ARBOVIRUS SURVEILLANCE

The Florida Department of Health in Nassau County (DOH-Nassau) began the annual arthropod-borne virus (arbovirus) surveillance program on May 3, 2018. DOH-Nassau maintains six sentinel chicken flocks throughout the county (Fig. 1), which are tested weekly for arbovirus activity throughout the summer. Blood samples from each chicken are tested at the Bureau of Public Health Laboratories in Tampa for West Nile Virus (WNV), Eastern Equine Encephalitis Virus (EEEV), and St. Louis Encephalitis Virus (SLEV). Arbovirus surveillance data are published weekly from May through October and allow DOH-Nassau to monitor risk of mosquito-borne disease throughout the county and state. The weekly arbovirus surveillance report also includes data on human cases of arboviral disease, mosquito testing, and veterinary arbovirus infections.

Nassau County Arbovirus Activity

From January 1, 2018 through May 12, 2018, there were two confirmed cases of EEE in horses in Nassau County, one with disease onset on January 29th and the other with onset on April 30th. One horse was not vaccinated for EEE and the other had an unknown vaccination status. Horses are considered a "dead end" host for EEE; they do not have enough viremia to transmit the virus on to mosquitoes. A horse with EEE serves as a sentinel and a reminder that EEE is endemic in Florida. Horse owners are encouraged to have their horses vaccinated against EEE.

Figure 1. Locations of arbovirus sentinel chicken flocks in Nassau County, 2018.
State Arbovirus Activity

Arbovirus surveillance in Florida includes endemic mosquito-borne viruses such as West Nile virus (WNV), Eastern equine encephalitis virus (EEEV), and St. Louis encephalitis virus (SLEV), as well as exotic viruses such as dengue virus (DENV), chikungunya virus (CHIKV), Zika virus (ZIKV), and California encephalitis group viruses (CEV). Malaria, a parasitic mosquito-borne disease is also included. Avian and equine cases of EEE and WNV have been reported in several counties in Florida (Fig. 2). So far in 2018, no human cases of endemic mosquito-borne diseases have been reported in Florida. Cases of chikungunya fever, dengue fever, Zika fever, and malaria have been reported, all of which were in individuals with history of travel to areas where these mosquito-borne diseases are circulating (Table 1).

Arbovirus Reporting and Testing

While the climate in Florida is mosquito friendly throughout the year, disease transmission is more likely during the warmer and humid summer months. Non-endemic viruses must be reported immediately upon suspicion (yellow fever) or immediately upon suspicion during business hours (Zika, dengue, chikungunya). Other mosquito-borne diseases endemic to Florida, such as West Nile virus disease, Eastern Equine encephalitis, and St. Louis encephalitis, are reportable by the next business day. Local introduction of one or more non-endemic viruses in Florida has occurred annually since 2009, when infected travelers were bitten by mosquitoes while in Florida. Prompt reporting of suspect cases helps ensure health department and mosquito control officials are able to rapidly implement mosquito control measures.

Zika, dengue, chikungunya, and yellow fever viruses circulate in many of the same areas of the world. The diseases they cause are often difficult to differentiate clinically and co-infections are possible. Providers should consider all relevant mosquito-borne diseases when evaluating, testing, and managing ill travelers. Testing for Zika, dengue, and chikungunya is available commercially. In addition, testing for Zika, dengue and chikungunya can be requested through DOH-Nassau for suspect local cases or for uninsured patients meeting clinical criteria. Yellow fever testing can be requested through DOH-Nassau for patients meeting clinical criteria.

For more information on arbovirus surveillance in Florida, visit: http://www.floridahealth.gov/diseases-and-conditions/mosquito-borne-diseases/surveillance.html

For more information on mosquito-borne and other insect-borne diseases and disease prevention, visit: http://www.floridahealth.gov/diseases-and-conditions/mosquito-borne-diseases/index.html

For arbovirus surveillance information in the United States, please see the Centers for Disease Control and Prevention (CDC) website at: https://www.cdc.gov/ncezid/dvbd/about.html

Disease/condition counts from 2016 and before are final. Disease/condition counts for 2017 and 2018 are preliminary and will change.
**TRAINING OPPORTUNITY**

**You are the Key: Best Practices for HPV Cancer Prevention**

The Florida Department of Health Immunization Section would like to share the National Area Health Education Center (AHEC) Organization’s educational webinar (continuing units are pending), You Are the Key: Best Practices for HPV Cancer Prevention. The webinar is scheduled for **Tuesday, June 12, 2018 at 2:00 p.m. EST**.

Join Dr. Betty Lo, Professor of Clinical Medicine and Pediatrics, Director of Medicine/Pediatrics Residency Program at Louisiana State University School of Medicine, for a discussion regarding low human papillomavirus (HPV) vaccination rates among males and females, up-to-date information on HPV infection/disease, the HPV vaccine, and ACIP recommendations.

Upon completion of the webinar, participants will be able to:

- Successfully communicate with patients and their parents about HPV vaccination
- Describe ways to reduce missed opportunities for HPV vaccination
- Describe best practices from medical offices nationally that are making HPV vaccination a priority

For registration, please visit:

https://events-na5.adobeconnect.com/content/connect/c1/951358841/en/events/event/shared/1480695977/event_registration.html?sco-id=1905607898&campaign-id=300&_charset_=utf-8

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**FLU SURVEILLANCE**

**Local influenza and influenza-like illness (ILI) activity**

Nassau County reported mild influenza and ILI activity for week 19, ending May 12, 2018 (Fig. 3). In week 19, 0.72% of Nassau County resident emergency department (ED) and urgent care center (UCC) visits were for ILI, similar to previous seasons at this time. ED and UCC visits for ILI in Nassau County residents peaked in week 6 at 11.69%. Three influenza outbreaks were reported in Nassau County this season, two influenza A and one influenza B.

**State influenza and ILI activity**

- Influenza and ILI activity continued to decrease in week 19 and remains at normal levels for this time of the season. Influenza activity peaked in Florida during week 5.
- No new influenza-associated pediatric deaths were confirmed in week 19. Eight influenza-associated pediatric deaths have been confirmed so far during the 2017-18 flu season.
- Three outbreaks of influenza or ILI were reported in week 19. So far, 505 outbreaks of influenza or ILI have been reported since the beginning of the 2017-18 flu season.
- Deaths due to pneumonia and influenza were below expected levels.
- The Florida Department of Health is conducting enhanced surveillance of intensive care unit patients <65 years of age with confirmed influenza. In week 19, four cases were reported.


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*Disease/condition counts from 2016 and before are final. Disease/condition counts for 2017 and 2018 are preliminary and will change.*
APRIL 2018: REPORTED CASES IN NASSAU COUNTY

Confirmed, Probable, Suspect Cases of Multiple Diseases with Report Date 04/01/18 to 04/30/18 with Three-Year Period Comparison for Nassau County

<table>
<thead>
<tr>
<th>Disease Name</th>
<th>Nassau County Cases</th>
<th>Nassau County Percent</th>
<th>Statewide Cases</th>
<th>Statewide Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Campylobacteriosis</td>
<td>1</td>
<td>4.5%</td>
<td>410</td>
<td>8.1%</td>
</tr>
<tr>
<td>Dengue Fever</td>
<td>0</td>
<td>0.0%</td>
<td>0</td>
<td>0.0%</td>
</tr>
<tr>
<td>Hepatitis B, Acute</td>
<td>3</td>
<td>13.6%</td>
<td>67</td>
<td>1.3%</td>
</tr>
<tr>
<td>Hepatitis B, Chronic</td>
<td>1</td>
<td>4.5%</td>
<td>67</td>
<td>1.3%</td>
</tr>
<tr>
<td>Hepatitis C, Acute</td>
<td>1</td>
<td>4.5%</td>
<td>67</td>
<td>1.3%</td>
</tr>
<tr>
<td>Hepatitis C, Chronic</td>
<td>13</td>
<td>59.1%</td>
<td>563</td>
<td>11.2%</td>
</tr>
<tr>
<td>Lead Poisoning</td>
<td>0</td>
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<td>0</td>
<td>0.0%</td>
</tr>
<tr>
<td>Pertussis</td>
<td>0</td>
<td>0.0%</td>
<td>2</td>
<td>0.0%</td>
</tr>
<tr>
<td>Rabies, Possible Exposure</td>
<td>2</td>
<td>9.1%</td>
<td>2</td>
<td>0.0%</td>
</tr>
<tr>
<td>Salmonellosis</td>
<td>1</td>
<td>4.5%</td>
<td>2</td>
<td>0.0%</td>
</tr>
<tr>
<td>Strep pneumoniae Invasive Disease, Drug-Resistant</td>
<td>0</td>
<td>0.0%</td>
<td>0</td>
<td>0.0%</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>22</strong></td>
<td><strong>100.0%</strong></td>
<td><strong>5032</strong></td>
<td><strong>100.0%</strong></td>
</tr>
</tbody>
</table>

Table 2. Confirmed, probable, and suspect case counts for reportable diseases and conditions in Nassau County and Florida, April 2015 through April 2018.

COMMUNITY HEALTH IMPROVEMENT PLAN SURVEY

The Partnership for Healthier Nassau wants to know “what matters to you” when you think of health. The survey is in both English and Spanish and for all persons who live in Nassau County. Your ideas will shape our local Health Improvement Plan for 2019-2021. The survey takes 8 minutes to complete and the findings will be shared with the community in September at a strategic planning meeting. By completing the survey you will help us create a new plan to support your personal health. For more information, please contact Mary von Mohr at 904-557-9133.

English survey: https://www.surveymonkey.com/r/HealthyNassau18
Spanish survey: https://www.surveymonkey.com/r/HealthyNassauSpanish18

Disease/condition counts from 2016 and before are final. Disease/condition counts for 2017 and 2018 are preliminary and will change.
Healthy and Safe Swimming Week

May 21–27, 2018 is Healthy and Safe Swimming Week. This yearly observance is celebrated the week before Memorial Day. This year’s theme is “Swim Healthy. Stay Healthy.” Healthy and Safe Swimming Week focuses on simple steps swimmers, parents of young swimmers, pool operators, and beach managers can take to help ensure healthy and safe swimming experiences for everyone. It highlights the role that swimmers, parents of young swimmers, aquatics and beach staff, residential pool owners, and public health officials play in preventing outbreaks of illnesses, drowning, and pool chemical injuries. Healthy and Safe Swimming Week promotes swimmer hygiene and the need for swimmers to take an active role in helping to protect themselves and prevent the spread of germs.

Staying healthy in the water

The pool, hot/spa, or water playground is the last place someone sick with diarrhea should be. Just one diarrheal incident in the water can release millions of germs. If someone swallows a mouthful of the water, it can cause diarrhea lasting up to 3 weeks. Here are some tips swimmers should take to help protect themselves, their friends, and their family, this summer and year round.

✦ Don’t swim or let your kids swim when sick with diarrhea.
✦ Don’t swallow the water.
✦ Check out the latest inspection score.
✦ Take kids on bathroom breaks every 60 minutes.
✦ Check diapers every 30–60 minutes and change them in a bathroom or diaper-changing area—not waterside—to keep germs away from the water.
✦ Shower before you get in the water. Rinsing off in the shower for just 1 minute helps get rid of most stuff that might be on swimmer’s body.

For more information about healthy and safe swimming, visit https://www.cdc.gov/healthywater/observances/hss-week/index.html

Image courtesy of https://www.cdc.gov/healthywater/observances/hss-week/