



Epi Watch

A Monthly Epidemiology Newsletter



Division of Disease Control
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Pinellas County Health Department

205 Dr. M.L.King Street North
St. Petersburg, FL 33701
(727) 824-6900
www.PinellasHealth.com

Director

John P. Heilman, MD, MPH
john_heilmanmd@doh.state.fl.us

Assistant Director

Claude M. Dharamraj, MD, MPH
claud_e_dharamraj@doh.state.fl.us

Division of Disease Control

Director

Deborah A. Healey, RN, MPH
debbie_healey@doh.state.fl.us

Epidemiology Program Manager

Julia Gill, PhD, MPH
julia_gill@doh.state.fl.us

Nursing Program Specialist

Susan Heller, RN, BSN
sue_heller@doh.state.fl.us

HIV/AIDS Program Manager

Lisa Cohen, BS
lisa_cohen@doh.state.fl.us

STD Program Manager

Sherry Lewis, BS
sherry_lewis@doh.state.fl.us

TB Program Manager

Robert Berger, BA
robert_berger@doh.state.fl.us

To report diseases or request information call:
(Mon-Fri, 8-5, Area code 727):
Epidemiology 824-6932
Hepatitis 824-6932
HIV/AIDS 824-6964
Immunizations 824-6936
STD 824-6911
Tuberculosis 824-6953
Non-business hours 824-6900

Epi Watch is a monthly newsletter produced and distributed by the Pinellas County Health Department Epidemiology Program.

Hepatitis Awareness Month

Robert Keane, LPN and Bonnie Lovely, RN



The prevention and control of viral hepatitis is recognized as a priority public health issue. Hepatitis A is transmitted by the oral-fecal route while hepatitis B and C are transmitted by blood and body fluids. Hepatitis B and hepatitis C infections are responsible for numerous cases of chronic hepatitis, cirrhosis of the liver, and liver cancer with many deaths each year attributed to these diseases. Because of this, prevention of viral hepatitis is of primary importance.

Hepatitis A and hepatitis B are vaccine-preventable diseases with vaccines widely available for both. Unfortunately, no vaccine is available for hepatitis C; therefore, behavioral changes are key to the prevention of infection for viral hepatitis.

To encourage these behavioral changes, education, risk reduction counseling, hepatitis A and hepatitis B immunizations, and testing are services offered to those at risk by the Pinellas CHD through the Florida Hepatitis Prevention Program. Since the inception of the hepatitis program in the year 2000, 11,507 hepatitis tests have been completed, 5,889 hepatitis A, and 7,715 hepatitis B vaccines have been administered, and 32,235 individuals in the community have received education and outreach services. All of these services continue to be provided free of charge to residents of Pinellas County through state funding.

According to recent studies 60% of hepatitis A&B testing results are false positives. This has been related to an acute hepatitis panel being ordered on asymptomatic patients with normal liver function levels. Hepatitis testing should be done according to the CDC case definition that follows:

An acute illness with a) discrete onset of symptoms and b) jaundice **or** elevated serum aminotransferase levels. Symptoms most commonly include: anorexia, vague abdominal discomfort, nausea and vomiting. Asymptomatic individuals with elevated serum aminotransferase levels 2½ times the upper limits of normal should also be included in acute testing.

A chronic hepatitis panel should be ordered when seeking identification of previous disease history.

Diagnosis of Acute Hepatitis

HAV IgM
HBcore IgM
HBsAg
Anti HCV

Diagnosis of Previous Infection

HBsAg
HBcoreTotal
HAV Total
Anti HCV

Including LFT's greater than 2.5 times upper limit of normal and or symptoms that include, nausea, vomiting, dark urine, fatigue, and or diarrhea.

Please visit our website at www.pinellashealth.com or the Florida DOH, Hepatitis Prevention & Control Program at www.doh.state.fl.us or the Centers for Disease Control and Prevention at www.cdc.gov to find out more about the prevention and control of viral hepatitis. To report a confirmed or suspected case of viral hepatitis, please contact the Pinellas CHD Epidemiology Program at 824-6932.

***Thank you to all nurses for contributing to the health of the public!
We salute you during National Nurses Week!***

"The reason for collecting, analyzing, and disseminating information on a disease is to control that disease. Collection and analysis should not be allowed to consume resources if action does not follow." Foegen, W.H. et al. (1976). Int. J of Epidemiology, 5:29-37.

NA = Not Available

Selected Reportable Diseases in Pinellas County

Disease	2006 April	2006 Year-to-Date	2005 Year-to-Date	2005 Total
AIDS	5	80	73	160
Animal Bite, PEP Recommended	4	13	12	48
Animal Rabies			1	5
Arboviral Illness (Human):				
Dengue				3
EEE				
SLE				
WNV				18
CA/LaCrosse				
Botulism				
Campylobacteriosis	2	7	10	39
Chlamydia	170	859	689	2505
Creutzfeldt-Jakob disease (CJD)			1	2
Cryptosporidiosis		2		15
Cyclosporiasis				57
<i>E. coli</i> O157:H7				3
Giardiasis	5	10	3	30
Gonorrhea	122	495	387	1436
<i>H. influenzae</i> :				
Meningitis				
Pneumonia		1		1
Primary bacteremia		3	1	6
Epiglottitis				
Hansen Disease				1
Hemolytic Uremic Syndrome (HUS)		1	1	1
Hepatitis, Acute Viral:				
A		2	4	9
B	1	2	10	36
C	1	3	3	7
Non-A, Non-B			1	1
Hepatitis B: Pregnant woman +HBsAg	6	11	12	33
HIV	2	48	114	238
Legionellosis	3	5		8
Listeriosis			1	1
Lyme Disease			1	5
Malaria	1	1		1
Meningitis:				
Group B Strep				
<i>S. pneumoniae</i>		1	3	6
Other bacterial		3	1	5
Meningococcal Disease	2	4	2	7
Mercury Poisoning				
Mumps			1	1
Pertussis		7	4	13
Plague (Bubonic & Pneumonic)				
Rocky Mountain Spotted Fever	1	1		1
Salmonellosis	9	30	24	212
Shigellosis	1	7	11	169
Smallpox				
<i>Streptococcal</i> disease, Inv. Group A	3	5	3	11
<i>S. pneumoniae</i> , Inv. disease (DR)		7	8	27
<i>S. pneumoniae</i> , Inv. disease (Suscept)	4	12	13	29
Syphilis:				
Total	13	48	26	95
Infectious (P and S)	3	12	14	41
Early Latent	9	22	8	32
Late Syphilis(Late Latent; Neurosyphilis)	1	14	4	22
Congenital				
Tuberculosis	3	13	7	27
<i>Vibrio</i> infections (vulnificus)	1	1		5

Provisional cases reported by the Pinellas County Health Department. Blank cells indicate no cases reported.

For a complete list of reportable diseases and guidelines for reporting please visit:

http://www.myflorida.com/disease_ctrl/epi/surv/lor8_4.pdf