



Epi Watch

A Monthly



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Pinellas County Health Department

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To report diseases by phone call:
(727) 824-6932

To report diseases by fax
(other than HIV/AIDS) use:
(727) 820-4270

Epi Watch is a monthly newsletter from the Pinellas County Health Department. For more information, or to add your e-mail address to the distribution list, please contact Andrea Dopico:
andrea_dopico@doh.state.fl.us

“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.”

Foege, W.H. et al. (1976). *Int. J of Epidemiology*, 5:29-37.

Pertussis

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Pertussis, or whooping cough, is continuing to be diagnosed throughout the United States in larger numbers. In Florida, there were 126 confirmed cases of pertussis reported in 2006. Cases are typically diagnosed during fall and winter, when the temperature is cooler.

We have previously discussed how pertussis is transmitted. This month, we want to emphasize the most reliable testing- “the gold standard”- which is the nasopharyngeal swab taken for culture. The main problem is getting a proper sample within the first three weeks of onset of symptoms or as early as possible.

The need for a special transport media also can cause a testing failure. The Pinellas County Health Department has the Regan-Lowe media available at its Clearwater and St. Petersburg centers for use by clinicians, if given advance notice of need. We ask that you contact us at **727-824-6932** at the suspicion of pertussis illness, especially in children, so that we may assist you in testing and to evaluate the families to prevent transmission to other family members, school or daycare contacts.

The development of the PCR testing method for pertussis was at first promising. However, according to a CDC study published in the MMWR August 24, 2007 Vol56/No.33, the reliability of the test results and their interpretation has been questioned when combined with culture results. There are no standardized PCR protocols for pertussis testing. Laboratories can vary their techniques and quality assurance per the CDC study. A new study to evaluate the use of standardized rapid and reliable tests to improve the specificity of the CSTE case definition is a public health priority.” The clinical validation study is to evaluate several PCR and serological assays. CDC does recommend obtaining a nasopharyngeal specimen for culture and PCR. Since the results of the PCR are returned faster, treatment can begin and the culture results will verify the diagnosis. Serology testing also often cannot distinguish between vaccination and disease, so the results are not reliable for diagnosis.

Of course the best prevention is vaccination of both children and adults. The new vaccines for adolescents and adults, Boostrix and Adacel, respectively, should be administered to extend protection for pertussis. By protecting the teens and adults in our community, we are ultimately protecting the infants and young children since the source of their infections are the teens and adults around them.

The MMWR report referenced in this article can be accessed at:
www.cdc.gov/mmwr/weekcvol.html

For further information on testing or vaccinations, please call: (727) 824-6932.

Selected Reportable Diseases in Pinellas County

Disease	2007 November	2007 Year-to-Date	2006 Year-to-Date	2006 Total
AIDS	9	138	183	221
Animal Bite, PEP Recommended	1	27	34	38
Animal Rabies		1		
Arboviral Illness (Human):				
Dengue		2	2	2
EEE				
SLE				
WNV		1		
CA/LaCrosse				
Campylobacteriosis	3	39	21	28
Chlamydia	331	2854	2469	2961
Creutzfeldt-Jakob Disease (CJD)		1		1
Cryptosporidiosis	3	15	8	9
Cyclosporiasis		1		
<i>E. coli</i> O157:H7		1	2	2
<i>E. coli</i> Shiga Toxin (+)	1	13	2	3
Giardiasis	3	22	30	37
Gonorrhea	158	1280	1387	1646
<i>H. influenzae</i> :				
Meningitis				
Pneumonia		2	4	5
Primary Bacteremia	1	3		5
Epiglottitis				
Hansen's Disease		2		
Hemolytic Uremic Syndrome (HUS)			1	2
Hepatitis, Acute Viral:				
A		5	5	5
B	2	18	18	24
C		6	7	9
Hepatitis B: Pregnant Woman +HBsAg	2	28	21	27
Hepatitis, Chronic Viral				
B	15	215	130	186
C	135	1439	1109	1581
HIV	22	219	140	173
Lead Poisoning:				
Total:	5	27	19	22
Children < 6 years:		5	5	6
Legionellosis		9	12	13
Listeriosis			2	2
Lyme Disease	1	10	1	3
Malaria		1	3	3
Meningitis:				
Group B Strep				
<i>S. pneumoniae</i>	1	4	2	2
Other Bacterial	1	4	7	10
Meningococcal Disease		1	5	7
Mercury Poisoning			3	5
Mumps				
Pertussis		7	5	5
Rocky Mountain Spotted Fever		1	2	3
Salmonellosis	40	181	137	175
Shigellosis		39	18	19
Streptococcal Disease, Inv. Group A	1	10	11	16
<i>S. pneumoniae</i> , Inv. Disease (DR)	1	34	17	18
<i>S. pneumoniae</i> , Inv. Disease (Suscept)	5	22	20	25
Syphilis:				
Total	24	106	122	140
Infectious (P and S)	14	56	33	38
Early Latent	6	30	53	59
Congenital				
Late Syphilis (Late Latent; Neurosyphilis)	4	20	36	43
Tuberculosis	1	32	26	30
<i>Vibrio</i> Infections		10	6	6

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.doh.state.fl.us/disease_ctrl/epi/index.html