



# Epi Watch

A Monthly Epidemiology Newsletter



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**To report diseases by phone call:**

**TELEPHONE: (727) 824-6932**

**To report diseases by fax  
(other than HIV/AIDS) use:**

*Epi Watch* is a monthly newsletter of the Pinellas County Health Department Epidemiology Program. For more information, or to add your e-mail address to the distribution list, please contact Andrea Dopico:  
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“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.*

## Varicella (Chicken Pox)

*Karen Alelis, MPH and Pat Borkowski, RN*

Varicella, commonly known as chickenpox, is an illness caused by the varicella zoster virus (VZV). In healthy children, symptoms are generally mild characterized by fever, tiredness, and an itchy rash with few complications. Among children and adults with weakened immune systems, varicella could lead to more serious, secondary bacterial skin infections, dehydration, pneumonia, encephalitis, and even death. VZV is spread from person to person through respiratory contact with airborne droplets or direct contact with skin lesions. The incubation period of varicella is usually 10-21 days (average: 14-16 days) and persons are highly contagious from 1 to 2 days before the onset of rash until lesions have formed scabs. The primary infection of VZV results in chickenpox. The recurrent infection of VZV results in herpes zoster also known as shingles. Individuals can become infected with VZV and develop chickenpox if they come in contact with the vesicle fluid of lesions on persons with herpes zoster.

The varicella vaccine was introduced in the United States in 1995. The Advisory Committee on Immunization Practices (ACIP) provided the following recommendations:

**For children, vaccine recommendations are as follows:**

- Routine administration for children 12-18 months of age
- Catch-up vaccination for children 19 months through 12 years
- One dose of varicella vaccine is required for children less than 13 years of age and children not vaccinated previously or who have no history of varicella

**For adolescents and adults, vaccine recommendations include:**

- Two doses of varicella vaccine, 4-8 weeks apart
- Susceptible persons who have close contact with persons at high risk of serious complications (e.g. healthcare workers and family contacts of immunocompromised persons)
- Susceptible persons at high risk for exposure where:
  - Transmission is likely (e.g. teachers, day care staff, residents and staff in institutions)
  - Transmission can occur (e.g. college students, inmates and staff in correctional institutions, and military personnel)
- Non-pregnant women of childbearing age
- International travelers with no evidence of immunity to VZV

Updated recommendations by ACIP in 1999 also includes vaccine use among children entering child care facilities and elementary schools without evidence of immunity to varicella, susceptible persons following exposure to varicella, and children with humoral immunodeficiencies. ACIP provisionally recommended a second dose of varicella vaccine for outbreak control in 2005 and recommended a routine second dose of varicella vaccine for children 4-6 years in 2006. With the introduction of varicella vaccine, varicella-related hospitalizations and deaths have declined and vaccine coverage has increased.

As of November 20, 2006, the revision of Chapter 64D-3 of the Florida Administrative Code included varicella and varicella mortality on the list of reportable diseases/conditions list. Surveillance of varicella cases can monitor the outcome of the vaccination program, detect changes in the epidemiology of varicella disease, and study vaccine effectiveness. For further information about the reporting of diseases and conditions in Florida, including varicella, please call (727) 824-6932.

# Selected Reportable Diseases in Pinellas County

Disease	2007	2007	2006	2006
	May	Year-to-Date	Year-to-Date	Total
AIDS	10	69	86	219
Animal Bite, PEP Recommended	3	12	16	38
Animal Rabies				
Arboviral Illness (Human):				
Dengue			1	2
EEE				
SLE				
WNV				
CA/LaCrosse				
Botulism				
Campylobacteriosis	2	21	10	28
Chlamydia	252	1228	1137	2904
Creutzfeldt-Jakob disease (CJD)				1
Cryptosporidiosis		2	2	9
Cyclosporiasis				
<i>E. coli O157:H7</i>		1		2
Giardiasis	1	8	12	37
Gonorrhea	121	555	682	1631
<i>H. influenzae</i> :				
Meningitis				
Pneumonia		2	1	3
Primary bacteremia		2	4	5
Epiglottitis				
Hansen's Disease		2		
Hemolytic Uremic Syndrome (HUS)			1	2
Hepatitis, Acute Viral:				
A		2	2	5
B	3	12	4	24
C		1	3	9
Hepatitis B: Pregnant woman +HBsAg	4	17	12	27
Hepatitis, Chronic Viral				
B	23	103	67	186
C	173	683	583	1581
HIV	20	121	53	175
Lead Poisoning:				
Total:	2	9	3	22
Children < 6 years:		1	1	6
Legionellosis		6	7	13
Listeriosis				2
Lyme Disease				3
Malaria			1	3
Meningitis:				
Group B Strep				
<i>S. pneumoniae</i>		2	1	2
Other bacterial		1	4	10
Meningococcal Disease		1	5	7
Mercury Poisoning				5
Mumps				
Pertussis	1	2	1	5
Rocky Mountain Spotted Fever			1	1
Salmonellosis	10	58	44	175
Shigellosis	4	16	11	19
<i>Streptococcal</i> disease, Inv. Group A	1	6	7	16
<i>S. pneumoniae</i> , Inv. disease (DR)	4	25	8	18
<i>S. pneumoniae</i> , Inv. disease (Suscept)	2	13	13	25
Syphilis:				
Total	10	39	59	143
Infectious (P and S)	5	23	15	40
Early Latent	4	16	27	60
Congenital				
Late Syphilis (Late Latent; Neurosyphilis)	1	4	17	43
Tuberculosis	3	14	16	31
<i>Vibrio</i> infections	2	5	2	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](http://www.doh.state.fl.us/disease_ctrl/epi/index.html)