



# EPI WATCH

Monthly Epidemiology Newsletter

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## ‘Public Health is Where You Are’

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This year's National Public Health Week kicked off on April 4 with the theme 'Public Health Is Where You Are.' The initiative began in April 1955 and was organized by the American Public Health Association. This week is meant to recognize achievements in public health but also to draw attention to root causes of health inequities and support actions making health care equitable for all. Various themes were honored throughout the week to highlight important public health topics such as racism, accessibility, community, public health workforce, and mental health.

The idea of 'Public Health is Where You Are' sheds lights on how many aspects of our lives, including local environment, access to resources, and racial background, all influence our overall health and well-being. Bias and racism present in upstream systems and policies have long impacted different racial groups. For example, Black women across all socioeconomic strata are three times more likely to die within one year of childbirth compared to white women<sup>1</sup>. By advancing racial equity within our communities, this can provide momentum to make progress in other groups based on factors such as gender, sexual orientation, age, or abilities. In addition to racial inequalities, the theme of accessibility draws attention to over one third of disabled persons who lack access to both primary and preventative care due to cost. By lacking basic services, adults with disabilities are at greater risk for other concerns like heart disease and diabetes. All of these issues are also represented under the theme of health as a human right. In our current economic climate, all individuals are spending more on health care costs and often having to choose between seeking medical care or paying other expenses. Attention is still needed for funding and policy changes to make healthcare more accessible and equitable.



Public Health Awareness Week also sheds light on emerging topics impacting our communities. The ongoing COVID-19 pandemic has affected nearly every aspect of our daily lives and is represented in the theme of community collaboration and resilience. Lockdowns throughout the pandemic led to great feelings of social isolation which in turn contributed to greater rates of depression, impaired immunity, and even premature mortality. In addition, the public health workforce has been under great strain causing physical exhaustion and mental health stress. Prioritizing mental health has gained increased attention nationwide and is highlighted during this week. The National Alliance on Mental Illness reported 50% of mental health conditions begin by the age of 14 and 75% by the age of 24<sup>2</sup>. Support for prevention, early detection and coping mechanisms are desperately needed. Awareness and support for these issues is key to promoting change.

National Public Health Awareness Week can be celebrated by simply taking time to learn more about each of these topics, advocating for community services, or taking action to promote changes within our systems. To learn more, visit [www.nphw.org](http://www.nphw.org)

#### References:

1. Pregnancy Mortality Surveillance System. Centers for Disease Control and Prevention. November 25, 2020. <https://www.cdc.gov/reproductivehealth/maternal-mortality/pregnancy-mortality-surveillance-system.htm>

2. Mental Health Conditions. National Alliance on Mental Illness. <https://www.nami.org/About-Mental-Illness/Mental-Health-Conditions>

# Rise in Congenital Syphilis in the United States

By: Stephen Marlin, MPH, CPH

Recently there has been a sharp increase in the number of congenital syphilis (CS) cases in the United States, with cases having increased almost sevenfold over the past 10 years.<sup>1</sup> STD programs closely monitor these reports because of the high potential of severe outcomes for both mother and child. From 2014 to 2020, Pinellas County has seen a steady increase in syphilis cases, and this increase includes congenital cases.<sup>2</sup> It is of particular concern that each year the number of pregnant women with positive syphilis tests increases, given the possible severity of the illness.

Congenital syphilis can have major health impacts on babies – infection can result in miscarriage, stillbirth, premature birth, low birth weight, deformed bones, severe anemia, skin rashes, an enlargement of one or more organs, jaundice, brain and nerve problems such as blindness, deafness, or meningitis, and ultimately may result in the infant's death shortly after birth. How severely CS affects a baby's health depends on how long the mother has had syphilis and if, or when, they receive treatment for the infection. Congenital syphilis can be prevented by treating the infection early in the mother's pregnancy, before the bacteria have been passed to the developing fetus. This is why prenatal care that includes syphilis testing is so critically important in reducing congenital cases. In almost all instances, congenital syphilis patients in Pinellas County have been shown to have either gaps or a total lack of prenatal care.<sup>2</sup> When a woman of childbearing age is diagnosed with syphilis, we must find ways to eliminate barriers that could lead to a lack of treatment and find ways to facilitate follow-up testing for at least one year to make sure that treatment is working.

DOH-Pinellas is continuing to promote syphilis prevention during outreaches for our at-risk priority populations, such as women with multiple partners, those who may be incarcerated or experiencing homelessness, or those that might report the use of certain drugs such as methamphetamine or heroin.<sup>3</sup> In Pinellas County, the prevention of congenital syphilis cases remains a priority of our highest concern.



## References:

1. Babies are dying as congenital syphilis continues a decade long surge across the country. Health News Florida. Retrieved from: <https://health.wusf.usf.edu/health-news-florida/2022-04-13/babies-are-dying-as-congenital-syphilis-continues-a-decade-long-surge-across-the-country>
2. County trend data. Division of Public Health Statistics and Performance Management. Community Health Assessment Resource Tool Set (FLCHARTS). Data as of April 10, 2022.

# Heartland Virus Now Identified in 11 States

By: Ian Stryker

Heartland virus was first identified in Missouri in 2009 after two farmers in the state fell ill. Physicians initially suspected Ehrlichiosis, a bacterial condition that is spread by ticks, as the cause. Since the virus's first discovery, it has been found in areas across the eastern United States. Researchers have now detected Heartland virus in lone star ticks sampled from across Georgia, marking it the eleventh state where the virus has been successfully identified. Emory University researchers collected almost 10,000 ticks to determine if the virus is circulating amongst lone star ticks in Georgia. They were able to isolate the virus and subsequently genotype the isolated samples. These genotypes were similar when compared to the virus found in Georgia but were different from those found in other areas of the country. These findings suggest the virus may change based on its geographic location or that there are different strains circulating in the wild. In either event, the findings indicate that the virus is circulating in the tick population in Georgia. Heartland virus has now been found in Arkansas, Illinois, Iowa, Kansas, Kentucky, Missouri, North Carolina, Oklahoma, Tennessee, and Georgia according to a CDC report.



Heartland virus presents as clinically similar to other tickborne illnesses with symptoms including high fever, diarrhea, muscle pains, headache, and low white blood cell and platelet counts. Currently, the only confirmatory criteria to diagnose a case of Heartland virus is laboratory evidence. Lone star ticks are the most common tick in Georgia and are found in wooded areas in the Southeast, Eastern, and Midwest United States. They are easily identified by the characteristic white mark found on their back. To avoid any tickborne illness, CDC recommends that everyone become informed on where ticks are found, use EPA registered insect repellent, and stick to trails when out in heavily wooded areas if possible. It is also recommended to check your clothing, yourself, and your pets for any ticks or tick bites following outdoor activities.

To locate areas with high tick populations, visit: [https://www.cdc.gov/ticks/geographic\\_distribution.html](https://www.cdc.gov/ticks/geographic_distribution.html)

To find more extensive guidelines to protect yourself from tick bites, visit: [https://www.cdc.gov/ticks/avoid/on\\_people.html](https://www.cdc.gov/ticks/avoid/on_people.html)

## References:

1. Clark, C. (2022, March 21). *Heartland virus identified in Lone Star Ticks in Georgia: Emory University: Atlanta ga.* Emory News Center. Retrieved April 19, 2022, from [https://news.emory.edu/stories/2022/03/esc\\_heartland\\_virus\\_ticks\\_21-03-2022/story.html?utm\\_source=together.emory.edu&utm\\_medium=referral&utm\\_campaign=Advancement%253Aand%253AAlumni%253AEngagement](https://news.emory.edu/stories/2022/03/esc_heartland_virus_ticks_21-03-2022/story.html?utm_source=together.emory.edu&utm_medium=referral&utm_campaign=Advancement%253Aand%253AAlumni%253AEngagement)
2. Esguerra, E. M. (2016). *Heartland virus: A new virus discovered in Missouri.* Missouri medicine. Retrieved April 19, 2022, from <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6139916/>
3. Centers for Disease Control and Prevention. (2021, April 23). *Statistics & Maps.* Centers for Disease Control and Prevention. Retrieved April 19, 2022, from <https://www.cdc.gov/heartland-virus/statistics/index.html>

# Select Reportable Diseases in Pinellas County

Disease	Pinellas		YTD Total		Pinellas County Annual Totals		
	March 2022	March 2021	Pinellas 2022	Florida 2022	2021	2020	2019
<b>A. Vaccine Preventable</b>							
Measles	0	0	0	0	0	0	1
Mumps	0	0	0	4	1	1	3
Pertussis	0	0	0	13	1	8	27
Varicella	2	0	5	98	25	18	32
<b>B. CNS Diseases &amp; Bacteremias</b>							
Creutzfeldt-Jakob Disease (CJD)	1	0	2	18	1	0	3
Meningitis (Bacterial, Cryptococcal, Mycotic)	1	0	4	36	6	5	7
Meningococcal Disease	0	0	0	21	1	2	1
<b>C. Enteric Infections</b>							
Campylobacteriosis	18	15	49	814	214	247	303
Cryptosporidiosis	1	1	6	102	28	38	62
Cyclosporiasis	0	0	0	7	9	9	28
<i>E. coli</i> Shiga Toxin (+)	1	0	5	196	16	10	22
Giardiasis	1	2	3	256	29	28	52
Hemolytic Uremic Syndrome (HUS)	0	0	0	1	0	0	1
Listeriosis	1	0	2	17	3	2	2
Salmonellosis	10	10	28	956	182	200	200
Shigellosis	3	3	6	155	37	19	22
<b>D. Viral Hepatitis</b>							
Hepatitis A	0	0	5	109	6	3	377
Hepatitis B: Pregnant Woman +HBsAg	1	0	5	73	11	18	21
Hepatitis B, Acute	1	5	4	154	53	40	71
Hepatitis C, Acute	14	11	34	369	89	117	75
<b>E. VectorBorne/Zoonoses</b>							
Animal Rabies	0	0	0	17	0	0	2
Rabies, possible exposure	7	14	27	1033	135	118	128
Chikungunya Fever	0	0	0	0	0	0	0
Dengue	1	0	1	20	0	1	3
Eastern Equine Encephalitis	0	0	0	0	0	0	0
Lyme Disease	0	0	0	41	6	11	19
Malaria	0	0	0	12	2	2	5
West Nile Virus	0	0	0	0	0	0	0
Zika Virus Disease	0	0	0	0	0	0	3
<b>F. Others</b>							
Chlamydia	363	368	967	n/a	3956	4575	4355
Gonorrhea	162	162	461	n/a	1634	1526	1416
Hansen's Disease	0	0	0	3	0	0	0
Legionellosis	3	2	9	138	36	33	30
Mercury Poisoning	0	0	0	14	2	1	1
Syphilis, Total	49	58	142	n/a	479	493	434
Syphilis, Infectious (Primary and Secondary)	29	22	57	n/a	212	218	190
Syphilis, Early Latent	13	23	57	n/a	166	197	152
Syphilis, Congenital	0	1	1	n/a	5	6	3
Syphilis, Late Syphilis (Late Latent; Neurosyphilis)	7	12	27	n/a	96	72	89
Tuberculosis	0	0	4	n/a	24	24	33
<i>Vibrio</i> Infections	1	0	2	28	13	12	18

\*YTD up to March 31, 2022. n/a = not available at this time

Reportable diseases include confirmed and probable cases only. All case counts are current and provisional. Data is collected from the Merlin Reportable Disease database, surveillance systems maintained at the Florida Department of Health in Pinellas County, and Florida CHARTS