

Florida Department of Health in Miami-Dade County

August 2022 Vol 23, Issue 8

Public Health LOOK OUT!

- September is Gynecologic Cancer Awareness Month. According to the CDC, Gynecologic cancer encompasses the female reproductive tract and is diagnosed in 89,000 women each year. This month brings awareness to this important women's health issue in hopes of educating women on prevention strategies, warning signs, and cancer risks. <u>Visit</u> to learn more
 or get involved!
- The World Heart Federation promotes **World Heart Day** on September 29th to bring awareness about cardiovascular health and the risks of tobacco use, unhealthy diet, and physical inactivity to your heart health. Cardiovascular disease is the leading cause of death claiming 18.6 million people ever year. Visit to get involved!
- On September 20th, the American Public Health Association (APHA) will hold its **Get Ready for Flu Day**. With the flu season incoming, be prepared by getting your yearly flu shot. Contact your physician or local health department to learn where you can schedule your flu vaccine. Help prevent the flu by getting vaccinated, washing your hands often, staying away from people who are ill, avoid touching your eyes, mouth, or nose with your hands, and by practicing good hygiene. Visit getreadyfor-flu.org to learn more!

For the most recent information on COVID-19 in Florida please visit: https://floridahealthcovid19.gov/

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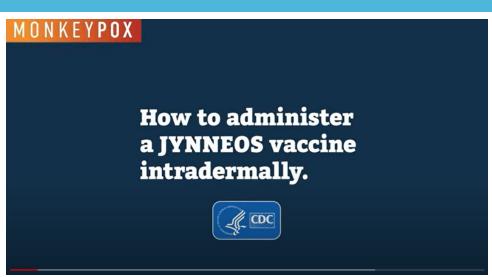
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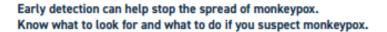
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MONKEYPOX

What To Do If You Suspect Monkeypox

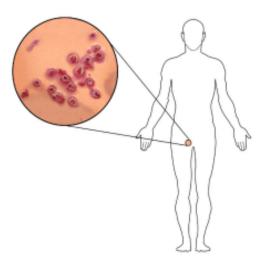


Signs and Symptoms

- A new, maculo-papular rash that develops into vesicles and then pustules. Lesions may be deep-seated, firm, well-circumscribed and umbilicated. The rash may:
 - Appear anywhere on the body, including palms, soles and anogenital region
 - Be localized to a specific body site or diffuse
 - Be the only symptom people experience
 - Be painful, painless, or itchy
- Fever, headache, malaise, chills, and lymphadenopathy may occur.
- Patients may present with anorectal pain, rectal bleeding, or tenesmus in association with visible perianal skin lesions and proctitis.

Ask the patient: Within the last 21 days, have you

- Traveled to a <u>country</u> with recent monkeypox cases, one that's experienced prior outbreaks?
- Had close or intimate contact with someone with a similar rash or confirmed monkeypox infection?
- Had close or intimate contact with someone in a social network experiencing monkeypox infection?
 - Most U.S. cases have been among gay, bisexual, and other men who have sex with men; many of whom had anonymous sex with someone they met on dating apps or sex with multiple partners at commercial sex venues or events where anonymous sex is common.







Call your <u>health department</u> as soon as you suspect monkeypox

- · Your state or local public health agency will:
 - Provide guidance for specimen collection and arrange for testing
 - Provide guidance for isolation
 - Discuss treatment options, if needed
- Tell your hospital epidemiologist or infection preventionist about the patient.



Protect your patient, yourself, and others

 Have the patient wear a mask and place them in a single-person room. Follow CDC's infection prevention and control guidelines for healthcare facilities, including using appropriate PPE around the patient.

Share resources with your patient

Let patients know:

- What to do if they are sick, including how to manage symptoms and rash relief
- How to identify close contacts and tips on what to say
- · How to prevent spreading monkeypox to others

People with monkeypox are advised to stay at home (isolate) if they have monkeypox symptoms, including until the monkeypox rash has healed and a new layer of skin has formed.

- How to disinfect their home, including what type of disinfectant to use and how to clean hard and soft surfaces
- If <u>treatment</u> may be right for them





Streamlined COVID-19 Guidance — CDC Update

By: Kelsey Bricker

Prevention Strategies

The CDC's prevention recommendations no longer differentiate based on vaccine status due to the occurrence of breakthrough infections. The CDC provides a COVID-19 Community Level guide to identify geographic areas that might experience increases in severe COVID-19 related outcomes.¹ These outcomes are based on hospitalization rates, hospital bed occupancy and COVID-19 incidence during the preceding period.¹ At all levels (low, medium, and high), recommendations emphasize staying up to date with vaccination, improving ventilation, testing persons who are symptomatic and exposed, and isolating infected persons.¹

Being up to date with COVID-19 vaccination including all recommended booster doses provides increased protection against COVID-19, as well as reduces symptoms of post COVID-19 conditions. For close contacts who have had a recent confirmed or suspected exposure, they must wear a mask for 10 days and should receive testing ≥5 days after exposure. Next, infected persons should isolate for ≥5 days and wear a high-quality mask if they must be around others. After five days, isolation can be discontinued if symptoms have improved, and they are without a fever for ≥24 hours without the use of medication. Although isolation can be discontinued, a high-quality mask should be worn around others at home and in public through day ten. When choosing to take a test to determine if masking can be discontinued, an antigen test should be taken on day six if they are without a fever for ≥24 hours. The use of two antigen tests (≥48 hours between tests) must be negative for a person to discontinue masking.

Reducing Medically Significant Illness

People who are immunocompromised and have COVID-19 are at an increased risk for ICU admission and death while hospitalized, despite their vaccine status. ¹ Pre-exposure prophylaxis with Evusheld can help protect immunocompromised people who may not have an adequate immune response after COVID-19 vaccination or who are not able to get vaccinated because of the risk for adverse reactions. ¹ In addition, there are antiviral medications such as Lagevrio, Paxlovid, Veklury, and monoclonal antibodies that are available to treat COVID-19 in people who are at an increased risk for severe illness. ¹ When administered soon after diagnosis, these antiviral agents reduce the risk for hospitalization and death.

Discussion

As COVID-19 continues to spread, it is crucial to understand the recommended measures to reduce transmission, hospitalizations, and deaths. Measures include staying up to date with vaccinations, using masks or respirators, pre-exposure prophylaxis for persons who are immunocompromised, and early access to antivirals. ¹ When utilizing these measures, there is a minimal strain on health care systems, as well as social, educational, and economic activity. ¹

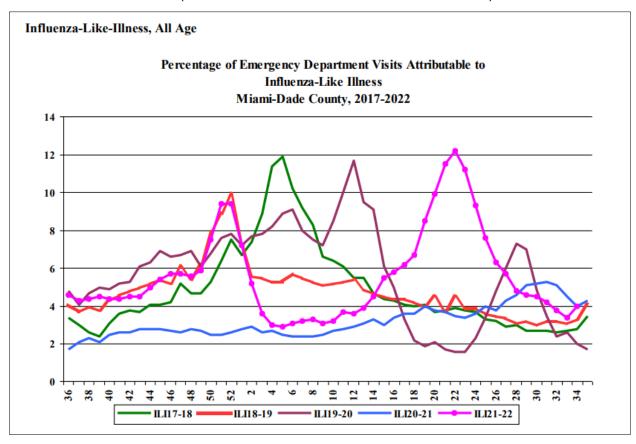
References

1. Massetti G, Jackson B, Brooks J, et al. Summary of guidance for minimizing the impact of COVID-19 on individual persons, communities, and health care systems—United States, August 2022. *MMWR*. 2022; 71(33): 1057-1064.

Florida Department of Health in Miami-Dade County Epidemiology, Disease Control and Immunization Services

Influenza Like Illness Surveillance Report

On a daily basis, all of Miami-Dade County's emergency department (ED) hospitals electronically transmit ED data to the Florida Department of Health. This data is then categorized into 11 distinct syndromes. The influenza-like illness (ILI) syndrome consists of fever with either cough or sore throat. It can also include a chief complaint of "flu" or "ILI". This season's 2020-2021 data is compared to the previous 4 influenza seasons (2016-2017, 2017-2018, 2018-2019, 2019-2020).



Across all ages, there were 35,843 ED visits; among them 1,428 (4.0%) were ILI. During the same week last year, 4.0% of ED visits were ILI.

PARTICIPATE IN INFLUENZA SENTINEL PROVIDER SURVEILLANCE Florida Department of Health in Miami-Dade County NEEDS Influenza Sentinel Providers!

Sentinel providers are key to the success of the Florida Department of Health's Influenza Surveillance System. Data reported by sentinel providers gives a picture of the influenza virus and ILI activity in the U.S. and Florida which can be used to guide prevention and control activities, vaccine strain selection, and patient care.

- Providers of any specialty, in any type of practice, are eligible to be sentinel providers.
- Most providers report that it takes less than 30 minutes a week to compile and report data on the total number
 of patients seen and the number of patients seen with influenza-like illness.
- Sentinel providers can submit specimens from a subset of patients to the state laboratory for virus isolation free
 of charge.

For more information, please contact

Stephanie Ramirez at 305-470-5660.



Miami-Dade County Monthly Report Select Reportable Disease/Conditions July 2022

Diseases/Conditions	2022	2022	2021	2020
	Current Month	Year to Date	Year to Date	Year to Date
HIV/AIDS				
AIDS*	41	261	246	193
HIV	175	1110	752	614
STD		200	0.74	0.74
Infectious Syphilis*	56	380	351	251
Chlamydia* Gonorrhea*	1295	8364	8215	6251
TB	623	3781	3642	2250
Tuberculosis**	11	83	59	47
Enidentialeur Disease Control 9				
Epidemiology, Disease Control &				
Immunization Services				
Epidemiology				
Campylobacteriosis	48	368	305	312
Chikungunya Fever	0	0	0	0
Ciguatera Poisoning	0	3	6	5
Cryptosporidiosis	11	41	26	13
Cyclosporiasis	37	40	8	2
Dengue Fever	51	75	1	10
Escherichia coli, Shiga Toxin-Producing	23	96	56	34
Encephalitis, West Nile Virus	0	0	0	0
Giardiasis, Acute	28	163	49	67
Influenza, Pediatric Death	0	0	0	0
Legionellosis	4	23	30	15
Leptospirosis	0	0	1	0
Listeriosis	0	3	4	4
Lyme disease	2	7	4	3
Malaria	0	0	2	2
Meningitis (except aseptic)	0	4	8	4
Meningococcal Disease	0	4	3	2
Salmonella serotype Typhy (Typhoid Fever)	0	0	0	0
Salmonellosis	133	608	454	422
Shigellosis	18	88	39	78
Pneumoniae, invasive disease	5	44	28	34
Vibriosis	5	20	12	2
West Nile Fever	0	0	0	7
Zika Virus (non-congenital)	0	0	0	0
Immunization Preventable Diseases				
Measles	0	0	0	0
Mumps	0	3	2	1
Pertussis	0	4	0	9
Rubella	0	0	0	0
Tetanus	0	0	0	0
Varicella	3	20	9	24
Hepatitis			•	
Hepatitis A	3	18	5	8
Hepatitis B (Acute)	10	56	15	32
Healthy Homes			-	
Lead Poisoning	32	185	68	42
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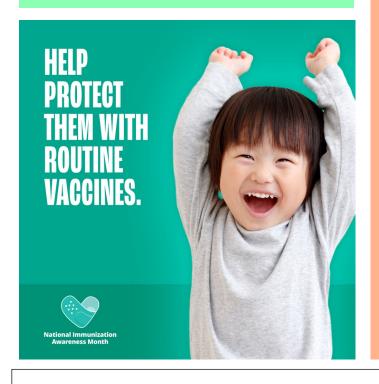
^{*}Data is provisional at the county level and is subject to edit checks by state and federal agencies.

Data on EDC-IS includes Confirmed and Probable cases.

 $^{^{\}star\star}$ Data on tuberculosis are provisional at the county level.

What's New at DOH-Miami-Dade:

- On August 18th, DOH-Miami-Dade was awarded and recognized as an Age Friendly Public Health System! The Florida Department of Health in Miami-Dade will continue to strive for excellence in serving the community!
- DOH-Miami-Dade is offering the Jynneos Monkeypox vaccine to high-risk populations. To become fully immunized, you must be vaccinated with 2 doses, the second dose 28 days after the initial dose. Schedule an appointment here!
- Tecovirimat (TPOXX) is the antiviral drug recommended for individuals who are more likely to get severely ill. DOH-Miami-Dade is able to request TPOXX and provide drugs to all patients who meet the necessary criteria. For more information, call the DOH-Miami Dade at (305) 470-5660!
- DOH Miami-Dade offers COVID-19 vaccines, vaccine boosters, pediatric vaccines, and flu shots. Visit <u>miamidade.floridahealth.gov</u> for clinic locations and appointments!



NOW AVAILABLE IN #OurCounty LOCATIONS: TROPICAL PARK 7900 SW 40TH ST. NORTH SIDE OF TENNIS COURTS MIAMI BEACH 224 23RD ST. PARKING LOT For more information and to make an appointment visit Miamidade.gov/Monkeypox

To report diseases and for information, call EDC-IS at:

Childhood Lead Poisoning Prevention Program	305-470-6877
Epidemiology and Disease Surveillance	305-470-5660
Hepatitis Program	305-470-5536
HIV/AIDS Program	305-470-6999
Immunization Services	305-470-5660
STD Program	305-575-5430
Tuberculosis Program	305-575-5415
Appointment Line	786-845-0550

About the Epi Monthly Report

The Epi Monthly Report is a publication of the Florida Department of Health in Miami-Dade County: Epidemiology, Disease Control & Immunization Services. The publication serves a primary audience of physicians, nurses, and public health professionals. Articles published in the Epi Monthly Report may focus on quantitative research and analysis, program updates, field investigations, or provider education. For more information or to submit an article, please contact Yoselin Garcia at (786) 582-2266 or Yoselin.Garcia@flhealth.gov.

