



EPILOGUE



Volusia County Health Department
Disease Surveillance Quarterly Newsletter
January 2010

Director, Office of Disease Control

Solinka Murillo-McIntosh, MPH
Solinka_Murillo-McIntosh@doh.state.fl.us
(386) 274-0500 x 0845

Susan Stewart, Staff Assistant
Susan_Stewart@doh.state.fl.us
(386) 274-0500 x 0651

To report, fax **(386) 274-0641** or call:

Epidemiology

Westside and Lead Program
Gayle Bush, RN
Gayle_Bush@doh.state.fl.us
(386) 274-0500 x 0588

Eastside and Perinatal Hep B Program
Lisa Palmatier, RN
Lisa_Palmatier@doh.state.fl.us
(386) 274-0500 x 0633

PHP Surveillance and Influenza Program
Michelle Nash, MPH
Michelle_Nash@doh.state.fl.us
(386) 274-0500 x 0618

After Hours Emergency (386) 316-5030

HIV/AIDS

Patrick Forand, MPH, Manager
Patrick_Forand@doh.state.fl.us
(386) 274-0500 x 0585

Ivette Rainey, Staff Assistant
Ivette_Rainey@doh.state.fl.us
(386) 274-0500 x 0656

Sexually Transmitted Disease

Solinka Murillo-McIntosh, MPH
Solinka_Murillo-McIntosh@doh.state.fl.us
(386) 274-0500 x 0845

Tuberculosis

Lynda Lignelle, RN, Manager
Lynda_Lignelle@doh.state.fl.us
(386) 274-0500 x 0654

Bonita Stevenson, STD/TB Staff Assistant
Bonita_Stevenson@doh.state.fl.us
(386) 274-0500 x 0645

Infectious Disease Specialist

Ronald S. Rusiecki, MD



KICK STARTING THE DECADE

The quarterly epidemiology (epi) newsletter is back! In each edition, we will provide the health care community news on interesting cases reported to our department, news you can use, and local disease rates that you help us compile. Please let us know if you have any suggestions on how to improve it.

SPOTLIGHT ON SCABIES

LISA PALMATIER, RN, NPS

Volusia County Health Department's (VCHD) epidemiologic surveillance systems have indicated an increase in the number of scabies cases in our community. Scabies is a parasitic infestation of a microscopic mite that affects the skin of persons infected.

Symptoms include rash, itching, or pimple-like skin irritations. Scabies is a strictly human vectored disease spread via frequent and prolonged skin to skin contact. Scabies transmission is most frequently seen in settings where such contact is common, such as nursing homes, hospitals, or child care facilities. Infestation can also be spread to sexual contacts and household members by sharing clothing, towels and bedding. Symptoms can take four to six weeks to develop in individuals not previously infected. In persons who have been previously infected with the scabies mite, symptoms can show up as soon as several days after the most recent exposure.

Persons who are experiencing the above mentioned symptoms should be evaluated by a physician. The physician can do a diagnostic test called a "skin scraping". In this test a small scraping of skin is taken and looked at under the microscope to identify if the mites or their ova are present.

There are several drug treatment options available for scabies infestation. These are prescribed at the discretion of the treating physician. Identification and treatment of contacts of confirmed scabies cases, plays an important role in transmission control of this skin mite. Environmental controls are equally important and should also be instituted either at the household or institutional level.

For further information on scabies please access the CDC's website at <http://www.cdc.gov/scabies/>.

Community or institutional outbreaks of this disease are required to be reported to our Epidemiology Division.

If you would like to report an outbreak, or have questions please call the appropriate Epidemiology staff at left.

REPORTABLE DISEASES IN FLORIDA

MICHELLE NASH, MPH

In 1917, select communicable diseases were made legally reportable to the health department in Florida because effective public health interventions could not be instituted without reliable data on the distribution, occurrence and causes of these diseases. Over time that list has grown, and there are currently over 90 reportable diseases that are detailed in Florida Administrative Code (FAC), Rule 64D-3.

Physicians, hospitals and laboratories are required by Florida Statutes to report any disease or outbreak detailed on this list to their local health department. The complete list and report form are available on our website <http://www.doh.state.fl.us/chd/volusia/Epidemiology.html>.

We recommend that you print the reportable disease list and post it in a prominent area so all staff can see it.

You can make a report two ways:

- Fax the report form to our secure fax
- Call the appropriate department contact

You can expect to get a call from us in response to most reports and you are required to provide us with the patient information we request.

Note that some diseases require you to call the health department when you first suspect them and/or immediately after getting a positive lab result. Reporting timeframes are detailed on the reportable disease list.

Our normal business hours are Monday-Friday, 8am-5pm, and we are closed on major holidays. So what if you need to report one these urgent diseases when we aren't here? Call (386) 316-5030 to reach one of our on call staff members.

We appreciate your cooperation and support!

INFECTIOUS DISEASE SPECIALIST BOARD CERTIFIED

MICHELLE NASH, MPH AND STEFANY STRONG, PIO

The Volusia County Health Department (VCHD) is pleased to announce that Dr. Ronald Rusiecki has just received his Board Certification from the American Board of Internal Medicine in Infectious Disease. Dr. Rusiecki serves as a senior physician in the health department's HIV and Tuberculosis clinics and also treats patients with a number of other communicable and infectious diseases.

Dr. Rusiecki joined VCHD in July 2009 from Shands Hospital in Gainesville where he practiced infectious disease medicine. An infectious disease physician is one who deals with the full scope of communicable diseases of all types and in all organs, from the common cold and flu to HIV and other respiratory infections.

At the health department, Dr. Rusiecki's responsibilities include treating HIV/AIDS, STD, and TB patients at clinics located in Daytona Beach, DeLand, New Smyrna Beach and Deltona. The health department offers the only public HIV/AIDS clinic in Volusia County serving those in need of care. The health clinic treats clients who may not otherwise have care.

The health department's AIDS Program also offers testing and counseling as well as the AIDS Drug Assistance Program (ADAP) and HIV prevention education. The addition of Dr. Rusiecki to the staff allowed the AIDS clinic to expand to three days.



**JANUARY IS... CERVICAL CANCER
AWARENESS AND NATIONAL BIRTH
DEFECTS PREVENTION MONTH**



**FEBRUARY IS...HEART HEALTH
AWARENESS MONTH**



**MARCH IS...COLORECTAL CANCER
AWARENESS MONTH**

Reportable Disease Rates – Volusia County*	2009	2008	2007	2006	3 yr avg
Vaccine Preventable					
MUMPS	0	0	1	1	1
PERTUSSIS	15	2	0	5	2
VARICELLA	45	141	9	0	50
CNS Diseases and Bacteremias					
CREUTZFELDT-JAKOB DISEASE (CJD)	2	2	1	0	1
ENCEPHALITIS, HERPES	0		1	0	1
ENCEPHALITIS, OTHER	0	1	0	0	0
H. INFLUENZAE MENINGITIS	0	1	1	0	1
HAEMOPHILUS INFLUENZAE (INVASIVE DISEASE)	8	5	1	2	3
LISTERIOSIS	1	3	1	0	1
MENINGITIS, BACTERIAL, CRYPTOCOCCAL, MYCOTIC	8	4	0	0	1
MENINGITIS, STREP PNEUMONIAE	0	2	3	0	2
MENINGOCOCCAL DISEASE	2	2	2	3	2
STAPHYLOCOCCUS AUREUS, COMMUNITY ASSOCIATED MORTALITY	0	1	0	0	0
STREP PNEUMONIAE, INVASIVE DISEASE, DRUG-R	22	19	24	17	20
STREP PNEUMONIAE, INVASIVE DISEASE, SUSCEPT	23	25	16	13	18
STREPTOCOCCAL DISEASE INVASIVE GROUP A	6	10	4	4	6
Enteric Infections					
CAMPYLOBACTERIOSIS	19	19	25	14	19
CRYPTOSPORIDIOSIS	7	12	20	9	14
CYCLOSPORIASIS	1	0	2	1	1
E. COLI SHIGA TOXIN + (NOT SEROGROUPED)	0		1	0	1
ENTEROHEMORRHAGIC E. COLI (EHEC) O157:H7	0	1	0	0	0
ESCHERICHIA COLI, SHIGA TOXIN PRODUCING	0	3	0	0	1
GIARDIASIS	20	34	21	29	28
SALMONELLOSIS	305	146	136	141	141
SHIGELLOSIS	2	58	83	61	67
TYPHOID FEVER	0	0	1	0	0
Viral Hepatitis					
HEPATITIS A	3	2	1	5	3
HEPATITIS B (+HBsAg IN PREGNANT WOMEN)	11	11	12	10	11
HEPATITIS B, ACUTE	10	7	5	7	6
HEPATITIS B, CHRONIC	80	49	6	11	22
HEPATITIS C, ACUTE	2	0	4	2	2
HEPATITIS C, CHRONIC	533	599	529	563	564
HEPATITIS E	1	0	0	0	0
Vector Borne, Zoonoses					
LYME DISEASE	2	3	0	1	1
MALARIA	1	1	2	2	2
PSITTACOSIS	0	0	0	1	0
RABIES, ANIMAL	5	2	7	7	5
RABIES, POSSIBLE EXPOSURE	102	98	111	95	101
ROCKY MOUNTAIN SPOTTED FEVER	1	0	0	0	0
Others					
AIDS	107	103	58	97	86
CARBON MONOXIDE POISONING	1	0	0	0	0
CHLAMYDIA [±]	1611	1450	--	--	--
GONORRHEA [±]	383	482	--	--	--
H. INFLUENZAE PNEUMONIA	0	2	2	1	2
HIV	105	145	91	79	105

INFLUENZA A, NOVEL OR PANDEMIC STRAINS	60	0	0	0	0
INFLUENZA-ASSOCIATED PEDIATRIC MORTALITY	1	0	0	0	0
LEAD POISONING	4	14	3	5	7
LEGIONELLOSIS	1	3	6	6	5
MERCURY POISONING	0	0	0	1	0
SYPHILIS, INFECTIOUS [±]	15	8	--	--	--
SYPHILIS, EARLY LATENT [±]	25	13	--	--	--
SYPHILIS, LATENT UN. DUR. [±]	9	10	--	--	--
SYPHILIS, LATE LATENT [±]	10	6	--	--	--
TUBERCULOSIS	6	12	17	8	12
VIBRIO ALGINOLYTICUS	0	0	2	1	1
VIBRIO FLUVIALIS	1	0	0	1	0
VIBRIO HOLLISAE	1	0	1	1	1
VIBRIO PARAHAEMOLYTICUS	0	1	5	2	3
VIBRIO VULNIFICUS	1	1	2	0	1
VIBRIO. OTHER	0	0	1	1	1
TOTAL	3578	3513	1218	1207	1979

*Includes all reported confirmed and probable cases. 2009 data is provisional and subject to change.

[±]Data prior to 2008 was not available at the time of this report.