

EPI WATCH

Monthly Epidemiology Newsletter



205 Dr. MLK Jr. St. N St. Petersburg, FL 33701 (727) 824-6900

Director

Ulyee Choe, DO

Editor

Andrea Leapley, MPH, CIC Andrea Leapley@FLHealth.gov

Division of Disease Control and Health Protection

Disease Reporting

To report diseases and clusters of illness:

Phone: (727) 824-6932 Fax: (727) 484-3865 (excluding HIV/AIDS)

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Surveillance Room 3-138 205 Dr. MLK Jr St. N

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Omicron, the New COVID-19 Variant of Concern

by Andrea Leapley, MPH, CIC

The most recent COVID-19 variant of concern, Omicron, was first reported to the World Health Organization (WHO) on November 24 after being detected in Botswana South Africa. The first case in the United States was identified on December 1. Since that time, thirty-eight states have reported at least one case of Omicron, including Florida, whose first case was reported on December 9.

Currently, based on some of the genetic mutations and how quickly Omicron replaced Delta in South Africa, there are concerns it may be more transmissible than previous variants, including Delta. More information is needed to understand the full spectrum of the severity of illness and the impact on immunity from vaccines or previous infection. There is no indication it is impacting treatment or diagnostic accuracy at this time.

On November 26, President Joe Biden issued a travel ban for persons who are non-citizens and have been in Botswana, Eswatini, Lesotho, Malawi, Mozambique, Namibia, South Africa, or Zimbabwe in the previous 14 days prior to entry. However, the evidence has shown that travel bans are largely ineffective at preventing the spread of infectious diseases. At best, the bans may slow the introduction of a disease, which is only really beneficial if countries use that time to prepare and implement prevention measures. At worst, the bans discourage scientific transparency, provide a false impression that the virus is being contained, can make it difficult to transport healthcare workers and supplies, and exacerbate racism and xenophobia. In the case of Omicron, while it has been detected in seventy-six countries in Europe, Asia, and North America, bans have only been issued for travelers from southern Africa.

Our best tool against COVID-19, the Omicron variant, and future variants is vaccination. According to the WHO's weekly Epidemiologic Update issued on December 14, there does seem to be a reduction in vaccine effectiveness as well as an increased risk for reinfection with Omicron, the extent of which has not yet been determined. However, early evidence indicates that a third dose of the Pfizer/BioNTech and Moderna vaccines boosts effectiveness against Omicron significantly³. This is especially important with the holiday season upon us, during which more people will be traveling and attending group events. In addition to vaccination, prevention measures such as mask wearing, social distancing, and avoiding crowded indoor spaces can also help to slow the spread of Omicron. Holding holiday gatherings outdoors when weather allows can also reduce the risk of infection. While each of these measures can add some level of protection, combining multiple measures has been shown to be more effective than any singular prevention measure. So, while we continue to learn more about Omicron, it is important to get vaccinated and take all possible measures to protect yourself, friends, and family, so that you can have a healthy holiday season.

For more on Omicron and COVID-19 variants, please visit CDC Variants of the Virus

References:

- 1. WHO Weekly epidemiological update on COVID-19 -14 December 2021 https://www.who.int/publications/m/item/weekly-
- epidemiological-update-on-covid-19---14-december-2021
 2. NPR As omicron spreads, studies suggest that travel bans alone don't do much good
- https://www.npr.org/sections/coronavirus-live-updates/2021/11/28/1059619823/omicron-travel-bans-covid
- 3. NPR Omicron evades Moderna vaccine too, study suggests, but boosters help https://www.npr.org/sections/health-shots/2021/12/15/1064202754/omicron-evades-moderna-vaccine-too-study-suggests-but-boosters-help

Don't Invite Norovirus to Your Holiday Parties

by Rachel Ilic, MPH, CPH, CIC

Happy norovirus season! Norovirus is a very contagious virus that causes diarrhea, vomiting, nausea, stomach pain, fever, headache, and body aches. People infected with norovirus can shed billions of particles while only a few can make someone ill. People of all ages can become infected, and outbreaks are usually more common in the winter months, with a peak seen around January¹.

Norovirus is spread by having direct contact with an infected person, consuming contaminated food or water, or touching contaminated surfaces and then putting unwashed hands in your mouth. Norovirus infection can be prevented by:

- Practice proper hand hygiene, which includes washing hands after using the bathroom or changing a diaper and before eating, preparing, or handing any food
- Prepare and handle food correctly by washing fruits and vegetables before
 preparing or eating them, cooking food to <u>adequate temperatures</u>, and keeping
 sick children or adults away from the kitchen.
- Cleaning and disinfecting surfaces regularly using <u>products the</u>
 Environmental Protection Agency has certified as effective against norovirus.
- Do not prepare food for others while ill and for at least two days after symptoms stop.

While there is no medicine to treat norovirus, those infected should drink plenty of fluids to help prevent dehydration. Symptoms of dehydration can include decrease in urination, dry mouth or throat, and feeling dizzy when you stand up.



Outbreaks of norovirus can occur in any setting, but some settings are identified more frequently than others including healthcare facilities, restaurants and catered events, schools, and on cruise ships. Genogroup II genotype 4 (GII.4) viruses have caused most outbreaks around the world. There are several surveillance systems that are used to track outbreaks. CaliciNET is used by the Bureau of Public Health Laboratories which helps collect information on genotypes that cause outbreaks. This winter season, make sure your hands are clean, the food is safe, and surfaces are disinfected for healthy, norovirus-free holidays.

For more on norovirus, please visit CDC Norovirus

References

1. Centers for Disease Control and Prevention Norovirus Trends and Outbreaks https://www.cdc.gov/norovirus/trends-outbreaks/burden-US.html

Influenza Activity is Increasing Among Young Adults

According to <u>an advisory issued on December 1</u> by the Centers for Disease Control and Prevention (CDC) via the Health Alert Network, an increase in influenza A (H3N2) has been seen in young adults and in college and university settings. Florida and Pinellas County have observed similar trend in these populations. This increase could mark the start of the 2021-2022 flu season and with the end of the semester approaching, many students will be traveling home for the holidays and possibly bringing the flu along with them.

Due to the low level of flu circulation during the 2020-2021 season, the CDC anticipates that there will be a lower level of community protection than in previous years. Additionally, flu vaccine coverage is low, and while the H3N2 strain is included in this year's vaccine, the H3N2 viruses tend to evolve more rapidly than some others to evade human immunity. For these reasons, the CDC is expecting an increase in flu this winter. The B-Victoria virus is also circulating along with H3N2. In conjunction with COVID-19, these viruses could inflict a dangerous strain on healthcare systems.



The CDC recommends that everyone 6 months of age and older get a flu vaccine as soon as possible. The vaccine is the most effective way to prevent flu and can also reduce the risk of severe illness, hospitalization, and death. In addition to the vaccine, there are plenty of steps to take in your daily life that can prevent the spread of flu. Staying home when you are sick and avoiding close contact with others when they are sick, covering your mouth and nose with a tissue when you cough or sneeze and throwing away the tissue, washing hands often with soap and water or using alcohol-based sanitizer if soap and water are not available, avoiding touching your eyes, nose, and mouth, and cleaning and disinfecting surfaces that may be contaminated with the flu viruses are all ways to reduce the spread of infection. And while mask wearing is not recommended for flu, it is recommended for COVID-19, which is still circulating.

For more on flu, please visit CDC Influenza

For the most recent information on flu in Florida, please visit the Florida Flu Review

Select Reportable Diseases in Pinellas County

Select Report					Sourcy			
	Pin	Pinellas		YTD Total		Pinellas Annual Totals		
Disease	November 2021	November 2020	Pinellas 2021	Florida 2021	2020	2019	2018	
A. Vaccine Preventable								
Measles	0	0	0	0	0	1	7	
Mumps	0	0	2	42	1	7	10	
Pertussis	0	0	1	45	8	27	32	
Varicella	1	1	24	328	18	33	67	
B. CNS Diseases & Bacteremias		•						
Creutzfeldt-Jakob Disease (CJD)	0	0	1	22	0	3	1	
Meningitis (Bacterial, Cryptococcal, Mycotic)	1	1	5	85	6	7	9	
Meningococcal Disease	0	0	1	25	3	1	1	
C. Enteric Infections	•	1		•				
Campylobacteriosis	15	20	199	3540	252	310	264	
- Cryptosporidiosis	2	0	27	304	44	64	34	
Cyclosporiasis	0	1	9	252	9	28	4	
E. coli Shiga Toxin (+)	0	2	17	580	10	24	15	
Giardiasis	3	1	25	627	28	52	41	
Hemolytic Uremic Syndrome (HUS)	0	0	0	3	0	1	0	
Listeriosis	0	0	2	52	2	2	1	
Salmonellosis	18	11	166	5658	176	201	233	
Shigellosis	1	0	32	456	19	22	40	
D. Viral Hepatitis								
Hepatitis A	3	0	5	178	4	377	113	
Hepatitis B: Pregnant Woman	2	0	11	270	40	24	14	
Hepatitis B, Acute	1	5	50	491	103	72	52	
Hepatitis C, Acute	4	9	68	1390	18	82	40	
E. Vector Borne/ Zoonoses								
Animal Rabies	0	0	0	77	1	2	1	
Rabies, possible exposure	8	10	125	3326	128	128	130	
Chikungunya Fever	0	0	0	1	0	0	0	
Dengue	0	0	0	24	0	3	0	
Eastern Equine Encephalitis	0	0	0	0	0	0	0	
Lyme Disease	0	2	10	357	11	22	14	
Malaria	0	0	2	39	2	5	3	
West Nile Virus	0	0	0	13	0	0	0	
Zika Virus Disease	0	0	0	0	0	3	2	
F. Others								
Chlamydia	308	291	3747	n/a	3982	4588	4422	
Gonorrhea	164	139	1745	n/a	1640	1537	1439	
Hansen's Disease	0	0	0	12	0	0	0	
Legionellosis	4	4	35	835	35	43	37	
Mercury Poisoning	0	0	2	19	1	1	1	
Syphilis, Total	51	42	562	n/a	469	479	438	
Syphilis, Primary and Secondary	22	19	250	n/a	224	213	190	
Syphilis, Early Latent	22	16	209	n/a	161	191	158	
Syphilis, Congenital	0	1	5	n/a	5	6	2	
Syphilis, Late Syphilis	7	6	98	n/a	89	69	88	
Tuberculosis	1	3	19	n/a	24	23	33	
Vibrio Infections	1	1	13	241	12	18	6	
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^{*}YTD up to November 30, 2021. 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 http://www.floridacharts.com/charts/default.aspx. STD data in STARS is continually updated. Please note, data from the previous month takes up to an additional month or more to be correctly updated.