

SLCHD EPIDEMIOLOGY PAGES

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EPIDEMIOLOGY STAFF

Virginia Lindell; Sr. CHN Director
Sue Noll, RN; Nursing Supervisor
Charisma Atkins, MPH; Epidemiologist
Maureen Dohoney, RN; Epidemiology Nurse
Alan Tuminelli, BSN; Jail-Link Coordinator
Bette Holeva, BA, MT; Bio-terrorism Surveillance
Linda Gordon, MSA; Area 15 HIV/AIDS Surveillance Manager
Kim Honer; STD Program Manager
Andrew Buffa, BA; STD Program Supervisor
Felicia Ingram; STD Program Surveillance
Mercedes Donahue, Staff Assistant

The St. Lucie County Health Department 's Epidemiology programs are on the front lines of disease control and prevention through the use of surveillance techniques and the analysis of communicable and environmental disease information. It is the charge of this department to investigate reported cases of all communicable diseases and/or disease clusters by addressing the persistent threat of all communicable diseases to all residents, regardless of age, gender, lifestyle, ethnic background, or socioeconomic status.

HIV/AIDS YEAR 2006 ANALYSIS

Linda Gordon, HIV/AIDS Surveillance Coordinator

In 2006, the Florida Department of Health Division of HIV/AIDS published a *Silence is Death* report that focused on the prevalence of HIV/AIDS in black communities across the state. This report was significant to St. Lucie County because it addressed the fact that our county has the highest rate of Blacks (1 in 35) living with HIV/AIDS in the state.

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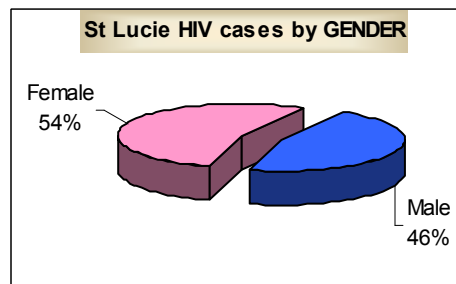
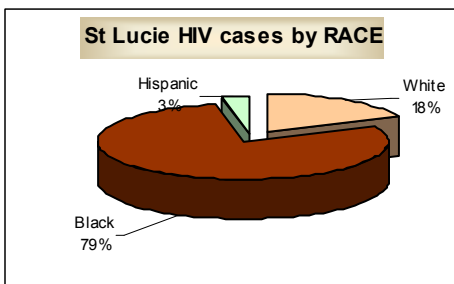
The overarching theme of *Silence is Death* is to break the silence by (1) raising awareness about HIV/AIDS among blacks; (2) encouraging individuals to be tested for HIV/AIDS; (3) increase youth involvement in HIV community planning, decision making, and HIV prevention programs; (4) reducing barriers to HIV testing, prevention, and care by addressing the HIV/AIDS stigma; and (5) disseminating information on the health benefits of condoms and other risk reduction measures.

HIV/AIDS Surveillance for Area 15 (Indian River, St. Lucie, Martin, and Okeechobee Counties) shows that there is a need to address this problem in the state and in St. Lucie county. The following statistics examine the number of people living with this disease in our area and provides evidence that in 2006 St. Lucie County was the leader in the number of people living with HIV based upon gender and race. For a more in-depth evaluation of HIV and AIDS cases in Area 15, please contact Linda Gordon at the St. Lucie County Health Department at Linda_Gordon@doh.state.fl.us.

	St. Lucie	Indian River	Martin	Okeechobee
Cumulative Cases To Date	544	98	124	48
Cumulative Cases, Same Time, 1 Year Ago (National: 12/31/02)	529	93	122	47
Cumulative Deaths	34 (6%)	1 (2%)	3 (2%)	1 (2%)

Race	National	%	Florida	%	Area 15	%	St. Lucie	%
White	76,703	33%	9,990	28%	173	21%	97	18%
Black	109,991	48%	18,941	53%	576	71%	425	78%
Hispanic	33,640	15%	6,307	18%	53	7%	16	3%
Other/Unknown	4,256	2%	430	1%	12	2%	6	1%

Adult Sex	National	%	Florida	%	Area 15	%	St. Lucie	%
Male	157,047	72%	22,949	64%	420	52%	250	46%
Female	67,543	28%	12,349	35%	394	48%	294	54%



SEXUALLY TRANSMITTED DISEASES

Charisma Atkins, Epidemiologist

The St. Lucie County Health Department Sexually Transmitted Diseases (STD) Program is housed in the Epidemiology Department and is part of Area 15. Its' mission is to investigate and treat reported cases of STDs, educate the community about how these diseases are spread, and provide proper prevention methods. The STD Program is responsible for notifying clients of their STD results, interviewing those clients to determine the source of their infection, interviewing client partners, and coordinating treatment protocols with a STD provider. While there are a host of STDs that are reported to the health department, only a few are investigated by persons employed as Disease Intervention Specialist (DIS) in the STD Program. Those diseases are HIV/AIDS, Chlamydia, Gonorrhea, and Syphilis. The other STDs (HPV, Herpes, Genital Warts, and Trichomoniasis) are reportable; but they are only followed by the DIS when children or pregnant women are the clients.

All clients diagnosed with a STD should receive treatment immediately upon their positive laboratory confirmation. Lack of treatment could lead to more serious infection and reproductive organs could be damaged. The major cause of concern is pregnant women since they are able to transfer disease to their unborn child through the womb, childbirth, and/or breastfeeding.

Disease Intervention Specialists are persons that assist in the identification and treatment of medical and non-medical issues. They provide support and answer any questions or concerns a patient may have regarding their diagnosis, as well as assist the client in informing their sexual partners about their condition. Partners must be informed about their possible exposure to sexually transmitted diseases and DIS provides partner Counseling and Referral Services that are confidential, voluntary, and free. This service is offered to everyone who tests positive for any STD in the State of Florida and is done without the client's name being mentioned thus preserving the patient's bill of rights.

In 2006, SLCHD employed 5 DIS and 2 assistants in doing investigations, reporting, and treatment of persons with sexually transmitted diseases. Investigations begin with the reporting of a positive test or the confirmation from the client's partner. This is known as the field record. In 2006 there were 3105 records generated for Area 15 with St. Lucie county generating 1933 records. A Disease Intervention Specialist conducts interviews with all clients when they come for treatment; however they only monitor the number of interviews done with HIV positive persons and pregnant women with laboratory-confirmed STD results. Area 15 conducted 551 interviews in 2006, with St. Lucie County performing 323 interviews. For more information on the STD Program, please contact Felicia Ingram at FelicaI_Ingram@doh.state.fl.us.

COMMUNICABLE DISEASE YEAR 2006 ANALYSIS

Diseases	2006	%
Animal Bite	8	1.4%
Animal Rabies	2	0.3%
Brucellosis	1	0.2%
Campylobacteriosis	13	2.3%
Ciguatera	1	0.2%
Cryptosporidiosis	5	0.9%
Cyclosporiasis	1	0.2%
Dengue Fever	1	0.2%
E. Coli (O157:H7)	1	0.2%
Giardiasis	14	2.4%
H. Influenzae Pneumonia	1	0.2%
H. Influenzae Primary Bacteremia	4	0.7%
Hepatitis A	7	1.2%
Hepatitis B (acute)	6	1.0%
Hepatitis B (chronic)	17	2.9%
Hepatitis B (+HBsAg in Preg Women)	10	1.7%
Hepatitis C (acute)	1	0.2%
Hepatitis C (chronic)	340	58.9%
Lead Poisoning	11	1.9%
Legionellosis	2	0.3%
Listeriosis	1	0.2%
Lyme Disease	4	0.7%
Malaria	2	0.3%
Meningitis (Other)	5	0.9%
Pertussis	1	0.2%
Rocky Mountain Spotted Fever	4	0.7%
Salmonellosis	85	14.7%
Shigellosis	6	1.0%
Strep Pneumoniae, Invasive Disease	20	3.5%
Streptococcal Diseases, Invasive	3	0.5%
Vibrio Vulnificus	1	0.2%
Total	578	

SLCHD investigated 578 cases of reportable diseases and conditions in 2006. The above listed diseases were all reported to the St. Lucie County Health Department from various community providers. The most frequently reported illness was Hepatitis C occupying 58.9% of the case load, followed by Salmonella with 14.7%. The remaining diseases were reported less frequently. A few cases were only reported once or twice throughout the year, indicating the lack of their prolonged presence in our county. Such cases were Brucellosis, Cyclosporiasis, Dengue Fever, H. Influenza Pneumonia, Hepatitis C (acute), Listeriosis, and Vibrio Vulnificus. Other less frequently reported diseases that require immediate attention regardless of their prevalence in the community are Animal Bites, Animal Rabies, Ciguatera, Childhood Lead Poisoning, E. Coli 0157:H7, and Legionellosis, and Pertussis. For more information on Communicable Diseases and Conditions, please contact Charisma Atkins at Charisma_Atkins@doh.state.fl.us.