



# EPIsodes - Monthly Report

## Spotlight on Foodborne Illness and Food Safety

The [CDC estimates](#) that in the United States, 48 million people experience foodborne illness and disease; 128,000 are hospitalized, and 3,000 die. In Florida thus far in 2018, there have been over 13,000 confirmed cases of reportable foodborne or water borne diseases; in St. Lucie County, 238. The Florida and St. Lucie case counts include only those individuals who met the Florida Department of Health case definition for the disease (clinical, laboratory, and/or epidemiological considerations depending upon the disease). These case counts do not include the thousands of people who may have suffered the effects of a foodborne illness and did not seek medical attention or were diagnosed with a foodborne illness that is not reportable to the Health Department such as norovirus.

The Epidemiology and Environmental Health Programs of the Florida Department of Health in St. Lucie County investigate outbreaks of foodborne illnesses (an incident in which two or more persons in different households experience similar illness resulting from the ingestion of a common food), individual cases of reportable foodborne illnesses, and specific food related complaints. Each investigation includes meal history of the ill person, food preparation habits in the household or where the exposure occurred, other environmental exposures, case contacts, and more. Although determining what specific food items are responsible for these cases is difficult, cooperation from the ill person or family member, medical partners, food production staff, and the community all help determine if a specific food, event, food preparation practice, or food service business presents a hazard to our community. Identifying possible exposure through these investigations helps us and other agencies or organizations to mitigate risk and keep our community healthy.

During a season where we are preparing and transporting large quantities of food for holiday gatherings, it is essential that each of us follow safe food handling guidelines to keep ourselves, friends, co-workers, and family safe and healthy. Go to [foodsafety.gov](#) for more information.

### What to do to keep your food safe:

- ⊕ Wash hands with soap and water before, during, and after food preparation, and before you eat.
- ⊕ [Clean](#) utensils and work surfaces with soap and HOT water.
- ⊕ Rinse fruits and vegetables under running water.
- ⊕ Use [separate](#) cutting boards and plates for raw meat, poultry, and seafood.
- ⊕ Keep raw meat, poultry, and seafood away from other foods in your grocery cart and in your refrigerator.
- ⊕ Thaw frozen foods separately in the refrigerator, in cold water, or by microwaving.
- ⊕ Use a food thermometer; hot foods should be held at 140° or above, cold foods at below 40° F.
- ⊕ [Cook](#) all foods to the right temperature. Reheat leftovers to 165° F.
- ⊕ [Chill](#) perishable foods within two hours by refrigerating or freezing. (After 1 hour if left out in the Florida heat-above 90°F).



### What NOT TO DO:

- ⊘ **Do not** prepare food for others if you have diarrhea or are vomiting.
- ⊘ **Do not** thaw meat on the counter.
- ⊘ **Do not** rinse meat, poultry, or seafood. Rinsing may splash bacteria onto counters and other surfaces.
- ⊘ **Do not** put cooked meat back on the same plate that held it raw.
- ⊘ **Do not** hold any food inside the “danger zone” of 40° to 140° F.
- ⊘ **Do not** rely on smell to determine if food has gone bad. Illness causing bacteria does not affect the look, smell, or taste of food.
- ⊘ **Do not** leave food out to cool before refrigerating.

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“Disease control and prevention are core functions of any public health agency. Protection of the public’s health from existing, emerging, and re-emerging diseases requires diligence in all aspects of public health. The public health partners identifying and characterizing emerging trends in disease are the physicians, nurses, laboratorians, hospital infection preventionists, and other health care professionals who participate in reportable disease surveillance. Without their participation, the ability to recognize and intervene in emerging public health issues would be much more limited.” [Florida Morbidity Statistics Report 2016](#)

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## Preliminary Cases and Incidence of Reportable Diseases/Conditions in St. Lucie County and Florida, Year to Date October 27, 2017 and 2018

Note that this table includes preliminary confirmed and probable cases (2018 data) reported in Florida residents (regardless of where infection was acquired) by date reported to the Bureau of Epidemiology as captured in the reportable disease surveillance system (Merlin).

Data for 2017 is final; data for 2018 is preliminary and will change. 2018 preliminary case counts are current as of the date above, but may change with additional review. A percentage of cases will be determined not to be cases after additional review and this percentage varies by disease.

Case reviews are continuous throughout the year. Some case counts may decrease between YTD reports.

Please note that counts presented in this table may differ from counts presented in other tables or reports, depending on the criteria used.

^Case definition for reported lead poisoning changed in 2018

\*\*From 2015 to 2016, the probable case classification for campylobacteriosis included non-culture tests for symptomatic people with no culture result available and no other enteric pathogen detected. Beginning in 2017, the probable case classification was revised to include non-culture tests for symptomatic people, independent of a culture result or detection of another enteric pathogen.

^^Beginning in 2017, the probable case classification for salmonellosis, shigellosis, and vibriosis included non-culture tests, independent of the presence of symptoms.

Disease Category	YTD Oct. 27, 2017		YTD Oct. 27, 2018	
	St. Lucie	Florida	St. Lucie	Florida
<b>Vaccine-Preventable Diseases</b>				
Measles (Rubeola)	0	3	0	11
Mumps	0	50	0	45
Pertussis	2	306	0	279
Varicella (Chickenpox)	4	529	10	660
<b>CNS Diseases and Bacteremias</b>				
Creutzfeldt-Jakob Disease (CJD)	0	24	0	15
Haemophilus influenzae Invasive Disease	1	229	0	267
in children 5 years or younger	0	28	0	38
Listeriosis	0	45	0	37
Meningitis, Bacterial or Mycotic	4	93	6	85
Meningococcal Disease	0	18	0	18
Streptococcus pneumoniae Invasive Disease	-	-	-	-
Drug-Resistant	3	193	2	175
Drug-Susceptible	9	272	2	315
<b>Enteric Infections</b>				
Campylobacteriosis**	45	3,585	80	4,005
Cryptosporidiosis	6	448	2	499
Cyclosporiasis	2	111	0	72
Escherichia coli, Shiga Toxin Producing (STEC)	0	135	9	673
Giardiasis, Acute	11	834	12	932
Salmonellosis^^	60	5,237	120	5,594
Shigellosis^^	1	1,097	9	1,203
Typhoid Fever (Salmonella serotype Typhi)	0	18	0	11
<b>Viral Hepatitis</b>				
Hepatitis A	1	219	1	300
Hepatitis B, Acute	17	623	10	660
Hepatitis B, Chronic	70	4,168	66	4,404
Hepatitis B, Surface Antigen in Pregnant Women	14	379	9	323
Hepatitis C, Acute	15	330	11	510
Hepatitis C, Chronic	418	21,920	443	20,786
Hepatitis D, E, G	0	6	1	8
<b>Vectorborne, Zoonoses</b>				
Dengue Fever	0	20	0	42
Ehrlichiosis/Anaplasmosis	0	24	0	50
Lyme Disease	4	169	3	140
Malaria	1	47	0	45
Rabies, Animal	0	63	1	117
Rabies, Human	0	0	0	1
Rabies, Possible Exposure	84	2,778	99	3,297
Rocky Mountain Spotted Fever/Rickettsiosis	1	21	1	29
West Nile Virus Disease	0	3	0	25
<b>Others</b>				
Botulism, Foodborne	0	0	0	0
Botulism, Infant	1	1	0	1
Brucellosis	0	8	0	13
Carbon Monoxide Poisoning	7	457	2	146
Ciguatera Fish Poisoning	0	19	5	61
Lead Poisoning^	29	1,879	14	2,257
Legionellosis	6	362	7	404
Mercury Poisoning	3	40	0	36
Vibriosis (Excluding Cholera)^^	1	230	3	195

[Click here for a list of Reportable Diseases/Conditions in Florida](#)