

Weekly Update



## California Department of Public Health Influenza Surveillance Program

### ***California Influenza and Other Respiratory Disease Surveillance for Week 2 (January 5, 2014 to January 11, 2014)***

Note: This report includes data from many different sources of influenza surveillance, including syndromic surveillance, laboratory surveillance, and mandatory reporting of influenza deaths for cases ages 0–64 years. The information contained in this report should be viewed as a “snapshot” of influenza activity for each surveillance week, and should not be considered as population-based data or representative of all California public health jurisdictions.

#### **Overall influenza activity in California during Week 2 was “widespread\*.”**

California has seen an accelerated increase in flu activity in the past few weeks. While influenza activity varies from year to year and is unpredictable, California generally sees an increase in cases in late December or early January and it often peaks in February or March. During Week 2, increases in laboratory detections of influenza and influenza-associated deaths in person <65 were reported in multiple regions statewide. While outpatient visits for influenza-like illness and hospitalizations for pneumonia and influenza at Kaiser Permanente facilities remain above expected levels for this time of year, the levels decreased from Week 1 to Week 2. Most influenza-positive specimens identified in California during the 2013–2014 influenza season are influenza A; of the influenza A viruses subtyped, most are 2009 A (H1N1) viruses. The H1N1 strain appears to be the predominant strain so far this flu season and is one that is contained in the current flu vaccine. Of the specimens strain-typed this season nationwide, all match components in the 2013-2014 influenza vaccine.

#### **Influenza Report Highlights**

- Outpatient influenza-like illness (ILI) during Week 2 (4.5%) exceeded expected levels for this time of year. Statewide, the percentage of outpatient visits for ILI decreased in Week 2 compared to Week 1 (5.4%).
  - Outpatient ILI for the California border region decreased in Week 2 (4.1%) compared to Week 1 (4.9%)
- Of 4,441 specimens tested during Week 2,
  - 1,463 (32.9%) were positive for influenza virus; of these
    - 43 (1.0%) were influenza B and
    - 1,420 (32.0%) were influenza A
      - 15 (1.1%) were subtyped as seasonal A (H3)
      - 419 (29.5%) were subtyped as 2009 A (H1)
      - 986 (69.4%) were not subtyped.
  - Of the 702 specimens tested in the California border region during Week 2, 228 (32%) were positive for influenza
- 38 laboratory-confirmed influenza deaths were reported during Week 2.

- Two laboratory-confirmed influenza outbreaks were reported during Week 2.
- No cases of novel influenza have been detected in California to date.

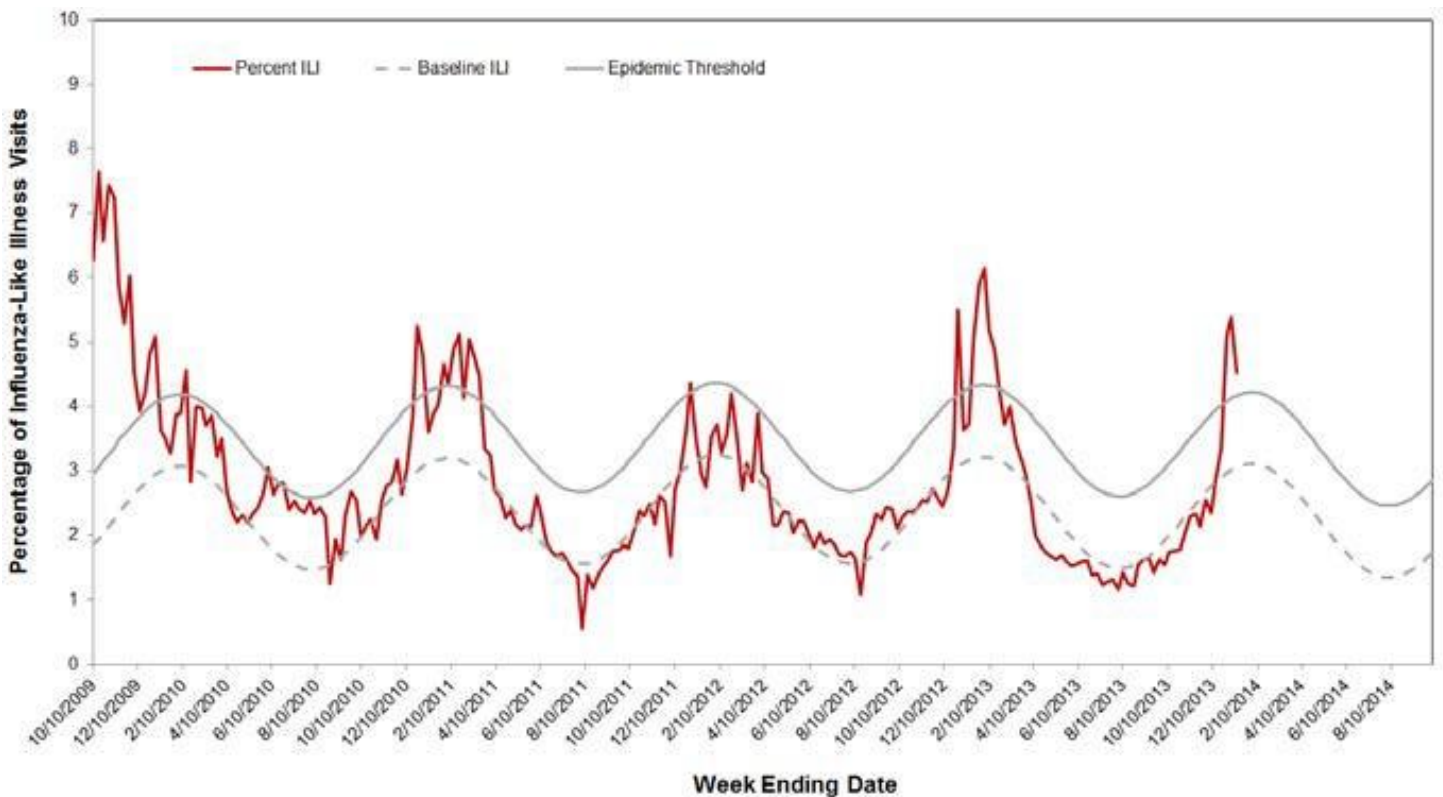
\*For the Centers for Disease Control and Prevention (CDC) definitions of influenza geographic distribution, please go to the [CDC Influenza page](http://www.cdc.gov/flu/weekly/overview.htm) (<http://www.cdc.gov/flu/weekly/overview.htm>).

## A. Syndromic Surveillance Update

### 1. CDC Influenza Sentinel Providers

A total of 86 enrolled sentinel providers have reported data for Week 2, compared to an average of 130 providers reporting for each of the previous weeks. Based on available data, the percentage of visits for ILI in Week 2 (4.5%) was above the epidemic threshold (4.1%) (Figure 1).

**Figure 1. Percentage of Influenza-like Illness Visits Among Patients Seen by California Sentinel Providers, 2009–2014**

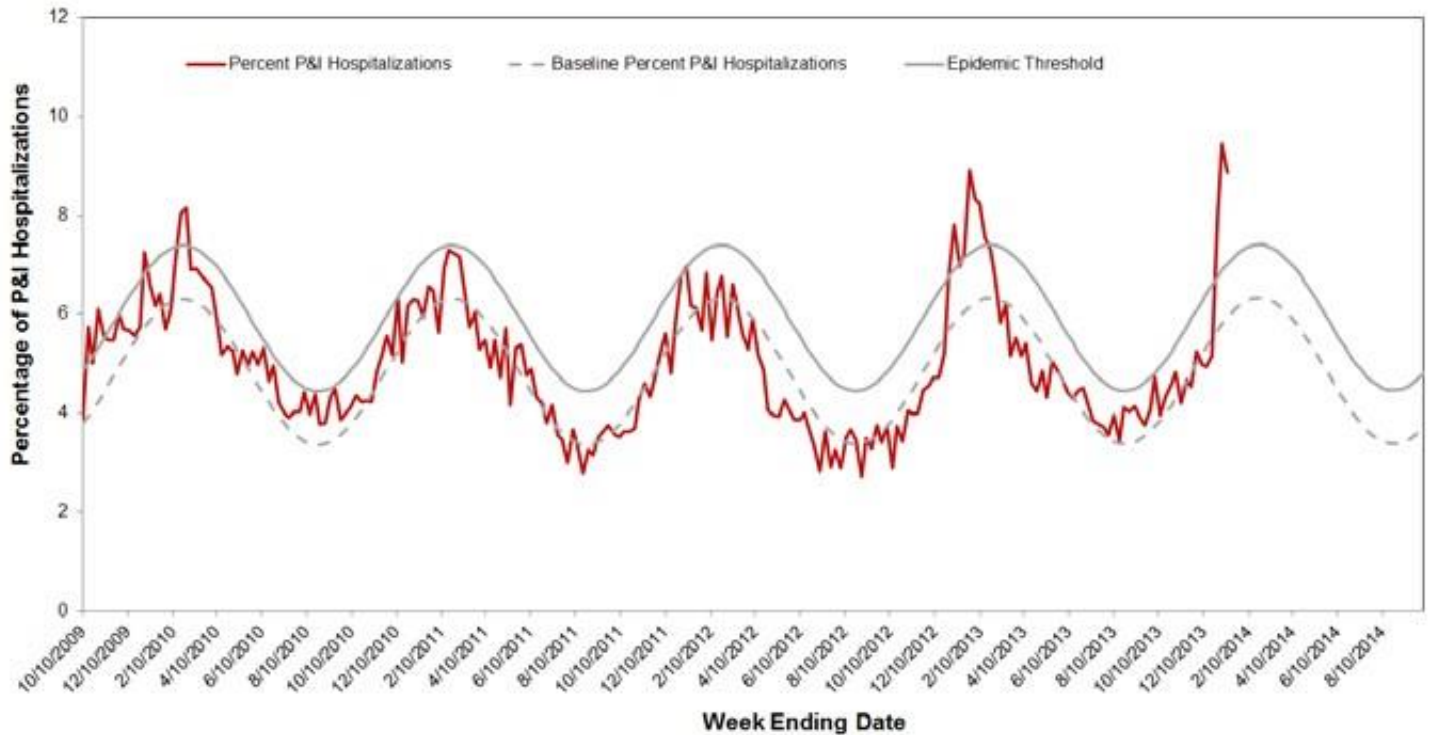


The seasonal baseline was calculated using a regression model applied to data from the previous eight years. The epidemic threshold is two standard deviations above the seasonal baseline and is the point at which the observed percentage of ILI is significantly higher than would be expected at that time of the year.

### 2. Kaiser Permanente Hospitalization Data

The percentage of hospitalizations for pneumonia and influenza (P&I) in Kaiser Permanente facilities in northern and southern California decreased during Week 2 (8.8%), compared to Week 1 (9.4%) (Figure 2). The percentage exceeded the epidemic threshold (7.0%) during Week 2.

**Figure 2. Percentage of P&I Hospitalizations in Kaiser Permanente Northern and Southern California Hospitals, 2009–2014**



The seasonal baseline was calculated using a regression model applied to data from the previous six years. The epidemic threshold is two standard deviations above the seasonal baseline and is the point at which the observed percentage of pneumonia and influenza hospitalizations in Kaiser Permanente hospitals in northern California is significantly higher than would be expected at that time of the year.

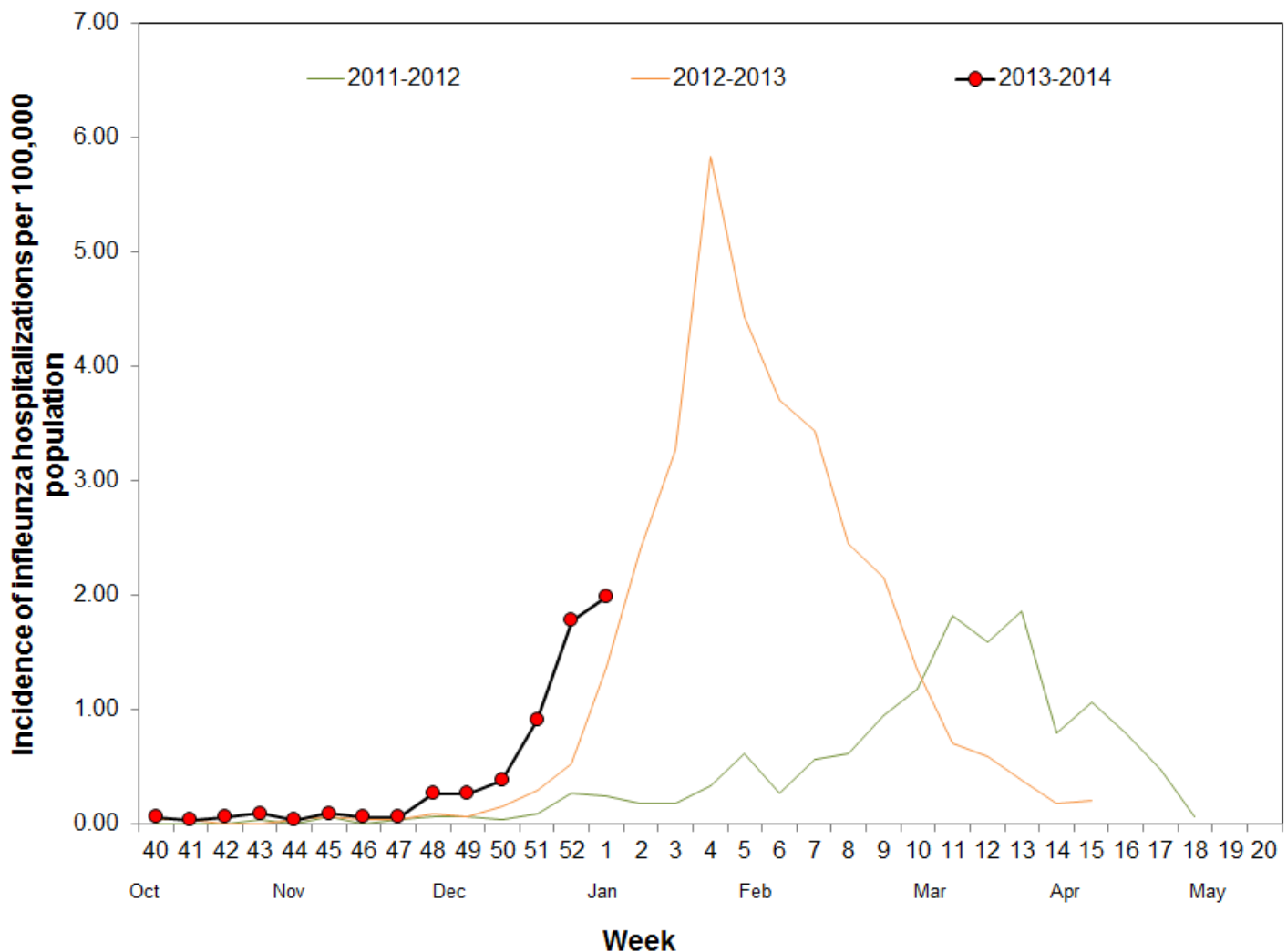
## **B. Hospitalization Surveillance Update**

### 1. Influenza-Associated Hospitalizations, California Emerging Infections Program

The California Emerging Infections Program (CEIP), Influenza Surveillance Network (FluSurv-NET) conducts population-based surveillance for laboratory-confirmed influenza-associated hospitalizations among patients of all ages in Alameda, Contra Costa, and San Francisco counties.

The incidence of influenza-associated hospitalizations per 100,000 population increased in Week 1 (1.02) compared to Week 52 (0.76). Data for Week 2 are not shown because results are still being collected and are likely to change.

**Figure 3. Incidence of Influenza Hospitalizations in CEIP Counties, 2011–2014**



### C. Laboratory Update

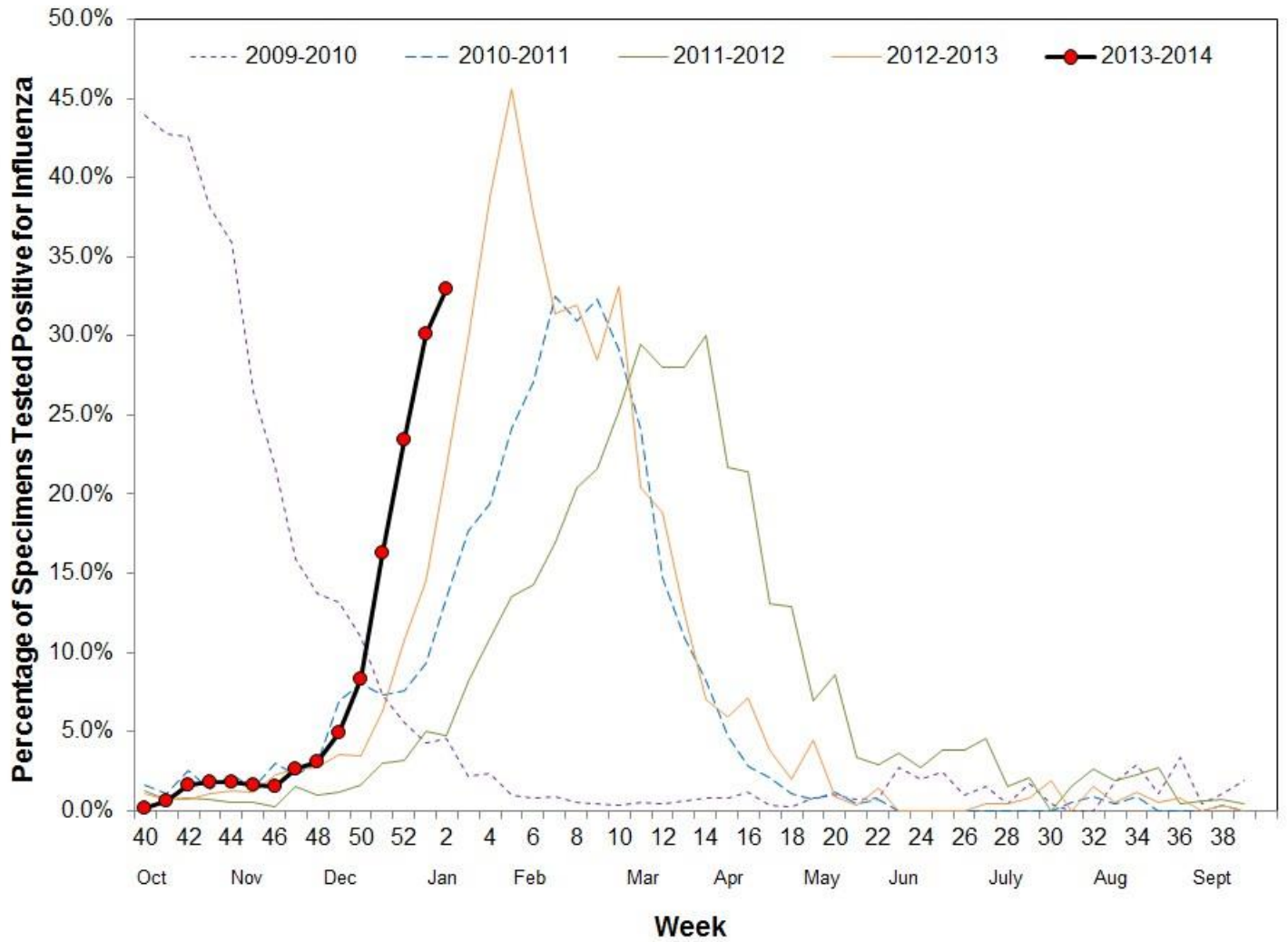
#### 1. Respiratory Laboratory Network (RLN) and Sentinel Laboratory Surveillance Results

The percentage of influenza detections in the RLN and sentinel laboratories increased in Week 2 (32.9%) compared to Week 1 (30.1%) (Figure 4). In Week 2, of 4,441 specimens tested by the RLN and sentinel laboratories, 43 (1.0%) were positive for influenza B and 1,420 (32.0%) were positive for influenza A. Of the 1,420 specimens that tested positive for influenza A, 15 (1.1%) were subtyped as seasonal A (H3), 419 (29.5%) were subtyped as 2009 A (H1), and 986 (69.4%) had no further subtyping performed.

To date for the 2013–2014 season, of 22,252 specimens tested, 3,619 (16.3%) were positive for influenza; of these, 143 (4.0%) were influenza B and 3,476 (96.0%) were influenza A. Of the 3,476 specimens that tested positive for influenza A, 62 (1.8%) were subtyped as seasonal A (H3), 1,013 (29.1%) were subtyped as 2009 A (H1), and 2,401 (69.1%) had no further subtyping performed. Positive specimens have been detected throughout the state.

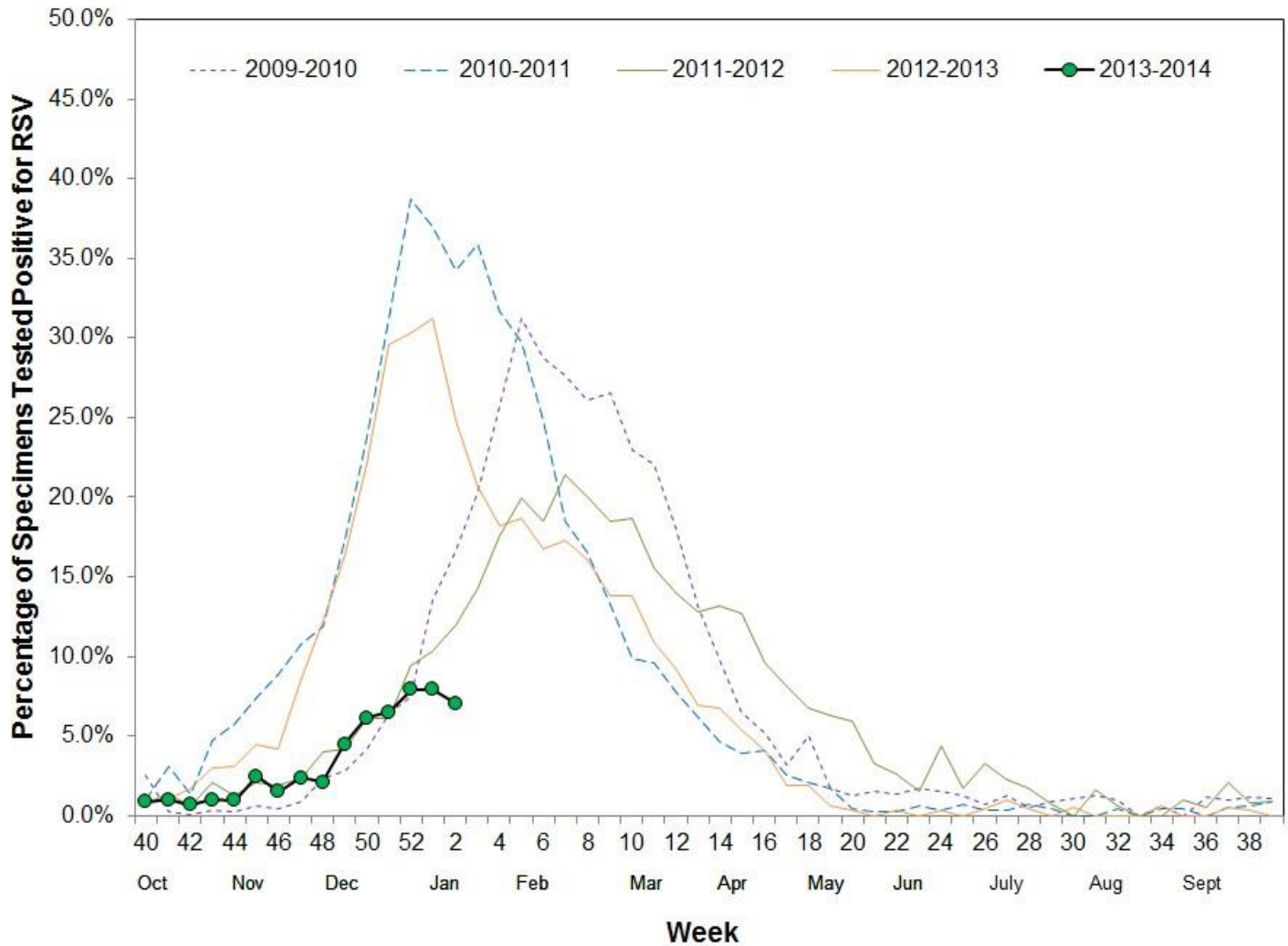
Neither the RLN nor CDPH-VRDL have identified any influenza viruses by polymerase chain reaction (PCR) typing or subtyping that are suggestive of a novel influenza virus.

**Figure 4. Percentage of Influenza Detections in Respiratory Laboratory Network and Sentinel Laboratories, 2009–2014**



During Week 2, 3,119 specimens were tested for RSV and 220 (7.1%) were positive, which represents a decrease compared to Week 1 (7.9%) (Figure 5).

**Figure 5. Percentage of RSV Detections in Respiratory Laboratory Network and Sentinel Laboratories, 2009–2014**

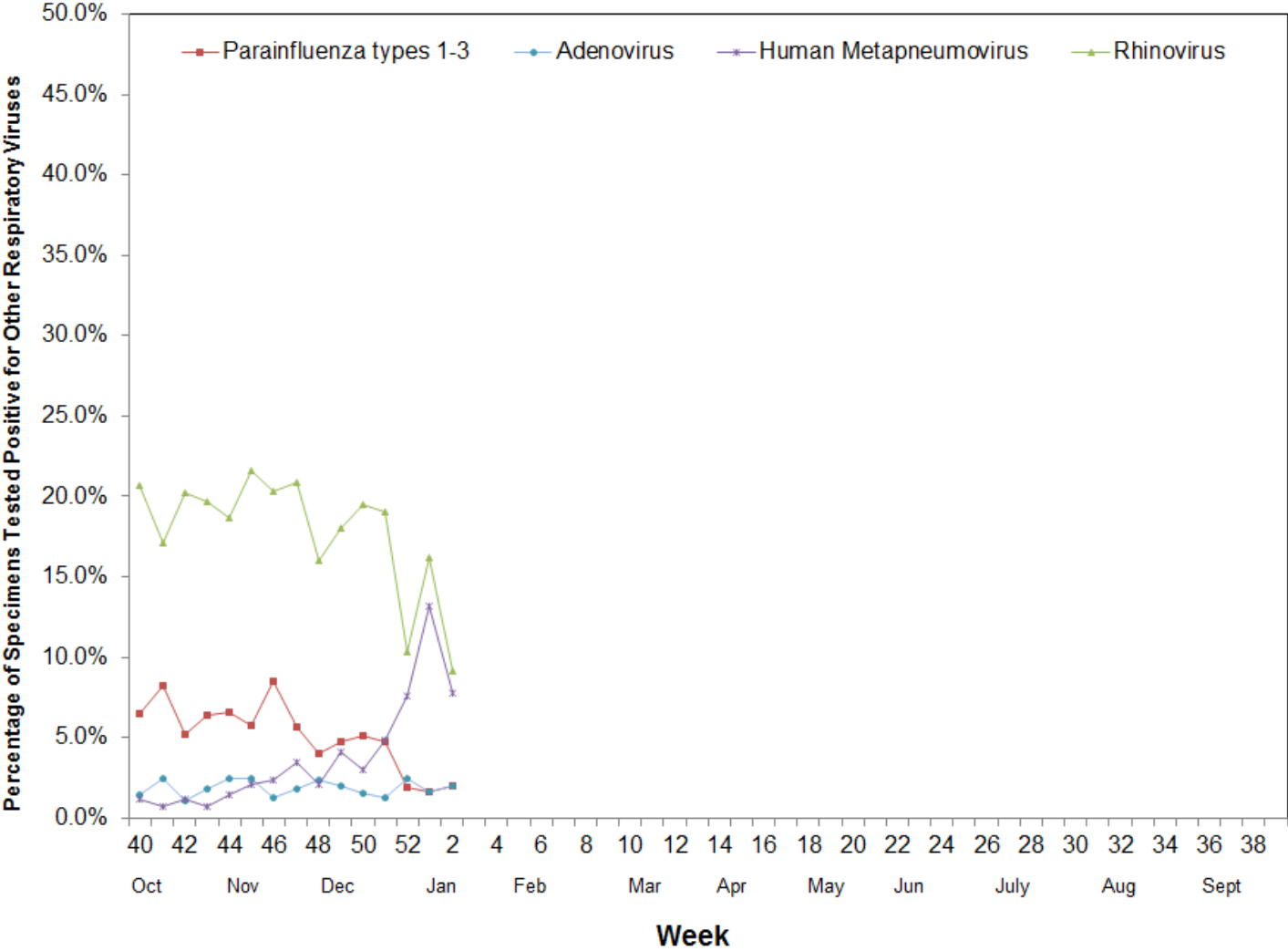


In Week 2, parainfluenza virus detections increased slightly (2.0%, compared to 1.6% in Week 1), adenovirus detections increased (2.0%, compared to 1.6% in Week 1), human metapneumovirus detections decreased (7.8%, compared to 13.2% in Week 1), and rhinovirus detections decreased (9.1%, compared to 16.2% in Week 1) (Table 1, Figure 5).

**Table 1. Number of specimens tested for other respiratory viruses and percentage positive in Week 2**

Other Respiratory Pathogens	No. Specimens Tested	No. Specimens Tested Positive n (%)
Parainfluenza types 1-3	603	12 (2.0%)
Adenovirus	603	12 (2.0%)
Human Metapneumovirus	553	43 (7.8%)
Rhinovirus	340	31 (9.1%)

**Figure 5. Percentage of Other Respiratory Pathogen Detections in Respiratory Laboratory Network and Sentinel Laboratories, 2013–2014**



**2. Antiviral Resistance Testing**

The CDPH-VRDL has tested seventeen 2009 A (H1) specimens and six A (H3) specimens for antiviral resistance to date during the 2013–2014 influenza season (Table 2). All specimens were sensitive to neuraminidase inhibitors.

**Table 2. Number of specimens tested for antiviral resistance**

Influenza A	Neuraminidase Inhibitors Resistance
Influenza 2009 A (H1)	0/17
Influenza A (H3)	0/6

**3. Influenza Virus Strain Characterization**

Sixteen 2009 A (H1) strains have been antigenically characterized to date during the 2013–2014 influenza season. All were strain-typed as A/California/07/2009-like (H1N1), the H1N1 component included in the 2013–2014 vaccine for the Northern Hemisphere.

Five A (H3) strains have been antigenically characterized to date during the 2013–2014 influenza season. All were strain-typed as A/Texas/50/2012-like (H3N2), the H3N2 component included in the 2013–2014 vaccine for the Northern Hemisphere.

#### **D. Laboratory-Confirmed Fatal Case Reports**

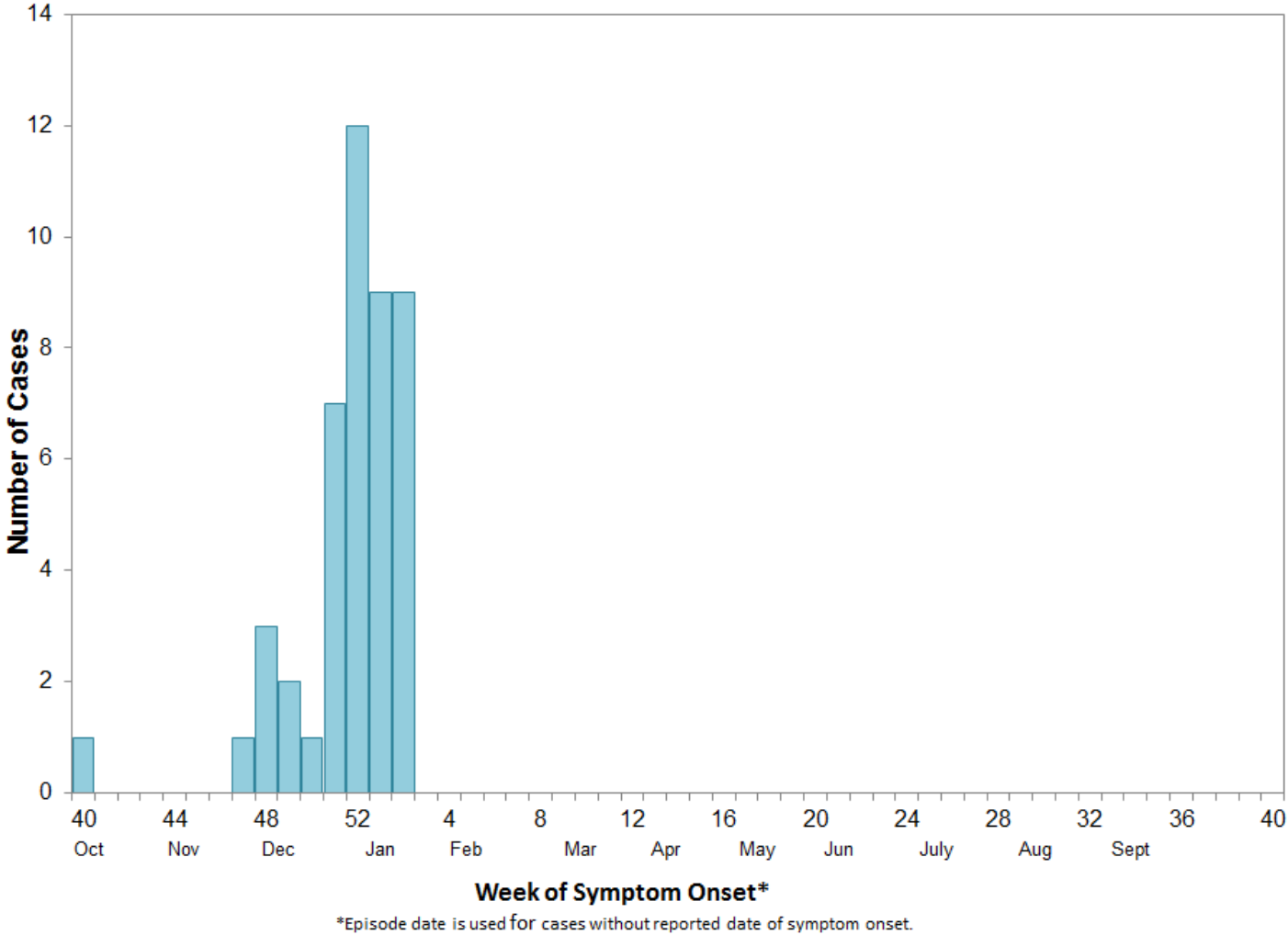
Currently, as mandated under Section 2500 of the California Code of Regulations, deaths among patients aged 0–64 years with laboratory-confirmed influenza are reportable to CDPH. During Week 2, 38 laboratory-confirmed influenza deaths were reported. Two of these deaths were in pediatric cases from Los Angeles and San Mateo County. Of the 38 fatalities reported during Week 2, 22 (57.9%) had data available on underlying medical conditions. Of these, 14 (63.6%) had co-morbid conditions considered by the Advisory Committee on Immunization Practices (ACIP) to increase the risk for severe influenza, 6 (27.3%) had other underlying medical conditions, and 2 (9.1%) were previously healthy. The fatalities were reported from the following counties: Alameda (2), Contra Costa (1), Kern (1), Kings (2), Los Angeles (3), Marin (2), Mendocino (1), Merced (2), Orange (3), Riverside (1), Sacramento (4), San Bernardino (4), San Diego (3), San Mateo (2), Santa Barbara (1), Santa Clara (3), Sonoma (1), and Stanislaus (2).

To date for the 2013-2014 season, 45 laboratory-confirmed influenza deaths have been reported to CDPH. Of the 45 fatalities, 42 were positive for influenza A, 1 was positive for influenza B, and 2 were positive for influenza but pending information for type. Of the 42 positive for influenza A, 0 (0%) were subtyped A (H3), 36 (81%) were subtyped 2009 A (H1N1), and 6 (13%) were not subtyped. By Week 2 of the 2012-2013 season, CDPH had received a total of 5 influenza fatalities.

The weekly influenza report includes confirmed deaths formally reported to CDPH as of January 11, 2014 (Week 2). Fifty deaths were reported to CDPH after this date and are currently being investigated. Deaths will be included in the report for the week they are confirmed.



**Figure 6. Number of Laboratory-Confirmed Fatal Influenza Cases in Persons <65 Years Old by Illness Onset Date\*, 2013-2014**



Note: These data are preliminary and may be revised upward as more cases are reported.

**E. Influenza-Associated Outbreaks**

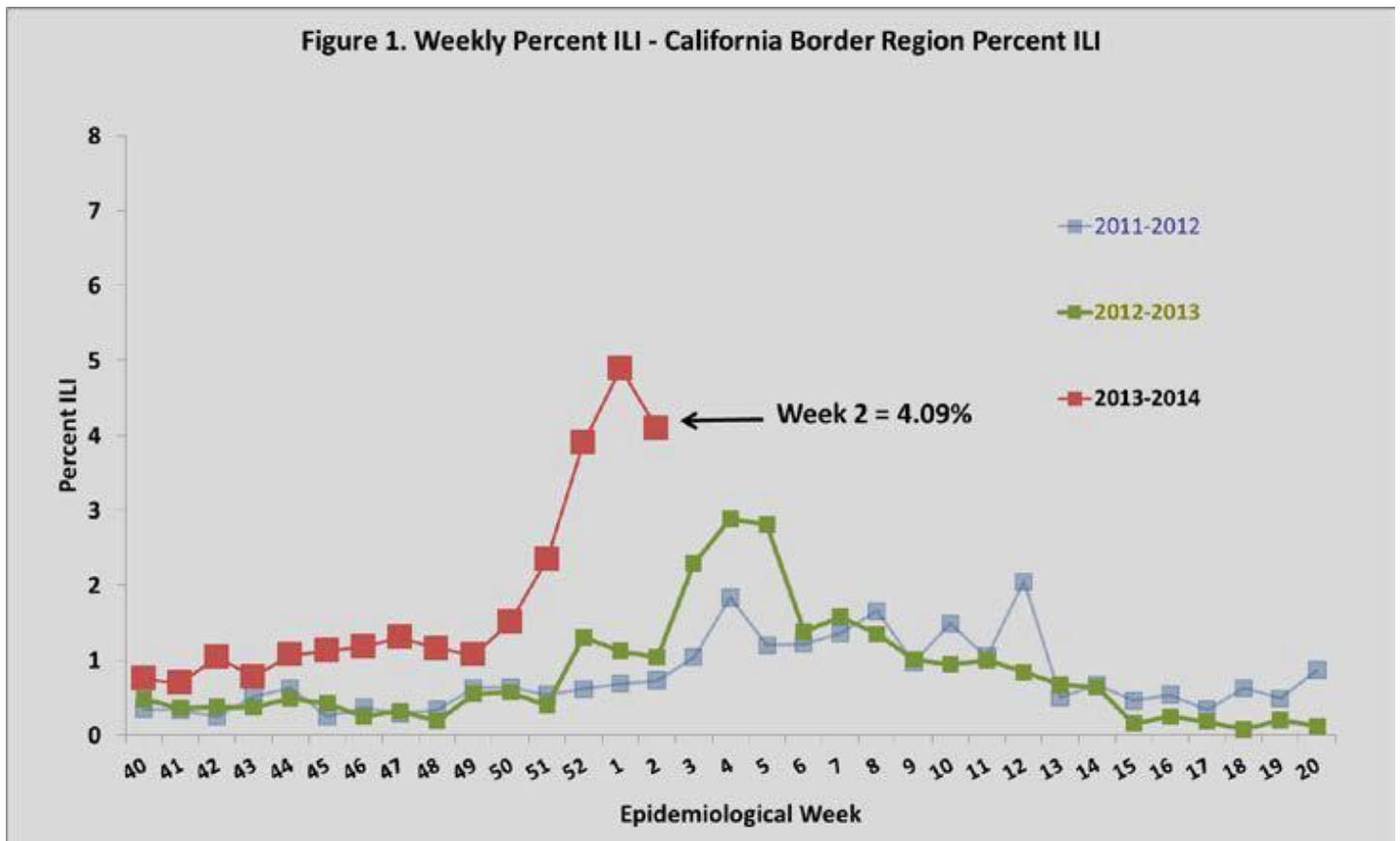
During Week 2, two laboratory-confirmed influenza outbreaks were reported. The outbreaks occurred in San Mateo and Sonoma counties. To date, five laboratory-confirmed influenza outbreaks have been reported for the 2013–2014 season. All outbreaks occurred in congregate living facilities and were caused by influenza A.

**F. California Border Region Influenza Surveillance Network Data**

1. Syndromic Surveillance Update

A total of 8 border region sentinel providers reported data during Weeks 1 and 2 of 2013. The total number of patients screened by all sentinel sites for ILI during Week 2 was 4,891. Outpatient ILI activity decreased by 0.8% from Week 1 (4.89% ILI) to Week 2 (4.09% ILI). ILI activity for the California border region was higher for Week 2 when compared to activity for the same weeks

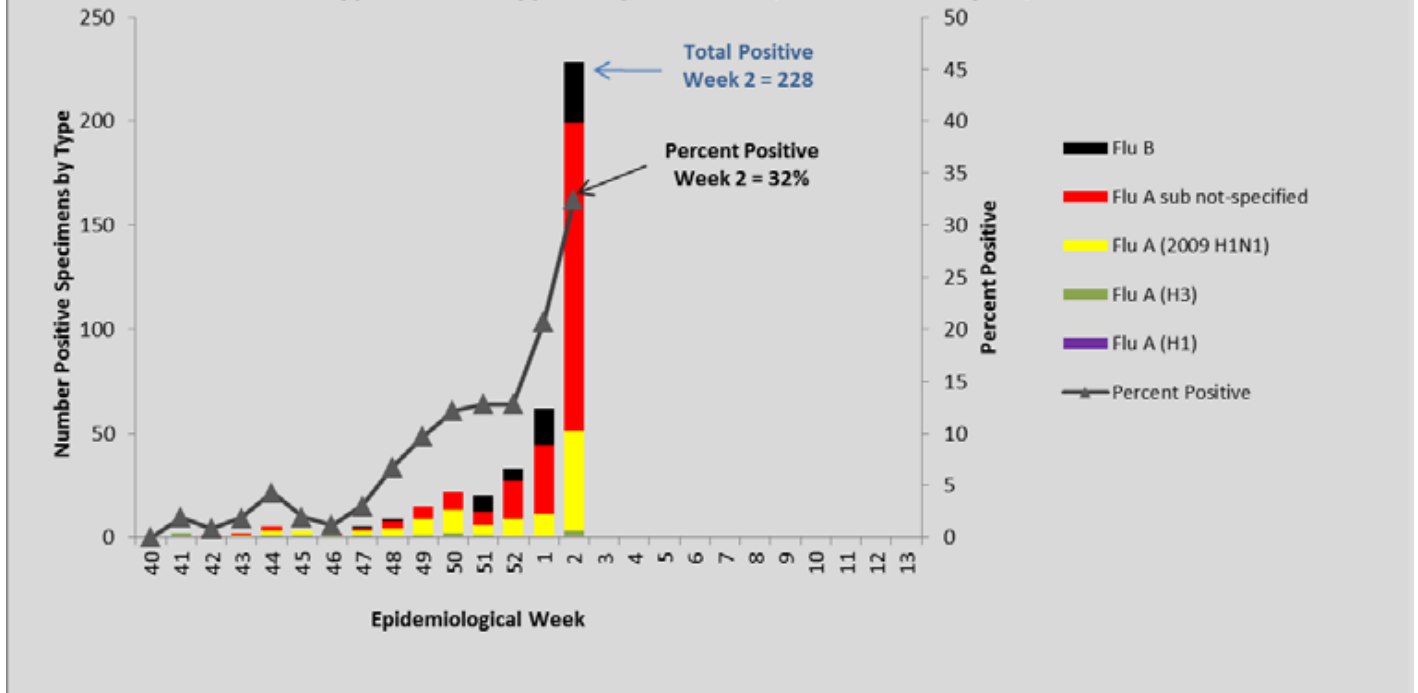
during the 2011– 2012 and 2012–2013 influenza seasons (Figure 1). All influenza syndromic data summarized for the border region represents a subset of CDC influenza sentinel providers in California.



## 2. Virologic Surveillance Update

Cumulatively this season, a total of 2,910 respiratory specimens have been tested from border region clinics; of these, 411 (14.1%) tested positive for influenza. Of the influenza positive specimens 346 (84.2%) were influenza A and 63 (15.3%) were influenza B. Of the 346 specimens that tested positive for influenza A, 13 (3.7%) were A (H3), 103 (29.7%) were 2009 A (H1), and 230 (66.4%) had no subtyping performed. For Week 2, a total of 702 respiratory specimens were submitted testing; of these, 228 (32%) were positive for influenza virus. Of the positive specimens 199 (87%) were influenza A, and 29 (13%) were influenza B. Of the 199 specimens that tested positive for influenza A, 3 (2%) were A (H3), 48 (24%) were A 2009 A (H1), and 148 (74%) had no further subtyping performed (Figure 2). Laboratory data summarized in Figure 2 includes data from influenza sentinel sites as well as laboratory data from other border region laboratories.

**Figure 2. California Border Region Total Positive Respiratory Specimens by Type and Subtype - September 29, 2013 - January 11, 2013**



For questions regarding influenza surveillance and reporting in California, please email [InfluenzaSurveillance@cdph.ca.gov](mailto:InfluenzaSurveillance@cdph.ca.gov). This account is monitored daily by several epidemiologists.

For more information regarding the different influenza surveillance data sources, please visit the [CDPH Influenza Surveillance Program](https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/Immunization/Flu-Reports.aspx) at <https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/Immunization/Flu-Reports.aspx>

To obtain additional information regarding influenza, please visit the [CDPH influenza website](https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/Immunization/Influenza.aspx) at <https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/Immunization/Influenza.aspx>.

A copy of the case report form for reporting any laboratory-confirmed influenza case that was either admitted to the ICU or died can be downloaded from the [Severe Influenza Case History Form Link](https://www.cdph.ca.gov/CDPH%20Document%20Library/ControlledForms/cdph9070.pdf) at <https://www.cdph.ca.gov/CDPH%20Document%20Library/ControlledForms/cdph9070.pdf>.