NATIONAL PERSPECTIVE

During the week January 10 - 16, 2010, CDC reported that overall flu activity continued to decrease in the United States. No states reported widespread flu activity and 7 states reported regional flu activity (a decrease of 2 states from last week).

The proportion of visits to doctors for influenza-like illness (ILI) decreased to 1.8%, below the national baseline level (2.3%). Nationally, 8.0% of deaths were attributed to pneumonia and influenza (P&I), just above the epidemic threshold (7.6%).

Ninety-eight percent of subtyped influenza A viruses reported were identified as 2009 H1N1 influenza. These viruses remain similar to the virus chosen for the 2009 H1N1 vaccine, and remain susceptible to the antiviral drugs oseltamivir and zanamivir with rare exception*.

*Since April 2009, 54 cases of oseltamivir resistance have been found in the United States, with one new case during the last week.

CALIFORNIA 2009 H1N1 INFLUENZA UPDATE

Highlights:

Summary:
- In California, 2009 H1N1 influenza activity remains as “sporadic” this week. Most indicators suggest that illness continues to decline, with levels of illness at or slightly below the usual range for this time of year. A total of 54 new cases (hospitalized and/or fatal) were reported to CDPH this week, 17 of which were from the current reporting period (January 17 - 23, 2010) and 37 of which were delayed reports from prior to January 17, 2009. Reported cases of new hospitalizations decreased from 98 cases last week to 54 cases this week. As in previous weeks, the rate of hospitalizations remains highest among children under one year of age. A total of 7 fatalities were reported to CDPH this week, one of which occurred during this reporting week (January 17 – 23, 2010). Reports of ILI from sentinel providers decreased sharply this past week (January 17 -23, 2010). Detections of respiratory syncytial virus (RSV) continue to increase. Four percent of specimens tested by the Respiratory Laboratory Network (RLN) were influenza A, 85% of which were unsubtypeable and the remaining 15% were not further subtyped.
**H1N1 Highlights:**

- Local health departments have been reporting hospitalized 2009 H1N1 influenza cases as weekly aggregate numbers since August 12, 2009. From January 17 - 23, 2010, 54 hospitalized and/or fatal cases were reported to CDPH, 17 of which were from the current reporting period (January 17 - 23, 2010) and 37 of which were delayed reports from prior to January 17, 2010.
- There have been 8,589 hospitalizations and/or fatalities reported to date since the beginning of the pandemic, of which 1,815 cases required intensive care.
- The statewide cumulative incidence rate of reported 2009 H1N1 influenza hospitalizations and/or fatalities is 22.2 per 100,000 population.
- CDPH received 7 reports of fatal 2009 H1N1 influenza cases for the week ending on January 23, 2010, one of which occurred during the reporting week (January 17 - 23, 2010); a total of 498 deaths caused by 2009 H1N1 influenza have been reported to CDPH to date.
- The case-fatality ratio is highest among individuals aged 50-64 years (10.0%, unchanged from the previous reporting week) and second-highest among individuals aged 36-49 years (9.9%, an increase of 0.1% from the previous reporting week). The case-fatality ratio for all ages combined is 5.8%.
- A total of 3,006 hospitalized and/or fatal 2009 H1N1 influenza cases in pediatric patients 18 years or younger, including 50 deaths, have been reported to CDPH to date.
- Four new cases meeting the case definition for severe pediatric influenza were reported this week, including one fatality. All of these cases are confirmed/probable 2009 H1N1 influenza.
- From January 17 – 23, 2010, 2 pregnant 2009 H1N1 influenza cases were reported to CDPH as aggregate numbers, both of which were from the current reporting period (January 17 – 23, 2010) and none of which were delayed reports from prior to January 17, 2010. A total of 557 pregnant hospitalized and/or fatal cases, including 17 deaths (case-fatality proportion 3.1%), have been reported to CDPH to date.
- In recent months, almost all influenza A-positive specimens tested by PCR at VRDL and by the RLN have been subsequently confirmed as 2009 H1N1 influenza, reflecting that the predominant circulating influenza strain in California remains 2009 H1N1 influenza.
- Four percent of specimens received by the Respiratory Laboratory Network (RLN) were positive for influenza, which is a decrease from 11% from the previous reporting week.
- This week, none of the specimens tested by the RLNs that were positive for influenza A was A/H1 or A/H3, while 85% were unsubtypeable.

**Kaiser Permanente Hospitalization Data (“Flu Admits”)**

The admission diagnoses of flu, pneumonia, and influenza (“Flu Admits”) serve as surrogate markers for the more accurate discharge diagnoses. Influenza activity is tracked by dividing the number of Flu Admits by the total number of hospital admissions for the same day to obtain a percentage of influenza and pneumonia admissions. As indicated in the circles, Figure 1 shows that during week 3 (January 17–23, 2010), the percentage of Kaiser hospitalizations for pneumonia and influenza (P&I) in northern California remained steady. Southern California has decreased for the last two reporting periods (Figure 2). Both data points remain within the range of percentages seen for seasonal influenza in previous years.

CDC Influenza Sentinel Providers

Sentinel providers report the number of outpatient visits for influenza-like illness (ILI) and the total number of visits per week. These data are reported weekly as a percentage of total visits. Figure 3 shows a peak in Weeks 17-18 (April 26 – May 9, 2009) when 2009 H1N1 influenza was first identified. ILI decreased during Week 3 (January 17-23, 2010). A total of 81 sentinel providers reported in Week 3.

Figure 3. California Sentinel Providers – Influenza-Like Visits, 2004-2010.
Laboratory Update

Respiratory Laboratory Network (RLN) Influenza PCR Surveillance Results

As noted in Table 1, during Week 3 (January 17-23, 2010), 4% of specimens received by the Respiratory Laboratory Network were positive for influenza A. This is a decrease from 11% in the previous week. 2009 H1N1 influenza remains the predominant strain circulating in California.

Table 1. Respiratory Laboratory Network (RLN) Influenza PCR Surveillance Results from Selected Laboratories*, Week 3 (January 17-23, 2010)

<table>
<thead>
<tr>
<th></th>
<th>Total Flu A tested</th>
<th>Flu A (% of total)</th>
<th>H1 (% of Flu A)</th>
<th>H3 (% of Flu A)</th>
<th>Unsubtypeable (% of Flu A)</th>
<th>Total Flu B tested</th>
<th>Flu B (% of total)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total RLN*</td>
<td>318</td>
<td>13 (4%)</td>
<td>0 (0%)</td>
<td>0 (0%)</td>
<td>11 (85%)</td>
<td>199</td>
<td>0 (0%)</td>
</tr>
<tr>
<td>Northern</td>
<td>181</td>
<td>4 (2%)</td>
<td>0 (0%)</td>
<td>0 (0%)</td>
<td>3 (75%)</td>
<td>116</td>
<td>0 (0%)</td>
</tr>
<tr>
<td>Central</td>
<td>61</td>
<td>3 (5%)</td>
<td>0 (0%)</td>
<td>0 (0%)</td>
<td>2 (67%)</td>
<td>61</td>
<td>0 (0%)</td>
</tr>
<tr>
<td>Southern</td>
<td>76</td>
<td>6 (8%)</td>
<td>0 (0%)</td>
<td>0 (0%)</td>
<td>6 (100%)</td>
<td>22</td>
<td>0 (0%)</td>
</tr>
</tbody>
</table>

* 19 RLN laboratories reporting, including:
  - Northern CA: Contra Costa, El Dorado, Marin, Monterey, Sacramento, San Francisco, San Mateo, Santa Clara, Shasta, Sonoma
  - Central CA: Fresno, San Joaquin, Tulare
  - Southern CA: Los Angeles, Long Beach, Orange, San Luis Obispo, Santa Barbara, Ventura

Laboratory Positive Results Data

Table 2 shows positive influenza and other virus results from sentinel laboratories, local public health laboratories and VRDL.

Table 2. Influenza and other respiratory virus detections, January 17-23, 2010.

<table>
<thead>
<tr>
<th></th>
<th>Sentinel Laboratories/Respiratory Laboratory Network†</th>
<th>Sentinel Providers</th>
</tr>
</thead>
<tbody>
<tr>
<td>Week 3</td>
<td>24 sites reporting</td>
<td>463 specimens submitted (248 positive by PCR, 24 pending)</td>
</tr>
<tr>
<td>Influenza A</td>
<td>33a Total tested week 3: 1536</td>
<td>0</td>
</tr>
<tr>
<td>Influenza B</td>
<td>0 Total tested week 3: 1388</td>
<td>0</td>
</tr>
<tr>
<td>RSV</td>
<td>281b Total tested week 3: 1154</td>
<td>N/A</td>
</tr>
<tr>
<td>Other Respiratory Viruses</td>
<td>11c Total tested week 3: 234</td>
<td>N/A</td>
</tr>
</tbody>
</table>

†Sentinel laboratories are hospital, academic, private, and public health laboratories located throughout California that provide data on the number of laboratory-confirmed influenza and other respiratory virus detections and isolations. The Respiratory Laboratory Network (RLN) is a network of 23 local public health laboratories that offer enhanced diagnostic testing with the “R-mix” shell vial assay, which detects several respiratory pathogens, including influenza A and B viruses, respiratory syncytial virus, parainfluenza virus, and adenovirus. Some RLN labs also offer PCR testing for influenza A and B.
Figure 4 shows that laboratory detections for influenza peaked in week 27 (July 5 - 11, 2009). Influenza A detections decreased during week 3 (January 17-23, 2010). Figure 5 shows that RSV detections continue to increase, but remain within the range seen in previous years.

**Figure 4.** Influenza detections at sentinel laboratories/Respiratory Laboratory Network (RLN), 2005-2010.

**Figure 5.** RSV detections at sentinel laboratories, 2005-2010.