California Influenza and Other Respiratory Disease Surveillance for Week 42 (October 16–22, 2011)

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.

Based on low levels of influenza-like illness and laboratory detections, overall influenza activity in California for Week 42 remained “sporadic.”*

Influenza Report Highlights

●---In Week 42, outpatient influenza-like illness (ILI) activity as a percentage of total visits to sentinel providers was low (1.2%).
●---Of 590 specimens tested by the Respiratory Laboratory Network (RLN) and sentinel laboratories during Week 42, 4 (0.7%) were positive for influenza A; all were from northern California.
●---The California Department of Public Health Viral and Rickettsial Disease Laboratory (CDPH-VRDL) has not tested any specimens for antiviral resistance to date.
●---No California specimens have been strain typed by the federal Centers for Disease Control and Prevention (CDC) to date.

In week 42, CDPH received no reports of laboratory-confirmed influenza-associated deaths among patients under 65 years of age.

*Sporadic activity is defined by the CDC as defined as “Small numbers of laboratory-confirmed influenza cases or a single laboratory-confirmed influenza outbreak has been reported, but there is no increase in cases of ILI.”

A. Syndromic Surveillance Update

1. CDC Influenza Sentinel Providers

Sentinel providers (physicians, nurse practitioners, and physician assistants) situated throughout California report the number of outpatient visits for ILI and the total number of visits per week. ILI is defined as any illness with fever (temperature of 100°F [37.8°C] or greater) and a cough and/or a sore throat in the absence of a known cause other than influenza. Data are reported weekly as a percentage of total visits. At present, over 200 sentinel providers have indicated their willingness to report ILI data and submit specimens to CDPH-VRDL for further testing this season, allowing CDPH to attain the CDC goal of 1 sentinel provider per 250,000 population.
To date, a total of 64 sentinel providers have reported Week 42 data. Based on the limited data available, the percentage of ILI visits remained low (1.2%).

Figure 1. California Sentinel Providers – Influenza-Like Illness Visits, 2011–2012

2. Kaiser Permanente Hospitalization Data (“Flu Admissions”)

“Flu Admissions” are defined as a diagnosis of “flu,” “pneumonia,” or “influenza” recorded in text fields at time of admission to the hospital. Influenza activity is tracked by dividing the number of Flu Admissions by the total number of hospital admissions for the same day to obtain a percentage of pneumonia and influenza (P&I) admissions.

During Week 42, the percentage of Kaiser hospitalizations for P&I decreased in southern California (3.0%, compared to 3.7% in Week 41). Due to technical issues, data from northern California were not available for Week 42.
B. Laboratory Update

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

The RLN is composed of 29 local public health laboratories that offer PCR testing for influenza A and B. Sentinel laboratories are a network of clinical, commercial, academic, and hospital laboratories located throughout California that provide weekly data on the number of laboratory-confirmed influenza and other respiratory virus detections and isolations. These laboratories use various testing methods, including rapid test, direct fluorescent assay, viral culture, and PCR.

Figure 2 shows that the percentage of influenza detections in the RLN and sentinel laboratories remained low during Week 42 (0.7%). The influenza-positive specimens were reported in Alameda, Contra Costa, San Joaquin, and Santa Clara counties. The RLN subtyped 2 influenza A samples during Week 42 as influenza A (H3).

Kaiser Permanente Southern California continues to report frequent detections of parainfluenza virus.

**Figure 2. Influenza detections in Respiratory Laboratory Network and Sentinel Laboratories, 2011–2012**
2. **Antiviral Resistance Testing**

CDPH-VRDL has not tested any influenza specimens to date during the 2011-2012 influenza season.

3. **Influenza Virus Strain Characterization**

No California specimens have been strain typed by CDC to date during the 2011–2012 influenza season.

**C. Laboratory-confirmed case reports**

Currently, as mandated under Section 2500 of the California Code of Regulations, deaths among cases age 0-64 years with laboratory-confirmed influenza are reportable to CDPH.

CDPH has received no reports to date this season.

For questions regarding influenza surveillance and reporting in California, please email 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 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 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 Severe Influenza Case History Form Link https://www.cdph.ca.gov/CDPH%20Document%20Library/ControlledForms/cdph9070.pdf.