

**California Influenza and Other Respiratory Disease Surveillance for Week 13  
(March 25 - 31, 2012)**

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.

**In week 13, the geographic distribution of influenza in California remained “widespread\*.”**

### **Influenza Report Highlights**

- Outpatient influenza-like illness (ILI) was up 0.3% in week 13 (3.1%) compared to week 12 (2.8%).
- Of 1636 specimens tested during week 13,
  - 530 (32.4%) were positive for influenza; of these
    - 127 (24.0%) were influenza B and
    - 403 (76.0%) were influenza A.
      - 26 (6.5%) were subtyped as 2009 A (H1),
      - 101 (25.1%) were subtyped as seasonal A (H3), and
      - 276 (68.5%) were not subtyped.
- No resistance to neuraminidase inhibitors has been identified in 78 influenza isolates tested during the 2011-2012 influenza season.
- Eighty-two specimens from California residents have been strain-typed this season; all but eight influenza B strains match the 2011-12 influenza vaccine.
- Six laboratory-confirmed influenza-associated deaths among persons less than 65 years were reported in week 12.
- No suspected or confirmed influenza A (H3N2)v [variant influenza A (H3N2), formerly called swine-origin triple reassortant A (H3N2)] has been detected in California.

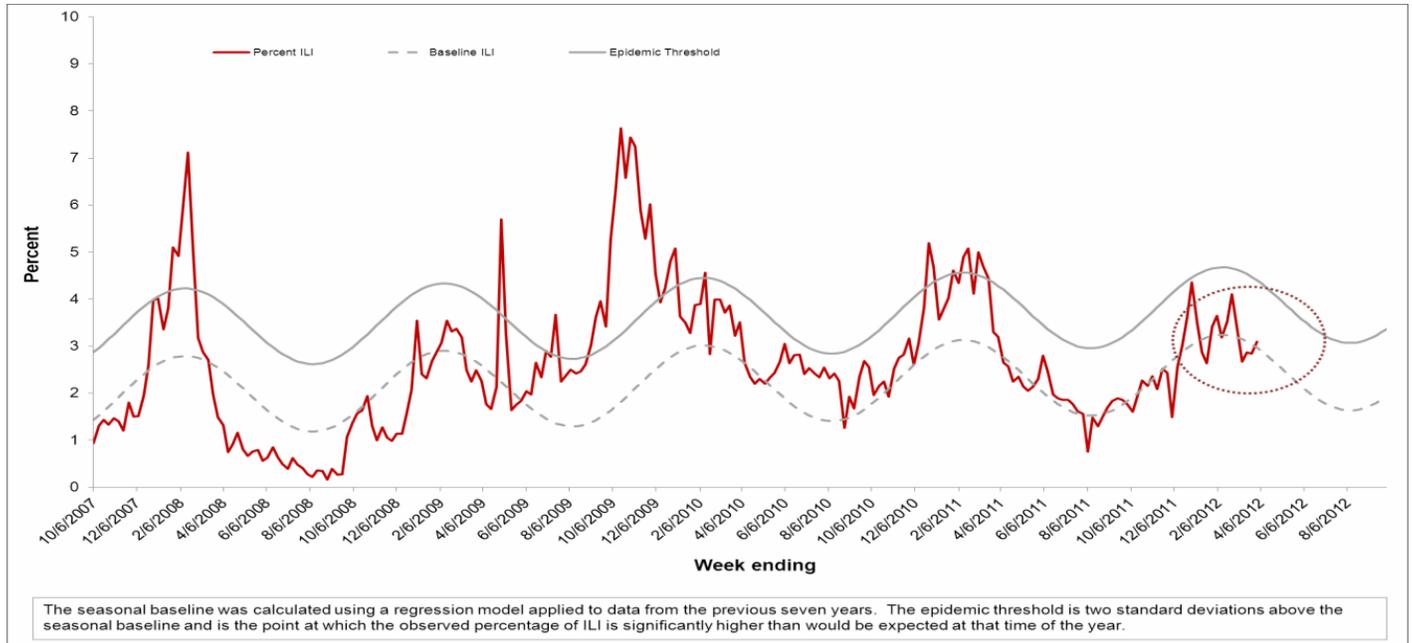
\*For the Centers for Disease Control and Prevention (CDC) definitions of influenza geographic distribution, please go to the [CDC Influenza page](http://www.cdc.gov/flu/weekly/overview.htm) (<http://www.cdc.gov/flu/weekly/overview.htm>).

## **A. Syndromic Surveillance Update**

### **1. CDC Influenza Sentinel Providers**

A total of 76 (38.4%) out of 198 enrolled sentinel providers have reported data for week 13. Based on available data, the percentage of ILI visits for week 13 (3.1%) was just above baseline (Figure 1).

**Figure 1. Percentage of Influenza-like Illness Visits Among Patients Seen by California Sentinel Providers, 2007– 2012**



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

The percentage of Kaiser Permanente hospitalizations for pneumonia and influenza in Northern California increased in week 13 (6.8%) compared to week 12 (5.8%).

**B. Laboratory Update**

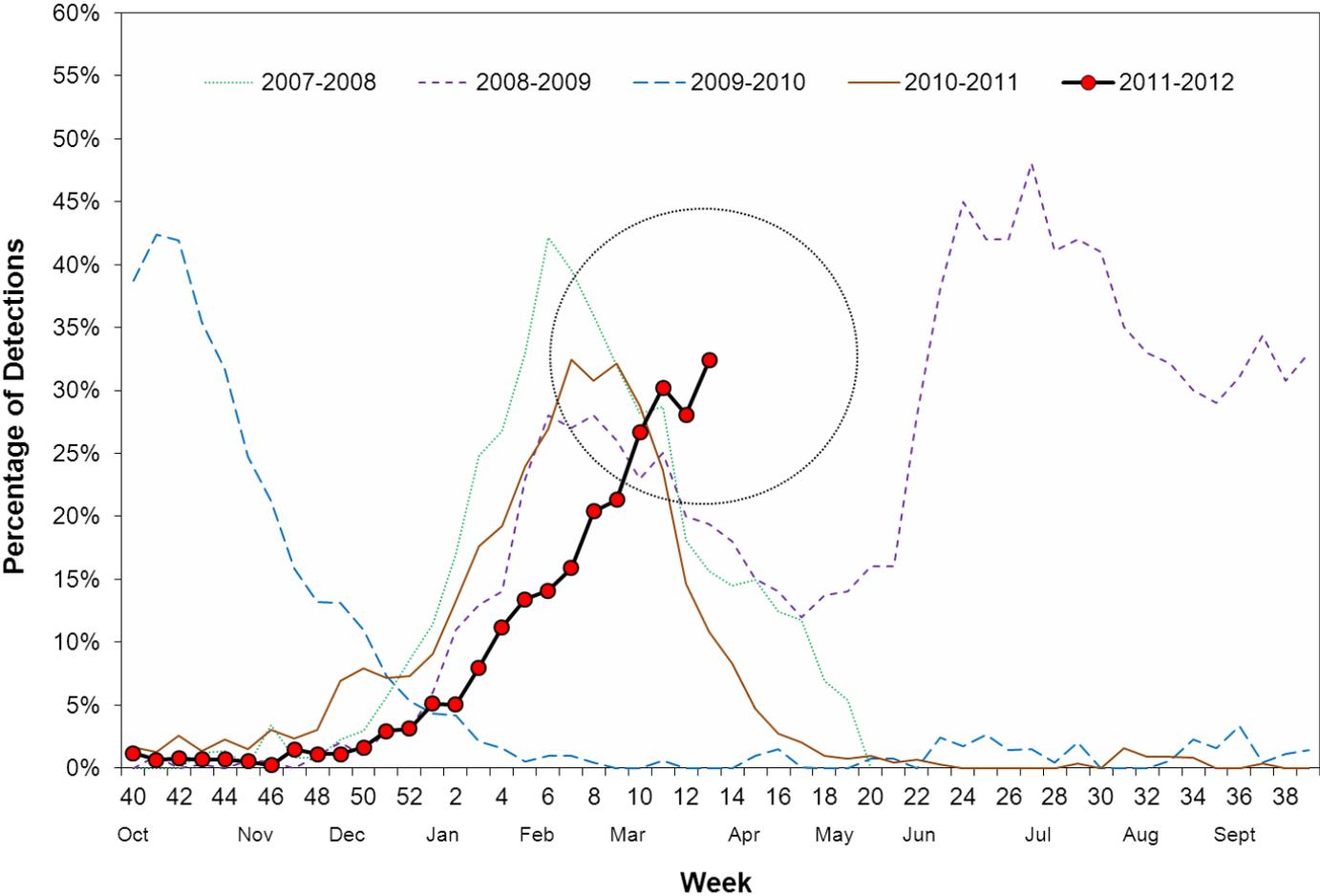
**1. Respiratory Laboratory Network (RLN) and Sentinel Laboratory Surveillance Results**

The percentage of influenza detections in the RLN and sentinel laboratories increased in week 13 (32.4%) compared to week 12 (28.1%), (Figure 2). Of 1636 specimens tested by the RLN and sentinel laboratories, 127 (7.8%) were positive for influenza B and 403 (24.6%) were positive for influenza A (Figure 3). Of the 403 specimens that tested positive for influenza A, 26 (6.5%) were subtyped as 2009 A (H1), 101 (25.0%) were subtyped as seasonal A (H3), and 276 (68.5%) had no further subtyping performed. The influenza-positive specimens were reported statewide.

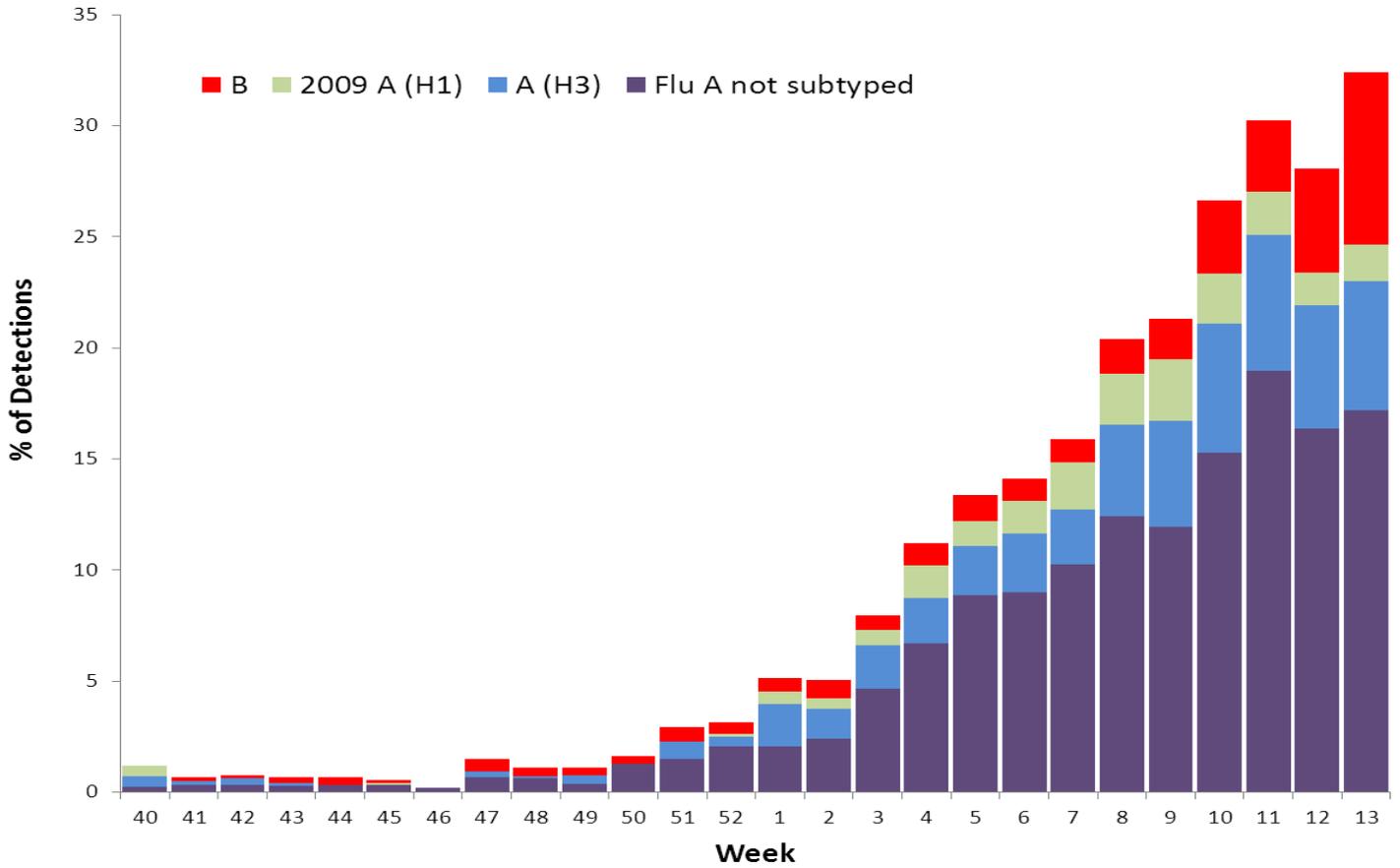
To date for the 2011-2012 season, of 39,672 specimens tested, 5306 (13.4%) were positive for influenza; of these, 650 (12.3%) were influenza B and 4656 (87.7%) were influenza A. Of the 4656 specimens that tested positive for influenza A, 458 (9.8%) were subtyped as 2009 A (H1), 1057 (22.7%) were subtyped as seasonal A (H3), and 3141 (67.5%) had no further subtyping performed.

Neither the RLN nor the California Department of Public Health Viral and Rickettsial Disease Laboratory (CDPH- VRDL) have identified any influenza viruses by polymerase chain reaction (PCR) typing or subtyping that are suggestive of the influenza A (H3N2)v infection.

**Figure 2. Percentage of Influenza Detections in Respiratory Laboratory Network and Sentinel Laboratories, 2007– 2012**

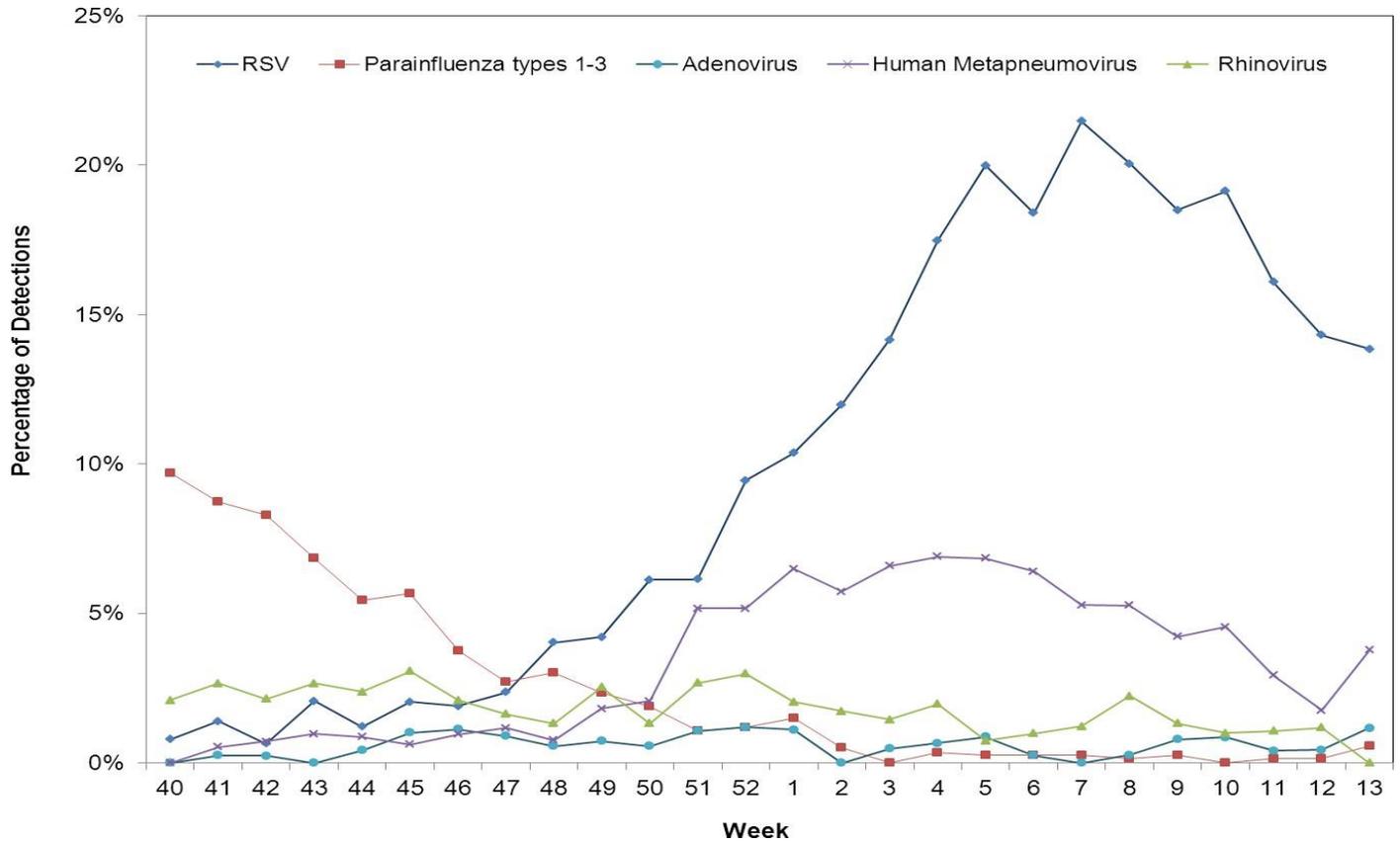


**Figure 3. Percentage of Influenza Types and Subtypes in Respiratory Laboratory Network and Sentinel Laboratories, 2011–2012**



The proportion of respiratory syncytial virus (RSV) detections continued to decrease in week 13 (13.8%, compared to 14.3% in week 12), (Figure 4).

**Figure 4. Other Respiratory Pathogen Detections in Respiratory Laboratory Network and Sentinel Laboratories, Weeks 40-13 (October 2, 2011 – March 31, 2012)**



**2. Antiviral Resistance Testing (AVR)**

CDPH-VRDL has tested 78 influenza specimens for antiviral resistance to date during the 2011-2012 influenza season; all have been sensitive to neuraminidase inhibitors (Table 1).

**Table 1. Number of Specimens Tested for Antiviral Resistance**

Influenza Strain	Neuraminidase Inhibitors Resistance
Influenza A (2009 H1N1)	0/26
Influenza A (H3N2)	0/52

**3. Influenza Virus Strain Characterization**

Eighty-two California specimens have been strain-typed to date during the 2011-2012 influenza season; all but eight matched with components of the 2011-2012 vaccine for the Northern Hemisphere (Table 2).

**Table 2. Influenza Virus Antigenic Characterization for the 2011-12 Season**

Influenza Strain	Total (N=82)
Influenza A	62
A/Perth/16/2009-like (H3N2)*	42
A/California/07/2009-like (H1N1)*	20
Influenza B	20
B/Brisbane/60/2008-like*	12
B/Wisconsin/01/2010-like	8

\*Matches components of the 2011-12 Northern Hemisphere influenza vaccine

### **C. Laboratory-confirmed Fatal Case Reports**

CDPH received six reports of influenza-associated deaths among persons less than 65 years old in week 13; one was in a child age 0-4 years and 5 were in adults age 29-58 years. To date during the 2011-2012 influenza season, CDPH has received 20 reports of influenza-associated deaths among persons less than 65 years old; 4 were among children 0-17 years and 16 were among adults 18-64 years.

### **D. Influenza-associated Outbreaks**

CDPH received four reports of laboratory-confirmed influenza outbreaks in week 13; two were in schools and two were in congregate living facilities. Of the four outbreaks, one was associated with influenza A (H3), one was associated with influenza A where subtyping was not performed and two were associated with influenza where the type was not provided.

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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>.