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 17, the geographic distribution of influenza in California remained “regional***.”

Influenza Report Highlights

- Outpatient influenza-like illness (ILI) decreased 0.4% in week 17 (1.1%) compared to week 16 (1.5%).
- Of 1343 specimens tested during week 17,
  - 164 (12.2%) were positive for influenza; of these
    - 78 (47.6%) were influenza B and
    - 86 (52.4%) were influenza A.
      - 1 (1.2%) was subtyped as 2009 A (H1),
      - 14 (16.3%) were subtyped as seasonal A (H3), and
      - 71 (82.6%) were not subtyped.
- Of the 125 influenza isolates tested during the 2011-12 influenza season, one was resistant to neuraminidase inhibitors.
- Of the 103 specimens from California residents that have been strain-typed this season, all but eight influenza B strains matched the 2011-12 influenza vaccine.
- Four laboratory-confirmed influenza-associated deaths among persons less than 65 years were reported in week 17.
- 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).

A. Syndromic Surveillance Update

1. CDC Influenza Sentinel Providers

A total of 83 (42.1%) out of 197 enrolled sentinel providers have reported data for week 17. Based on available data, the percentage of ILI visits for week 17 (1.1%) was below baseline (Figure 1).
2. Kaiser Permanente Hospitalization Data (“Flu Admissions”)

The percentage of Kaiser Permanente hospitalizations for pneumonia and influenza in Northern California decreased in week 17 (4.3%) compared to week 16 (5.2%).

B. Laboratory Update

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

The percentage of influenza detections in the RLN and sentinel laboratories decreased in week 17 (12.2%) compared to week 16 (24.2%) (Figure 2). Of 1343 specimens tested by the RLN and sentinel laboratories, 78 (5.8%) were positive for influenza B and 86 (6.4%) were positive for influenza A (Figure 3). Of the 86 specimens that tested positive for influenza A, 1 (1.2%) was subtyped as 2009 A (H1), 14 (16.3%) were subtyped as seasonal A (H3), and 71 (82.6%) had no further subtyping performed. The influenza-positive specimens were reported statewide.

To date for the 2011-2012 season, of 47,853 specimens tested, 7119 (14.9%) were positive for influenza; of these, 1156 (16.2%) were influenza B and 5963 (83.8%) were influenza A. Of the 5963 specimens that tested positive for influenza A, 596 (10.0%) were subtyped as 2009 A (H1), 1461 (24.5%) were subtyped as seasonal A (H3), and 3906 (65.5%) 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
The proportion of respiratory syncytial virus (RSV) detections decreased in week 17 (8.4%, compared to 10.3% in week 16) (Figure 4).
2. Antiviral Resistance Testing (AVR)

CDPH-VRDL has tested 125 influenza specimens for antiviral resistance to date during the 2011-2012 influenza season; all but one influenza A (2009 H1N1) have been sensitive to neuraminidase inhibitors (Table 1).

Table 1. Number of Specimens Tested for Antiviral Resistance

<table>
<thead>
<tr>
<th>Influenza Strain</th>
<th>Neuraminidase Inhibitors Resistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Influenza A (2009 H1N1)</td>
<td>1/34</td>
</tr>
<tr>
<td>Influenza A (H3N2)</td>
<td>0/91</td>
</tr>
</tbody>
</table>

3. Influenza Virus Strain Characterization

Of the 103 California specimens that have been strain-typed to date during the 2011-2012 influenza season, all but eight influenza B 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

<table>
<thead>
<tr>
<th>Influenza Strain</th>
<th>Total (N=103)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Influenza A</td>
<td>82</td>
</tr>
<tr>
<td>A/Perth/16/2009-like (H3N2)*</td>
<td>52</td>
</tr>
<tr>
<td>A/California/07/2009-like (H1N1)*</td>
<td>30</td>
</tr>
<tr>
<td>Influenza B</td>
<td>21</td>
</tr>
<tr>
<td>B/Brisbane/60/2008-like*</td>
<td>13</td>
</tr>
<tr>
<td>B/Wisconsin/01/2010-like</td>
<td>8</td>
</tr>
</tbody>
</table>

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

C. Laboratory-confirmed Fatal Case Reports

CDPH received four reports of influenza-associated deaths among persons less than 65 years old in week 17; all were among adults in the 40-64 year age-range. The deaths occurred in December 2011, March 2012 and April 2012.

To date during the 2011-2012 influenza season, CDPH has received 33 reports of influenza-associated deaths among persons less than 65 years old; 6 were among children 0-17 years and 27 were among adults 18-64 years.

D. Influenza-associated Outbreaks

CDPH received three reports of laboratory-confirmed influenza outbreaks in week 17; two in congregate living facilities that were associated with influenza A (subtype not done) and one in a school that was associated with influenza B.

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 the Severe Influenza Case History Form Link at https://www.cdph.ca.gov/CDPH%20Document%20Library/ControlledForms/cdph9070.pdf.