California Influenza and Other Respiratory Disease Surveillance for Week 15 (April 7–13, 2013)

Note: This report includes information from many different data sources, 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. Additionally, it is important to keep in mind that the data included in this report represent a sampling of various influenza indicators and are not meant to capture all influenza cases in the state. The trends of these influenza indicators, however, are useful for monitoring influenza activity. Data in previous weeks may be revised as additional information becomes available.

Novel Influenza A (H7N9) in China

On April 1, 2013, the World Health Organization (WHO) reported three human infections with a novel avian influenza A (H7N9) virus in China. These are the first known human infections with this influenza strain, which has been known to circulate among birds in China and causes mild disease in birds. As of April 18, 2013, 87 human cases have been reported in China from four provinces [Anhui (3), Henan (3), Jiangsu (21), and Zhejiang (27)] and two municipalities [Beijing (1), and Shanghai (32)]. Among these, there have been 17 deaths. New cases continue to be reported and case counts will increase. To date there has been no evidence of ongoing human-to-human transmission of this virus. Neither have there been any confirmed cases outside of China. CDPH has issued guidance to local health departments implementing CDC recommendations on testing for avian influenza A (H7N9) in any person with influenza-like illness who has visited a country with human cases in the past 10 days. With the large volume of international travel between California and China, suspect cases will likely be identified.

Overall influenza activity in California remained “sporadic*” during Week 15.

During Week 15, influenza activity continued to decrease statewide.

- A total of 50 enrolled sentinel providers have reported data for Week 15, compared to an average of 115 providers reporting for each of the previous weeks. Based on available data, the percentage of visits for ILI in Week 15 (1.9%) was below the baseline (2.9%).
- The percentage of hospitalizations for pneumonia and influenza (P&I) in Kaiser Permanente facilities in northern California remained the same during Week 15 (5.2%), compared to Week 14 (5.2%), and remained below the baseline (5.6%).
- The incidence of laboratory-confirmed influenza-associated hospitalizations as reported
by the California Emerging Infections Program (CEIP) Influenza Surveillance Network (FluSurv-NET) decreased in Week 14 (0.1 hospitalizations per 100,000 population, compared to 0.3 hospitalizations per 100,000 population in Week 13). Week 15 data are not available.

- The percentage of influenza detections in the RLN and sentinel laboratories decreased in Week 15 (5.4%, compared to 6.6% in Week 14).
- Of 719 specimens tested by Respiratory Laboratory Network (RLN) and sentinel laboratories during Week 15,
  - 39 (5.4%) were positive for influenza virus; of these
    - 28 (71.8%) were influenza B and
    - 11 (28.2%) were influenza A
      - 1 (9.1%) were subtyped as seasonal A (H3)
      - 2 (18.2%) were subtyped as 2009 A (H1)
      - 8 (72.7%) were not subtyped
- Respiratory syncytial virus (RSV) detections decreased in Week 15 (5.6%, compared to 6.8% in Week 14). Low levels of parainfluenza virus, human metapneumovirus, rhinovirus and adenovirus activity continue to be reported.
- The California Department of Public Health Viral and Rickettsial Disease Laboratory (CDPH-VRDL) has tested 91 influenza isolates for antiviral resistance to date; none have been resistant to neuraminidase inhibitors.
- Fifty-seven specimens from California residents have been strain-typed this season; of these, 55 (96.5%) match the components of the 2012–2013 influenza vaccine.
- Three influenza-associated deaths in individuals less than 65 years of age, including one pediatric death, were reported during Week 15. The pediatric death occurred in mid-February.
- No reports of laboratory-confirmed influenza outbreaks were received during Week 15.
- 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 web page at http://www.cdc.gov/flu/weekly/overview.htm.
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.