California Influenza and Other Respiratory Disease Surveillance for Week 16 (April 14–20, 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 24, 2013, the Taiwan Centers for Disease Control reported the first human case of avian influenza A(H7N9) in a Taiwanese citizen. This is the first case of avian influenza A(H7N9) detected outside of mainland China. As of April 24, 2013, a total of 109 cases have been reported, including 22 deaths. Cases have been reported in China from five provinces [Anhui (4), Henan (3), Jiangsu (23), Shandong (1), and Zhejiang (42)] and two municipalities [Beijing (1) and Shanghai (34)], and one case has been reported in Taiwan. New cases continue to be reported and case counts are likely to increase. There is currently no evidence that the virus has become easily transmissible from person to person. 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.

Overall influenza activity in California remained “sporadic” during Week 16.

During Week 16, influenza activity continued to decrease statewide.

A total of 51 enrolled sentinel providers have reported data for Week 16, compared to an average of 113 providers reporting for each of the previous weeks. Based on available data, the percentage of visits for ILI in Week 16 (0.9%) was below the baseline (2.8%). The percentage of hospitalizations for pneumonia and influenza (P&I) in Kaiser Permanente facilities in northern California decreased during Week 16 (4.7%), compared to Week 15 (5.2%), and remained below the baseline (5.5%).
The incidence of laboratory-confirmed influenza-associated hospitalizations as reported by the California Emerging Infections Program (CEIP) Influenza Surveillance Network (FluSurv-NET) remained the same in Week 15 (0.2 hospitalizations per 100,000 population, compared to 0.2 hospitalizations per 100,000 population in Week 14). Week 16 data are not available.

The percentage of influenza detections in the RLN and sentinel laboratories increased in Week 16 (7.2%, compared to 5.2% in Week 15).

Of 552 specimens tested by Respiratory Laboratory Network (RLN) and sentinel laboratories during Week 16,
  o 40 (7.2%) were positive for influenza virus; of these
    ▪ 20 (50.0%) were influenza B and
    ▪ 20 (50.0%) were influenza A
      7 (35.0%) were subtyped as seasonal A (H3) 6 (30.0%) were subtyped as 2009 A (H1)
      7 (35.0%) were not subtyped

Respiratory syncytial virus (RSV) detections decreased in Week 16 (4.2%, compared to 5.5% in Week 15). Low levels of parainfluenza virus, human metapneumovirus, and adenovirus activity continue to be reported, while rhinovirus levels continue to increase since Week 7. 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.

---Six influenza-associated deaths in individuals less than 65 years of age were reported during Week 16 with deaths occurring from February 11, 2013 to April 9, 2013.

---CDPH received two reports of laboratory-confirmed influenza outbreaks during Week 16. Both outbreaks occurred in congregate living facilities and were associated with influenza A (H3). The outbreaks occurred in February and March of 2013. A total of 138 laboratory-confirmed influenza outbreaks have been reported to date during the 2012–2013 influenza season.

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