California Influenza and Other Respiratory Disease Surveillance for Weeks 19–20 (May 5–18, 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.

Avian Influenza A(H7N9)

No new cases of avian influenza A(H7N9) have been reported by the World Health Organization (WHO) since the last update on May 17, 2013. As of May 23, 2013, a total of 131 cases have been reported, including 36 deaths. Cases have been reported in China from eight provinces [Anhui (4), Fujian (5), Henan (4), Hunan (3), Jiangsu (26), Jiangxi (5), Shandong (2) and Zhejiang (46)] and two municipalities [Beijing (1) and Shanghai (34)], and in Taiwan (1). Of the cases for which complete data are available, dates of illness onset range from February 19 to May 4, 2013. The occurrence of new cases has decreased in recent weeks. The decline in cases may be related to interventions implemented in China, including closure of live poultry markets, the seasonality of the H7N9 virus, or a combination of both factors. For additional information, please visit the CDPH H7N9 Information Website at: https://www.cdc.gov/flu/avianflu/h7n9-virus.htm.


During Weeks 19-20, influenza activity continued to decrease statewide.

- A total of 71 and 50 enrolled sentinel providers have reported data for Weeks 19 and 20, respectively, 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 19 (1.1%) and Week 20 (1.0%) remained below baseline levels for their respective weeks (2.5% and 2.4%).
• The percentage of hospitalizations for pneumonia and influenza (P&I) in Kaiser Permanente facilities in northern California decreased during Week 19 (3.7%), compared to 4.1% in Week 18, and increased during Week 20 (5.2%). During Week 19, the percentage remained below the baseline level (4.9%), but increased to above the baseline level during Week 20 (4.8%).

• No laboratory-confirmed influenza-associated hospitalizations were reported to the California Emerging Infections Program (CEIP) Influenza Surveillance Network (FluSurv-NET) during Weeks 19–20.

• The percentage of influenza detections in the RLN and sentinel laboratories increased in Week 19 (2.2%) and decreased in Week 20 (0.6%), compared to 1.8% in Week 18.

• Of 676 total specimens tested by Respiratory Laboratory Network (RLN) and sentinel laboratories during Weeks 19-20,
  o 10 (0.01%) were positive for influenza virus; of these
    • 8 (80.0%) were influenza B and
    • 2 (20.0%) were influenza A
      • 1 (50.0%) was subtyped as 2009 A (H1)
      • 1 (50.0%) was not subtyped

• Respiratory syncytial virus (RSV) detections decreased in Week 19 (0.6%) and Week 20 (0.3%), compared to 1.9% in Week 18. Low levels of rhinovirus, parainfluenza virus, human metapneumovirus, 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.

• Five influenza-associated deaths in individuals less than 65 years of age (including two pediatric) were reported during Weeks 19 and 20 with deaths occurring from January 1, 2013 to March 22, 2013.

• Two reports of laboratory-confirmed influenza outbreaks were received by CDPH during Weeks 19–20. One outbreak was associated with influenza A (H3) and occurred in a congregate living facility in January 2013. The other outbreak was associated with influenza A (subtyping not performed) and occurred in a prison in March 2013. A total of 141 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.