**Week 41: October 9-15, 2011**

**Summary**

The Florida Department of Health (FDOH) monitors multiple surveillance systems such as the Electronic Surveillance System for the Early Notification of Community-based Epidemics (ESSENCE), the Florida Pneumonia and Influenza Mortality Surveillance System (FPIMSS), notifiable disease reports (Merlin), EpiCom, and Florida ILINet in order to track influenza activity in the state.

**National:**
- Influenza and ILI are at low levels nationwide according to Centers for Disease Control and Prevention (CDC) reports. Using Florida ILINet data, CDC calculated minimal ILI intensity for Florida in week 40.

**State:**
- Influenza and ILI activity in Florida is low in all FDOH surveillance systems. All counties report low or no influenza activity. Nine counties report that influenza activity is increasing, and four report decreasing influenza activity.
- ESSENCE and ILINet ILI activity levels are near previous non-pandemic seasons at this time in most regions of Florida.
- In week 41 there were no positive flu results from the state laboratory. In week 40 one flu specimen tested positive for influenza A H3. In recent weeks, the overall number of specimens submitted and the percent positive for influenza have been low. Other viruses known to be currently circulating, potentially causing ILI, include adenovirus, rhinovirus, parainfluenza, and respiratory syncytial virus (RSV).
- No outbreaks of ILI or influenza were reported in week 41. One outbreak of respiratory illness was reported in Pasco County.

**Weekly state influenza activity: Sporadic**

Florida is currently reporting Sporadic influenza activity statewide, due to low activity levels in all regions of Florida as shown in our influenza surveillance systems. This activity level represents the statewide spread of influenza, and is not a measure of flu intensity.

**Pediatric influenza Mortality**

No pediatric influenza mortalities were reported in week 41. There have been no influenza-associated pediatric mortalities-associated deaths among those less than 18 years old are reportable in Florida.

**TABLE 1: Summary of Florida Influenza-Like Illness (ILI) Activity for Week 40**

<table>
<thead>
<tr>
<th>Measure</th>
<th>Difference from previous week</th>
<th>Current week 41</th>
<th>Previous week 40</th>
<th>Page of Report</th>
</tr>
</thead>
<tbody>
<tr>
<td>Overall statewide activity code reported to CDC</td>
<td>No Change</td>
<td>Sporadic</td>
<td>Sporadic</td>
<td>1</td>
</tr>
<tr>
<td>Percent of visits to ILINet providers for ILI</td>
<td>▼ 0.1</td>
<td>1.0%</td>
<td>1.1%</td>
<td>2</td>
</tr>
<tr>
<td>Percent of emergency department visits (from ESSENCE) due to ILI</td>
<td>▲ 0.1</td>
<td>1.8%</td>
<td>1.7%</td>
<td>3</td>
</tr>
<tr>
<td>Percent of hospital admissions (from ESSENCE) due to ILI</td>
<td>No Change</td>
<td>0.4%</td>
<td>0.4%</td>
<td>3</td>
</tr>
<tr>
<td>Percent of laboratory specimens that were positive for influenza</td>
<td>▼ 5.0</td>
<td>0.0%</td>
<td>5.0%</td>
<td>5</td>
</tr>
<tr>
<td>Number of counties reporting moderate influenza activity</td>
<td>▼ 1</td>
<td>0</td>
<td>1</td>
<td>6</td>
</tr>
<tr>
<td>Number of counties reporting widespread influenza activity</td>
<td>No Change</td>
<td>0</td>
<td>0</td>
<td>6</td>
</tr>
<tr>
<td>Number of counties reporting increasing influenza activity</td>
<td>▼ 1</td>
<td>9</td>
<td>10</td>
<td>7</td>
</tr>
<tr>
<td>Number of counties reporting decreasing influenza activity</td>
<td>▲ 3</td>
<td>4</td>
<td>1</td>
<td>7</td>
</tr>
<tr>
<td>Number of ILI outbreaks reported in EpiCom</td>
<td>No Change</td>
<td>0</td>
<td>0</td>
<td>10</td>
</tr>
</tbody>
</table>

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ILINet is a nationwide surveillance system composed of sentinel providers. Florida has 112 providers enrolled in ILINet who submit weekly ILI and total visit counts, as well as submitting ILI specimens to the BOL for confirmatory testing. For this season, BOE has designated 16 of these ILINet physicians’ offices as Super-Sentinels. These Super-Sentinels will receive more active follow-up from BOE and participating county health departments, with the goal of increasing data quality and surveillance specimen submission. Complete lab and visit data from Florida ILINet Super-Sentinels will be presented in the Florida Flu Review in future weeks.

FIGURE 1 shows the percentage of visits for ILI* reported by ILINet Sentinel Providers statewide.

ILI activity is well below the moderate threshold and at levels near previous non-pandemic influenza seasons at this time.

64 of 112 ILINet Sentinels have reported visit counts as of 5:00 p.m., October 18, 2011.

11 of 16 ILINet Super-Sentinels have reported visit counts as of 5:00 p.m., October 18, 2011.

FIGURE 2 shows ILI visit counts reported by ILINet sentinel providers statewide by age group.

ILI visit counts are at low levels in all age groups.

*ILI = Influenza-like illness, fever >100°F AND sore throat and/or cough in the absence of another known cause.

^There is no week 53 during the 2009-2010, 2010-2011, and 2011-12 seasons; the week 53 data point for those seasons is an average of weeks 52 and 1.

†Data presented here are counts, not proportions as included in Figure 2. This is because age group denominator data is not available through ILINet.
Florida uses ESSENCE for syndromic surveillance, which currently collects data daily from 174 hospital emergency departments (ED). These data are processed into 11 different syndrome categories based on the patient’s chief complaint. One of the categories is ILI, which is composed of chief complaints that include the words “influenza” or “flu,” or complaints that contain fever plus cough and/or sore throat.

**Figure 3** shows ESSENCE data on ILI visits to EDs as a percentage of all ED visits.

Overall activity for influenza-like illness reported in ESSENCE is similar to levels seen during the same time period in non-pandemic years.

**Figure 4** shows percentage of ILI among all ED visits by age group.

Age-specific trends show that ILI activity is declining in all age groups.

Ninety-five facilities participating in ESSENCE have been able to provide historical admissions data and are included here. The percentage of admissions for ILI is highest in those less than 20 years old, but the small numerators and denominators in this age group result in high variability. Overall, the percentage of admissions due to ILI is very low. These data are based on the patient’s chief complaint when presenting to the emergency department and may not reflect the actual diagnosis.

**Figure 5** shows hospital admissions due to ILI as a percentage of all hospital admissions..
ILI activity in ESSENCE is at low levels in all RDSTF regions, and ILI is at levels similar to those seen in previous non-pandemic influenza seasons at this time.
Table 2 shows the number of specimens tested by the Bureau of Laboratories (BOL), how many are influenza positive, and how many are H1N1 or other influenza subtypes.

**FIGURE 13 - FIGURE 14** use BOL viral surveillance data to track the progress of influenza infection over time. They include weekly information on how many specimens are tested by the BOL, what proportion of those test positive for influenza, and what subtypes are found for the positive influenza specimens.

In the summer months, small numbers of influenza specimens submitted to BOL tested positive. Specimens tested positive for influenza A H3, 2009 H1N1, and influenza B.

No one strain of influenza is currently predominant in Florida.

**Note:** In week 40, BOL tested specimens collected during a cruise-ship outbreak of ILI. Eight of ten specimens tested positive for influenza A H3. Because the outbreak did not occur in Florida, these data are not listed in Figures 13-14.

Table 2: Bureau of Laboratories Viral Surveillance for Week 41 by Lab Event Date* as reported by 1:00 p.m. October 18, 2011

<table>
<thead>
<tr>
<th></th>
<th>Current Week 41</th>
<th>Previous Week 40</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Specimens Tested</td>
<td>24</td>
<td>19</td>
</tr>
<tr>
<td>Influenza Positive Specimens (% of total)</td>
<td>0 (0.0%)</td>
<td>1 (5.00%)</td>
</tr>
<tr>
<td>H1N1 Positive Specimens (% of influenza positives)</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>H3 Influenza A</td>
<td>-</td>
<td>1 (100.0%)</td>
</tr>
<tr>
<td>Influenza A Unspecified</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Influenza B Unspecified</td>
<td>-</td>
<td>-</td>
</tr>
</tbody>
</table>

*Please note that lab event date is defined as the earliest of the following dates associated with the lab: date collected, date received by the laboratory, date reported, or date inserted.

For county-specific laboratory data, please refer to the Flu Lab Report in Merlin.

As of 3:00 p.m. October 19, 2011 a total of 67 (100%) counties had reported their weekly level of influenza activity. We have achieved 100% reporting for this week due to enhanced follow-up with counties. Please note that data reported by counties after the deadline Tuesday at 5 p.m. are recorded but may not be included in the activity map for previous weeks.

### TABLE 3: Weekly County Influenza Activity for Week 41 (ending October 15, 2011) as Reported by 3:00 p.m. October 19, 2011

<table>
<thead>
<tr>
<th>Activity Level</th>
<th>Week 40 Number of Counties</th>
<th>Week 41 Number of Counties</th>
<th>Week 41 Counties</th>
</tr>
</thead>
<tbody>
<tr>
<td>No Report</td>
<td>0</td>
<td>0</td>
<td>-</td>
</tr>
<tr>
<td>Mild</td>
<td>19</td>
<td>22</td>
<td>Alachua, Brevard, Broward, Charlotte, Clay, Collier, Dade, Duval, Hardee, Hendry, Hillsborough, Levy, Marion, Martin, Orange, Palm Beach, Pasco, Pinellas, Polk, Santa Rosa, St. Lucie, Volusia</td>
</tr>
<tr>
<td>Moderate</td>
<td>1</td>
<td>0</td>
<td>-</td>
</tr>
<tr>
<td>Widespread</td>
<td>0</td>
<td>0</td>
<td>-</td>
</tr>
</tbody>
</table>
County influenza activity data is reported to the Bureau of Epidemiology through EpiGateway on a weekly basis by the county influenza coordinator. Specific information is requested about laboratory results, outbreak reports, and surveillance system activity. Figures 16-25 displayed below reflect a county’s assessment of influenza activity within their county as a whole as well as influenza activity within specific settings. For week 41, four counties indicated that activity was decreasing, 44 indicated it was about the same as previous weeks, and nine indicated that activity was increasing.

**FIGURE 16** shows the assessment of the overall influenza activity trend in each county as reported by county health department flu coordinators for week 41 as of 3:00 p.m. October 19, 2011.

Definitions for the County Influenza Activity Trends are available at: [http://www.doh.state.fl.us/disease_ctrl/epi/CountyInfluenzaTrendGuide.html](http://www.doh.state.fl.us/disease_ctrl/epi/CountyInfluenzaTrendGuide.html)

Counties are asked to evaluate influenza activity in certain settings within their county. Each setting has a scale for activity that ranges from none or minimal activity to very high activity. What defines each of the values varies by facility type, but the example of the assessment in elementary, middle, and high schools is included below. More detailed information on the meanings of the levels for each setting can be found on the webpage also included below.

- **No or very minimal activity** -- Scattered cases of ILI with no increase in absenteeism or disruption of school activities.
- **Moderate activity** -- Absenteeism elevated above baseline (in range of 10 to 25%) in some but fewer than half of schools where it is known; occasional children sent home because of ILI.
- **High activity** -- Absenteeism elevated above baseline (in range of 10 to 25%) in more than half of schools; most schools sending several or many children home each day because of ILI.
- **Very high activity** -- Absenteeism high enough to force curtailment of some or all school activities.

County influenza settings assessment guides are available at: [http://www.doh.state.fl.us/disease_ctrl/epi/FluAssessment.htm](http://www.doh.state.fl.us/disease_ctrl/epi/FluAssessment.htm)

**FIGURE 17** and **FIGURE 18** show the activity levels in various facilities by county as reported by county health department flu coordinators for week 41 as of 3:00 p.m. October 19, 2011.
FIGURE 19 - FIGURE 25 show the activity levels in various facilities by county as reported by county health department flu coordinators for week 41 as of 3:00 p.m. October 19, 2011.
Florida Pneumonia and Influenza Mortality Surveillance

FDOH started the Florida Pneumonia and Influenza Mortality Surveillance System (FPIMSS) in 2006 in order to more timely assess the number of pneumonia and influenza deaths occurring in the state. This system was modeled on the CDC’s 122 Cities Mortality Reporting System. Each week, the vital statistics office in the 24 most populous counties in Florida manually reviews the death certificates received for the previous week. Any mention of pneumonia or influenza on the death certificate, with certain prescribed exceptions, is counted as a pneumonia or influenza death. These counts, by age group, are then reported to the state through EpiGateway.

**FIGURE 26** shows Pneumonia and Influenza Deaths for 24 Florida Counties, 2008-2009, 2009-2010, 2010-11, and 2011-12

For week 41 (ending October 15) there were:

- 115 deaths reported
- Upper bound of 95% confidence interval for prediction: 161 deaths
- No excess deaths

The majority of the deaths are in those aged 75 years and older.

22 of 24 participating counties reported data for week 41.

**FIGURE 27** shows Pneumonia and Influenza Deaths for 24 Florida Counties, Week 40, 2009 - Week 41, 2011 as Reported to FPIMSS by 5:00 p.m. October 15, 2011

For week 41 (ending October 15) there were:

- 115 deaths reported
- Upper bound of 95% confidence interval for prediction: 161 deaths
- No excess deaths

The majority of the deaths are in those aged 75 years and older.

22 of 24 participating counties reported data for week 41.

**FIGURE 28** shows the reported count of pneumonia and influenza deaths for 24 Florida counties, the number of deaths predicted using the Serfling Model, and the upper bound of the 95% confidence interval for this prediction.
The National Respiratory and Enteric Virus Surveillance System (NREVSS) collects data from laboratory facilities around the country on a weekly basis. NREVSS monitors temporal and geographic patterns of RSV, human parainfluenza viruses, human metapneumo virus (HMPV), respiratory and enteric adenoviruses, and rotavirus. Florida has over 30 participating laboratory facilities.

**FIGURE 29** shows the percentage of positive tests for multiple respiratory viruses reported by NREVSS-participating laboratories in Florida.

The six respiratory viruses summarized in Figure 1 are:
- RSV
- Parainfluenza 1-3
- Adenovirus
- HMPV
- Rhinovirus
- Influenza

Recent spikes in Rhinovirus are due to low numbers of Rhinovirus tests. Data will change as more data are received.

**Influenza and ILI Outbreaks**

In week 41 there were no influenza or ILI outbreaks reported into EpiCom. One respiratory illness outbreak was reported in a skilled nursing facility in Pasco County. Fifteen of 112 residents and three staff members at the facility reported respiratory symptoms including cough and nasal or chest congestion. Staff have been educated on proper isolation and infection prevention procedures.

No influenza or ILI outbreaks were reported in Florida during summer 2011, or so far in the 2011-12 season.

**Pediatric Influenza-Associated Mortality**

In week 41 there were no influenza associated pediatric deaths reported in Florida.

No influenza-associated pediatric deaths were reported in Florida during summer 2011.