Week 35: August 26 – September 1, 2012

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:
Since July, 2012, over 275 people in ten states have been infected with a variant strain of influenza A H3N2, also known as H3N2v. The H3N2v strain originates from influenza that circulates in pigs. All persons infected with H3N2v have reported direct or indirect contact with swine. Most cases have occurred in children; one death has been reported in an adult with underlying health conditions. No cases of H3N2v infection have been reported in Florida. More information can be found at: http://www.cdc.gov/flu/swineflu/influenza-variant-viruses-h3n2v.htm

State:
After experiencing elevated influenza-like illness levels statewide during the summer months, there was an additional increase this week in ESSENCE emergency department ILI levels, especially in the panhandle regions of Florida. Two counties reported moderate influenza activity in week 35.

- In week 35, one specimen tested PCR-positive for influenza B at the state lab. In recent weeks, influenza B has been the most common influenza subtype identified by the state lab.

<table>
<thead>
<tr>
<th>Measure</th>
<th>Difference from previous week</th>
<th>Current week 35</th>
<th>Previous week 34</th>
<th>Page of report</th>
</tr>
</thead>
<tbody>
<tr>
<td>Percent of visits to ILINet providers for ILI</td>
<td>▲ 0.1</td>
<td>0.8%</td>
<td>0.7%</td>
<td>2</td>
</tr>
<tr>
<td>Number of ILI outbreaks reported in EpiCom</td>
<td>No Change</td>
<td>0</td>
<td>0</td>
<td>2</td>
</tr>
<tr>
<td>Percent of emergency department visits (from ESSENCE) due to ILI</td>
<td>▼ 0.2</td>
<td>1.5%</td>
<td>1.7%</td>
<td>3</td>
</tr>
<tr>
<td>Number of laboratory specimens that were positive for influenza out of total submissions</td>
<td>▼ 2</td>
<td>1/15</td>
<td>3/29</td>
<td>5</td>
</tr>
<tr>
<td>Number of counties reporting moderate or widespread influenza activity</td>
<td>▲ 1</td>
<td>2</td>
<td>1</td>
<td>-</td>
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</tbody>
</table>

NREVSS Respiratory Virus Surveillance

The National Respiratory and Enteric Virus Surveillance System (NREVSS) collects data from laboratories around the country on a weekly basis. NREVSS monitors temporal and geographic patterns of six common respiratory viruses. Ten facilities reported in week 35.

FIGURE 1 shows the percentage of positive tests for multiple respiratory viruses reported by NREVSS-participating laboratories in Florida.

The 6 respiratory viruses summarized in Figure 1 are:
- RSV
- Parainfluenza 1-3
- Adenovirus
- HMPV
- Rhinovirus
- Influenza

FIGURE 1: Percentage of Positive Respiratory Virus Tests as Collected by NREVSS, Florida, 2010-2012, as of September 4, 2012
ILINet is a nationwide surveillance system composed of sentinel providers. Florida has 110 providers enrolled in ILINet who submit weekly ILI and total visit counts, as well as submitting ILI specimens to the Bureau of Public Health laboratories (BPHL) for confirmatory testing.

**FIGURE 2** shows the percentage of visits for ILI* reported by ILINet Sentinel Providers statewide.

ILI percent positive remains low and similar to other non-pandemic seasons at this time. **ILINet provider reporting declines in the summer months. Figures will be updated as new data are received.**

37 of 110 ILINet Sentinels have reported visit counts as of 10:00 a.m., September 5, 2012.

11 of 16 ILINet Super-Sentinels have reported visit counts as of 10:00 a.m., September 5, 2012.

**Note:** In response to several states’ identifying recent infections due to H3N2v, FDOH is enhancing its virologic surveillance. ILI sentinel physicians have been advised to submit more specimens to the BPHL from children under age 18. BPHL is able to detect presumptive positives for both seasonal and novel influenza viruses through routine testing. **No cases of variant H3N2 influenza A have been reported in Florida.** Detailed guidance documents have been sent to sentinel sites and county health departments.

**FIGURE 3** shows ILI visit counts reported by ILINet sentinel providers statewide by age group.

ILI visit counts decreased in the 0-55 age group. ILI visits are flat in the 55+ age group.

**Influenza and ILI Outbreaks**

In week 35 there were no influenza or ILI outbreaks reported via EpiCom.

Eight influenza or ILI outbreaks have been reported via EpiCom in summer 2012.

**County Influenza Activity**

As of 10:00 a.m. September 5, 2012 a total of 27 (40%) counties had reported their weekly level of influenza activity. Orange County and Levy reported moderate activity; the other 25 counties reported mild or no activity. During the summer months, counties have the option of continuing to report influenza activity. **Please note that data reported by counties after the deadline Tuesday at 5:00 p.m. are recorded but may not be included in the activity map for previous weeks.**
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 4** shows ESSENCE data on ILI visits to EDs as a percentage of all ED Visits.

Overall activity for ILI reported in ESSENCE is elevated compared to levels seen in previous non-pandemic seasons at this time.

**FIGURE 5** shows percentage of ILI among all ED visits by age group.

Age-specific trends show that percent ILI in the 0-19 age group is increasing and that the percent ILI in the 20-55+ age group is flat in week 35.

One hundred five ESSENCE participating facilities are able to provide discharge disposition data for their ED visits going back to week 40, 2010. Using this information, the percent of ED visits for ILI that result in hospitalization can be calculated. The highest percentage of admissions is in the 55+ years old age group. The low number of visits in the 55+ age group causes variability in the ILI admission percentage from week to week.

**FIGURE 6** shows the percentage of ED visits for ILI that resulted in hospitalization, by age group.

*There is no week 53 for the 2007-2008, 2009-2010, and 2010-2011 seasons; the week 53 data point for those seasons is an average of weeks 52 and 1.*
ILI activity in ESSENCE is elevated over previous years at this time in Regions 1, 2, 3, and 5.

*There is no week 53 for the 2009-2010, 2010-2011 and 2011-2012 seasons; the week 53 data point for those seasons is an average of weeks 52 and 1.

**Historical data for region 2 is only available beginning week 1, 2009.
Table 2 shows the number of specimens tested by the Bureau of Public Health Laboratories (BPHL), how many are influenza positive, and how many are H1N1 or other influenza subtypes.

**FIGURE 14 - FIGURE 15** use BPHL viral surveillance data to track the progress of influenza infection over time. They include weekly information on how many specimens are tested by the BPHL, what proportion of those test positive for influenza, and what subtypes are found for the positive specimens.

Small numbers of influenza specimens submitted to BPHL tested positive for influenza A H3, 2009 H1N1, and influenza B. Influenza B has been the most common strain detected by BPHL in recent weeks.

Table 2: Bureau of Public Health Laboratories Viral Surveillance for Week 35 by Lab Event Date* as reported by 10:00 a.m. September 5, 2012

<table>
<thead>
<tr>
<th></th>
<th>Current Week 35</th>
<th>Previous Week 34</th>
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<tbody>
<tr>
<td>Total Specimens Tested</td>
<td>15</td>
<td>29</td>
</tr>
<tr>
<td>Influenza Positive Specimens (% of total)</td>
<td>1 (6.7%)</td>
<td>3 (10.3%)</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>2 (66.7%)</td>
</tr>
<tr>
<td>Influenza A Unspecified</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Influenza B Unspecified</td>
<td>1 (100.0%)</td>
<td>1 (33.3%)</td>
</tr>
</tbody>
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*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.

For instructions on how to use the Flu Lab Report, please see the Guide to Flu Lab Report on the Bureau of Epidemiology website: