Week 40: September 30 – October 6, 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, 307 people in 11 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. Nearly 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-vvariant-viruses-h3n2v.htm](http://www.cdc.gov/flu/swineflu/influenza-vvariant-viruses-h3n2v.htm)

State:
- After experiencing elevated influenza-like illness (ILI) levels statewide during the summer months, ESSENCE emergency department ILI levels continue to be well above expected levels for this time of year. The sharpest increases in ESSENCE ILI have been seen in Regions 2, 3 and 5. Three counties report moderate influenza activity in week 40. No ILI or influenza outbreaks were reported in week 40.
- In week 40, two specimens tested PCR positive for Influenza A H3 and five specimens tested PCR positive for influenza B at the state public health laboratory. In recent weeks, influenza B has been the most common influenza subtype identified by the state public health laboratory. RSV activity is elevated above previous years at this time although recent increases are in keeping with seasonal trends.

**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. The weekly state influenza activity level is a measure of the geographic spread of influenza across Florida, and not of influenza morbidity or mortality.

**Pediatric Influenza-Associated Mortality**

No influenza-associated pediatric deaths have so far been reported in the 2012-2013 influenza season. Pediatric influenza-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 40</th>
<th>Previous week 39</th>
<th>Page of Report</th>
</tr>
</thead>
<tbody>
<tr>
<td>Overall statewide activity code reported to CDC</td>
<td>-</td>
<td>Sporadic</td>
<td>-</td>
<td>1</td>
</tr>
<tr>
<td>Percent of visits to ILINet providers for ILI</td>
<td>▼ 0.1</td>
<td>1.1%</td>
<td>1.2%</td>
<td>2</td>
</tr>
<tr>
<td>Percent of emergency department visits (from ESSENCE) due to ILI</td>
<td>▲ 0.3</td>
<td>2.5%</td>
<td>2.2%</td>
<td>3</td>
</tr>
<tr>
<td>Percent of laboratory specimens that were positive for influenza</td>
<td>▲ 9.4</td>
<td>20.6%</td>
<td>11.1%</td>
<td>5</td>
</tr>
<tr>
<td>Number of counties reporting moderate influenza activity</td>
<td>▲ 2</td>
<td>3</td>
<td>1</td>
<td>6</td>
</tr>
<tr>
<td>Number of counties reporting widespread influenza activity</td>
<td>-</td>
<td>0</td>
<td>-</td>
<td>6</td>
</tr>
<tr>
<td>Number of counties reporting increasing influenza activity</td>
<td>-</td>
<td>18</td>
<td>-</td>
<td>7</td>
</tr>
<tr>
<td>Number of counties reporting decreasing influenza activity</td>
<td>-</td>
<td>4</td>
<td>-</td>
<td>7</td>
</tr>
<tr>
<td>Number of ILI outbreaks reported in EpiCom</td>
<td>▼ 1</td>
<td>0</td>
<td>1</td>
<td>10</td>
</tr>
</tbody>
</table>
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 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 percent positive remains low and similar to other non-pandemic seasons at this time.

64 of 110 ILINet Sentinels have reported visit counts as of 11:00 a.m., October 10, 2012.

12 of 15 ILINet Super-Sentinels have reported visit counts as of 11:00 a.m., October 10, 2012.

**Note:** In response to several states’ identifying recent infections due to H3N2v, FDOH is enhancing virologic surveillance. ILI Sentinels have been advised to submit more specimens to 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 2** shows ILI visit counts reported by ILINet sentinel providers statewide by age group.

ILI visit counts are increasing in the 0-54 age group. ILI visit counts are flat in the 55+ age group.

*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 2011-2012 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 at slightly higher levels than seen in previous non-pandemic seasons at this time.

*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.

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

Age-specific trends show that percent ILI in the 0-55+ age group is increasing for week 40.

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 5** shows the percentage of ED visits for ILI that resulted in hospitalization, by age group.
FIGURE 6 - FIGURE 12 describe ED chief complaint data from ESSENCE by Regional Domestic Security Task Force (RDSTF).

ILI activity in ESSENCE is elevated in Regions 1, 2, 3 and 5. ILI levels in all other regions are at or below levels seen in previous non-pandemic seasons at this time.

Map 1: Hospitals Reporting Emergency Department (ED) Data to Florida ESSENCE, October 10, 2012 (N=174)

*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 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 influenza 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 (BPHL) Viral Surveillance for Week 40 by Lab Event Date* as reported by 10:00 a.m. October 10, 2012

<table>
<thead>
<tr>
<th></th>
<th>Current Week 40</th>
<th>Previous Week 39</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Total Specimens Tested</strong></td>
<td>34</td>
<td>27</td>
</tr>
<tr>
<td><strong>Influenza Positive Specimens (% of total)</strong></td>
<td>7 (20.6%)</td>
<td>3 (11.1%)</td>
</tr>
<tr>
<td><strong>H1N1 Positive Specimens (% of influenza positives)</strong></td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td><strong>H3 Influenza A</strong></td>
<td>2 (28.6 %)</td>
<td>3 (100.0%)</td>
</tr>
<tr>
<td><strong>Influenza A Unspecified</strong></td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td><strong>Influenza B Unspecified</strong></td>
<td>5 (71.4 %)</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 1:30 p.m. October 10, 2012 a total of 67 (100%) counties had reported their weekly level of influenza activity. 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 40 (ending October 6, 2012) as Reported by 1:30 p.m. October 10, 2012**

<table>
<thead>
<tr>
<th>Activity Level</th>
<th>Week 39 Number of Counties</th>
<th>Week 40 Number of Counties</th>
<th>Week 40 Counties</th>
</tr>
</thead>
<tbody>
<tr>
<td>No Report</td>
<td>-</td>
<td>-</td>
<td></td>
</tr>
<tr>
<td>Mild</td>
<td>-</td>
<td>26</td>
<td>Alachua, Bay, Brevard, Broward, Calhoun, Collier, Dade, Duval, Hillsborough, Indian River, Lake, Lee, Leon, Madison, Marion, Martin, Orange, Osceola, Palm Beach, Pasco, Pinellas, Polk, Seminole, St. Lucie, Sumter, Volusia</td>
</tr>
<tr>
<td>Moderate</td>
<td>-</td>
<td>3</td>
<td>Lafayette, Levy, Taylor</td>
</tr>
<tr>
<td>Widespread</td>
<td>-</td>
<td>-</td>
<td></td>
</tr>
</tbody>
</table>

Most counties report no or mild activity. Three counties report moderate activity.
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 40, four counties indicated that activity was decreasing, 35 indicated it was about the same as previous weeks, and eighteen 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 40 as of 1:30 p.m. October 10, 2012.

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 - FIGURE 18** show the activity levels in various facilities by county as reported by county health department flu coordinators for week 40 as of 1:30 a.m. October 10, 2012.
FIGURE 19 - FIGURE 25 show the activity levels in various facilities by county as reported by county health department flu coordinators for week 40 as of 1:30 p.m. October 10, 2012.
Because of less than 100% reporting in the Florida Pneumonia and Influenza Mortality Surveillance System in week 40, pneumonia and influenza (P&I) mortality data from ESSENCE are used in this report. Over the past year, the FDOH Bureau of Vital Statistics and County Health Departments have been rolling out an electronic death record system for Florida. ESSENCE now displays electronic death record data from all 67 Florida counties. For P&I surveillance, death record literals are queried in ESSENCE using a free-text query that searches for references to pneumonia and influenza on death certificates. Any mention of pneumonia or influenza in the death certificate literals, with certain exceptions, is counted as a P&I death. Numbers may change as more data are received. The most recent data available are displayed here. ESSENCE death records data are currently considered to be reliable through week 39, 2012.

For week 39 (ending September 29, 2012) there were:
- 129 deaths reported
- Upper bound of 95% confidence interval for prediction: 156 deaths
- NO excess deaths

The majority of the deaths are in those aged 75 years and older, and P&I deaths in this age group have increased in recent weeks.

**FIGURE 26** shows the reported count of pneumonia and influenza deaths for all Florida counties, the number of deaths predicted using a multi-year, and the upper bound of the 95% confidence interval for this prediction.

**FIGURE 27** shows Pneumonia and Influenza Deaths for all Florida Counties, Week 40, 2010-Week 40, 2012, as reported into ESSENCE.

**FIGURE 28** shows Pneumonia and Influenza Deaths for all Florida Counties by Age Group, Week 40, 2010-Week 40, 2012, as reported into ESSENCE.
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. Twenty facilities reported in week 40.

**FIGURE 29** 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:
- Respiratory Syncytial Virus (RSV)
- Parainfluenza 1-3
- Adenovirus
- Human Metapneumovirus (HMPV)
- Rhinovirus
- Influenza

### Influenza and ILI Outbreaks

In week 40 there were no influenza or ILI outbreaks reported into EpiCom.

**Zero** influenza or ILI outbreaks have been reported into EpiCom in the 2012-13 influenza season.

### Pediatric Influenza-Associated Mortality

In week 40 there were no influenza-associated pediatric deaths reported statewide.

**Zero** Influenza-associated pediatric deaths have been reported in Florida so far in the 2012-13 season.