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-FL), the Florida Pneumonia and Influenza Mortality Surveillance System (FPIMSS), notifiable disease reports (Merlin), EpiCom, and Florida ILLNet in order to track influenza activity in the state.

**National:**
- In 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-variant-viruses-h3n2v.htm](http://www.cdc.gov/flu/swineflu/influenza-variant-viruses-h3n2v.htm)

**State:**
- After experiencing elevated influenza-like illness (ILI) levels statewide during the summer months, ESSENCE-FL emergency department ILI levels in some regions are above expected levels for this time of year. The most elevated levels in ESSENCE-FL ILI are currently in Regions 1 and 5. Four counties report moderate influenza activity in week 43. Alachua County reported one ILI outbreak in an elementary school into EpiCom in week 43.
- In week 43, ten specimens tested PCR positive for Influenza B and four tested PCR positive for influenza A H3 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 43

<table>
<thead>
<tr>
<th>Measure</th>
<th>Difference from previous week</th>
<th>Current week 43</th>
<th>Previous week 42</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 ILLNet providers for ILI</td>
<td>No Change</td>
<td>1.7%</td>
<td>1.7%</td>
<td>2</td>
</tr>
<tr>
<td>Percent of emergency department visits (from ESSENCE-FL) due to ILI</td>
<td>▲ 0.2</td>
<td>2.3%</td>
<td>2.1%</td>
<td>3</td>
</tr>
<tr>
<td>Percent of laboratory specimens that were positive for influenza</td>
<td>▼ 6.8</td>
<td>31.1%</td>
<td>37.9%</td>
<td>5</td>
</tr>
<tr>
<td>Number of counties reporting moderate influenza activity</td>
<td>▼ 2</td>
<td>4</td>
<td>6</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>▼ 5</td>
<td>12</td>
<td>17</td>
<td>7</td>
</tr>
<tr>
<td>Number of counties reporting decreasing influenza activity</td>
<td>▲ 2</td>
<td>4</td>
<td>2</td>
<td>7</td>
</tr>
<tr>
<td>Number of ILI outbreaks reported in EpiCom</td>
<td>No Change</td>
<td>1</td>
<td>1</td>
<td>10</td>
</tr>
</tbody>
</table>

**In this Issue:**
- Summary
- Outpatient Influenza-like Illness Surveillance Network (ILINET)-Statewide
- ESSENCE-FL Syndromic Surveillance Statewide
- ESSENCE-FL Syndromic Surveillance Regional
- Florida Bureau of Public Health Laboratories Viral Surveillance
- County Influenza Activity
- ESSENCE Pneumonia and Influenza Mortality Data
- NREVSS Respiratory Virus Surveillance
- Influenza and ILI outbreaks reported in EpiCom
- Pediatric Influenza-Associated Mortality

**October 31, 2012**
Posted on the Bureau of Epidemiology website: [http://www.doh.state.fl.us/floridaflu/](http://www.doh.state.fl.us/floridaflu/)
Produced by: Bureau of Epidemiology, Florida Department of Health (FDOH)
Contributors: Heather Rubino, MS; Colin Malone, MPH; Laura Coleman, BS; Aaron Chern, MS; Leah Eisenstein, MPH; Lea Heberlein-Larson, BS, MPH, SM(ASCP); Valerie Mock; Janet Hamilton, MPH
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.

72 of 110 ILINet Sentinels have reported visit counts as of 11:45 a.m., October 31, 2012.

10 of 15 ILINet Super-Sentinels have reported visit counts as of 11:45 a.m., October 31, 2012.

**Note:** In response to several states’ identifying recent infections due to H3N2v, FDOH is enhancing virologic surveillance. ILINet 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 decreasing in the 0-54 age group in week 43. ILI visit counts in the 65+ age group are increasing in week 43.

*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-FL 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-FL data on ILI visits to EDs as a percentage of all ED Visits.

Overall activity for influenza-like illness reported in ESSENCE-FL is at slightly higher levels than seen in previous non-pandemic seasons at this time.

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

Age-specific trends show that percent ILI in the 0-54+ age group is increasing for week 43. ILI visit counts are flat for week 43 in the 55+ age group.

One hundred five ESSENCE-FL 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.
ILI activity in ESSENCE-FL is elevated in Regions 1 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 ESSENCE-FL, October 31, 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 their 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.

In addition to PCR testing, BPHL also uses culture testing for influenza specimens, including those positive for influenza B.

There are two distinct lineages of influenza B, known as Victoria and Yamagata. Both have circulated in Florida in the past year.

This season, 4 specimens have tested positive for influenza B, Victoria lineage. Last year’s 2011-12 vaccine included a Victoria lineage virus, while this year’s 2012-2013 vaccine includes a Yamagata lineage virus. Influenza viruses that circulate at the beginning of the flu season may be different than those that circulate later in the year, and these specimens represent a very small sample of statewide influenza activity. All flu positive specimens may not be able to receive culture testing. FDOH will continue to monitor subtype and lineage for influenza viruses.

Table 2: Bureau of Public Health Laboratories (BPHL) Viral Surveillance for Week 43 by Lab Event Date* as reported by 10:30 a.m. October 31, 2012

<table>
<thead>
<tr>
<th>Total Specimens Tested</th>
<th>Current Week 43</th>
<th>Previous Week 42</th>
</tr>
</thead>
<tbody>
<tr>
<td>Influenza Positive Specimens (% of total)</td>
<td>14 (31.1%)</td>
<td>22 (37.9%)</td>
</tr>
<tr>
<td>H1N1 Positive Specimens (% of influenza positives)</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>H3 Influenza A</td>
<td>4 (28.6 %)</td>
<td>6 (27.3 %)</td>
</tr>
<tr>
<td>Influenza A Unspecified</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Influenza B Unspecified</td>
<td>10 (71.4 %)</td>
<td>16 (72.7 %)</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 10:30 a.m. October 31, 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 43 (ending October 27, 2012) as Reported by 10:30 a.m. October 31, 2012

<table>
<thead>
<tr>
<th>Activity Level</th>
<th>Week 42 Number of Counties</th>
<th>Week 43 Number of Counties</th>
<th>Week 43 Counties</th>
</tr>
</thead>
<tbody>
<tr>
<td>No Report</td>
<td>-</td>
<td>-</td>
<td></td>
</tr>
<tr>
<td>Mild</td>
<td>33</td>
<td>35</td>
<td>Alachua, Bradford, Brevard, Broward, Calhoun, Clay, Collier, Dade, Duval, Escambia, Hernando, Highlands, Hillsborough, Lafayette, Lake, Lee, Leon, Madison, Marion, Martin, Nassau, Okaloosa, Osceola, Palm Beach, Pasco, Polk, Santa Rosa, Sarasota, Seminole, St. Lucie, Sumter, Suwannee, Taylor, Volusia, Wakulla</td>
</tr>
<tr>
<td>Moderate</td>
<td>6</td>
<td>4</td>
<td>Gadsden, Gilchrist, Levy, Orange</td>
</tr>
<tr>
<td>Widespread</td>
<td>-</td>
<td>-</td>
<td></td>
</tr>
</tbody>
</table>

Most counties report no or mild activity. Four counties report moderate activity.

Map 2: Weekly County Influenza Activity for Week 43 as Reported by 10:30 a.m. October 31, 2012
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 43, four counties indicated that activity was decreasing, 45 indicated it was about the same as previous weeks, and twelve 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 43 as of 10:30 a.m. October 31, 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 43 as of 10:30 a.m. October 31, 2012.
FIGURE 19 - FIGURE 25 show the activity levels in various facilities by county as reported by county health department flu coordinators for week 43 as of 10:30 a.m. October 31, 2012.
Because of less than 100% reporting in the Florida Pneumonia and Influenza Mortality Surveillance System in week 44, pneumonia and influenza (P&I) mortality data from ESSENCE-FL 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-FL now displays electronic death record data from all 67 Florida counties. For P&I surveillance, death record literals are queried in ESSENCE-FL 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-FL death records data are currently considered to be reliable through week 42, 2012.

**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.

For week 42 (ending October 20, 2012) there were:
- 135 deaths reported
- Upper bound of 95% confidence interval for prediction: 171 deaths
- NO excess deaths

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

**FIGURE 27** shows Pneumonia and Influenza Deaths for all Florida Counties, Week 40, 2010 - Week 44, 2012, as reported into ESSENCE-FL.

**FIGURE 28** shows Pneumonia and Influenza Deaths for all Florida Counties by Age Group, Week 40, 2010 - Week 44, 2012, as reported into ESSENCE-FL.

* ESSENCE-FL death records data are currently considered to be reliable through week 42, 2012.
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. Four facilities reported in week 43.

**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

In week 43 there was one influenza or ILI outbreak reported into EpiCom.

- Alachua County: Eighteen students at an elementary school had ILI. One student tested positive for influenza B by rapid antigen test. Another student tested rapid antigen positive for influenza A. Five of the children had not been vaccinated. This is the only Alachua County ILI outbreak in the 2012-13 influenza season.

In week 43 there were no influenza-associated pediatric deaths reported statewide.

**Pediatric Influenza-Associated Mortality**

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