State influenza and influenza-like illness (ILI) activity:

- Influenza and ILI activity in Florida remained low, which is typical for this time of year.
- In weeks 23–24, one outbreak of influenza B was reported; 155 outbreaks have been reported since the start of the 2016–17 influenza season.
- In week 23, the preliminary estimated number of deaths due to pneumonia and influenza increased, although levels remain similar to those observed in previous seasons at this time.
- One influenza-associated pediatric death was reported in week 24 in a child with no known underlying health conditions. The child was positive for influenza A by rapid antigen testing and was not vaccinated for the 2016-17 influenza season.
  - Eleven influenza-associated pediatric deaths have been reported since the start of the 2016-17 influenza season. Annual vaccination remains the best way to protect children against influenza.
- In weeks 23–24, six of the 38 (15.8%) specimens submitted to the Bureau of Public Health Laboratories (BPHL) for influenza testing were positive by real-time Reverse Transcription Polymerase Chain Reaction (RT-PCR) for influenza: one influenza A (H3), one influenza A (not yet subtyped), one influenza B Yamagata lineage, and three influenza B (not yet subtyped).
- In recent weeks, the Florida Department of Agriculture and Consumer Services in coordination with the University of Florida College of Veterinary Medicine announced that the University of Florida has confirmed seven cases of canine influenza A (H3N2) in dogs in Florida.
  - These strains of influenza A (H3N2) are not the same as the strains circulating in people. While highly contagious in dogs, there is no evidence to suggest that canine influenza A (H3N2) infects humans. Canine influenza vaccine is available at many veterinary clinics. To learn more, please visit: http://hospitals.vetmed.ufl.edu/canine-influenza/.

National influenza activity:

- Influenza viruses continue to circulate at low levels nationally.
- The Centers for Disease Control and Prevention has identified an antigenically drifted influenza B Victoria lineage strain circulating nationally that is different from the strain of influenza B Victoria lineage contained in the current 2016–17 influenza vaccination formulations. This drifted strain is also different from the strain of influenza B Victoria lineage recommended for inclusion in the 2017-18 influenza vaccination formulations.
- In the spring of 2017, avian influenza A (H7N9) was identified in chickens in Tennessee, Alabama, and Kentucky, avian influenza A (H7) was identified in chickens in Georgia, and avian influenza A (H5N2) was identified in turkeys in Wisconsin. No avian influenza has been identified in Florida birds or humans so far in 2017. To learn more about HPAI, please visit: www.floridahealth.gov/novelflu.

ED and UCC Visits for ILI by Flu Season

The figure to the left shows the percent of visits for ILI from ED and UCC chief complaint data for ESSENCE-FL participating facilities (n=304) from week 40, 2013 through week 24, 2017.

The percent of ILI visits to ESSENCE-FL participating facilities decreased in recent weeks and was similar to levels observed in previous seasons at this time.

1 Influenza-like illness (ILI) is defined as a fever ≥ 100°F AND sore throat and/or cough in the absence of another known cause.

2 In Florida, only influenza-associated pediatric mortalities, cases of novel influenza infection, and outbreaks of influenza or ILI are reportable. The Florida Department of Health (DOH) uses many different surveillance systems to measure influenza activity. A summary of all these systems can be found on our website: www.floridahealth.gov/floridaflu and on page 4.

Posted June 21, 2017 on the Bureau of Epidemiology (BOE) website: www.floridahealth.gov/floridaflu

Produced by BOE, DOH

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The figure below shows the number of preliminary P&I deaths by age group from week 40, 2013 through week 23, 2017, as reported into ESSENCE-FL. Vital statistics death records data are currently considered to be complete through week 23, 2017.

The number of P&I deaths reported in week 23 was similar to or below levels seen in previous seasons at this time in all age groups.

205 preliminary estimated P&I deaths were reported for week 23, 2016.

Based on a multi-year regression model to predict P&I death counts in the Florida population, no excess deaths were reported for week 23, 2016. The upper bound of the 95% confidence interval for prediction is 219 deaths.

The map to the left shows influenza and ILI outbreaks by county from week 40, 2016 (beginning on October 4, 2016) through week 24, 2017 (ending on June 17, 2017). One outbreak of influenza B was reported in weeks 23 and 24. As of week 24, 155 outbreaks of influenza and ILI have been reported into Merlin since the start of the 2016-17 season. This is the largest number of outbreaks reported in the past seven influenza seasons.

Pinellas County:
A long-term care facility and rehabilitation facility reported three residents and one staff member with ILI. At least one individual was hospitalized. Specimens collected for testing at the facility were positive for influenza B by rapid antigen testing. No specimens have been available for testing at BPHL thus far. The facility reported that 289 staff members and 128 residents were vaccinated for the 2016-17 influenza season. Infection control measures were reviewed with facility leadership. This investigation is ongoing.
RSV activity:
- In week 24, the percent of children <5 years old diagnosed with RSV at EDs and UCCs increased notably and was above levels observed in previous seasons at this time.
- The percent of specimens testing positive for RSV increased and was above levels observed in previous seasons at this time.
- To learn more about RSV in Florida, please visit: http://www.floridahealth.gov/rsv.

RSV seasonality:
- RSV activity in Florida typically peaks between November and January, though activity can vary dramatically by region. According to CDC, the start of RSV season is marked by the first two consecutive weeks during which the average percentage of specimens testing positive for RSV is ≥10%.
- Florida has established regular RSV seasons based on these thresholds. Currently, only the southeast region is considered to be in RSV season.
- Florida’s RSV season is longer than the rest of the nation and has distinct regional seasonality. For more information on RSV seasonality in Florida, see the American Academy of Pediatrics’ 2015 Red Book.

Other respiratory virus surveillance:
- The percent of specimens testing positive for rhinovirus decreased and was below levels observed in previous seasons at this time.
- The percent of specimens testing positive for human metapneumovirus increased and was similar to levels observed in previous seasons at this time.
- The percent of specimens testing positive for parainfluenza 1-3 decreased slightly and was below levels observed in previous seasons at this time.

*This overall trend has been validated* through review of hospital discharge data collected by the Agency for Health Care Administration.

The figure to the left shows the percent of visits to EDs and UCCs with discharge diagnoses that include RSV or RSV-associated illness, as reported by participating ESSENCE-FL facilities (n=304), week 30, 2013 to week 24, 2017.

In week 24, the percent of children presenting to participating EDs and UCCs for care with RSV increased notably. Levels were above those observed in previous seasons at this time.

The figure below shows the percent of laboratory results testing positive for eight common respiratory viruses, as reported by the National Respiratory and Enteric Virus Surveillance System (NREVSS) and participating validated laboratories reporting via electronic laboratory reporting (ELR) to DOH (n=15), week 40, 2013 to week 24, 2017.

In week 24, the percent of specimens testing positive for influenza increased. DOH continues to monitor increases in influenza activity during the summer months. Preliminary analyses suggest this is a data artifact due to a reduction in the number of facilities that have submitted data for week 24.
Florida ILI Surveillance System Summary

ESSENCE-FL Syndromic Surveillance and Vital Statistics Portal
- Electronic Surveillance System for the Early Notification of Community-based Epidemics (ESSENCE-FL) is used to measure trends in ILI visits from emergency departments (ED) and urgent care clinics (UCC) and influenza mortality using death certificates from the Bureau of Vital Statistics. Participating EDs and UCCs (n=304) electronically transmit visit data into ESSENCE-FL daily or hourly.
- For statewide and regional data on ILI, ED and UCC visits with chief complaints that include the words “influenza” or “flu” are counted along with chief complaints that include the word “fever” and one or both of the following: “cough,” or “sore throat.”
- For pneumonia and influenza (P&I) surveillance, death record literals are examined using a free-text query that searches for references to P&I on death certificates. Any mention of P&I in the death certificate literals, with certain exceptions, is counted as a P&I death.
- For respiratory syncytial virus (RSV) surveillance, visits are counted as ED or UCC visits to participating facilities for which RSV or RSV-associated illness is included in the discharge diagnosis. Death record literals are also queried using a free-text query that searches for references to RSV on death certificates for children <18 years old. Any mention of RSV in the death certificate literals, with certain exceptions, is counted as an RSV-associated pediatric death.

Bureau of Public Health Laboratories (BPHL)
- BPHL performs confirmatory testing and subtyping on surveillance specimens from sentinel providers, outbreak investigations, patients with severe or unusual influenza presentations, and medical examiners.

Outbreak Reporting in Merlin
- Merlin, DOH’s reportable disease surveillance system, is used to track influenza and ILI outbreak investigations by county health departments (CHDs). Reports by CHDs include the type of respiratory disease causing the outbreak and settings where outbreaks are occurring. CHD epidemiologists report outbreaks of influenza and ILI into Merlin.
- Outbreaks are defined as two or more cases of influenza or ILI in a specific setting.

Laboratory Viral Respiratory Surveillance
- The National Respiratory and Enteric Virus Surveillance System (NREVSS) and electronic laboratory reporting (ELR) data are collected from laboratories in Florida on a weekly basis and monitor temporal and geographic patterns of six commonly circulating respiratory viruses. NREVSS data are collected by the Centers for Disease Control and Prevention (CDC) and ELR data are collected by DOH.

Acute Respiratory Infection Epidemiology and Surveillance (ARIES) Program
- The Acute Respiratory Infection Epidemiology and Surveillance (ARIES) Program is a nationwide surveillance system composed of nine participating jurisdictions. Florida has seven sentinel providers enrolled in ARIES who submit weekly ILI and acute respiratory infection (ARI) patient counts, as well as submit ARI and ILI specimens to BPHL for testing.

Case-Based Influenza Surveillance
- Deaths in children with laboratory-confirmed influenza infection and patients infected with novel or pandemic influenza strains are reportable in Florida. Influenza-associated pediatric deaths and novel or pandemic strain influenza cases are reportable by CHDs into Merlin.