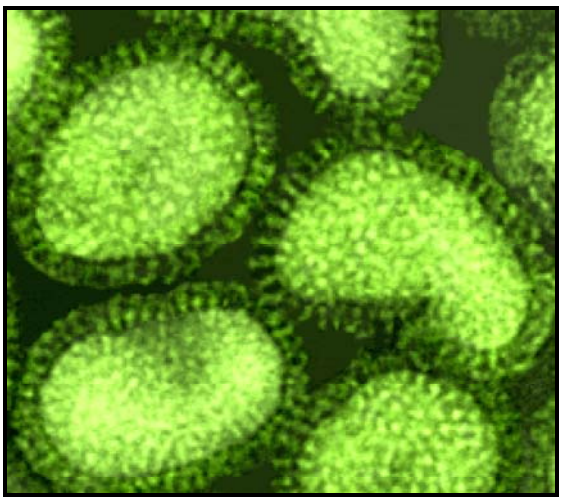
Florida Influenza Surveillance



Week Ending January 31, 2004 (Week 04)

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Summary

Florida influenza-like illness (ILI) activity decreased across the state during the week ending January 31, 2004 (Week 04) compared to the previous weeks. Ten counties reported as having high ILI% activity for the week. However, not all sentinels have reported at the time this summary was written (82% reporting as of February 10, 2004). Nine counties have reported an increase in ILI activity from the previous week, nine counties reported a decrease, and twelve counties remained level. Three counties did not have at least 50% of the sentinels reporting or did not report the previous week and therefore the change in activity could not be determined. Of the 16,047 patients seen by the Florida Sentinel Physician Influenza Surveillance Network (FSPISN) providers during the week ending January 31, 379 were seen for influenza-like illnesses. The overall state ILI activity for the week ending January 31, 2004 was 2.36%. This is a decrease in activity compared to the previous week (3.76%). The Florida ILI activity code reported to the Centers for Disease Control and Prevention (CDC) for the week ending January 31, 2004 was regional.

Across the nation, regional activity was reported in eleven states, including Florida, for the week ending January 31, 2004. No states reported widespread activity. The percentage of deaths due to influenza and pneumonia (9.3%) continued to decrease across the nation, however, it was still above the epidemic threshold for Week 04 (8.2%).

CDC and WHO reported as of February 10, twenty-three laboratory confirmed cases of avian Influenza A (H5N1) infections in humans in Vietnam and Thailand. Eighteen cases were from Vietnam and five were form Thailand. Eighteen of the twenty-three cases have been fatal. The Bureau of Epidemiology has distributed more information regarding CDC interim guidance for establishing enhanced surveillance of avian influenza as well as infection control precautions for managing patients suspected of being infected with the avian influenza A virus (H5N1). Physicians and health care workers are asked to report any suspected cases of avian influenza immediately to the local county health department and the county health department have been instructed to contacted the Bureau of Epidemiology, Dr. Joann Schulte, for immediate triage of all suspected avian influenza cases.

Enhanced Surveillance for Influenza 2003-2004 Season - Week 04

At the end of December 2003, the Bureau of Epidemiology sent out information regarding the reporting of outbreaks of influenza and influenza-like illness, as well as influenza associated

deaths and encephalopathies among children (<18 yrs old). In that request, counties were instructed to report this information using the Influenza forum in EpiCom. The following is a statewide summary of the reports submitted by the counties for the week ending January 31, 2004.

Influenza or ILI Outbreaks

No outbreaks of influenza or influenza-like illness were reported to the Bureau of Epidemiology during this surveillance week.

Pediatric Deaths and Encephalopathies

No influenza deaths or encephalopathies among children were reported to the Bureau of Epidemiology during this surveillance week.

Notes

Some counties are reporting little to no ILI activity in the ER's and walk-in clinics. More counties continue to report a decrease in influenza-like illness (ILI) activity across the state. There have been no reports of increased absenteeism. Individual county nursing home surveillance projects report a decrease in the level of ILI activity.

The statewide summary of the enhanced surveillance reporting is also available on EpiCom.

FSPISN Influenza-Like Illness (ILI) Summary

Seventy-five sentinels from 67 public clinics and private offices submitted reports for 30 counties during the week ending January 31, 2004 (Week 04). Counties with the highest percentage of patients with ILI were Lake (2.15%, with 2 of 2 sentinel locations reporting); Pinellas (2.34%, with 6 of 7 reporting); Brevard (3.16%, with 1 of 3 reporting); Lee (3.80%, with 2 of 2 reporting); Polk (4.48%, with 3 of 4 reporting); Indian River (6.00%, with 3 of 3 reporting); Leon (6.82%, with 1 of 2 reporting); Collier (10.82%, with 2 of 2 reporting); Escambia (15.92%, with 1 of 1 reporting); and Putnam (34.47%, with 1 of 3 reporting). Eleven counties reported a low percentage of patients with ILI, and 12 counties reported no cases of ILI. A breakdown of ILI% reported for week ending January 31, 2004 by county is listed in Table 1.

TABLE 1. INFLUENZA-LIKE ILLNESS REPORTING BY COUNTY FOR WEEK ENDING 2/7/04 (WEEK 04)
Report Date: February 9 2004

County	Change	Active within the last 4 weeks		Reporting for Week 04		Participation for Week 04	ILI % Reported Week 04 (Current)	ILI% Reported Week 03 (Updated)	ILI% Reported Week 02 (Updated)
		Active Sentinels	From Offices	Sentinels Reporting	From Offices				
Alachua	Increasing	1	1	1	1	100%	0.21%	0.00%	0.48%
Brevard	--	3	3	1	1	33%	3.16%	4.89%	6.80%
Broward	Decreasing	6	6	5	5	83%	0.57%	0.96%	1.86%
Charlotte	Decreasing	1	1	1	1	100%	0.00%	1.16%	0.71%
Citrus	Level	1	1	1	1	100%	0.00%	0.00%	0.00%
Collier	Increasing	2	2	2	2	100%	10.82%	7.84%	0.43%
Duval	Decreasing	5	5	4	4	80%	0.51%	0.79%	1.98%
Escambia	Level	1	1	1	1	100%	15.92%	13.64%	12.65%
Hardee	Level	1	1	1	1	100%	0.00%	0.00%	0.00%
Hillsborough	Increasing	4	4	3	3	75%	1.19%	0.15%	0.59%
Indian River	Level	8	3	7	3	88%	6.00%	5.66%	7.73%
Lake	Increasing	2	2	2	2	100%	2.15%	1.69%	3.37%
Lee	Level	2	2	2	2	100%	3.80%	3.33%	3.42%
Leon	Increasing	2	2	1	1	50%	6.82%	1.11%	1.60%
Marion	Level	1	1	1	1	100%	0.00%	0.00%	0.00%
Martin	Level	1	1	1	1	100%	0.00%	0.00%	0.56%
Miami-Dade	Level	5	5	5	5	100%	0.54%	0.59%	0.48%

Monroe	Increasing	1	1	1	1	100%	1.78%	0.00%	5.71%
Okaloosa	Decreasing	4	4	4	4	100%	0.38%	1.75%	1.26%
Orange	Level	7	5	6	5	86%	1.74%	2.03%	2.18%
Osceola	Level	1	1	1	1	100%	0.00%	0.00%	0.00%
Palm Beach	Decreasing	5	5	3	3	60%	0.26%	6.90%	3.60%
Pasco	Decreasing	1	1	1	1	100%	0.00%	7.32%	0.00%
Pinellas	Increasing	7	7	6	6	86%	2.34%	1.89%	1.65%
Polk	Decreasing	7	4	6	3	86%	4.48%	6.30%	4.42%
Putnam	--	3	3	1	1	33%	34.47%	32.10%	20.60%
Santa Rosa	Decreasing	2	2	1	1	50%	0.00%	65.71%	38.51%
Sarasota	Decreasing	1	1	1	1	100%	0.70%	4.67%	3.95%
Seminole	--	2	2	0	0	0%	--	1.54%	2.32%
St. Johns	Level	1	1	1	1	100%	0.00%	0.00%	0.00%
St. Lucie	Level	1	1	1	1	100%	0.00%	0.00%	0.00%
Volusia	Increasing	4	4	4	4	100%	0.57%	0.42%	3.26%
Walton	Increasing	1	1	1	1	100%	1.75%	0.00%	0.00%

State Laboratory Specimen Testing in Florida

Eleven of the 38 specimens received by the Jacksonville Central and Tampa Branch laboratories for influenza isolate testing during the week ending January 31, 2004 (Week 04) were found positive for influenza A. Of these 11 viruses, 9 were found positive for A (H3N2), and culture testing continues on two unknown influenza A specimens received that were found positive for influenza A through PCR testing. These viruses came from Hillsborough, Indian River, Leon, Miami-Dade, and Polk counties. The CDC has returned results from 9 specimens collected from Florida during October and November. All were positive for influenza A (H3N2): 5 were similar antigenically to the vaccine strain A/Panama/2007/99 (H3N2), and 4 were similar to the drift variant, A/Fujian/411/2002 (H3N2)

From September 28, 2003 to January 31, 2004, the Florida laboratories tested a total of 665 specimens and found 224 positive for influenza A (H3N2) and 91 that were unknown A or had culture results pending. The remaining specimens were negative for influenza. Table 2 details isolates found since September 28, 2003 by county.

TABLE 2. ISOLATES BY COUNTY FOUND DURING 2003-2004 SURVEILLANCE
Report Date: February 9, 2004
Number of previously reported positive specimens (positive specimens, Week 04)

County	Type A - H3N2	Type A - H1N1	Type A - Unknown	Type A –Unknown Culture Pending	Type B
Alachua	10		5		
Brevard	1				
Broward	6			6	
Charlotte				1	
Citrus	5			3	
Collier	3				
Duval	30		10		
Hardee	1			1	
Hernando	1				
Hillsborough	14			6(2)	
Indian River	25(1)		12		
Lake	1				
Lee	2				
Leon	21(1)		4		
Marion	1				
Martin	1				
Miami-Dade	8(6)		12		

Monroe	2		1		
Okaloosa	6				
Orange	5		4	1	
Osceola	2		1		
Palm Beach	7			3	
Pasco	3				
Pinellas	10			3	
Polk	20(1)			5	
Putnam	4		1	3	
Sarasota	9				
St Johns	10		4		
Volusia	6		3	1	
Wakulla	1			1	
Washington			1		

Rapid Testing Performed by Private Laboratories in Florida

Reports received from non-sentinel, private hospitals and private laboratories since September 28, 2003 are summarized in Table 3.

TABLE 3. RAPID INFLUENZA TESTS BY COUNTY DURING 2003-2004
Report Date: February 9, 2004

County	Rapid Tests Performed	Negative Tests	Positive for A/B	Positive for A	Positive for B
Alachua	Unknown	Unknown	5	0	0
Bay	714	468	103	144	1
Brevard	1212	922	0	299	0
Broward	7	6	0	1	0
Clay	Unknown	Unknown	1	0	0
Collier	Unknown	Unknown	362	0	0
Hillsborough	Unknown	Unknown	3	40	0
Marion	2	1	1	0	0
Miami-Dade	294	180	91	0	0
Orange	24	16	14	0	0
Pinellas	3	1	2	67	0
Sarasota	Unknown	Unknown	79	77	1

National Influenza Surveillance

This section summarizes the weekly influenza report from the Centers for Disease Control and Prevention. More detailed information can be found at: http://www.cdc.gov/flu

Influenza-Like Illness Report for the Week January 31, 2004
The proportion of patient visits to sentinel physicians for influenza-like illness (ILI) remained at 1.9% nationwide. This is below the national baseline of 2.5%. On a regional level, the West South Central region had the highest percentage of visits for ILI (3.5%). The New England region had the lowest percentage of visits for ILI (0.9%). Due to wide variability in regional level data, it is not appropriate to apply the national baseline to regional level data. National percentage and regional percentages of patient visits for ILI are weighted on the basis of state population.

Antigenic Characterization
The CDC has antigenically characterized two influenza A (H1) viruses, 584 influenza A (H3N2) viruses, and six influenza B viruses that were submitted by U.S. laboratories since October 1, 2003. The influenza A (H1) viruses were similar antigentically to the vaccine strain A/New Caledonia/20/99. Of the 584 influenza A (H3N2) isolates characterized, 106 (18.2%) were similar

antigenically to the vaccine strain A/Panama/2007/99 (H3N2), and 478 (81.8%) were similar to the drift variant, A/Fujian/411/2002 (H3N2). Five of the influenza B viruses were similar to B/Sichuan/379/99 and one influenza B virus was similar to B/Hong Kong/330/2001.

U.S. World Health Organization (WHO) and Nation Respiratory and Enteric Virus Surveillance System (NREVSS) Laboratories Report

During week January 31, 2004, 76 (6.3%) of the 1,213 specimens tested at WHO and NREVSS laboratories were positive. Of these 76 positive specimens, 49 were influenza A (H3N2) viruses, 26 were influenza A viruses that were not subtyped, and 1 was an influenza B virus. Since September 28, 2003 WHO and NREVSS laboratories tested 87,333 specimens for influenza viruses and found 22,199 positive specimens. Of the positive specimens, 132 were influenza B viruses, 5,780 were influenza A (H3N2), and one was A (H1). The remaining 16,286 influenza A viruses have not been subtyped. Weekly ratios reported by nine regions are presented in Table 4.

TABLE 4. 2003-2004 SPECIMEN TESTING SUMMARY BY REGION
Report Date: February 9, 2004

Region	Total Specimens	A H1N1	A H3N2	A-Unk	B	Ratio Pos.	ILI Reporting Weighted ILI %
New England	3,000	-	261	788	1	0.35	2.338
Mid-Atlantic	9,499	-	230	1,329	7	0.165	2.638
East North Central	5,259	-	1,007	442	4	0.276	3.943
West North Central	9,958	-	383	1,690	4	0.209	3.106
South Atlantic	16,494	1	1,258	3,680	63	0.303	3.531
East South Central	3,931	-	419	268	1	0.175	3.193
West South Central	17,220	-	957	4,024	9	0.29	6.424
Mountain	11,560	-	623	2,802	36	0.299	2.809
Pacific	10,412	-	642	1,263	7	0.184	4.191

122 U.S. Cities Vital Statistics Mortality Report

The percentage of all deaths due to pneumonia and influenza was 9.3%. This percentage is above the epidemic threshold of 8.2% for the week ending January 31, 2004.

International Influenza Surveillance

This section summarizes the weekly influenza report from around the globe. More detailed information can be found at the corresponding websites for each organization.

Report from the European Influenza Surveillance Scheme (EISS)

The EISS reports influenza activity continues to move across Europe from the west to east. Increased influenza activity was reported in Central Europe, the Baltic States, Italy and Germany during the week ending January 31, 2004. Of the 22 European countries that are members of the EISS, widespread influenza activity was reported only in Italy. Eighteen networks reported either local outbreaks or no influenza activity for the week ending January 31, 2004. Younger age groups (0-14) experienced the highest clinical incidence of influenza. A/Fujian/411/2002 (H3N2)-like viruses continue to be the most common. For more information about the EISS report, please visit their website at: http://www.eiss.org/

World Health Organization (WHO) Communicable Disease Surveillance and Response

Widespread activity was reported in Canada, Croatia, the Russian Federation, Slovenia, and the Ukraine; regional activity was reported in Italy, Japan, Latvia, Norway, Romania and Switzerland; localized activity was reported in Austria, Germany, Slovakia, and Sweden; sporadic activity was reported in Belarus, Finland, and Poland. Thirteen countries reported low influenza activity and five countries reported no influenza activity. The Republic of Korea reported influenza B activity.

Source: *The Weekly Epidemiological Record (WER),* volume 79, issue 6, pages 63-64. http://www.who.int/wer/en/

WHO influenza updates and reports to date have also included the following items:

- (Update 19) WHO announced genetic sequencing of the two influenza A (H5N1) viruses found in a Viet Nam family cluster are of avian origin and do not contain human influenza genes.
- WHO reported on January 31, 2004 a 40-year-old hospital director from China's Guangdong Province has fully recovered from SARS coronavirus. The source of infection is still being investigated. Four cases (3 laboratory-confirmed and 1 probable) have been found in China since December 16, 2003.

2002-2003 Influenza Surveillance Summaries

An international summary of the 2002-2003 influenza surveillance season (October-September) can be found on page 303 in the November 7, 2003 edition of the WHO's Weekly Epidemiological Record (Vol. 78) at the following website: http://www.who.int/wer/2003/wer7845/en/

WHO Recommended Composition of Influenza Vaccine

Information regarding the WHO recommended composition of the influenza virus vaccine for the 2004 influenza season can be found at the following website:
http://www.who.int/csr/disease/influenza/recommendations2004/en/

Influenza Surveillance – Definitions and Reminders

Definitions of the influenza activity codes

No Activity*: No laboratory-confirmed cases of influenza and no reported increase in the number of cases of ILI.*

Sporadic*: Small numbers of laboratory-confirmed influenza cases or a single influenza outbreak has been reported, but there is no increase in cases of ILI.*

Local*: Outbreaks of influenza or increases in ILI cases and recent laboratory-confirmed influenza in a single region of the state.*

Regional*: Outbreaks of influenza or increases in ILI cases and recent laboratory-confirmed influenza in at least two but less than half the regions of the state.*

Widespread*: Outbreaks of influenza or increases in ILI cases and recent laboratory-confirmed influenza in at least half the regions of the state.*

Important Reminders

- *Influenza activity reporting by sentinel providers is voluntary.*
- *The influenza surveillance data is used to answer the question of where, when, and what viruses are circulating. It can be used to determine if influenza activity is increasing or decreasing, but it cannot be used to ascertain how many people have become ill with influenza so far this season.*
- *Reporting is incomplete for this week. Numbers may change as more reports are received.*