

FLORIDA INFLUENZA SURVEILLANCE

Week 43: October 25th-October 31st, 2009

Produced on: November 4, 2009

Posted on the Bureau of Epidemiology website:

http://www.doh.state.fl.us/disease_ctrl/epi/swineflu/Reports/reports.htm



Produced by: Bureau of Epidemiology, Florida Department of Health (FDOH)

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The Florida Department of Health (FDOH) monitors influenza activity through multiple surveillance systems. This report is produced weekly in order to assist FDOH monitor the current influenza and novel H1N1 influenza situation. Data summarized in this report includes multiple sources 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. The criteria for influenza-like illness differ somewhat across the data systems.

These data sources indicate influenza-like illness activity has been well above the expected levels for this time of year and is comparable to the peaks seen during "normal" influenza seasons. Although influenza activity remains high across Florida, most county health departments are reporting a downward trend in overall activity.

Weekly state influenza activity:
Widespread

Each week an activity code for the state as a whole is reported to the Centers for Disease Control and Prevention (CDC). There are five possible categories: No Activity, Sporadic, Local, Regional, or Widespread. For week 43, Florida meets the CDC widespread activity definition: outbreaks of influenza or increases in ILI cases in more than half the regions of the state with recent laboratory evidence of influenza in those regions. The CDC report can be viewed at:
<http://www.cdc.gov/flu/weekly/usmap.htm>.

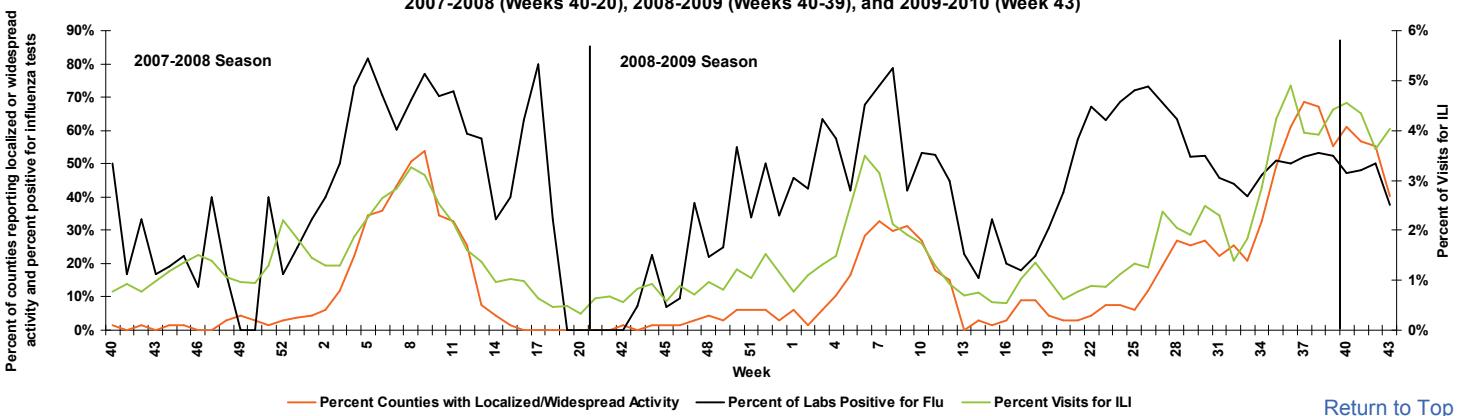


TABLE 1: Summary of Florida Influenza-Like Illness (ILI) Activity for Week 43

Measure	Current week 43	Previous week 42	Difference from previous week	Page of Report
Overall statewide activity code reported to CDC	Widespread	Widespread	No Change	1
Percent of visits to ILINet providers for ILI	4.0%	4.1%	-0.1	2
Percent of emergency department visits (from ESSENCE) due to ILI	6.1%	6.7%	-0.7	4
Percent of hospital admissions (from ESSENCE) due to ILI	0.6	1.1%	-0.5	4
Percent of laboratory specimens that were positive for influenza	37.7%	52.1%	-14.4	6
Percent of positive influenza specimens that were identified as 2009 H1N1	100.0%	100.0%	No change	6
Number of counties reporting localized influenza activity	24 counties	30 counties	-6	7
Number of counties reporting widespread influenza activity	3 counties	7 counties	-4	7
Number of counties reporting increasing influenza activity	4 counties	6 counties	-2	8
Number of counties reporting decreasing influenza activity	22 counties	20 counties	2	8
Number of recent hospitalizations in confirmed 2009 H1N1 influenza cases	42 hospitalizations	51 hospitalizations	-9	11
Number of recent deaths in confirmed 2009 H1N1 influenza cases	9 deaths	8 deaths	1	12
Number of ILI outbreaks reported in Epi Com	22 outbreaks	38 outbreaks	-16	13

Figure 1 shows the progression of the 2007-2008 and 2008-2009 Florida influenza seasons as monitored by three of the surveillance systems: ILINet, Bureau of Laboratories viral surveillance, and county influenza activity levels.

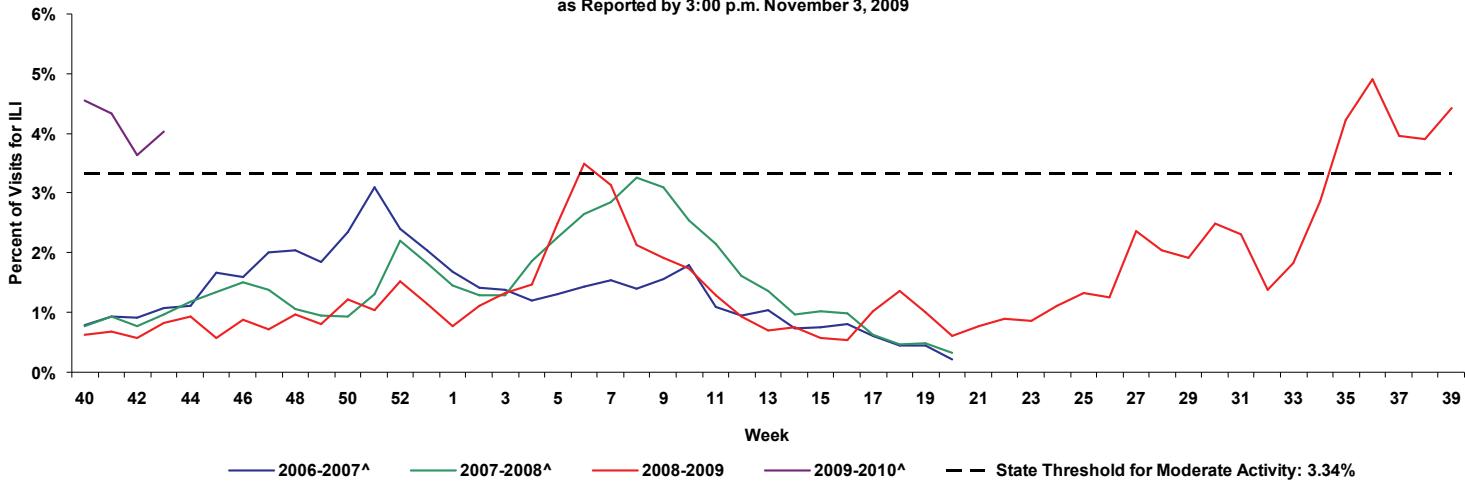
FIGURE 1: Percent Visits for ILI to ILINet Sites, Percent of Counties with Localized or Widespread Activity, and Percent of Labs Tested by Florida Bureau of Laboratories Positive for Influenza
2007-2008 (Weeks 40-20), 2008-2009 (Weeks 40-39), and 2009-2010 (Week 43)



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II. ILINET INFLUENZA-LIKE ILLNESS-STATEWIDE

FIGURE 2: Percentage of Visits for Influenza-Like Illness* Reported by ILINet Sentinel Providers Statewide,
2006-2007, 2007-2008 (Weeks 40-20), 2008-2009 (Weeks 40-39), and 2009-2010 (Weeks 40-43)
as Reported by 3:00 p.m. November 3, 2009

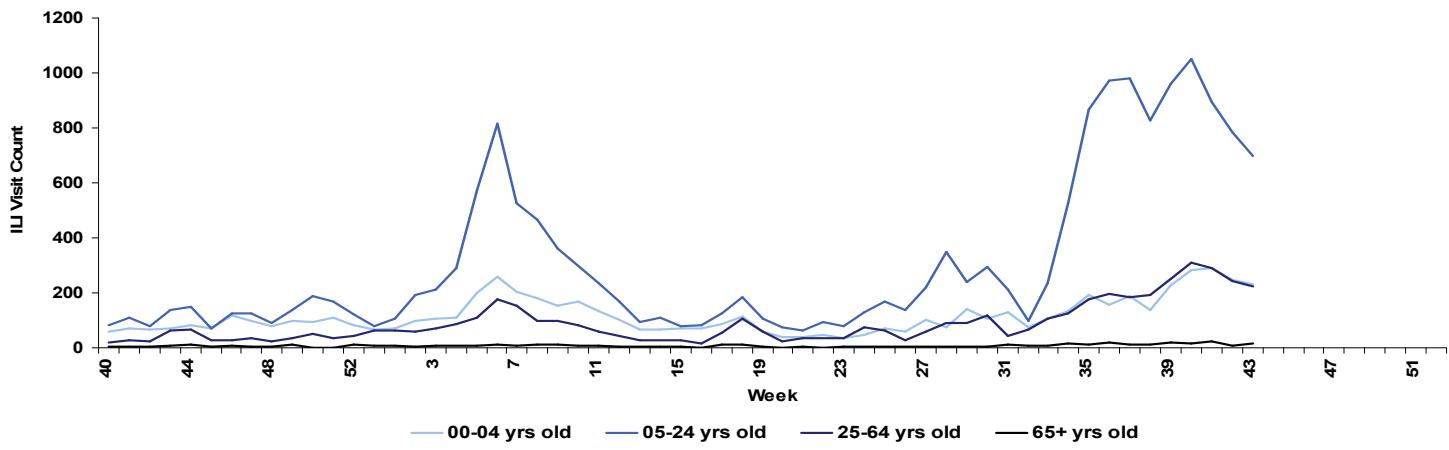


*ILI = Influenza-like illness, fever >100°F AND sore throat and/or cough *in the absence* of another known cause.

**The 2009-2010 threshold for moderate activity is calculated from ILINet data. The threshold for moderate activity is the mean percentage of ILI visits during influenza weeks for the previous three seasons plus two standard deviations. Only weeks with $\geq 10\%$ of laboratory specimens testing positive are included in the calculation. Due to wide variability in regional level data, it is not appropriate to apply the state baseline to regional data.

^aThere is only a week 53 during the 2008-2009 season; the week 53 data point for other seasons is an average of weeks 52 and 1.

FIGURE 3: Influenza-like Illness (ILI) Visit Counts by Age Group
Week 40, 2008-Week 43, 2009 as Reported to ILINet as of 3:00 p.m. November 3, 2009



*ILI = Influenza-like illness, fever >100°F AND sore throat and/or cough *in the absence* of another known cause.

†Data presented here are counts, not proportions as included in Figure 2. This is because age group denominator data is not available through ILINet.

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The table below shows the weighted ILI activity by Domestic Security Task Force Region (RSTDF) as reported by Florida ILINet physicians for week 43 (ending October 31, 2009). The graphs below include ILI activity as reported by sentinel physicians for the 2006-2007, 2007-2008, and 2008-2009, and 2009-10 seasons.

MAP 1: RSTDF Regions for ILINet Data

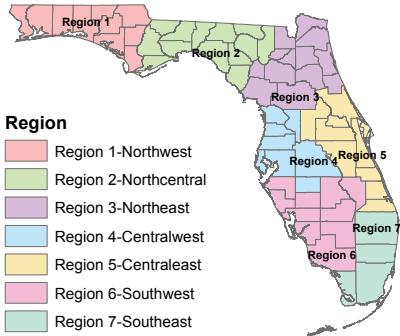
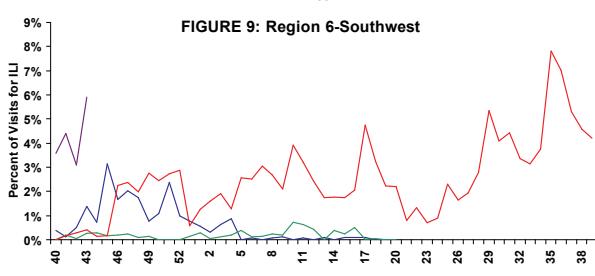
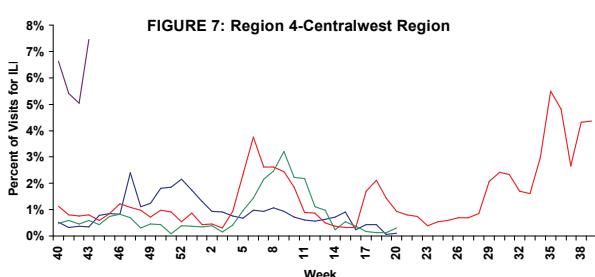
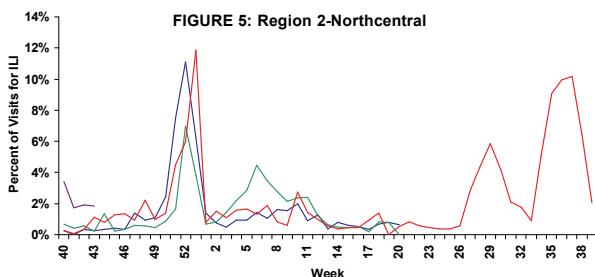
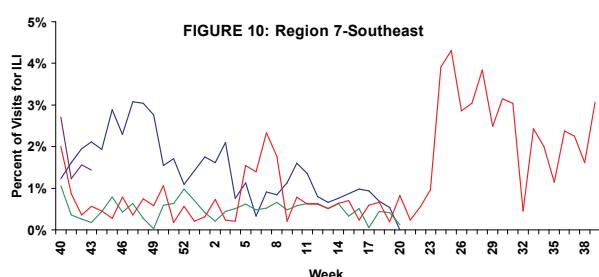
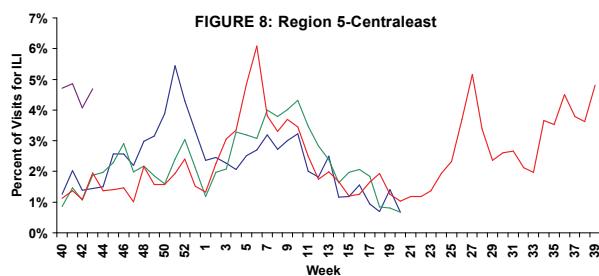
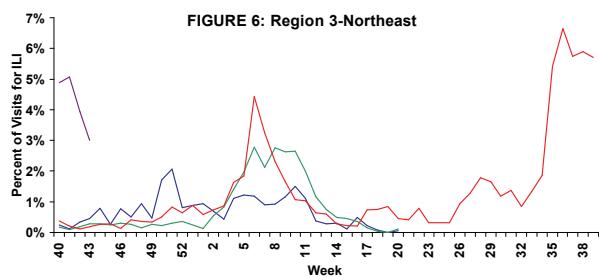
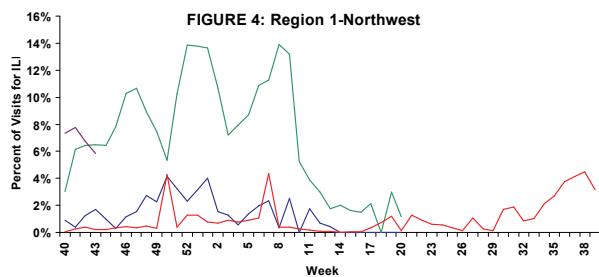


TABLE 2: ILINet Providers and Percent of Visits for ILI by Region, Week 43, as Reported by 3:00 p.m. November 3, 2009

Region	Number of Participating Providers	Providers that Reported	Percent Visits for ILI
Region 1-Northwest	17	8 (47.1%)	5.86%
Region 2-Northcentral	5	2 (40.0%)	1.82%
Region 3-Northeast	23	10 (34.8%)	3.00%
Region 4-Centralwest	37	17 (46.0%)	7.45%
Region 5-Centraleast	45	30 (66.7%)	4.70%
Region 6-Southwest	20	6 (30.0%)	5.90%
Region 7-Southeast	23	10 (43.5%)	1.43%
Total	170	83 (48.8%)	4.04%

Percentage of Visits for Influenza-Like Illness Reported by ILINet Sentinel Providers by RSTDF Region, 2006-07 (Weeks 40-20), 2007-2008 (Weeks 40-20), 2008-2009 (Weeks 40-39), and 2009-10 (Weeks 40-43) as Reported by 3:00 p.m. November 3, 2009

Please refer to table above for the number of providers reporting for each region. Data should be interpreted with caution, due to the low number of providers reporting in some regions. Numbers will change as more data are received.



Graph Legend

- 2006-2007*
- 2007-2008*
- 2008-2009
- 2009-2010*

*There is no week 53 during the 2006-07, 2007-08, and 2009-10 seasons; the week 53 data point for those seasons is an average of weeks 52 and 1.

IV. ESSENCE SYNDROMIC SURVEILLANCE SUMMARY-STATEWIDE

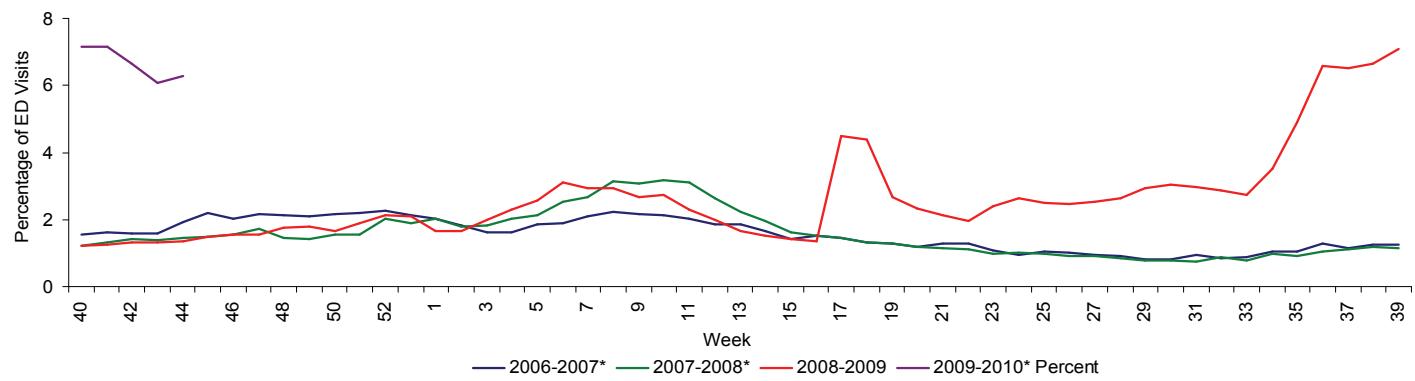
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Florida uses the Electronic Surveillance System for the Early Notification of Community-based Epidemics (ESSENCE) for syndromic surveillance, which currently collects data daily from 132 hospital emergency departments (ED). These data are processed into 11 different syndrome categories based on the patient's chief complaint. One of the categories is influenza-like illness (ILI), which is composed of chief complaints that include the words "influenza" or "flu," or either fever and cough or sore throat.

Overall activity for influenza-like illness remains well above expected levels for this time of year (Figure 11). In many areas it exceeds levels seen at the peak of normal influenza season, and exceeds the initial surge of worried well at week 17, 2009. The majority of the increase in ED visits is occurring in younger age groups (Figure 12). In the last 3-4 weeks the percent of ED visits has either stabilized or has declined, depending on the region and age group. These data are based on the patient's chief complaint and may not reflect the actual diagnosis.

Hospital admissions due to ILI as a percentage of all hospital admissions are shown in the bottom graph (Figure 13). Twenty-seven facilities participating in ESSENCE have been able to provide historical admissions data and are included here. The percentage of admissions for ILI is highest in those less than 20 years old, but the small numerators and denominators in this age group result in high variability. The percentages in the older age groups is less variable and shows a distinct increase starting around week 32. Overall, the percentage of admissions due to ILI is very low. These data are based on the patient's chief complaint when presenting to the emergency department and may not reflect the actual diagnosis.

FIGURE 11: Influenza-like Illness Visits (by Chief Complaint) to Emergency Departments (ED) as a Percentage of All ED Visits, Florida ESSENCE Participating Hospitals (N=132), Week 40, 2006 through Nov. 3, 2009



*There is no week 53 for the 2006-2007, 2007-2008, or 2009-2010 seasons; the week 53 data point for those seasons is an average of weeks 52 and 1.

FIGURE 12: Percentage of Influenza-like Illness from Emergency Department (ED) Chief Complaints by Age, Florida ESSENCE Participating Hospitals (N=132), Week 40, 2008 through Nov. 3, 2009

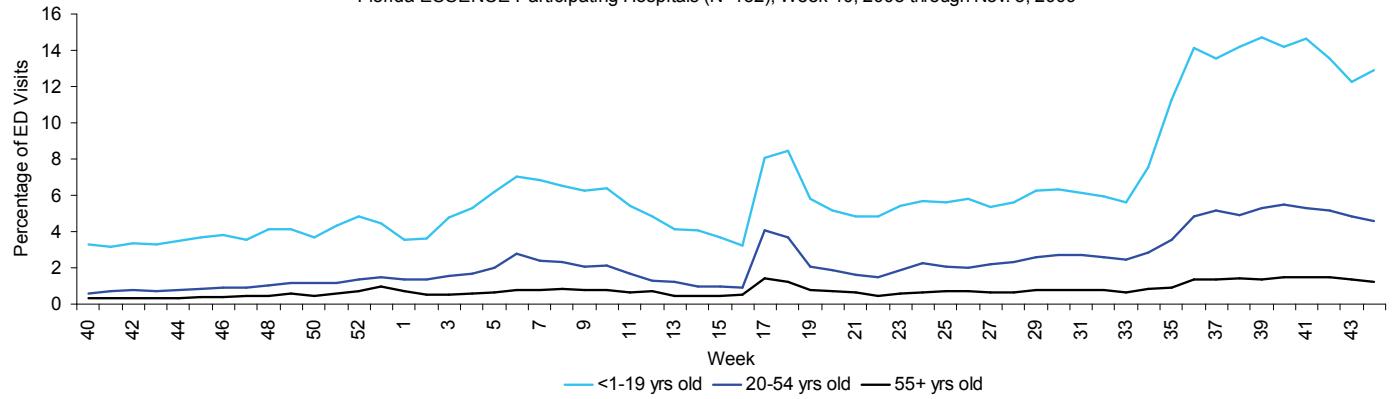
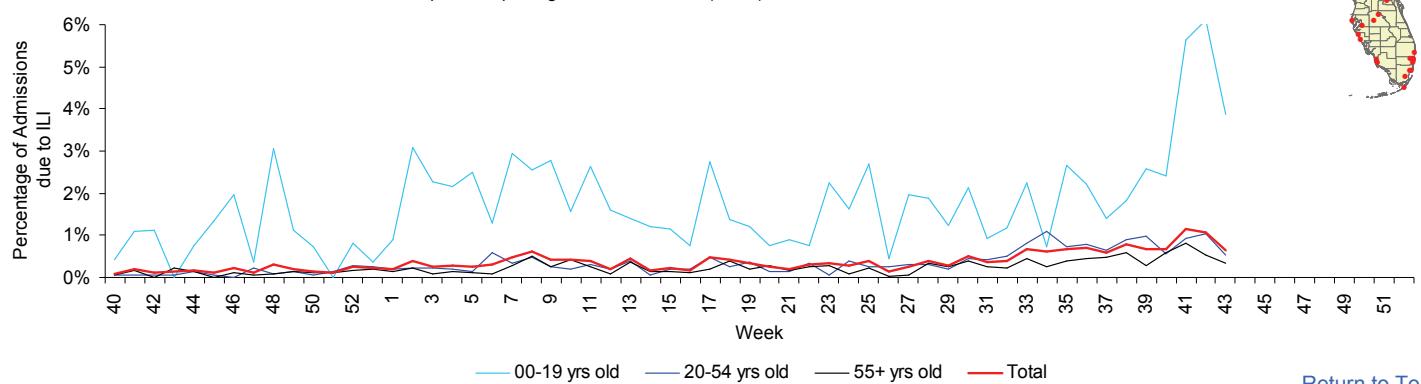


FIGURE 13: Percentage Admitted to Hospital for Influenza-Like Illness (ILI) Among All Persons Admitted in the Hospital through the ED Based on ED Chief Complaint, Hospitals Reporting Admissions Data (N=27) for Week 40, 2008 to Week 43, 2009



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V. ESSENCE SYNDROMIC SURVEILLANCE SUMMARY-REGIONAL

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The figures below describe emergency department chief complaint data from ESSENCE by Domestic Security Task Force Region (Region 2 does not have any participating facilities in ESSENCE and therefore is not displayed). All regions with reporting hospitals show very large increases in flu activity in the weeks coinciding with school opening (week 34). At this time it appears that most regions are at a plateau or are showing decreases in ED visits categorized as ILI. At the time novel H1N1 influenza was first identified (week 17, 2009), data from 5 of the 7 regions indicated large increases in patients presenting for care of influenza-like illness. Our interpretation of this peak is that it includes many individuals who we may classify as "worried well," others may be truly ill with a respiratory illness but in the absence of swine flu news may have stayed home to get better, and then of course some of these probably had some strain of influenza. The increase in ILI activity after week 21 are more likely to be associated with actual 2009 H1N1 influenza infection.

FIGURE 14: Percentage of Influenza-Like Illness from Emergency Department (ED) Chief Complaints, RDSTF Region 1 ESSENCE Participating Hospitals (N=3), Week 40, 2007 through Nov. 3, 2009

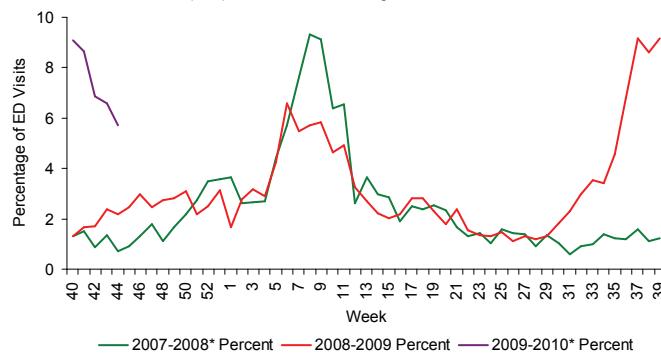


FIGURE 16: Percentage of Influenza-Like Illness from Emergency Department (ED) Chief Complaints, RDSTF Region 4 ESSENCE Participating Hospitals (N=29), Week 40, 2006 through Nov. 3, 2009

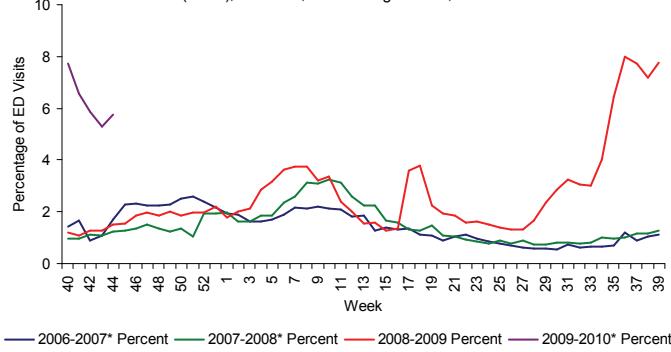
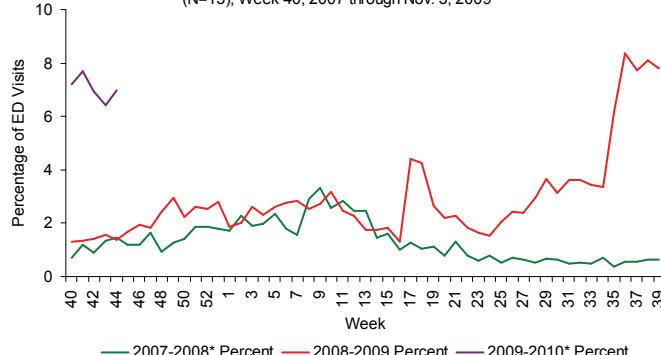


FIGURE 18: Percentage of Influenza-Like Illness from Emergency Department (ED) Chief Complaints, RDSTF Region 6 ESSENCE Participating Hospitals (N=15), Week 40, 2007 through Nov. 3, 2009



*There is no week 53 for the 2006-2007, 2007-2008, or 2009-2010 seasons; the week 53 data point for those seasons is an average of weeks 52 and 54.

MAP 2: Hospitals Reporting Emergency Department (ED) Data to Florida ESSENCE, November 3, 2009 (N=132)

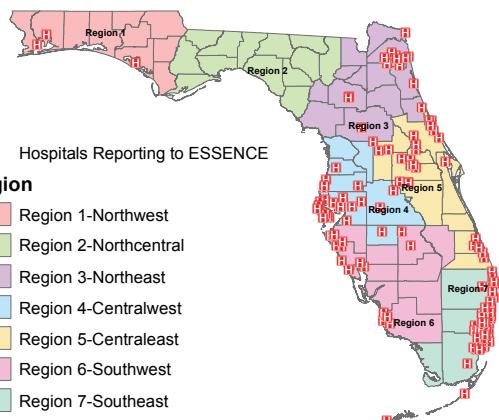


FIGURE 15: Percentage of Influenza-Like Illness from Emergency Department (ED) Chief Complaints, RDSTF Region 3 ESSENCE Participating Hospitals (N=15), Week 40, 2007 through Nov. 3, 2009

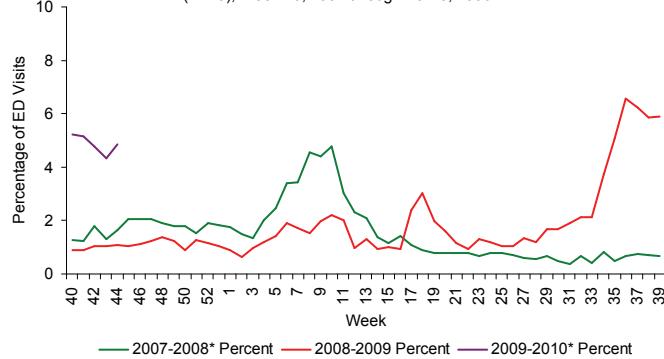


FIGURE 17: Percentage of Influenza-Like Illness from Emergency Department (ED) Chief Complaints, RDSTF Region 5 ESSENCE Participating Hospitals (N=24), Week 40, 2007 through Nov. 3, 2009

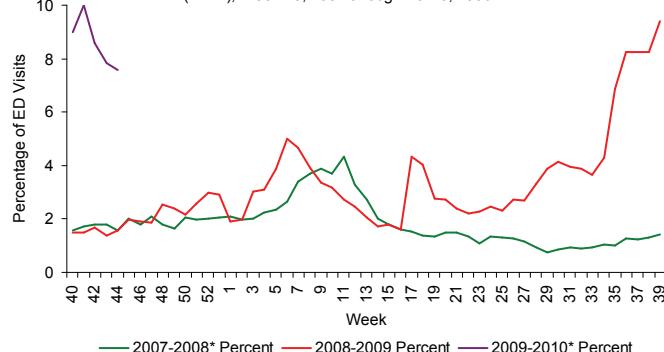
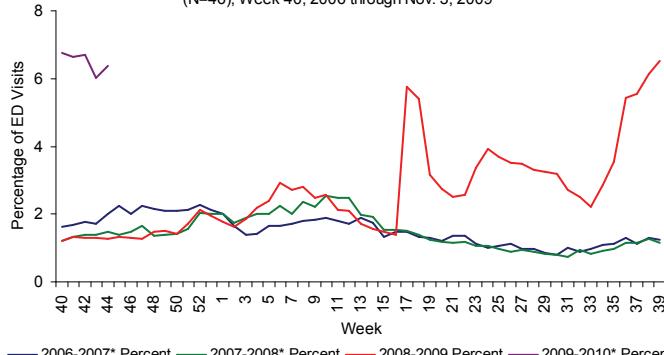


FIGURE 19: Percentage of Influenza-Like Illness from Emergency Department (ED) Chief Complaints, RDSTF Region 7 ESSENCE Participating Hospitals (N=46), Week 40, 2006 through Nov. 3, 2009



As of 9:00 a.m. November 3, 130 specimens with a Lab Event Date* during week 43 were tested by the Bureau of Laboratories (BOL). Of those, 49 (38%) were positive for influenza. Of the 49 positive for influenza, 49 (100%) were novel H1N1 influenza (Figure 20-22). Since week 39, two specimens tested by BOL have tested positive for influenza B; one of the had a lab event date of week 39 and the other from week 40. Influenza B, unlike influenza A does not cause epidemics. Virtually all infections due to the new novel H1N1 virus are caused by strains that are sensitive to Tamiflu and Relenza.

A total of 311 specimens with a Lab Event Date* during week 42 have now been tested by BOL with 156 (50%) positive for influenza (Figure 20-22). Laboratory information is preliminary and will change as additional results are received. Totals from previous weeks will be adjusted to reflect correct specimen numbers.

Enhanced laboratory testing activities in response to novel H1N1 influenza activity was initiated in week 17.

FIGURE 20: Number of Influenza-Positive Specimens Tested by the Florida Bureau of Laboratories by Subtype by Lab Event Date*
Week 40, 2008 to Week 43, 2009 as Reported in Merlin by 9:00 a.m. November 3, 2009

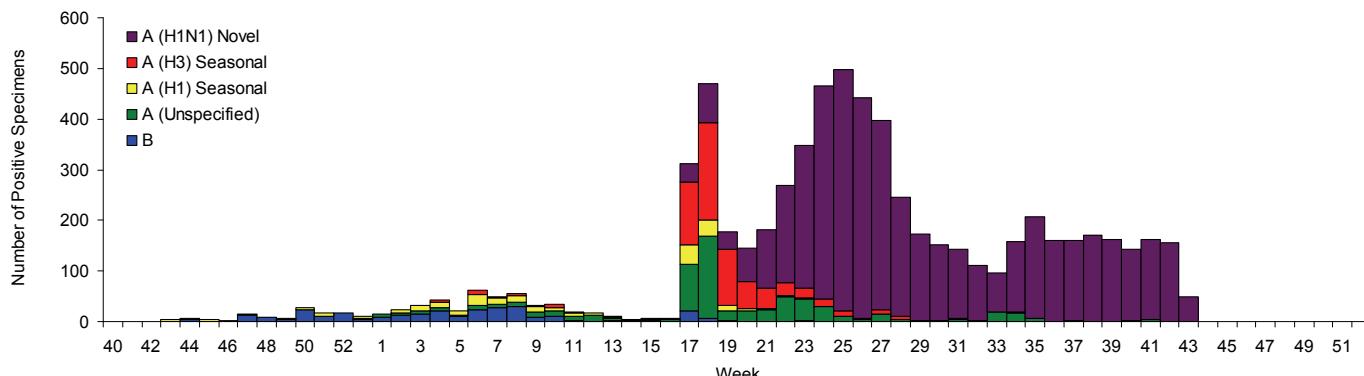


FIGURE 21: Number of Specimens Tested by Florida Bureau of Laboratories and Percent Positive for Influenza by Lab Event Date*
Week 40, 2008 to Week 43, 2009 as Reported in Merlin by 9:00 a.m. November 3, 2009

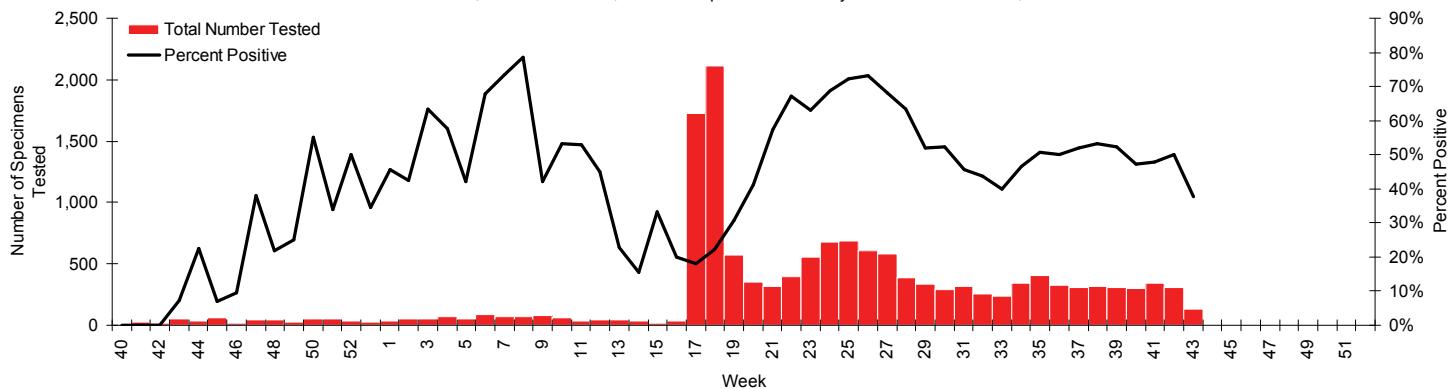
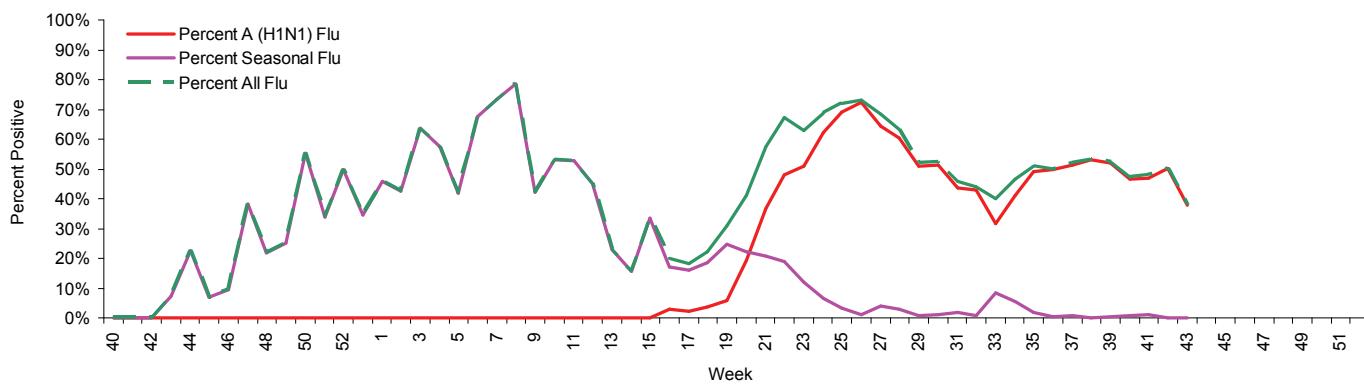


FIGURE 22: Percentage of Specimens Tested by Florida Bureau of Laboratories Positive for Influenza by Subtype by Lab Event Date*
Week 40, 2008 to Week 43, 2009 as Reported in Merlin by 9:00 a.m. November 3, 2009



*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:

http://www.doh.state.fl.us/disease_ctrl/epi/htopics/flu/FluLabReportGuide.pdf

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As of 7:30 p.m. November 3, 2009, a total of 51 (76.1%) counties had reported their weekly level of influenza activity. Please note that data reported by counties after the deadline are recorded but may not be included in the activity map below.

TABLE 3: Weekly County Influenza Activity for Week 43 (ending October 31, 2009) as Reported by 7:30 p.m. a.m. November 3, 2009

Activity Level	Week 42 Number of Counties	Week 43 Number of Counties	Week 43 Counties
No Report	11	16	Calhoun, Citrus, Dixie, Gadsden, Gilchrist, Gulf, Hillsborough, Holmes, Jefferson, Lafayette, Lee, Liberty, Madison, Pasco, Taylor, Washington
No Activity	1	1	Hamilton
Sporadic	18	23	Alachua, Bay, Charlotte, Columbia, Dade, Desoto, Flagler, Franklin, Glades, Hardee, Hendry, Highlands, Indian River, Levy, Monroe, Nassau, Okeechobee, Pinellas, Putnam, St. Johns, Sumter, Union, Walton
Localized	30	24	Baker, Bradford, Brevard, Broward, Clay, Collier, Duval, Escambia, Hernando, Jackson, Lake, Leon, Manatee, Marion, Martin, Okaloosa, Orange, Osceola, Palm Beach, Polk, St. Lucie, Santa Rosa, Volusia, Wakulla
Widespread	7	3	Sarasota, Seminole, Suwannee

MAP 3: Weekly County Influenza Activity for Week 43 (ending October 31, 2009) as Reported by 7:30 p.m. November 3, 2009

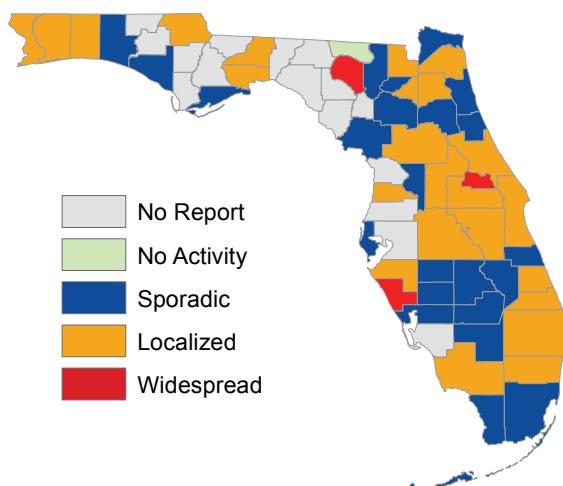
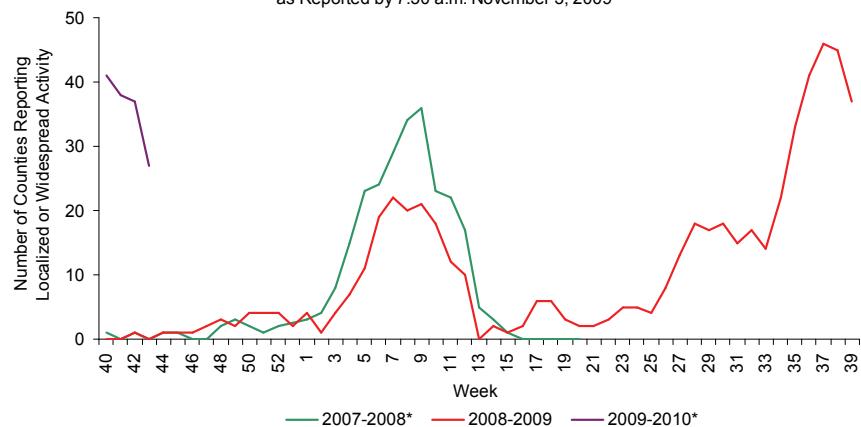


FIGURE 23: Number of Counties Reporting Localized or Widespread Activity, 2007-2008 (Weeks 40-20), 2008-2009 (Weeks 40-39), and 2009-2010 (Week 43) as Reported by 7:30 a.m. November 3, 2009

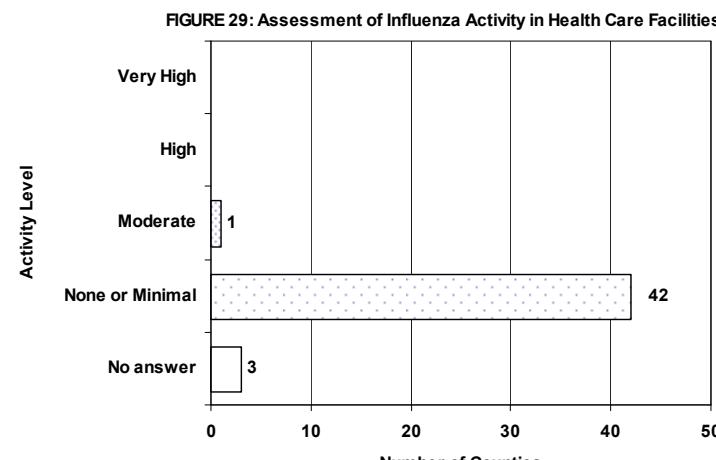
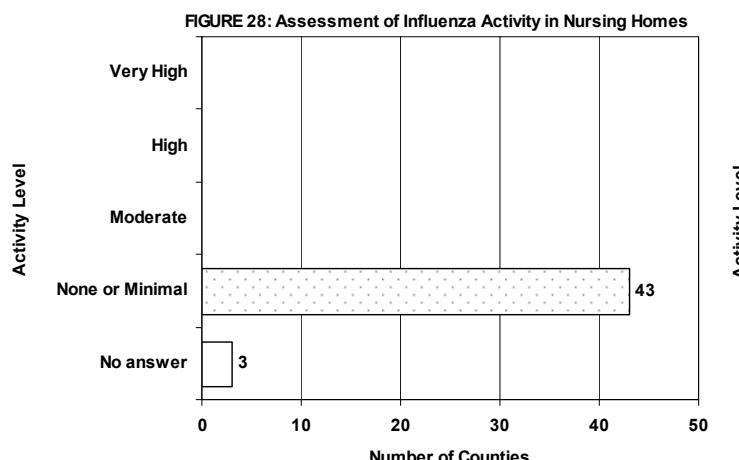
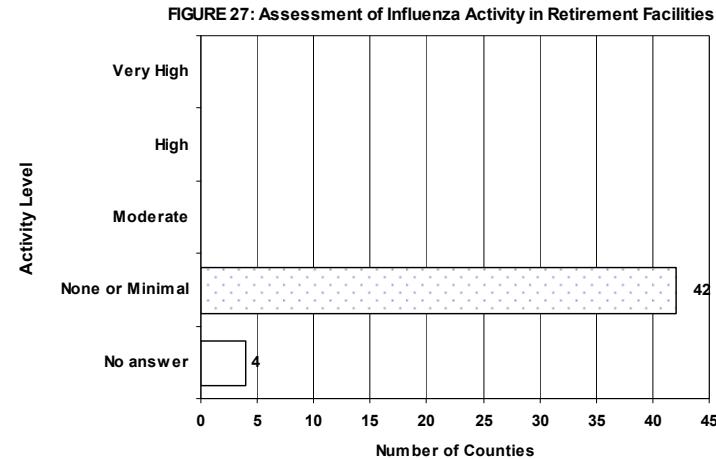
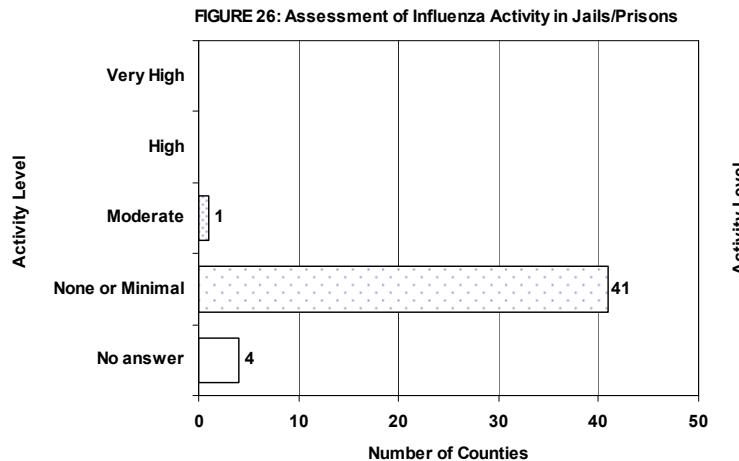
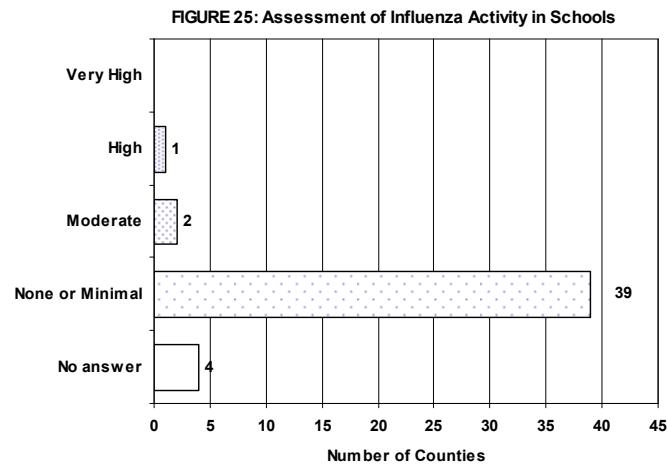
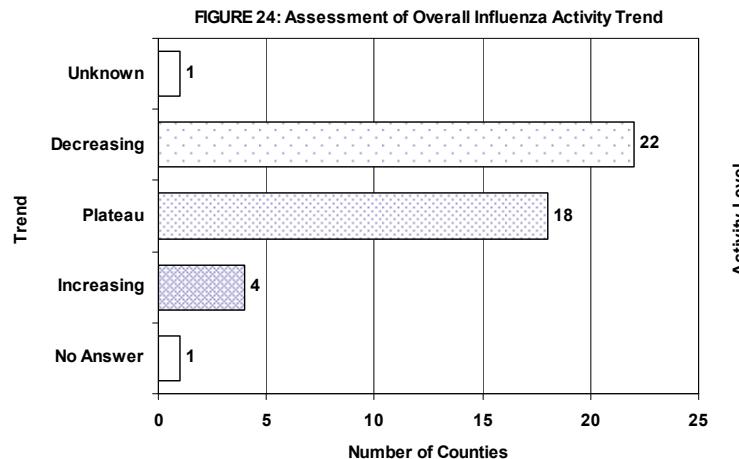


County flu activity level definitions are now available online at:
http://www.doh.state.fl.us/disease_ctrl/epi/FluActivityDef.htm

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 24-32 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 the week ending October 31st, 22 counties indicated that activity was decreasing, 18 indicated it was about the same, and 4 indicated that activity was increasing.

County influenza settings assessment guides are available at:
http://www.doh.state.fl.us/disease_ctrl/epi/FluAssessment.htm

Assessment of Overall Influenza Activity Trend in County and Activity Levels in Various Facilities by County as Reported by County Health Department Flu Coordinators for Week 43 as of 10:30 a.m. November 4, 2009



Assessment of Overall Influenza Activity Trend in County and Activity Levels in Various Facilities by County as Reported by County Health Department Flu Coordinators for Week 43 as of 10:30 a.m. November 3, 2009

FIGURE 30: Assessment of Influenza Activity in Daycare Centers

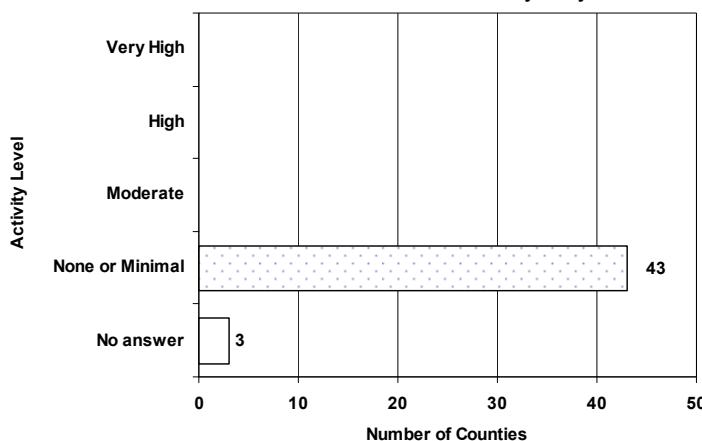


FIGURE 31: Assessment of Influenza Activity in Businesses

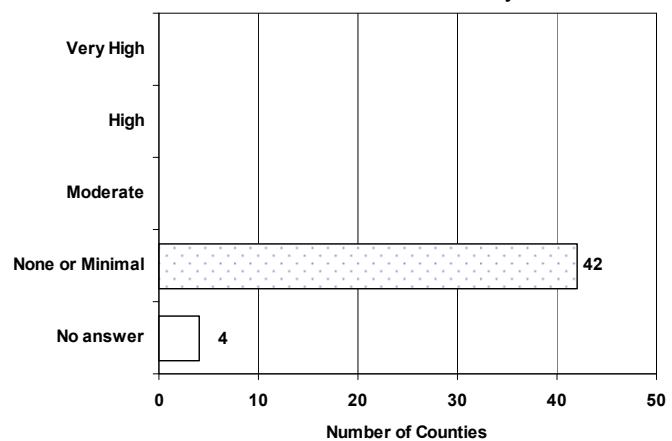
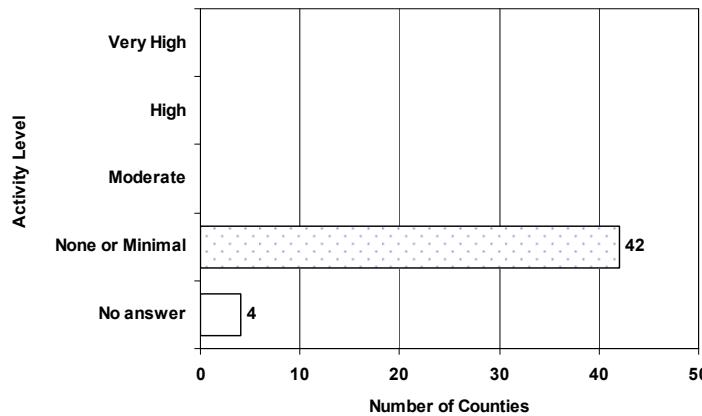
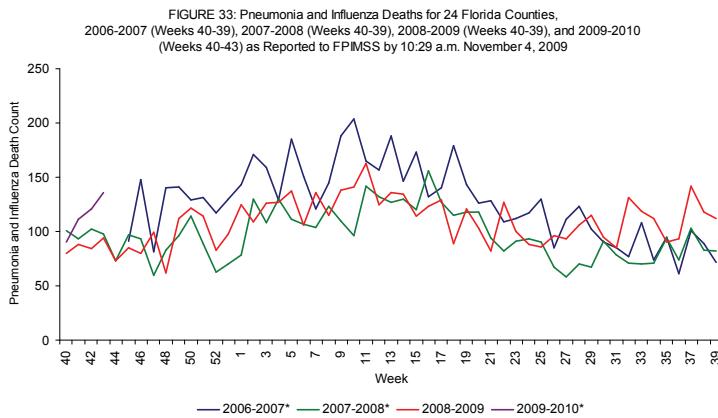


FIGURE 32: Assessment of Influenza Activity in State or Local Government Offices



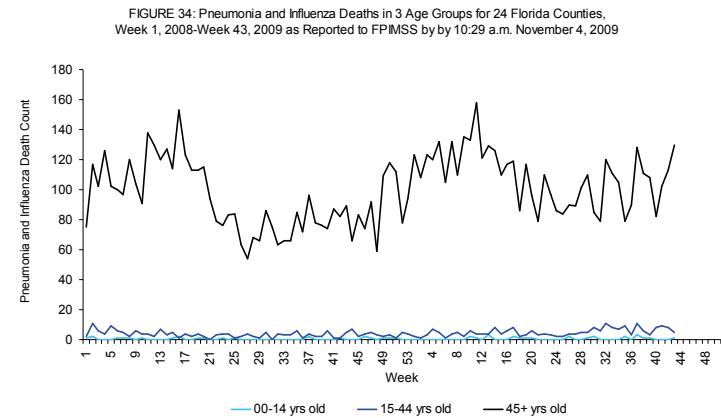
The Florida Department of Health started the Florida Pneumonia and Influenza Mortality Surveillance System (FPIMSS) in 2006 in order to more timely assess the number of pneumonia and influenza deaths occurring in the state. This system was modeled on the CDC's 122 cities surveillance system. Each week, the vital statistics office in the 24 most populous counties in Florida manually reviews the death certificates received for the previous week. Any mention of pneumonia or influenza on the death certificate, with certain prescribed exceptions, is counted as a pneumonia or influenza death. These counts, by age group, are then reported to the state via the EpiGateway web-interface.

For week 43 (ending October 31, 2009) as of 10:29 a.m., 136 deaths had been reported; 117 deaths were expected for week 43 indicating that there were nineteen excess deaths. Two weeks in a row with excess deaths reported indicates that the state is above the epidemic threshold for deaths. Week 43 is the third consecutive week with excess deaths reported. The majority of the deaths are in those aged 45 years and older.



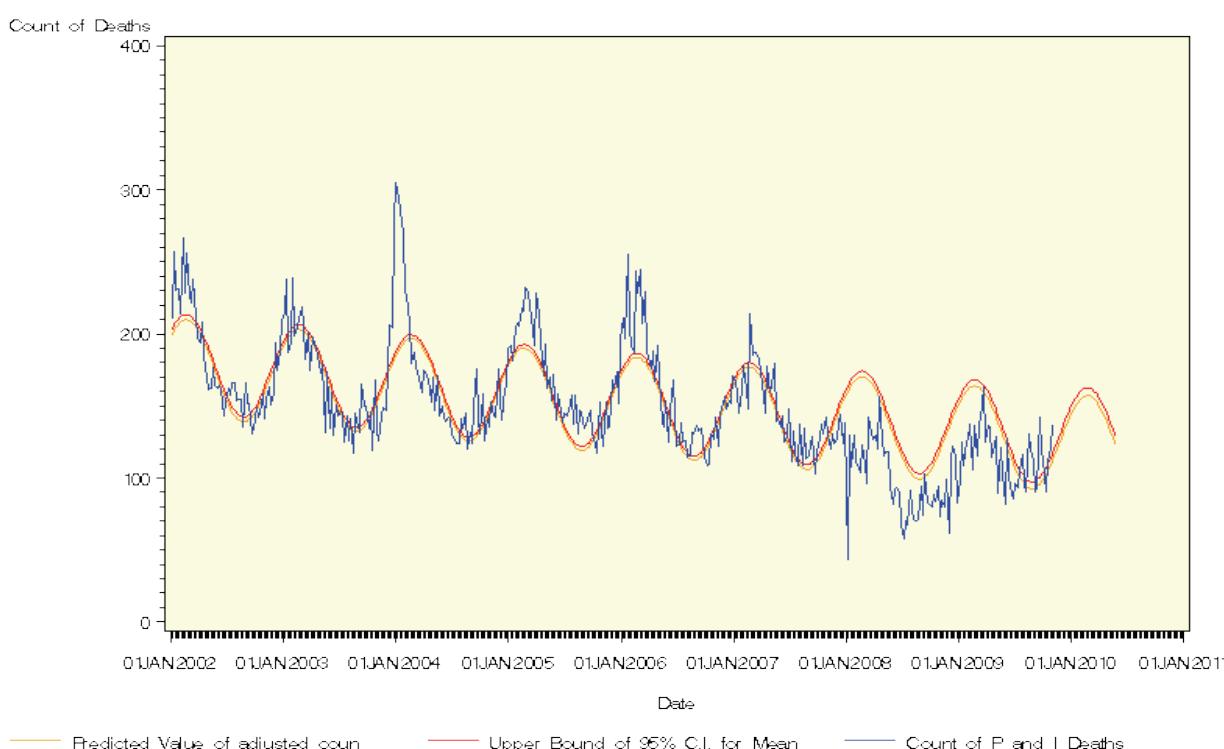
*There is no week 53 for the 2006-2007, 2007-2008, or 2009-2010 seasons; the week 53 data point for those seasons is an average of weeks 52 and 1.

All of the 24 participating counties reported their data for week 43. There were nineteen excess deaths.



All of the 24 participating counties reported their data for week 43 as of 10:29 a.m. November 4, 2009. The highest number of pneumonia and influenza deaths has occurred in those over 45.

FIGURE 35: Pneumonia and Influenza Deaths for 24 Florida Counties, Counts Model January 1, 2002-October 31, 2009 as Reported to FPIMSS as of 10:29 a.m. November 4, 2009



X. NOTIFIABLE DISEASE REPORTS: NOVEL H1N1 HOSPITALIZATIONS

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Although the number of cases, hospitalizations*, and deaths continues to rise, there is no evidence that the virus has changed to a more virulent form, either in Florida, the rest of the U.S., or elsewhere in the world.

*Please note that under the current surveillance strategy, case reporting is only required for confirmed or probable cases of novel H1N1 influenza in a) patients with life-threatening illness, b) pregnant women who are hospitalized, and c) deaths. Use caution when interpreting hospitalization data, as only hospitalized patients with life-threatening illness are reportable and there is some variability in communities as to how "life-threatening-illness" is interpreted.

TABLE 4: Cumulative hospitalizations* in all Reported Novel H1N1 Influenza Cases by County as of 12:00 Noon November 3, 2009

County	Number	Percent	ICU (percent of hospitalized)
Total	1008	100.0	396 (39.3)
Alachua	15	1.5	12 (80.0)
Baker	2	0.2	2 (100.0)
Bay	2	0.2	0 (0.0)
Brevard	11	1.1	8 (72.7)
Broward	86	8.5	31 (36.0)
Calhoun	1	0.1	0 (0.0)
Charlotte	5	0.5	1 (20.0)
Citrus	11	1.1	1 (9.1)
Clay	3	0.3	1 (33.3)
Collier	3	0.3	2 (66.7)
Columbia	3	0.3	0 (0.0)
Duval	51	5.1	29 (56.9)
Escambia	4	0.4	0 (0.0)
Flagler	1	0.1	0 (0.0)
Gadsden	4	0.4	1 (25.0)
Hardee	2	0.2	0 (0.0)
Hendry	1	0.1	0 (0.0)
Hernando	7	0.7	3 (42.9)
Highlands	4	0.4	0 (0.0)
Hillsborough	27	2.7	12 (44.4)
Indian River	4	0.4	0 (0.0)
Lake	6	0.6	0 (0.0)
Lee	29	2.9	19 (65.5)
Levy	2	0.2	0 (0.0)
Manatee	13	1.3	6 (46.2)
Marion	5	0.5	0 (0.0)
Martin	5	0.5	2 (40.0)
Miami-Dade	385	38.2	117 (30.4)
Monroe	5	0.5	0 (0.0)
Nassau	3	0.3	3 (100.0)
Okaloosa	8	0.8	7 (87.5)
Okeechobee	1	0.1	0 (0.0)
Orange	85	8.4	32 (37.6)
Osceola	5	0.5	2 (40.0)
Palm Beach	81	8.0	35 (43.2)
Pasco	3	0.3	0 (0.0)
Pinellas	27	2.7	20 (74.1)
Polk	21	2.1	11 (52.4)
Putnam	4	0.4	3 (75.0)
Santa Rosa	6	0.6	1 (16.7)
Sarasota	11	1.1	6 (54.5)
Seminole	19	1.9	6 (31.6)
St. Johns	6	0.6	2 (33.3)
St. Lucie	7	0.7	3 (42.9)
Taylor	1	0.1	1 (100.0)
Volusia	22	2.2	16 (72.7)
Walton	1	0.1	1 (100.0)

TABLE 5: Recent Hospitalizations* in Novel H1N1 Influenza Cases by County, 12:00 Noon October 27, 2009 to 12:00 Noon November 3, 2009

County	Number	Percent	ICU (percent of hospitalized)
Total	42	100.0	20 (47.6)
Broward	7	16.7	5 (71.4)
Columbia	1	2.4	0 (0.0)
Hardee	1	2.4	0 (0.0)
Hillsborough	2	4.8	1 (50.0)
Marion	1	2.4	0 (0.0)
Miami-Dade	15	35.7	3 (20.0)
Okaloosa	1	2.4	1 (100.0)
Orange	5	11.9	4 (80.0)
Palm Beach	3	7.1	2 (66.7)
Pinellas	1	2.4	1 (100.0)
Polk	1	2.4	1 (100.0)
Putnam	1	2.4	1 (100.0)
St. Lucie	1	2.4	0 (0.0)
Volusia	2	4.8	1 (50.0)

The number of hospitalizations in cases reported each week since July 26, 2009 has ranged from 13 hospitalizations (week 33) to 54 hospitalizations (week 40) with an average of 30.2 hospitalizations in cases reported per week.

TABLE 6: Cumulative Hospitalizations* in all Reported Novel H1N1 Influenza Cases by Age as of 12:00 Noon November 3, 2009

Age group	Number	Percent	Hospitalizations	NO underlying condition^	ICU
			per million population		
Total	1008	100.0	52.7	162 (16.1)	396 (39.3)
0-4	147	14.6	130.0	35 (23.8)	45 (30.6)
5-24	285	28.3	59.4	34 (11.9)	83 (29.1)
25-49	338	33.5	54.5	65 (19.2)	155 (45.9)
50-64	185	18.4	50.4	23 (12.4)	96 (51.9)
65+	53	5.3	16.0	5 (9.4)	17 (32.1)

[^]As of week 41, underlying medical conditions include pregnancy unless otherwise noted.

TABLE 7: Cumulative Hospitalizations* in all Pregnant Women with Novel H1N1 Influenza Cases by Status of Underlying Medical Conditions Other than Pregnancy as of 12:00 Noon November 3, 2009

Underlying medical condition status	Number	Percent	ICU	Death
Total	115	100.0	34 (29.6)	6 (5.2)
No underlying medical condition	69	60.0	22 (31.9)	3 (4.3)
Underlying medical condition	29	25.2	8 (27.6)	3 (10.3)
Unknown	17	14.8	4 (23.5)	0 (0.0)

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All deaths in reported laboratory-confirmed novel H1N1 influenza cases are presented in the following tables. Note that novel H1N1 influenza may not necessarily be the attributable cause of death in all cases.

Approximately 20% of deaths are in people with no clear underlying medical condition.

149 deaths in those with laboratory-confirmed novel H1N1 influenza reported as of 12:00 noon November 3, 2009

9 deaths were newly reported (12:00 noon October 27, 2009 to 12:00 noon November 3, 2009)

TABLE 8: Cumulative Deaths in Novel H1N1 Influenza Cases by County as of 12:00 Noon November 3, 2009

County	Number	Percent
Total	149	100.0
Alachua	6	4.0
Baker	1	0.7
Brevard	3	2.0
Broward	11	7.4
Charlotte	2	1.3
Citrus	1	0.7
Clay	1	0.7
DeSoto	1	0.7
Duval	13	8.7
Hernando	2	1.3
Highlands	1	0.7
Hillsborough	10	6.7
Indian River	1	0.7
Lake	1	0.7
Lee	4	2.7
Levy	1	0.7
Manatee	2	1.3
Miami-Dade	28	18.8
Monroe	2	1.3
Okaloosa	2	1.3
Orange	7	4.7
Osceola	1	0.7
Palm Beach	8	5.4
Pasco	2	1.3
Pinellas	10	6.7
Polk	5	3.4
Putnam	1	0.7
Santa Rosa	1	0.7
Sarasota	4	2.7
Seminole	3	2.0
St. Johns	2	1.3
St. Lucie	5	3.4
Taylor	1	0.7
Volusia	5	3.4
Walton	1	0.7

TABLE 9: Recent Deaths in Novel H1N1 Influenza Cases by County, 12:00 Noon October 27, 2009 to 12:00 Noon November 3, 2009

County	Number	Percent
Total	9	100.0
Broward	1	11.1
Hillsborough	1	11.1
Okaloosa	1	11.1
Palm Beach	2	22.2
Pinellas	1	11.1
Polk	1	11.1
Putnam	1	11.1
St. Lucie	1	11.1

TABLE 10: Cumulative Deaths in Novel H1N1 Influenza Cases by Age as of 12:00 Noon November 3, 2009

Age	Number	Percent	Deaths per million population	NO underlying condition^
Total	149	100	7.8	31 (20.8)
0-4	5	3.4	4.4	0 (0.0)
5-24	17	11.4	3.5	7 (41.2)
25-49	62	41.6	10.0	18 (29.0)
50-64	56	37.6	15.3	6 (10.7)
65+	9	6.0	2.7	0 (0.0)

[^]As of week 41, underlying medical conditions include pregnancy unless otherwise noted.

The number of deaths reported each week since July 26, 2009 has ranged from 2 deaths (week 37) to 13 deaths (week 38) with an average of 8.5 deaths reported per week.

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XII. NOTIFIABLE DISEASE REPORTS: INFLUENZA-ASSOCIATED PEDIATRIC MORTALITY

Influenza-associated deaths among those <18 years of age and/or post-influenza infection encephalitis are reportable; case report forms can be accessed at: http://www.doh.state.fl.us/disease_ctrl/epi/topicscrforms.htm.

Influenza-Associated Pediatric Mortality

- 1 influenza-associated deaths among those <18 years of age was reported in week 43 for a total of 2 cases for the 2009-2010 season
- 11 influenza-associated deaths among those <18 years of age were reported for the 2008-2009 influenza season (week 40, 2008 to week 39, 2009)

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394 confirmed or suspect outbreaks of novel influenza A (H1N1) have been reported as of October 31, 2009

Schools have been the most heavily impacted setting with 235 (59.6%) of the 394 outbreaks. Summer camps accounted for 50 (12.7%) of the outbreaks, daycares accounted for 26 (6.6%), and correctional facilities accounted for 18 (4.6%).

22 confirmed or suspect outbreaks of novel influenza A (H1N1) reported during week 43 (ending October 31, 2009)

During week 43, 22 new confirmed or suspect outbreaks of ILI and novel influenza A H1N1 were reported via EpiCom (please note that outbreaks may not have occurred during the week in which they were posted). These outbreaks occurred in 18 schools and 4 day cares.

County health department epidemiologists should report influenza and ILI outbreaks via the Influenza Forum in EpiCom:

<https://fdens.com/vabtrs/GateStart.aspx>

TABLE 11: Cumulative outbreaks Reported via EpiCom by County as of Week 43 (Ending October 31, 2009)

County	Number	Percent
Alachua	1	0.3%
Baker	2	0.5%
Bradford	1	0.3%
Brevard	1	0.3%
Clay	4	1.0%
Collier	27	6.9%
Columbia	2	0.5%
Duval	11	2.8%
Escambia	42	10.7%
Glades	1	0.3%
Hamilton	1	0.3%
Hendry	3	0.8%
Hernando	1	0.3%
Hillsborough	54	13.7%
Holmes	1	0.3%
Indian River	3	0.8%
Jackson	2	0.5%
Lake	48	12.2%
Madison	1	0.3%
Marion	3	0.8%
Martin	1	0.3%
Miami-Dade	20	5.1%
Nassau	20	5.1%
Okaloosa	4	1.0%
Orange	42	10.7%
Osceola	24	6.1%
Palm Beach	46	11.7%
Pasco	4	1.0%
Pinellas	3	0.8%
Polk	2	0.5%
Putnam	1	0.3%
Sarasota	7	1.8%
Seminole	5	1.3%
St. Johns	5	1.3%
Volusia	1	0.3%
Total	394	100.0%

TABLE 12: Cumulative outbreaks Reported via EpiCom by Setting as of Week 43 (Ending October 31, 2009)

Setting	Number	Percent
Athletics	3	0.8%
Church	1	0.3%
College/University	3	0.8%
Community Center	5	1.3%
Correctional Facility	18	4.6%
Day Care	26	6.6%
Group/Foster Home	2	0.5%
Healthcare Facility	7	1.8%
Home	4	1.0%
Home/School	1	0.3%
Long-Term Care Facility	4	1.0%
Military Facility	3	0.8%
Out of State Trip	5	1.3%
School	235	59.6%
Special Needs Facility	11	2.8%
Summer Camps	50	12.7%
Work	13	3.3%
Work/Home	3	0.8%
Total	394	100.0%

TABLE 13: Recent Outbreaks Reported via EpiCom by Setting during Week 43 (Ending October 31, 2009)

Setting	Number	Percent
School	18	81.8%
Day Care	4	18.2%
Total	22	100.0%