Florida FLU REVIEW

Summer 2015

Summary

Weeks 37-38: September 13 to 26, 2015

National influenza activity:

- Influenza virus continues to circulate at low levels nationally.
- The predominantly circulating strain in recent weeks has shifted from influenza B to influenza A (H3), which is typical
 for this time of year.
- The Centers for Disease Control and Prevention continue to recommend vaccination as long as influenza viruses are circulating.
- Highly pathogenic avian influenza (HPAI) H5 viruses have been identified in U.S. backyard and commercial flocks of birds during the spring and summer of 2015. HPAI H5 has not been identified in Florida birds, but identifications are anticipated. No humans have been identified with HPAI infection in Florida or the rest of the nation.
 - To learn more about HPAI, please visit: http://www.floridahealth.gov/diseases-and-conditions/diseases-from-animals/novel-influenza-viruses.html.

State influenza and influenza-like illness (ILI)¹ activity:

- Emergency department (ED) and urgent care center (UCC) ILI visits reported into ESSENCE-FL (Florida's syndromic surveillance system) have increased in recent weeks, which is typical for this time of year.
- One outbreak of influenza A was reported in week 38 in Indian River County.
- In week 37, the preliminary estimated number of deaths due to pneumonia and influenza in Florida is similar to levels seen in previous years at this time.
- In weeks 37 and 38, eight of 54 (14.8%) specimens submitted to Bureau of Public Health Labs (BPHL) for influenza testing were PCR positive for seasonal strains of influenza: seven were positive for influenza A (H3) and one was positive for influenza B not yet subtyped.

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Produced by the Bureau of Epidemiology (BOE), Florida Department of Health (DOH)

Posted on the BOE website:

floridahealth.gov/ floridaflu

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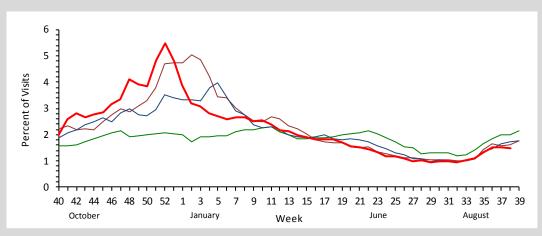
Table 1. Summary of Florida ILI Activity, Weeks 37 through 38, 2015

Measure	Difference From Previous Week		Current Week 38	Previous Week 37	Data Source ²
Percent of ED and UCC visits due to ILI	N/A	0.0%	1.5%	1.5%	ESSENCE-FL
Percent of laboratory specimens positive for influenza	•	22.2%	3.7%	25.9%	Laboratory Surveillance
Number of reported ILI outbreaks	A	1	1	0	EpiCom

ED and UCC Visits for ILI³ by Flu Season

ED = emergency department, UCC = urgent care center

The percent of ILI visits to ESSENCE-FL participating facilities has increased in recent weeks and is below levels seen in previous years at this time.



The figure to the left shows the percent of visits to EDs and UCCs with chief complaints that code into the ILI syndrome, as reported by participating ESSENCE-FL facilities (N=255) from week 40, 2011 through week 38, 2015, accessed September 30, 2015.

2014-2015 — 2012-2013 — 2013-2014 — 2011-2012

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

²The 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 at: floridahealth.gov/floridaflu

³ As of April 30, 2015, **FLS** was added to list of abbreviations in ESSENCE-FL and is now expanded to **Flu Like Symptoms**. As a result of this change, any visit with a chief complaint containing FLS will now code into the ILI syndrome and the Influenza subsyndrome. Historical records have been reprocessed to reflect this change.

P&I Mortality

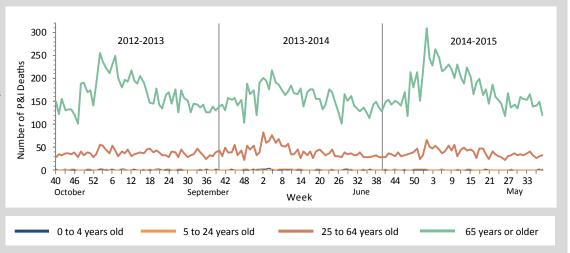
P&I = Pneumonia and Influenza

The figure below shows P&I deaths for all Florida counties by age group from week 40, 2012 through week 38, 2015, as reported into ESSENCE-FL. *Vital statistics death records data are currently considered to be complete through week 37, 2015.*

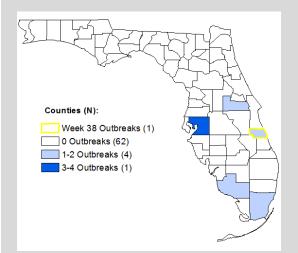
The total number of P&I deaths reported in week 37 for all age groups is similar to levels seen in previous years at this time.

133 preliminary estimated P&I deaths have been reported for week 37, 2015.

Based on a multi-year regression model to predict P&I mortality in the Florida population, no excess deaths were reported for week 37, 2015. The upper bound of the 95% confidence interval for prediction is 198.5 deaths.



Influenza and ILI Outbreaks



One outbreak of influenza A was reported in week 38, 2015.

Indian River County: A long term care facility (LTCF) reported 23 residents and seven staff with ILI; six of the 23 residents were hospitalized. Specimens from four ill persons (one staff and three residents) tested positive for influenza A by rapid antigen test at local healthcare providers. The three specimens collected from ill patients that tested positive for influenza A by rapid antigen test, and an additional four specimens collected from ill residents, were tested for influenza at BPHL. Five of the seven specimens tested positive for influenza A (H3) by PCR.

Chemoprophylaxis of non-ill residents and staff was recommended, and residents were prophylaxed. After recommendation from DOH, the 2015-16 influenza vaccine was provided for all well residents in week 39. Infection control measures were reviewed with facility leadership and all were implemented. Local facilities (LTCFs, hospitals, schools etc.) were notified of the outbreak and provided with infection control and management recommendations. This investigation is closed.

Laboratory Viral Surveillance

The figure below shows the percentage of positive tests for respiratory viruses reported by the National Respiratory and Enteric Virus Surveillance System (NREVSS) and participating validated laboratories reporting results via electronic lab reporting (ELR) to DOH. Currently, 11 facilities are reporting data for the 2014-2015 season; nine reporting through NREVSS and two reporting through ELR.

Rhinovirus and respiratory syncytial virus (RSV) are circulating at this time. Rhinovirus and RSV activity has been elevated but has declined in recent weeks, similar to trends seen in previous years at this time. These viruses circulate annually in Florida and regularly fluctuate between weeks.



