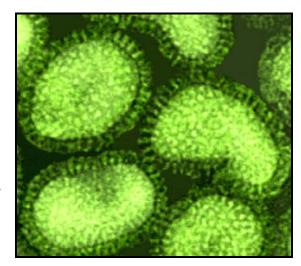
Florida Influenza Surveillance

Week Ending March 20, 2004 (Week 11)

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Summary

Florida influenza-like illness (ILI) activity increased slightly across the state for the week ending March 20, 2004. Seven counties reported having a high ILI% activity for week 11. However, not all sentinels have reported at the time that this summary was written (81% reporting as of March 29, 2004). Compared to data from the previous week, thirteen counties reported an increase in ILI activity for week 11, while six counties reported a decrease and eleven counties remained at a level activity. Five counties did not have at least 50% of the active sentinels reporting and therefore the change in ILI activity could not be determined. Of the thirty-five counties represented by the Florida Sentinel Physician Influenza Surveillance Network (FSPISN), eleven counties reported no influenza-like illness activity for the week ending March 20, 2004. The FSPISN providers reported seeing 17,144 total patients during week 11, of which, 274 patients were seen with influenza-like illness symptoms (1.60% statewide ILI activity). None of the five specimens tested at the state branch laboratories during week 11 tested positive for influenza. The influenza activity code for Florida was reported to the Centers for Disease Control and Prevention as "no activity" for the week ending March 20, 2004.

Across the nation, there were no reports of widespread or local ILI activity. Twenty-one states reported sporadic activity; and all other states, including Florida, reported no ILI activity for the week ending March 20, 2004. Mortality due to pneumonia and influenza (P&I) remained below the epidemic threshold for the week ending March 20, 2004. The percentage of patient visits seen with influenza-like illness to sentinel providers across the nation remained at 1.2% for week 11.

The number of human cases of avian influenza H5N1 appears to be stable in Vietnam and Thailand. The total number of human cases confirmed by the World Health Organization (WHO) is 34, of which, 24 have been fatal. Twenty-two of the cases have occurred in Vietnam with 15 fatalities and 12 cases in Thailand with 8 fatalities. The WHO continues to monitor the situation in Southeast Asia in collaboration with Member States. A fact sheet about the significance of avian influenza for human health along with all the previous situation updates can be found at the World Health Organization's website at: http://www.who.int

FSPISN Influenza-Like Illness (ILI) Summary

Seventy-one sentinels from 62 public clinics and private offices submitted reports for 30 counties during the week ending March 20, 2004 (Week 11). Counties with the highest percentage of patients with ILI were Palm Beach (2.42%, with 3 of 4 sentinel locations reporting); Pasco (2.94%,

with 1 of 1 reporting); Brevard (3.31%, with 3 of 4 reporting); Polk (3.49%, with 3 of 4 reporting); Wakulla (3.85%, with 1 of 1 reporting); Indian River (5.64%, with 3 of 3 reporting); and Bay (11.88%, with 1 of 1 reporting). Twelve 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 March 20, 2004 by county is listed in Table 1.

TABLE 1. INFLUENZA-LIKE ILLNESS REPORTING BY COUNTY FOR WEEK ENDING 03/20/04 (WEEK 00) Report Date: March 22, 2004										
		Active wi	thin the veeks	Reporting for Week 11		Participation	ILI % Reported Week 11	ILI% Reported Week 10	ILI% Reported Week 09	
County	Change	Active Sentinels	From Offices	Sentinels Reporting	From Offices	for Week 11	(Current)		(Updated)	
Alachua		-	-	-	-	0%	-	0.00%	0.07%	
Bay	Level	1	1	1	1	100%	11.88%	14.58%	0.00%	
Brevard	Increasing	4	4	3	3	75%	3.31%	1.75%	0.34%	
Broward	Increasing	6	6	5	5	83%	1.45%	0.29%	0.57%	
Charlotte	Decreasing	1	1	1	1	100%	0.00%	0.47%	0.00%	
Citrus	Level	1	1	1	1	100%	0.00%	0.00%	0.00%	
Collier		-	-	-	-	0%	-	-	0.00%	
Duval	Increasing	6	6	4	4	67%	0.29%	0.20%	1.54%	
Escambia		-	-	-	-	0%	-	14.00%	10.73%	
Hillsborough	Decreasing	4	4	3	3	75%	0.00%	0.11%	0.13%	
Indian River	Increasing	8	3	8	3	100%	5.64%	4.54%	4.72%	
Lake	Decreasing	2	2	2	2	100%	1.60%	2.31%	0.55%	
Lee	Increasing	2	2	1	1	50%	1.69%	0.00%	0.49%	
Leon	Decreasing	2	2	2	2	100%	0.45%	1.31%	0.38%	
Manatee	Level	1	1	1	1	100%	0.00%	0.00%	0.00%	
Marion	Level	1	1	1	1	100%	0.00%	0.00%	0.00%	
Martin	Increasing	1	1	1	1	100%	0.77%	0.00%	0.40%	
Miami-Dade	Increasing	6	5	5	5	83%	0.48%	0.36%	0.61%	
Monroe	Decreasing	1	1	1	1	100%	0.95%	2.63%	2.23%	
Okaloosa	Increasing	4	4	2	2	50%	0.86%	0.00%	0.56%	
Orange	Level	7	6	4	3	57%	0.88%	0.89%	1.45%	
Osceola	Level	1	1	1	1	100%	0.00%	0.00%	0.00%	
Palm Beach	Increasing	4	4	3	3	75%	2.42%	1.31%	2.04%	
Pasco	Increasing	1	1	1	1	100%	2.94%	1.79%	3.03%	
Pinellas	Increasing	6	6	5	5	83%	1.04%	0.13%	1.36%	
Polk	Increasing	7	4	6	3	86%	3.49%	2.47%	1.67%	
Putnam		2	2	-	-	0%	-	-	0.00%	
Santa Rosa	Decreasing	2	2	1	1	50%	0.00%	11.67%	18.79%	
Sarasota	Level	1	1	1	1	100%	0.00%	0.00%	0.00%	
Seminole	Increasing	2	2	1	1	50%	1.38%	0.80%	1.21%	
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	Level	3	3	3	3	100%	0.00%	0.00%	0.00%	
Wakulla	Level	1	1	1	1	100%	3.85%	3.94%	2.56%	
Walton		1	1	-	-	0%	-	-	0.00%	

State Laboratory Specimen Testing in Florida

None of the five specimens submitted to the Jacksonville Central and Tampa Branch laboratories during week 11 tested positive for influenza. From September 28, 2003 to March 20, 2004, the Florida laboratories tested a total of 736 specimens and found 238 positive for influenza A (H3N2), 100 that were influenza A of an unknown subtype, and one positive for influenza B. 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: March 22, 2004									
Number of previously reported positive specimens (positive specimens, Week 11) Type A - Type A - Type A - Type A - Unknown Type B									
	H3N2	H1N1	Unknown	Culture Pending	Type D				
Alachua	10		6						
Bay					1				
Brevard	1								
Broward	6			5					
Charlotte				1					
Citrus	5			3					
Collier	3								
Duval	30		10						
Hardee	1			1					
Hernando	1								
Hillsborough	14			6					
Indian River	34		17						
Lake	1								
Lee	2								
Leon	22		4						
Marion	1								
Martin	1								
Miami-Dade	16		14						
Monroe	2		1						
Okaloosa	6								
Orange	5		4	1					
Osceola	2		1						
Palm Beach	7			3					
Pasco	3								
Pinellas	10			3					
Polk	21			5					
Putnam	6		1	3					
Sarasota	9								
St Johns	10		4						
Taylor			1						
Volusia	8		4						
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: March 22, 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	1239	948	0	300	0			
Broward	7	6	0	1	0			
Clay	Unknown	Unknown	1	0	0			
Collier	Unknown	Unknown	362	0	0			

Hillsborough	Unknown	Unknown	3	41	1
Marion	2	1	1	0	0
Miami-Dade	294	180	91	0	0
Orange	24	16	15	0	0
Pinellas	3	1	2	67	0
Sarasota	Unknown	Unknown	79	80	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 Ending March 20, 2004

The proportion of patient visits to sentinel physicians for influenza-like illness (ILI) remains at 1.2% nationwide. This is below the national baseline of 2.5%. 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 three influenza A (H1) viruses, 727 influenza A (H3N2) viruses, and 27 influenza B viruses that were submitted by U.S. laboratories since October 1, 2003. Of the 727 influenza A (H3N2) isolates characterized, 106 (14.6%) were antigenically similar to the vaccine strain A/Panama/2007/99, and 621 (85.4%) were similar to the drift variant, A/Fujian/411/2002. Twenty-four of the influenza B viruses were similar to B/Sichuan/379/99 and three influenza B viruses were similar to B/Hong Kong/330/2001. Nine of the A/Fujian/411/2002 (H3N2)-like viruses came from Florida.

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

During week ending March 20, 2004, four (0.3%) of the 1,189 specimens tested at WHO and NREVSS laboratories were positive. Of these four positive specimens, one was an influenza A viruses that was not subtyped, and three were influenza A (H3N2) viruses. Since September 28, 2003, WHO and NREVSS laboratories tested 113,517 specimens for influenza viruses and found 24,108 positive specimens. Of the positive specimens, 176 were influenza B viruses, 6,816 were influenza A (H3N2), and two were A (H1) viruses. Weekly ratios reported by the nine regions are presented in Table 4.

TABLE 4. 2003-2004 SPECIMEN TESTING SUMMARY BY REGION Report Date: March 22, 2004								
Region	Total Specimens	A H1N1	A H3N2	A-Unk	В	Ratio Pos.	ILI Reporting Weighted ILI %	
New England	4,684	-	481	933	2	0.303	1.937	
Mid-Atlantic	12,363	-	324	1413	17	0.142	2.348	
East North Central	10,352	-	1057	678	8	0.168	3.255	
West North Central	12,598	-	904	1756	5	0.212	2.507	
South Atlantic	19,727	1	1311	3782	71	0.262	2.991	
East South Central	4,831	-	442	248	2	0.143	2.772	
West South Central	21,003	-	963	4145	19	0.244	5.421	
Mountain	13,315	-	650	2804	40	0.262	2.569	
Pacific	14,644	-	684	1355	12	0.14	3.291	

122 U.S. Cities Vital Statistics Mortality Report

The percentage of all deaths due to pneumonia and influenza was 7.2%. This percentage is below the epidemic threshold of 8.3% for the week ending March 20, 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)

EISS reports the influenza season in Europe has almost ended, with low levels of activity reported by all networks. Germany and Italy reported local activity, six networks reported sporadic activity and 15 networks reported no activity. Influenza A/Fujian/411/2002 (H3N2)-like viruses were the predominant virus circulating in Europe this season. For more information about the EISS, please visit the following website: http://dev.eiss.org/

World Health Organization (WHO) Communicable Disease Surveillance and Response

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

 Current Confirmed Human Cases of Avian Influenza A (H5N1) reports can be found at http://www.who.int/csr/disease/avian_influenza/country/en/

WHO Recommended Composition of Influenza Vaccine

WHO has recommended that the composition of influenza virus vaccines for use in the 2004-2005 northern hemisphere influenza season contain the following:

- ♦ An A/New Caledonia/20/99(H1N1)-like virus
- An A/Fujian/411/2002(H3N2)-like virus
- ♦ A B/Shanghai/361/2002-like virus

For more detailed information please see "Recommended composition of influenza virus vaccine for use in the 2004-2005 influenza season" in *The Weekly Epidemiological Record (WER)*, vol. 79. 9.

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.