Florida FLUREVIEW 2012-2013 season



Week 52: December 23 - 29, 2012



Summary

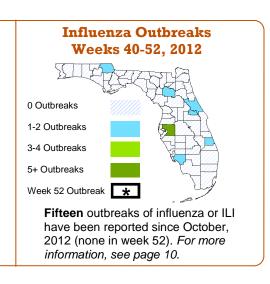
The Florida Department of Health (FDOH) uses many different surveillance systems to measure influenza activity. A summary of all these systems can be found at the top of page 2. **National:**

- According to CDC, influenza activity is increasing nationwide and is most elevated in the southern region of the country. Nationwide, influenza A H3N2 is the most commonly detected influenza subtype.
- There were no new cases of H3N2 influenza A (H3N2v) reported in week 52. No cases of H3N2v have been reported in Florida. More information on H3N2v is at: http://www.cdc.gov/flu/swineflu/influenza-variant-viruses-h3n2v.htm

State:

- Influenza-like illness (ILI) activity is increasing statewide
 - Currently, influenza and ILI activity is increasing in all regions of Florida, which is normal for this time of year.
 - Panhandle, Central, and South Florida regions are showing higher than expected ILI activity in emergency department (ED) visits for ILI, as monitored through ESSENCE-FL.
 - Twenty counties across all regions of Florida report moderate influenza activity in week 52.
 - Because of the statewide reports of increasing influenza and ILI activity, FDOH is reporting Widespread influenza activity to CDC for week 52.
 - The activity level refers to the geographic spread of influenza, not its severity or intensity.
- Influenza A is the most common flu type in Florida this season
 - The Bureau of Public Health Laboratories (BPHL) tests select influenza surveillance specimens, such as those from outbreak investigations and sentinel healthcare providers.
 - Of the tests that have been influenza positive, most have been positive for influenza A H3; the rest have been influenza B. These are both seasonal subtypes of influenza.
 - This is a change from previous weeks, when influenza B was more common.
 - Of the fifteen ILI outbreaks reported this season, seven have had confirmed influenza A
 infections.
 - In week 52, BPHL tested 57 specimens. Forty tested positive: six for influenza B, 19 for influenza A H3, 15 for influenza A (not yet subtyped).
- There were no influenza outbreaks reported in week 52.
- No pediatric influenza-associated mortality was reported in week 52.
 - Two pediatric influenza-associated mortalities have been reported in the 2012-2013 season.

No Report No Activity Mild Moderate Widespread Most counties report no or mild influenza activity. Twenty report moderate activity in week 52. For more information, see page 6.



January 3, 2013

Posted on the Bureau of Epidemiology website: http://www.doh.state.fl.us/floridaflu/

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Summary page 2

The Florida Department of Health (FDOH) monitors multiple surveillance systems such as the Electronic Surveillance System for the Early Notification of Community-based Epidemics (ESSENCE-FL), the Florida Pneumonia and Influenza Mortality Surveillance System (FPIMSS), notifiable disease reports (Merlin), EpiCom, and Florida ILINet in order to track influenza activity in the state. FDOH does not count individual cases of influenza, except in cases of novel influenza infection or pediatric influenza mortality.

TABLE 1: Summary of Florida Influenza-Like Illness (ILI) Activity for Week 52

Measure	Difference from previous week	Current week 52	Previous week 51	Page of Report
Overall statewide activity code reported to CDC	No Change	Widespread	Widespread	1
Percent of visits to ILINet providers for ILI	▲ 2.1	4.9%	2.8%	2
Percent of emergency department visits (from ESSENCE-FL) due to ILI	▲ 0.3	4.9%	4.6%	3
Percent of laboratory specimens that were positive for influenza	▲ 4.3	70.2%	65.9%	5
Number of counties reporting moderate influenza activity	▼ 1	14	15	6
Number of counties reporting widespread influenza activity	No Change	0	0	6
Number of counties reporting increasing influenza activity	▼ 6	38	32	7
Number of counties reporting decreasing influenza activity	▼ 1	3	2	7
Number of ILI outbreaks reported in EpiCom	▼ 8	0	8	10

ILINet Influenza-like Illness-Statewide

ILINet is a nationwide surveillance system composed of sentinel providers. Florida has 110 providers enrolled in ILINet who submit weekly ILI and total visit counts, as well as submitting ILI specimens to the Bureau of Public Health Laboratories (BPHL) for confirmatory testing. For this season, the Bureau of Epidemiology (BOE) has designated 16 of these ILINet physicians' offices as Super-Sentinels. These Super-Sentinels will receive more active follow-up from BOE and participating county health departments, with the goal of increasing data quality and surveillance specimen submission. Complete laboratory and visit data from Florida ILINet Super-Sentinels will be presented in the Florida Flu Review in future weeks.

FIGURE 1 shows the percentage of visits for ILI* reported by ILINet Sentinel Providers statewide.

ILI percent positive has increased in recent weeks and is similar to other non-pandemic seasons at this time.

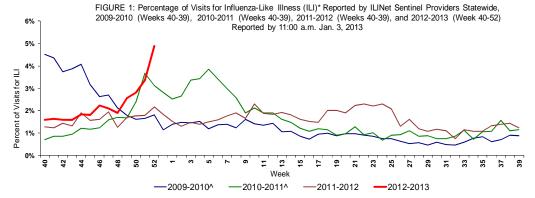
54 of 110 ILINet Sentinels reported visit counts as of 12:30 p.m., January 3, 2013.

5 of 14 ILINet Super-Sentinels reported visit counts as of 12:30 p.m., January 3, 2013.

Reports from ILINet sentinels decrease during the holidays. Data will change as more information is received.

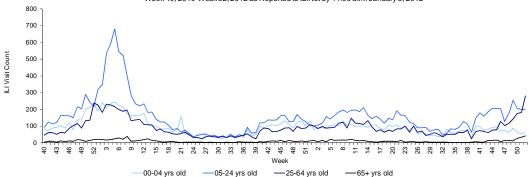
FIGURE 2 shows ILI visit counts reported by ILINet sentinel providers statewide by age group.

ILI visit counts are increasing in the 0-55+ age groups in week 52.



*ILI = Influenza-like illness, fever >100°F AND sor e throat and/or cough *in the absence* of another known cause. ^There is no week 53 during the 2009-2010, 2010-2011, and 2011-12 seasons; the week 53 data point for those seasons is an average of weeks 52 and 1.

FIGURE 2: Influenza-like Illness (ILI) Visit Counts Reported by ILINet Sentinel Providers Statewide by Age Group Week 40, 2010-Week 52, 2012 as Reported to ILINet by 11:00 a.m. January 3, 2012

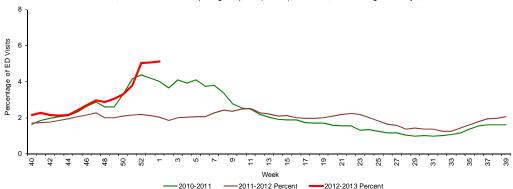


Florida uses ESSENCE-FL for syndromic surveillance, which currently collects data daily from 174 hospital emergency departments (ED). These data are processed into 11 different syndrome categories based on the patient's chief complaint. One of the categories is ILI, which is composed of chief complaints that include the words "influenza" or "flu," or complaints that contain fever plus cough or sore throat.

FIGURE 3 shows ESSENCE-FL data on ILI visits to EDs as a percentage of all ED Visits.

Overall activity for influenza-like illness reported in ESSENCE-FL is similar to levels seen during the 2010-2011 season.

FIGURE 3: Influenza-Like Illness Visits (by Chief Complaint) to Emergency Departments (ED) as a Percentage of All ED Visits, ESSENCE-FL Participating Hospitals (N=174), Week 40, 2010 through January 3, 2013

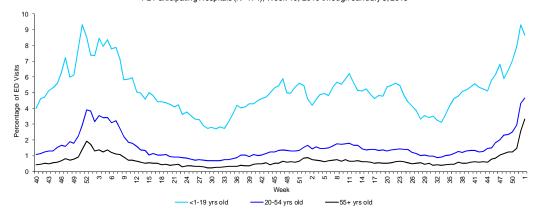


*There is no week 53 for the 2007-2008, 2009-2010, and 2010-2011 seasons; the week 53 data point for those seasons is an average of weeks 52 and 1.

FIGURE 4 shows percentage of ILI among all ED visits by age group.

Age-specific trends show that percent ILI in the 0 to 19 age group is decreasing and ILI in the 20-55+ age group is increasing for week 52.

FIGURE 4: Percentage of Influenza-Like Illness from Emergency Department (ED) Chief Complaints by Age, ESSENCE-FL Participating Hospitals (N=174), Week 40, 2010 through January 3, 2013



One hundred five ESSENCE-FL participating facilities are able to provide discharge disposition data for their ED visits going back to week 40, 2010. Using this information, the percent of ED visits for ILI that result in hospitalization can be calculated. The highest percentage of admissions is in the 55+ years old age group. The low number of visits in the 55+ age group causes variability in the ILI admission percentage from week to week.

FIGURE 5 shows the percentage of ED visits for ILI that resulted in hospitalization, by age group.

FIGURE 5: Percentage of ED Visits for ILI Resulting in Hospital Admission, Hospitals Reporting Discharge Disposition (N=105), Week 40, 2010 to Week 52, 2012

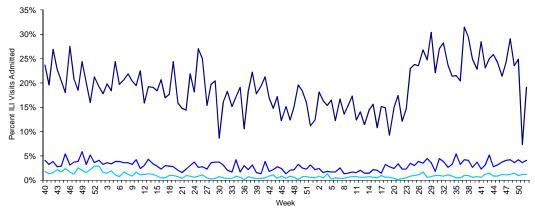


FIGURE 6 - FIGURE 12 describe ED chief complaint data from ESSENCE-FL by Regional Domestic Security Task Force (RDSTF).

ILI activity is trending upward in all regions of Florida. ILI activity in ESSENCE-FL is elevated in Regions 1, 2, 4, 5, 6, and 7.

Map 1: Hospitals Reporting Emergency Department (ED) Data to ESSENCE-FL, January 3, 2013 (N=174)

FIGURE 7: Percentage of Influenza-Like Illness from Emergency Department (ED) Chief Complaints, RDSTF Region 1 ESSENCE-FL Participating Hospitals (N=5), Week 40, 2009 through January 3, 2013

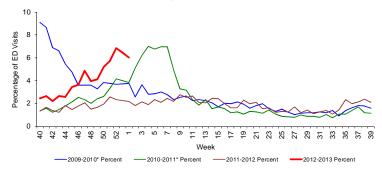


FIGURE 8: Percentage of Influenza-Like Illness from Emergency Department (ED) Chief Complaints, RDSTF Region 2 ESSENCE-FL Participating Hospitals (N=2), Week 40, 2009 through January 3, 2013

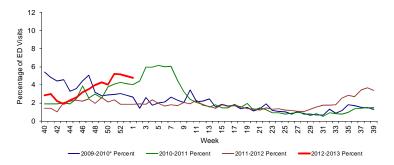


FIGURE 10: Percentage of Influenza-Like Illness from Emergency Department (ED) Chief Complaints, RDSTF Region 4 ESSENCE-FL Participating Hospitals (N=31), Week 40, 2009 through January 3, 2013

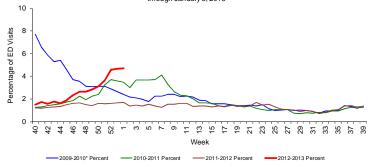
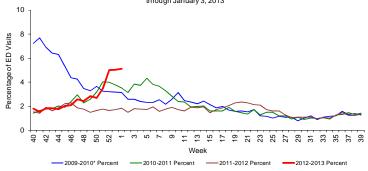


FIGURE 12: Percentage of Influenza-Like Illness from Emergengy Department (ED) Chief Complaints, RDSTF Region 6 ESSENCE-FL Participating Hospitals (N=15), Week 40, 2009 through January 3, 2013



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Region 2

Region 4

Region 4

Region 6

FIGURE 9: Percentage of Influenza-Like Illness from Emergency Department (ED) Chief Complaints, RDSTF Region 3 ESSENCE-FL Participating Hospitals (N=14), Week 40, 2009 through January 3, 2013

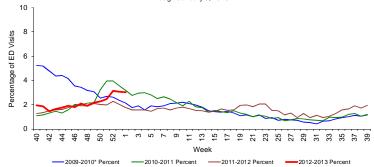


FIGURE 11: Percentage of Influenza-Like Illness from Emergency Department (ED) Chief Complaints, RDSTF Region 5 ESSENCE-FL Participating Hospitals (N=49), Week 40, 2009 through January 3, 2013

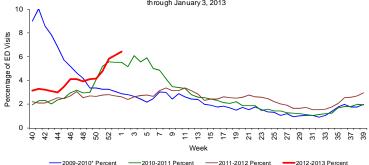
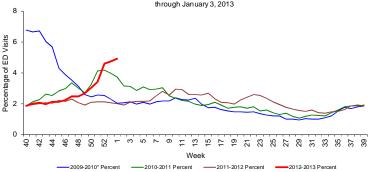


FIGURE 13: Percentage of Influenza-Like Illness from Emergency Department (ED) Chief Complaints, RDSTF Region 7 ESSENCE-FL Participating Hospitals (N=48), Week 40, 2009 through January 3, 2013



^{*}There is no week 53 for the 2009-2010, 2010-2011 and 2011-2012 seasons; the week 53 data point for those seasons is an average of weeks 52 and 1.

^{**}Historical data for region 2 is only available beginning week 1, 2009

TABLE 2 shows the number of specimens tested by BPHL, how many are influenza positive, and their subtypes.

viral surveillance data to track the progress of influenza infection over time. They include weekly information on how many specimens are tested by the BPHL, what proportion of those test positive for influenza, and what subtypes are found for the positive. influenza specimens.

Recent influenza specimens submitted to BPHL tested positive for influenza A H3, 2009 H1N1, and influenza B.

Influenza B was the most common strain type in the early weeks of the 2012-2013 influenza season. In recent weeks, influenza A H3 has been the most common strain detected by BPHL.

In addition to PCR testing, BPHL also uses culture testing for influenza specimens, including those positive for influenza B.

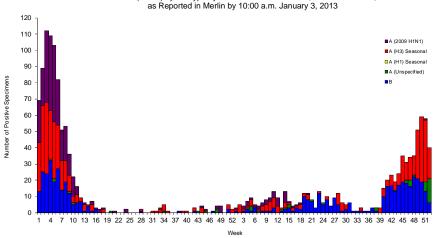
There are two distinct antigenic lineages of influenza B, known as Victoria and Yamagata. Both have circulated in Florida in the past year.

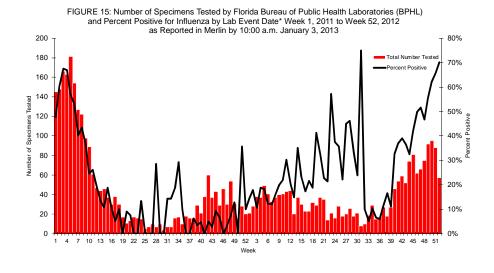
This season, 12 specimens have tested positive for influenza B, Victoria lineage and one specimen has tested positive for influenza B, Yamagata lineage. Last year's 2011-12 vaccine included a Victoria lineage virus, while this year's 2012-2013 vaccine includes a Yamagata lineage virus. Influenza viruses that circulate at the beginning of the flu season may be different than those that circulate later in the year. and these specimens represent a very small sample of statewide influenza activity. Not all flu positive specimens receive culture testing. FDOH will continue to monitor subtype and lineage for influenza viruses.

Table 2: Bureau of Public Health Laboratories (BPHL) Viral Surveillance for Week 52 by Lab Event Date* as reported by 10:00 a.m. January 3, 2013

	Current Week 52	Previous Week 51
Total Specimens Tested	57	88
Influenza Positive Specimens (% of total)	40 (65.2%)	58 (65.9%)
H1N1 Positive Specimens (% of influenza positives)	-	1 (1.7%)
H3 Influenza A	19 (47.5%)	38 (65.5%)
Influenza A Unspecified	15 (37.5%)	6 (10.3%)
Influenza B Unspecified	6 (15.0%)	13 (22.5%)







^{*}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

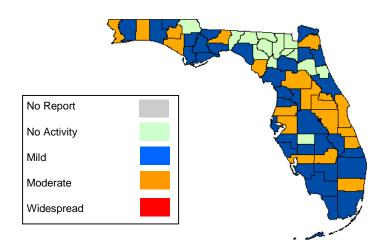
As of 12:00 p.m. January 3, 2013 a total of 67 (100%) counties had reported their weekly level of influenza activity. Please note that data reported by counties after the deadline Tuesday at 5 p.m. are recorded but may not be included in the activity map for previous weeks.

TABLE 3: Weekly County Influenza Activity for Week 52 (ending December 29, 2012) as Reported by 12:00 p.m. January 3, 2013

Activity Level	Week 51 Number of Counties	Week 52 Number of Counties	Week 52 Counties
No Report	-	-	
No Activity	16	14	Baker, Bradford, Columbia, Flagler, Gilchrist, Hamilton, Hardee, Jackson, Jefferson, Lafayette, Madison, Putnam, Suwannee, Union
Mild	36	33	Alachua, Calhoun, Citrus, Clay, Collier, Dade, Desoto, Franklin, Gadsden, Gulf, Hendry, Hernando, Highlands, Holmes, Lee, Levy, Liberty, Manatee, Martin, Monroe, Nassau, Okeechobee, Palm Beach, Pinellas, Polk, Santa Rosa, Sarasota, St. Johns, Sumter, Taylor, Volusia, Wakulla, Walton
Moderate	15	20	Bay, Brevard, Broward, Charlotte, Dixie, Duval, Escambia, Glades, Hillsborough, Indian River, Lake, Leon, Marion, Okaloosa, Orange, Osceola, Pasco, Seminole, St. Lucie, Washington
Widespread	-	-	-

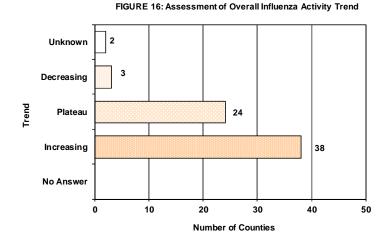
Map 2: Weekly County Influenza Activity for Week 52 as Reported by 12:00 p.m. January 3, 2013

Most counties report no or mild activity. Twenty counties report moderate activity.



County influenza activity data is reported to the BOE 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 16-25 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 week 52, three counties indicated that activity was decreasing, 24 indicated it was about the same as previous weeks, and 38 indicated that activity was increasing.

of the overall influenza activity trend in each county as reported by county health department flu coordinators for week 52 as of 12:00 p.m. January 3, 2013.



Definitions for the County Influenza Activity Trends are available at: http://www.doh.state.fl.us/disease_ctrl/epi/CountyInfluenzaTrendGuide.html

Counties are asked to evaluate influenza activity in certain settings within their county. Each setting has a scale for activity that ranges from none or minimal activity to very high activity. What defines each of the values varies by facility type, but the example of the assessment in elementary, middle, and high schools is included below. More detailed information on the meanings of the levels for each setting can be found on the webpage also included below.

No or very minimal activity -- Scattered cases of ILI with no increase in absenteeism or disruption of school activities.

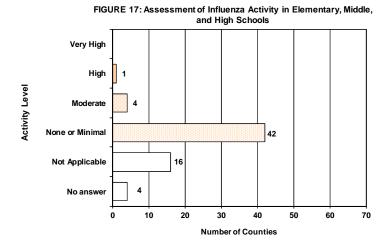
Moderate activity -- Absenteeism elevated above baseline (in range of 10 to 25%) in some but fewer than half of schools where it is known; occasional children sent home because of ILI.

High activity -- Absenteeism elevated above baseline (in range of 10 to 25%) in more than half of schools; most schools sending several or many children home each day because of ILI.

Very high activity -- Absenteeism high enough to force curtailment of some or all school activities.

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

FIGURE 17 - FIGURE 18 show the activity levels in various facilities by county as reported by county health department flu coordinators for week 52 as of 12:00 p.m. January 3, 2012.



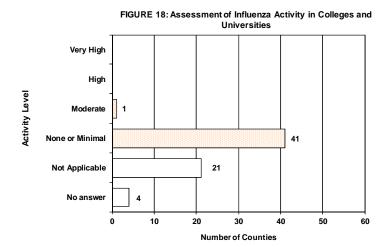
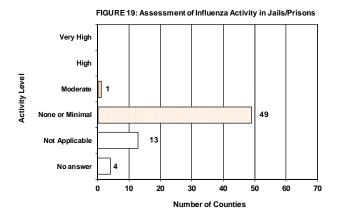
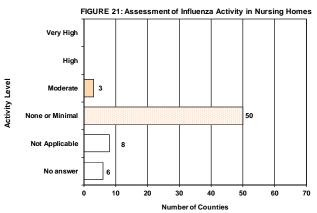
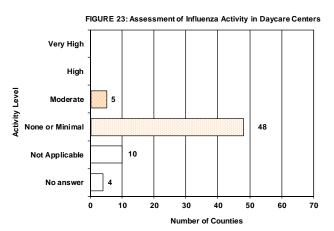
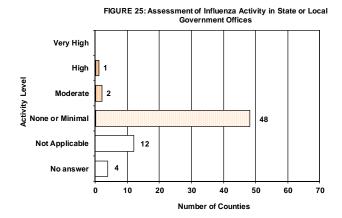


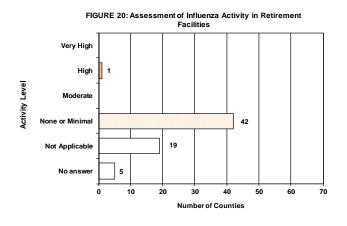
FIGURE 19 - FIGURE 25 show the activity levels in various facilities by county as reported by county health department flu coordinators for week 52 as of 12:00 p.m. January 3, 2012.

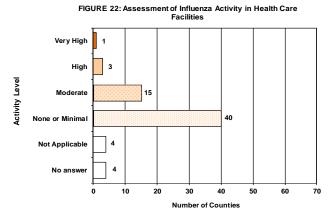


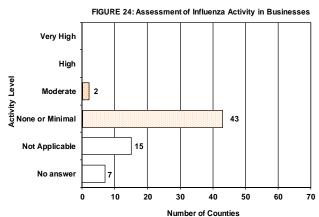












Over the past year, the FDOH Bureau of Vital Statistics and County Health Departments have been rolling out an electronic death record system for Florida. ESSENCE-FL now displays electronic death record data from all 67 Florida counties. For P&I surveillance, death record literals are queried in ESSENCE-FL using a free-text query that searches for references to pneumonia and influenza on death certificates. Any mention of pneumonia or influenza in the death certificate literals, with certain exceptions, is counted as a P&I death. Numbers may change as more data are received. The most recent data available are displayed here. ESSENCE-FL death records data are currently considered to be reliable through week 51, 2012.

FIGURE 26 shows the reported count of pneumonia and influenza deaths for all Florida counties, the number of deaths predicted using a multi-year regression model, and the upper bound of the 95% confidence interval for this prediction

For week 51 (ending December 22, 2012) there were:

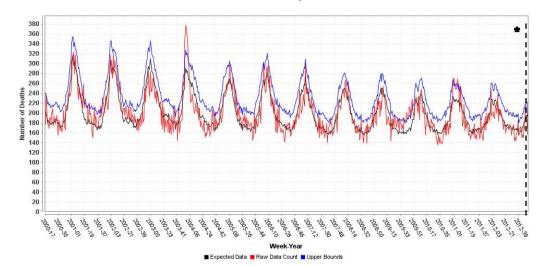
- •157deaths reported
- •Upper bound of 95% confidence interval for prediction: 194 deaths
- •NO excess deaths

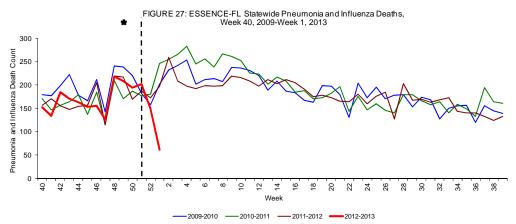
The majority of the deaths are in those aged 75 years and older.

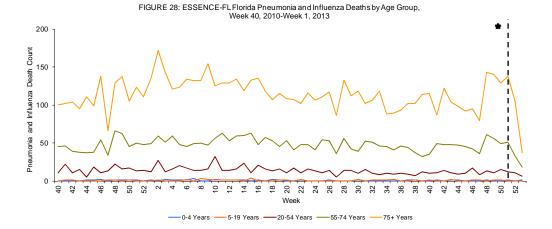
FIGURE 27 shows pneumonia and influenza deaths for all Florida counties, Week 40, 2010 - Week 1, 2013, as reported into ESSENCE-FL

FIGURE 28 shows pneumonia and influenza deaths for all Florida counties by age group, Week 40, 2010 - Week 1, 2013, as reported into ESSENCE-FL

Figure 26: Pneumonia and Influenza Deaths for all Florida Counties, Multi-Year Regression Model Week 1, 2009-Week 51, 2012, as reported into ESSENCE-FL







^{*} ESSENCE-FL death records data are currently considered to be reliable through week 51, 2012.

10 5

5 9

13 17 21

%RSV

25 29 33 37 41

%Parainfluenza

The National Respiratory and Enteric Virus Surveillance System (NREVSS) collects data from laboratories around the country on a weekly basis. NREVSS monitors temporal and geographic patterns of six common respiratory viruses. Twenty facilities reported in week 52.

FIGURE 29 shows the percentage of positive tests for multiple respiratory viruses reported by NREVSS-participating laboratories in Florida

The 6 respiratory viruses summarized in Figure 29 are:

- Respiratory Syncytial Virus (RSV)
- Parainfluenza 1-3
- Adenovirus
- Human Metapneumovirus (HMPV)
- Rhinovirus
- Influenza

50 2011 2012 45 40 35 30 30 25 30 15

45 49

Week

%Adenovirus

5 9

% HMPV

13 17 21 25 29 33 37

% Rhinovirus

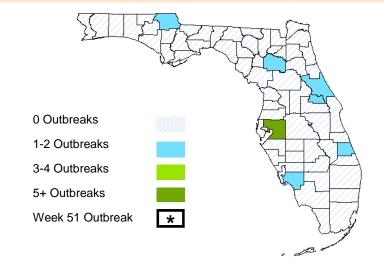
FIGURE 29: Percentage of Positive Respiratory Virus Tests as Collected by NREVSS, Florida, 2010-2012, as of January 3, 2013

Influenza and ILI Outbreaks

In week 52 there were no ILI outbreaks reported in EpiCom.

Fifteen influenza or ILI outbreaks have been reported into EpiCom in the 2012-2013 season.

Map 3: Weekly County Influenza Outbreak Activity for Week 52 as Reported by 11:00 a.m. January 3, 2013



Pediatric Influenza-Associated Mortality

In week 52 there were no influenza-associated pediatric deaths.

Two Influenza-associated pediatric deaths have been reported in Florida so far in the 2012-13 season.