Florida FLU REVIEW 2016-17 Season Week 2: January 8-14, 2017

Summary

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

- Influenza season is here. Florida reported widespread activity to the Centers of Disease Control and Prevention (CDC). This is up from regional activity in recent weeks.
- In week 2, influenza activity in Florida remained elevated overall. Increased influenza activity is expected for several weeks, with peak activity still ahead.
- Statewide, the percent of emergency department (ED) and urgent care center (UCC) visits for influenza-like illness (ILI) decreased slightly, however, the percent of ED and UCC visits for ILI among adults aged ≥65 remained similar to peak levels observed in the 2015-16 season.
- ILI activity among pregnant women increased and was slightly above levels observed in previous seasons at this time. Pregnant women are at higher risk for severe complications from influenza infection.
- Respiratory syncytial virus (RSV) activity in children <5 years old decreased, but remained above levels observed in the 2014-15 and 2013-14 seasons at this time (see page 12).
- In week 1, the preliminary estimated number of deaths due to pneumonia and influenza (P&I) increased and was similar to levels seen in previous seasons at this time.
- One influenza-associated pediatric death was reported. The child had underlying health conditions and no reported vaccination for the 2016-17 influenza season.
 - This is the second influenza-associated pediatric death reported so far this season in Florida. While rare, Florida receives reports of influenza-associated pediatric deaths each season.
 - Annual vaccination remains the best way to protect children against influenza infection. It is not too late to vaccinate children for the 2016-17 influenza season. If you have not gotten vaccinated yet, you should get vaccinated now.
- Eleven counties reported moderate influenza activity, 48 counties reported mild influenza activity, and eight counties reported no influenza activity.
- Twelve ILI or influenza outbreaks were reported. A total of 34 outbreaks of influenza or ILI have been reported so far this season.
- Since the start of the 2016-17 influenza season, the most common influenza subtype detected at the Bureau of Public Health Laboratories (BPHL) statewide has been influenza A (H3).

National influenza activity:

- In recent weeks, influenza and ILI activity remains elevated. In week 1, levels were above the national baseline for the fourth consecutive week. Twelve states reported widespread influenza activity. Florida and 20 states reported regional influenza activity in week 1.
 - While the timing and severity of influenza seasons vary and are unpredictable, influenza activity is expected continue for several more weeks.
- In recent weeks, influenza A (H3) has been the most common subtype reported to CDC by public health laboratories across the nation.
 - Seasons in which influenza A (H3) predominates have been associated with more severe illness, particularly in young children and adults ≥65 years old.
- In week 1, CDC reported the first three influenza-associated pediatric deaths of the 2016-17 season. One of these deaths occurred in a Florida resident.
- CDC recommends annual vaccination for everyone ≥6 months old. People who have not been vaccinated against influenza should get vaccinated as soon as possible.
- There is increased risk for highly pathogenic avian influenza (HPAI) H5 virus identification in birds during the fall and winter migratory season. HPAI H5 has not been identified in Florida birds and would be expected to be seen in more northerly states first, but identifications are possible. To date, only two wild ducks have tested positive for HPAI H5 since August 2016; one was identified in Alaska in August and the second was just identified in Montana. No human HPAI infections have been identified in Florida or other states.
 - To learn more about HPAI, please visit: www.floridahealth.gov/novelflu.

Weekly State Influenza Activity



For more information see

page 2 🕨

Predominately Circulating Strain



Influenza and ILI Outbreaks Reported as of 1/14/2017



For more information see page 5 🕨

County Influenza Activity



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Contributors: Heather Rubino, PhD; Julia Munroe, MS; Brandon Ramsey, MS; Mwedu Mtenga, MPH; Lea Heberlein-Larson, MPH; Valerie Mock, BS; Marshall Cone, MS; Pam Colarusso, MSH; Janet Hamilton, MPH, Leah Eisenstein, MPH.



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Weekly State Influenza Activity Reporting

Below is the state influenza activity level reported to CDC each week since the 2012-13 influenza season. Florida reported widespread influenza activity for week 2.



Influenza activity in Florida can vary widely from season to season. This unpredictability underscores the importance of influenza surveillance in Florida.

Influenza surveillance goals:

- Influenza surveillance is conducted to detect changes in the influenza virus. These data are used to help determine the annual national vaccine composition and to prepare for potential epidemics or pandemics.
- Surveillance is also conducted to identify unusually severe presentations of influenza infection, detect outbreaks, and determine seasonal influenza trends in order to guide influenza prevention, particularly in high-risk populations like children, adults ≥65 years old, and pregnant women.
- See the back page of this report for more information on influenza surveillance systems used in Florida: page 14

Statewide ILI Visits

Influenza-like illness (ILI) is defined as a fever ≥100°F AND sore throat and/or cough in the absence of another known cause.



Figure 1 shows the percent of visits for ILI from ED and UCC chief complaint data for ESSENCE-FL participating facilities (n=285), week 40, 2013 to week 2, 2017.

In week 2, the percent of visits to EDs and UCCs for ILI decreased and was similar to levels seen in previous seasons at this time.

2013-14

Statewide ILI Outpatient Visits and P&I Deaths

2016-17

2013-14

Visits for ILI to Outpatient Providers by Flu Season ILI = influenza-like illness

Figure 2 shows the percent of visits for ILI reported by ILINet outpatient providers statewide (n=39), week 40, 2013 to week 2, 2017.

In week 2, the percent of visits for ILI reported by ILINet outpatient providers increased and was similar to levels seen in previous seasons at this time.



2014-15



40 42 44 46 48 50 52 1 3 5 7 9 11 13 15 17 19 21 23 25 27 29 31 33 35 37 39

Week

Figure 3 shows P&I deaths* for all Florida counties from the Bureau of Vital Statistics, as reported into ESSENCE-FL, week 40, 2013 to week 1, 2017.

As of week 1 (ending January 7, 2017), 2,988 P&I deaths have been reported in the 2016-17 influenza season.

The preliminary number of P&I deaths increased and was similar to levels seen in previous seasons at this time.

P&I Deaths*, Multi-Year Regression Model P&I = pneumonia and influenza

Figure 4 shows the number of preliminary estimated P&I 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 1 (ending January 7, 2017), 242 preliminary estimated P&I deaths were reported.

0

The upper bound of the 95% confidence interval for prediction is 269 deaths, with no excess deaths.



* Current season P&I death counts are preliminary estimates, and may change as more data are received. The most recent data available are displayed here. Vital statistics death records received in ESSENCE-FL are considered to be complete through week 1, 2017.

2015-16

County Influenza and ILI Activity Maps

County influenza activity data are reported by county health departments through EpiGateway on a weekly basis. Information is used to determine county activity and includes laboratory results, outbreak reports, and ILI activity. The figures below reflect a county health department's assessment of influenza activity within their county. For week 2, 30 counties reported increasing activity, 33 counties reported activity at a plateau, and four counties reported decreasing activity.



As of 9:30 a.m. January 18, 2017, a total of 67 (100%) counties reported their weekly level of influenza activity. Please note that data reported after the deadline Tuesday at 5 p.m. are recorded but may not be included in the activity maps for this week.

Influenza-Associated Pediatric Deaths



ILI Activity and Outbreaks by Setting

Reported Influenza and ILI Outbreaks ILI = influenza-like illness

Map 3 shows influenza and ILI outbreaks by county for week 40, 2016 through week 2, 2017.

In week 2, 12 outbreaks were reported into EpiCom or Merlin: one influenza A (H3), 6 influenza A unsubtyped, one respiratory syncytial virus (RSV), and four of currently unknown etiology. All 12 outbreaks were reported in facilities serving adults ≥65 years old, such as nursing homes and long-term care facilities. Thirty-four outbreaks of influenza or ILI have been reported into EpiCom or Merlin so far this season.

In previous seasons, outbreaks were reported in facilities serving children, such as schools and day cares, ahead of facilities serving adults ≥65 years old. Outbreaks in facilities serving children have historically made up 30.6%-42.9% of the total number of outbreaks reported at this point in the influenza season. As of week 2, three (8.8%) of the 34 outbreaks reported thus far this season occurred in facilities serving children.

For more information on influenza and ILI outbreaks reported in week 2, see page 6.



Tab	le 1: S	ummary	of Flor	ida Influei	nza and ILI	Outbrea	iks by S	etting, We	ek 40 thro	ugh Week 2, 20	17
Setting	Total	A (H3)	A 2009 (H1N1)	A Unsubtyped	A & B Unsubtyped	B Yamagata	B Victoria	B Unsubtyped	Influenza Unspecified	Other respiratory viruses	Currently unknown pathogen
Schools	-	-	-	-	-	-	-	-	-	-	-
Daycares	3	-	-	-	-	1	-	-	-	-	2
Jails & prisons	-	-	-	-	-	-	-	-	-	-	-
Mental health facilities	1	-	-	-	-	-	-	-	-	-	1
Nursing homes & long-term care facilities	30	2	-	13	-	1	-	1	1	2-RSV	10
Health care facilities	-	-	-	-	-	-	-	-	-	-	-
Other	-	-	-	-	-	-	-	-		-	-
Total	34	2	0	13	0	2	0	1	1	2	13



Figure 8 shows the distribution of outbreaks by facility type and season.

In week 2, 12 outbreaks of influenza or ILI were reported in facilities serving adults ≥65 years old.

Seasons in which influenza A (H3) predominates have been associated with more severe illness, particularly adults ≥65 years old. As such, it is expected that outbreaks will occur in long-term care facilities and nursing homes.

Reported Influenza and ILI Outbreaks

ILI = influenza-like illness

In week 2, 12 outbreaks were reported into EpiCom or Merlin. Thirty-four outbreaks of influenza or ILI have been reported into EpiCom or Merlin so far this season.

Sarasota County:

• A short-term rehabilitation facility reported 15 residents and two staff members with ILI. Two ill individuals tested positive for influenza A by rapid antigen testing at the facility. Specimens have been requested for testing at BPHL. Vaccination status for ill individuals for the 2016-17 influenza season is unknown. Infection control measures were reviewed with facility leadership. This investigation is ongoing.

Pinellas County:

- A nursing home reported two staff members with ILI. Both ill individuals tested positive for influenza A by rapid antigen testing at a local urgent care center. No specimens were available for testing at BPHL. Vaccination status for ill individuals for the 2016-17 influenza seasons is unknown. Infection control measures were reviewed with facility leadership. This investigation is closed.
- A nursing home reported seven staff members with ILI. The etiology of this outbreak is currently unknown. Vaccination status for ill individuals for the 2016-17 influenza season is unknown. Infection control measures were reviewed with facility leadership. This investigation is ongoing.
- A long-term care facility reported seven residents with ILI. Four individuals were positive for influenza A by rapid antigen testing at the long-term care facility. Specimens have been requested for testing at BPHL. Vaccination status for ill individuals for the 2016-17 influenza season is unknown. Infection control measures were reviewed with facility leadership. This investigation is ongoing.
- A skilled nursing facility reported five residents with ILI. Four ill residents were hospitalized. Specimens have been requested for testing at BPHL. Vaccination status for ill individuals for the 2016-17 season is unknown. Infection control measures were reviewed with facility leadership. This investigation is ongoing.

Miami-Dade County:

• A nursing and rehabilitation facility reported nine residents and eight staff members with ILI. Three specimens were collected from ill individuals and were positive for influenza A (H3). Vaccination status for ill individuals for the 2016-17 season is unknown. Infection control measures were reviewed with facility leadership. This investigation is closed.

Polk County:

- A long-term care facility reported four residents with ILI. All four residents were hospitalized and one resident expired. Two residents tested positive for influenza A by rapid antigen testing at the long-term care facility and two residents tested positive for influenza A by PCR at the hospital. Two specimens were collected for testing at BPHL. Those results are pending. Of the four ill residents, two were vaccinated for the 2016-17 influenza season. Infection control measures were reviewed with facility leadership. This investigation is ongoing.
- A long-term care facility reported four residents with ILI. All four residents were hospitalized and one resident expired. Specimens collected from all three individuals were positive for RSV by PCR at BPHL. Infection control measures were reviewed with facility leadership. This investigation is ongoing.
- A skilled nursing facility reported three residents with ILI. Three residents were hospitalized and one resident expired. All three residents were positive for influenza A at the hospital. Three specimens were collected for testing at BPHL. Those results are pending. The facility reported that 94% of residents and 100% of staff members were vaccinated for the 2016-17 influenza season. Infection control measures were reviewed with facility leadership and implemented. This investigation is ongoing.

Broward County:

• A nursing home reported 31 residents 18 staff members with ILI. Five ill individuals were hospitalized. Three ill individuals tested positive for influenza A by rapid antigen testing at the facility. Three specimens were collected for testing at BPHL and were positive for influenza A. Subtype results are pending. It is unknown if ill individuals were vaccinated for the 2016-17 influenza season. Infection control measures were reviewed with facility leadership. This investigation is ongoing.

Hillsborough County:

• A nursing home reported four individuals who had been diagnosed with upper respiratory infections. No specimens were available for testing at BPHL. All ill individuals were vaccinated for the 2017-16 influenza season. Infection control measures were reviewed with facility leadership. This investigation is closed.

Manatee County:

• A memory care facility reported 11 individuals with ILI. Specimens were collected for testing at BPHL. Those results are pending. Vaccination status for ill individuals for the 2016-17 influenza season is currently unknown. Infection control measures were reviewed with facility leadership. This investigation is ongoing.

Laboratory Surveillance

2013-14



2014-15

Figures 9 and 10 use BPHL viral surveillance data.

Figure 9 shows the number of influenzapositive specimens tested by subtype and lab event date.*

In recent weeks, the most common influenza subtype detected at BPHL statewide has been influenza A (H3). Seasons in which A (H3) viruses predominate have been associated with more severe illness in young children and adults ≥65 years old.

Figure 10 shows the number of specimens tested by BPHL and the percent that were positive for influenza by lab event date*.

In week 2, the number of specimens tested for influenza decreased and was below levels observed in previous seasons at this time. The percent of specimens testing positive for influenza increased and was similar to levels observed in previous seasons at this time.

Table 2: Bureau of Public Health Laboratories (BPHL) Viral Surveillance by Lab Event Date* Reported by 10:00 a.m. January 18, 2017

2016-17

Influenza Type	Current Week 2	Previous Week 1	Current 2016-17 Season
Total Specimens Tested	19	43	620
Influenza positive specimens (% of total specimen tested)	10 (52.6%)	21 (48.8%)	211 (34.0%)
Influenza A 2009 (H1N1) (% of influenza positives)	-		5 (2.4%)
Influenza A (H3) (% of influenza positives)	10 (100.0%)	15 (71.4%)	143 (67.8%)
Influenza A not yet subtyped (% of influenza positives)	-	2 (9.5%)	5 (2.4%)
Influenza A inconclusive** (% of influenza positives)	-	-	1 (0.5%)
Influenza B Yamagata (% of influenza positives)	-	2 (9.5%)	30 (14.2%)
Influenza B Victoria (% of influenza positives)	-	2 (9.5%)	24 (11.4%)
Influenza B not yet subtyped (% of influenza positives)	-	-	3 (1.4%)

*"Lab event date" is defined as the earliest of the following dates associated with influenza testing at the laboratory: date specimen collected, date received by the laboratory, date reported or date inserted.

**Influenza A inconclusive test results are due to technical difficulties including an insufficient sample for testing or internal sample control failure and occur occasionally in routine laboratory testing.

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: www.floridahealth.gov/diseases-and-conditions/influenza/ documents/flulabreportguide.pdf

Regional ILI Visits

ED and UCC Visits for ILI by Region

ED = emergency department, UCC = urgent care center, ILI = influenza-like illness

Figures 11-17 show the percent of visits for ILI from ED and UCC chief complaints for ESSENCE-FL participating facilities (n=285), by ESSENCE-FL Regional Domestic Security Task Force (RDSTF) regions (see map 4) from week 40, 2013 to week 2, 2017*. **In week 2, the percent of ED and UCC**

visits for ILI was similar to levels seen in previous seasons in all regions at this time. ILI activity increased in region 1 and decreased in all other regions. In region 1, ILI activity was at peak levels observed in the 2015-16 season. ILI activity levels were highest in regions 1 and 7.



Age Groups: ILI Visits and P&I Deaths

5 to 24 years old



Page **9**

≥65 years old

ED and UCC Visits for ILI by Age Group ED = emergency department, UCC = urgent care center, ILI = influenza-like illness Figure 18 shows the percent Figure 18 of visits for ILI from ED and 12 UCC chief complaints by age 2013-14 2014-15 2015-16 2016-17 group for ESSENCE-FL 10 Percent of ED Visits participating facilities (n=285), 8 week 40, 2013 to week 2, 2017. 6 In week 2, ED and UCC visits 4 for ILI decreased in all age groups. Levels were similar to 2 those observed in previous seasons at this time in 0 7 13 19 25 31 37 43 49 3 46 52 6 12 18 24 30 36 42 48 9 15 21 27 33 39 45 51 40 1 younger age groups. Week

Visits to Outpatient Providers for ILI by Age Group* ILI = influenza-like illness Figure 19 350 2014-15 2013-14 2015-16 2016-17 300 Number of ILI Visits 250 200 150 100 50 0 12 18 24 30 36 42 48 7 13 19 25 31 37 43 49 3 9 15 21 27 33 39 40 46 52 6 1 45 51 Week

Figure 19 shows the number of visits for ILI reported by ILINet outpatient providers statewide (n=39) by age group, week 40, 2013 to week 2, 2017.

In week 2, the number of visits for ILI increased in the 5-24 age group and decreased in all other age groups. Levels were similar to or below those seen in previous seasons at this time in all age groups.

*Data presented here are counts, not proportions. This is because age group denominator data is not available through ILINet.



*Current season P&I death numbers are preliminary estimates, and may change as more data are received. The most recent data available are displayed here. Vital statistics death records received in ESSENCE-FL are currently considered to be complete through week 1, 2017.

At-Risk Populations: ILI Visits

ESSENCE-FL collects data daily from 285 EDs and UCCs. 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," "cough," and/or "sore throat." The Florida Department of Health uses ED and UCC chief complaint data to monitor influenza and ILI activity in a timely manner in groups at higher risk of severe health outcomes (such as hospitalization and death) from influenza infection. These at-risk groups include pregnant women, children ≤18 years old, and adults ≥65 years old.



ED and UCC Visits for ILI by Children ≤18 Years Old ED = emergency department, UCC = urgent care center, ILI = influenza-like illness



Figure 22 shows the percent of ILI visits among all ED and UCC visits for children ≤18 years old, as reported into ESSSENCE-FL, week 40, 2013 to week 2, 2017.

In week 2, the percent of ILI visits among all ED and UCC visits for children ≤18 years old decreased and was similar to levels seen in previous seasons at this time.

ED and UCC Visits for ILI by Adults ≥65 Years Old ED = emergency department, UCC = urgent care center, ILI = influenza-like illness

Figure 23 shows the percent of ILI visits among all ED and UCC visits for adults ≥65 years old, as reported into ESSSENCE -FL, week 40, 2013 to week 2, 2017.

In week 2, the percent of ILI visits among all ED and UCC visits for adults ≥65 years old decreased, but remained similar to peak levels observed in the 2015-16 season. Activity was above peak levels observed in the 2013-14 season. Seasons where influenza A (H3) predominates have been associated with more severe illness, particularly in adults ≥65 years old.



ILI Activity by Population and Setting Type

ILI Activity by Setting Type ILI = influenza-like illness

County health departments are asked to evaluate influenza activity in certain settings within their county. The assessment scale for activity ranges from no or minimal activity to very high activity.

Figure 24 shows the results of the influenza activity assessment for week 2, 2017.

Counties that reported "not applicable" for the listed settings are excluded from the denominator in the calculations below.

- ILI Activity Levels:
- No or very minimal activity
- Moderate activity
- High activity
- Very high activity



Settings for Children <18 Years Old

In elementary schools, 54 counties (81.8%) reported no or minimal influenza or ILI activity. Two counties (3.0%) reported moderate influenza or ILI activity. One county (1.5%) reported high influenza or ILI activity.

In daycare settings, 51 counties (85.0%) reported no or minimal influenza or ILI activity.

Settings for Adults >65 Years Old

In nursing homes, 51 counties (79.7%) reported no or minimal influenza or ILI activity. Two counties (3.1%) reported moderate influenza or ILI activity. One county (1.6%) reported high influenza or ILI activity.

In retirement homes, 43 counties (76.8%) reported no or minimal influenza or ILI activity. One county (1.8%) reported moderate influenza or ILI activity.

Settings for Adults 18 to 65 Years Old

In colleges, 36 of 46 counties (76.8%) reported no or minimal influenza or ILI activity. One county (1.8%) reported moderate influenza or ILI activity.

In businesses, 42 counties (79.2%) reported no or minimal influenza or ILI activity. One county (1.9%) reported moderate influenza or ILI activity.

In government offices, 47 counties (82.5%) reported no or minimal influenza or ILI activity.

Other Unique Settings

In jails and prisons, 52 counties (83.9%) reported no or minimal influenza or ILI activity. One county (1.6%) reported moderate influenza or ILI activity.

In health care settings, including rehabilitation facilities and mental health facilities, 46 counties (70.8%) reported no or minimal influenza or ILI activity. Nine counties (13.8%) reported moderate influenza or ILI activity. One county (1.5%) reported high influenza or ILI activity.

Respiratory Syncytial Virus Surveillance

RSV Activity Summary and Seasonality

RSV = respiratory syncytial virus

RSV activity:

- In week 2, the percent of children <5 years old diagnosed with RSV at EDs and UCCs decreased, but remained above levels observed in the 2014-15 and 2013-14 seasons. Currently, all regions are still considered to be in RSV season.
- The percent of specimens testing positive for RSV decreased and was below levels observed in previous seasons at this time.
- To learn more about RSV in Florida, please visit: http://www.floridahealth.gov/rsv.

RSV Seasonality:

- RSV activity in Florida typically peaks in November through January, though activity can vary dramatically by region. According to CDC, the start of RSV season is marked by the first two consecutive weeks during which the average percentage of specimens testing positive for RSV is ≥10%.
- Florida has established regular RSV seasons based on these thresholds.
- Florida's RSV season is longer than the rest of the nation and has distinct regional seasonality. For more information on RSV seasonality in Florida, see the American Academy of Pediatrics' 2015 Red Book.



RSV surveillance goals:

- A statewide RSV surveillance system was implemented in Florida to support clinical decision-making for prophylaxis of premature infants. The determination of unique seasonal and geographic trends of RSV activity has important implications as it relates to prescribing patterns for initiating prophylaxis to children at high risk for RSV infection.
- See the back page of this report for more information on RSV surveillance systems used in Florida: page 14 🕨

ED and UCC Visits for RSV by Children <5 Years Old

ED = emergency department, UCC = urgent care center, RSV = respiratory syncytial virus



Figure 25 shows the percent of visits to EDs and UCCs with discharge diagnoses that include RSV or RSV-associated illness, as reported by participating ESSSENCE-FL facilities (n=285), week 30, 2013 to week 2, 2017.

In week 2, the percent of children presenting to participating EDs and UCCs for care with RSV decreased. Levels remained above those seen in the 2014-15 and 2013-14 seasons.



Laboratory RSV Surveillance RSV = respiratory syncytial virus

Figure 26 shows the percent of laboratory results testing positive for RSV, as reported by hospital laboratories (n=11), week 40, 2013 to week 2, 2017.

In week 2, the percent of specimens testing positive for RSV decreased and was below levels observed in previous seasons at this time.





Other Respiratory Virus Surveillance

Statewide activity:

- In week 2, the percent of specimens testing positive for influenza decreased slightly, but remained above levels observed in previous seasons at this time. The percent of specimens testing positive for influenza was higher than other respiratory viruses under surveillance.
- The percent of specimens testing positive for RSV decreased and was below levels observed in previous seasons at this time.
- The percent of specimens testing positive for rhinovirus increased and was above levels observed in the 2014-15 and 2013-14 seasons at this time. Levels were below those observed in the 2015-16 season at this time.

Enterovirus D68 (EV-D68) activity:

- In week 2, no new cases of EV-D68 were identified in Florida.
- Eight cases of EV-D68 have been identified in Florida since February 2016. These eight cases were identified in different regions of the state and represent the full spectrum of disease. These are the first identifications of EV-D68 in the United States since the fall of 2014.
- Six of these cases were identified as a result of Florida's participation in the Acute Respiratory Infection Epidemiology and Surveillance Program (ARIES).
- To learn more about EV-D68, please visit: http://www.floridahealth.gov/diseases-and-conditions/d68.

Outbreaks:

• In week 2, one outbreak of RSV was reported in a Polk County long-term care facility.

Laboratory Viral Respiratory Surveillance

Figure 27 shows the percent of laboratory results testing positive for eight common respiratory viruses, as reported by hospital laboratories (n=11), week 40, 2013 to week 2, 2017.

In recent weeks, the percent of specimens testing positive for influenza increased and was higher than other respiratory viruses under surveillance.







Figure 28 shows the number of specimens testing positive for 12 common respiratory viruses, as reported by BPHL and ARIES outpatient providers statewide (n=6), week 40, 2015 to week 1, 2017.

None of the specimens submitted by ARIES providers in week 1 (ending January 7, 2017) have tested positive by extended respiratory panel thus far.



*Data presented here are counts, not proportions. The most recent data available are displayed here. ARIES laboratory data are currently considered to be complete through week 1, 2017. Laboratory results for specimens that have not yet been tested in full will be included in future reports.

Non-Influenza ARIES Laboratory Outpatient Surveillance* ARIES = Acute Respiratory Infection Epidemiology and Surveillance Program