

Current Situation

The proportion of patient visits to sentinel providers for influenza-like illness (ILI) during the week ending February 11th was 1.2% (weighted average). Nationally, 2.5% of patient visits to sentinel providers were for ILI, which is slightly above the national baseline. Criteria for inclusion as a case of ILI are fever of 100°F and cough or sore throat.

The proportion of mortality due to pneumonia and influenza (P&I) in Clark County was 6.1% for the week ending February 11th (week 6). The national P&I mortality was 7.0% for week 4, with the national threshold for influenza outbreaks being 8.3%.

Nationally, 97% of all isolates tested were influenza A, with over 99% of the influenza A isolates being subtyped as H3N2. Of the 149 A(H3N2) isolates characterized by the Centers for Disease Control and Prevention (CDC), 123 were characterized as A/California/07/2004-like, which is a component of this year's vaccine. Twenty-six of the A(H3N2) isolates characterized showed reduced titers with antisera produced against A/California/07/2004. Two of 31 influenza B isolates has been characterized as being similar to B/Shanghai/361/2002, a component of this year's vaccine, and 17 were characterized as being similar to B/Florida/07/2004, which is a minor antigenic variant of the Shanghai strain. Twelve influenza B viruses were identified as belonging to the B/Victoria lineage, which is not a component of this year's vaccine.

The majority of rapid tests performed in Clark County are of a type that cannot distinguish influenza A from influenza B. Thirty-six cultures from Clark County submitted for testing have been subtyped as H3N2.

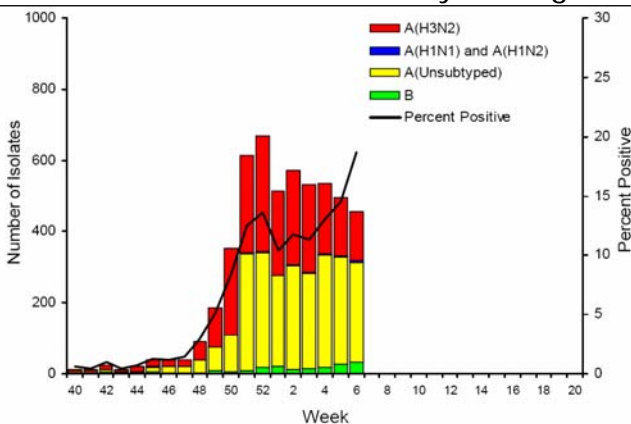
Analysis

Flu activity continues to decrease in western states, with the majority of western states reporting local influenza activity. Flu activity has been increasing throughout the rest of the country over the past month, with the majority of states along the Atlantic coast reporting widespread activity. The level of activity refers to the geographic distribution of influenza activity and not the severity of the activity. Although widespread geographical activity is being reported in a number of states, the number of patients seeking medical care for influenza-like illness is only slightly above baseline throughout the country, as it has been since mid-January.

In Clark County, the 2005-2006 influenza season has been mild in comparison to past seasons. Influenza continues to circulate in the community, but at low levels. It is not possible to predict if this pattern will continue throughout the rest of the influenza season.

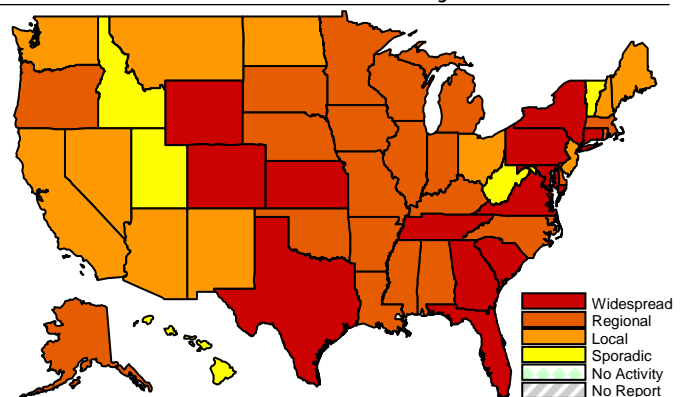
The Food and Drug Administration Vaccines and Related Biological Products Advisory Committee met on February 17th to determine the composition of the vaccine for the 2006-2007 season. The results of that meeting were not available at the time this newsletter was written, but will be included in a future weekly influenza surveillance update.

Chart 1. National Laboratory Testing



Source: World Health Organization And National Respiratory and Enteric Virus Surveillance System Collaborating Laboratories

Chart 2. National Flu Activity—Week 6



Source: Centers for Disease Control and Prevention: www.cdc.gov/flu