

## Weekly Influenza Surveillance Update

December 23, 2005

### Current Situation

Community-wide increases in influenza-like activity were identified during the week of December 18<sup>th</sup> through multiple surveillance systems. The number of people visiting health care providers has increased, as have calls for emergency medical services. Positive rapid influenza tests also continue to be reported, although reported numbers remain low.

The proportion of patient visits to sentinel providers for influenza-like illness (ILI) during the week ending December 17<sup>th</sup> was 2.4% (weighted average). Nationally, 2.4% of patient visits to sentinel providers were for ILI, which is above the national baseline. Criteria for inclusion as a case of ILI are fever of 100°F and cough or sore throat.

During week 50 the proportion of mortality due to pneumonia and influenza (P&I) in Clark County was 6.7%, nearly half the previous weeks percentage of 12%. The national P&I mortality was 6.7%, with the national threshold for influenza outbreaks being 7.7% for week 50.

Laboratory testing has identified influenza A in the majority of isolates, both nationally and in Western states. Twenty-one of 23 A(H3N2) viruses characterized by the Centers for Disease Control and Prevention were characterized as A/California/07/2004-like, which is a component of this year's vaccine. Two of three influenza B isolates have been characterized as being similar to B/Shanghai/361/2002, which is also a component of this year's vaccine.

### Analysis

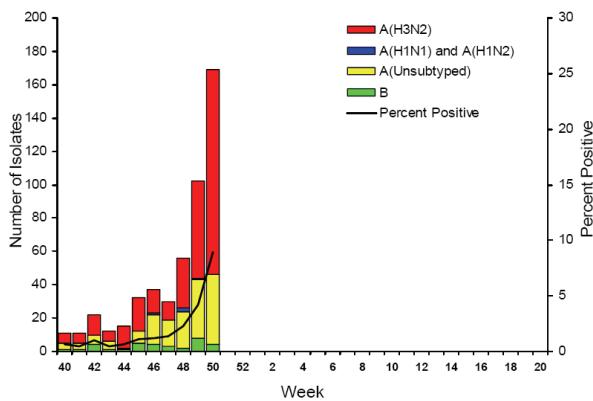
The current pattern of influenza seen in Clark County is typical for this time of year. More people are presenting to local emergency rooms with complaints of flu-like symptoms, and calls to 911 with respiratory complaints are on the rise. Recent increased activity indicates that flu season has begun in Clark County.

Although it is impossible to predict the changes in the influenza season, the 2005-2006 season has been very similar to the 2004-2005 season. Last season, community-wide influenza activity started in late December, peaked in mid-February, and returned to baseline by the beginning to middle of April.

Week 49's increase in P&I deaths was not significant, as the numbers returned to normal ranges during week 50. Unlike many other areas of the country, P&I deaths in Clark County vary widely, and are not a very good indicator of influenza activity.

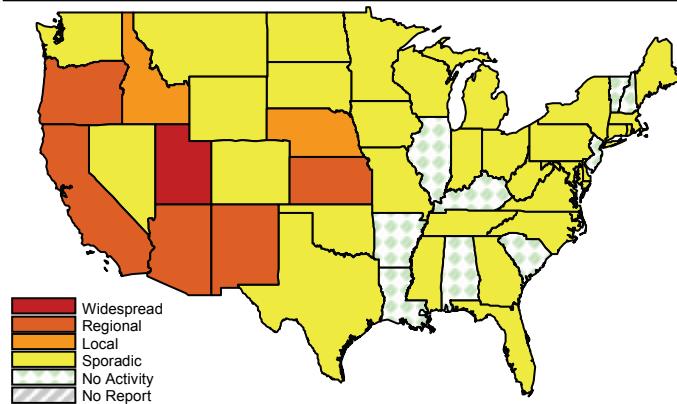
Regionally, there has been a significant increase in influenza activity in the western states. Utah is the first state to report widespread influenza activity this season, and other western states have reached the regional level. Nevada is still listed as sporadic, but influenza has been isolated in Clark and Washoe counties.

**Chart 2. National Laboratory Testing**



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

**Chart 2. National Flu Activity—Week 50**



Source: Centers for Disease Control and Prevention: [www.cdc.gov/flu](http://www.cdc.gov/flu)