One hundred-thirteen cases of influenza-like illness (ILI) were reported during week 1. **Criteria for inclusion as a case of ILI are fever ≥100°F (37.8°C) and cough or sore throat.** The proportion of patient visits to sentinel providers for ILI was 2.32% (weighted average), which is slightly below the national baseline of 2.5%. Nationwide, the proportion of ILI continues to increase. Even though the proportion of ILI cases here in Clark County has decreased, it is not unusual to experience fluctuations of ILI cases such as this during the season. This decrease should not be interpreted as the decline of the influenza season. During week 1 the proportion of mortality due to pneumonia and influenza (P&I) in Clark County was 7.23% and the national P&I mortality was 7.6%. The epidemic threshold for week 1 was 8.0%. The proportion of ILI cases by week in Clark County for weeks 40-1 of the 2004-2005 surveillance season reported by sentinel site surveillance is presented in the following figure:

![Proportion of Patient Visits to Sentinel Providers for Influenza-Like Illness (ILI) By Week (Weighted Average) for Weeks 40-1, 2004-05](image)

Nine new laboratory-confirmed cases of influenza have been reported to the Office of Epidemiology (OOE) during week 2. This brings the total to nineteen confirmed cases of influenza that have been reported to the OOE this season in Clark County. Five of the nineteen cases were laboratory-confirmed as influenza B (3 cultures, 2 rapid antigen tests). Two of the three influenza B isolates have been antigenically characterized by the Nevada State Health Laboratory (NSHL) as B/Sichuan/379/99-like. Five of the nineteen cases were laboratory-confirmed as influenza A (2 cultures, 3 rapid antigen tests). The two influenza A isolates were subtyped by the NSHL as influenza A (H3N2). The remaining nine cases were laboratory-confirmed by a type of rapid test which does not differentiate between influenza A and B. Nevada law (NAC 441A) requires that healthcare providers report all positive influenza tests (including rapid tests) to the local health authority. Physicians and healthcare workers are reminded that any unusual occurrence of illness or suspected outbreak should be reported to the Office of Epidemiology. The 24-hour number for reporting is 759-1300.


   January 14, 2005

This newsletter is also posted on the Clark County Health District webpage for health care practitioners. See [http://www.cchd.org/physician/physician_only.htm](http://www.cchd.org/physician/physician_only.htm) for this and other health and bioterrorism related information

Health care providers wishing to participate in the ongoing Clark County Health District Influenza Surveillance Program should contact Salena Savarda, Surveillance Coordinator, at (702) 759-1300.