

Date:	January 28, 2005
To:	Health Care Provider
From:	Salena Savarda, BS, Epidemiologist II
Subject:	Influenza Report for Week 3 (Jan. 16-22, 2005)

Eighty-six cases of influenza-like illness (ILI) were reported during week 3. **Criteria for inclusion as a case of ILI** are fever \geq 100°F (37.8°C) and cough or sore throat. The proportion of patient visits to sentinel providers for ILI was 2.24% (weighted average), which is slightly below the national baseline of 2.5%. During week 3 the proportion of mortality due to pneumonia and influenza (P&I) in Clark County was 9.84% and the national P&I mortality was 7.7%. The epidemic threshold for week 3 is 8.1%. The proportion of ILI cases by week in Clark County for weeks 40-3 of the 2004-2005 surveillance season reported by sentinel site surveillance is presented in the following figure:



Five new laboratory-confirmed cases of influenza have been reported to the Office of Epidemiology (OOE) during week 4. This brings the total to twenty-seven confirmed cases of influenza that have been reported to the OOE this season in Clark County. Eight of the twenty-seven cases were laboratory-confirmed as influenza B (5 cultures, 3 rapid antigen tests). Six of the twenty-seven cases were laboratory-confirmed as influenza A (5 cultures, 1 rapid antigen tests). The remaining thirteen 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.

The 2004–05 influenza vaccine includes A/Fujian/411/2002 (H3N2)-like, A/New Caledonia/20/99 (H1N1)-like, and B/Shanghai/361/2002-like antigens. Five Clark County influenza A cases were subtyped as A (H3N2) by the Nevada State Health Laboratory. Antigenic characterization on these isolates is still pending. All five of the influenza B isolates have been antigenically characterized. Two of the five influenza B isolates were antigenically characterized as B/Shanghai/361/2002-like. One of the five influenza B isolates was antigenically characterized as B/HongKong/330/2001-like. And the remaining two influenza B isolates were antigenically characterized as B/Sichuan/379/99-like, which is in the same Yamagata lineage as the B/Shanghai/361/2002. At this time it is uncertain if the two strains are closely enough related for the current vaccine to provide immunity to the Sichuan strain.

On January 27, the Centers for Disease Control and Prevention (CDC) issued their "Revised Interim Guidance for Late-Season Influenza Vaccination." The document can be accessed in its entirety at http://www.cdc.gov/flu/protect/lateseasonguidance.htm.

Nationally influenza activity was low in the United States from October through early December 2004, but has steadily increased since mid-December. Influenza activity does not appear to have peaked yet and could still continue for several months. For this reason, late-season vaccination may still offer protection against influenza this season. In addition, influenza vaccination coverage of priority groups is lower this season than in recent influenza seasons. Given these considerations, CDC continues to recommend aggressive efforts to vaccinate people in priority groups.

The Clark County Health District does have a limited supply of influenza vaccine still available to offer to the public including the CDC's expanded priority groups. The vaccination is available at the Clark County Health District Ravenholt Public Health Center at 625 Shadow Lane. For additional locations and any questions regarding immunizations please call 385-INFO.

References:

1. Centers for Disease Control and Prevention. <u>http://www.cdc.gov/ncidod/diseases/flu/weekly.htm</u> January 28, 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 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.