

Weekly Influenza Surveillance Update

January 9, 2006

Current Situation

The Clark County Health District has received the first report of an influenza death in the 2005-2006 influenza season, occurring in an elderly man in mid-December. Reports of positive rapid influenza tests are still being received; these numbers are expected to decrease over the rest of the season as hospitals and clinics deplete their supply of rapid tests.

The proportion of patient visits to sentinel providers for influenza-like illness (ILI) during week the week ending December 31st was 2.6% (weighted average). Nationally, 3.3% 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.

The proportion of mortality due to pneumonia and influenza (P&I) in Clark County was 4.8% for the week ending December 31st (week 52). The national P&I mortality was 6.8% for week 52, with the national threshold for influenza outbreaks being 7.8%.

Nationally, 96% of all isolates tested were influenza A, with over 99% of the influenza A isolates being subtyped as H3N2. Twenty-one of 23 A(H3N2) viruses characterized by the Centers for Disease Control and Prevention (CDC) were characterized as A/California/07/2004-like, which is a component of this year's vaccine. One of five influenza B isolates have been characterized as being similar to B/Shanghai/361/2002, a component of this year's vaccine, and 4 were characterized as being similar to

B/Florida/07/2004, which is a minor antigenic variant of the Shanghai strain.

The majority of rapid tests performed in Clark County are of a type that cannot distinguish influenza A from influenza B. Cultures are pending on a number of influenza isolates received by the Southern Nevada Public Health Laboratory in late December; four specimens submitted in mid-December were sub-typed as H3N2.

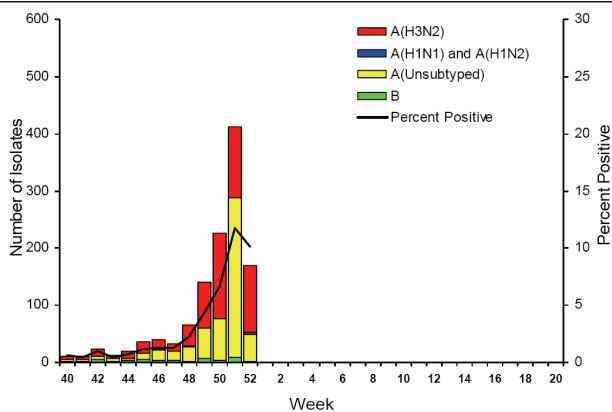
Analysis

This first report of a death is a reminder of the significant role of influenza and pneumonia in mortality, especially in the very young and very old. CDC estimates that about 30,000 people die from influenza each year, with a majority of these deaths going unreported. Reports of influenza deaths in Clark County are rare, although not unexpected. This death was identified through a weekly review of death certificates.

The 2005-2006 influenza season continues to follow the pattern of the 2004-2005 season. Although it is impossible to predict the changes in the influenza season, in past seasons, influenza activity increased throughout January, peaked in mid-February, and returned to baseline by the beginning to middle of April.

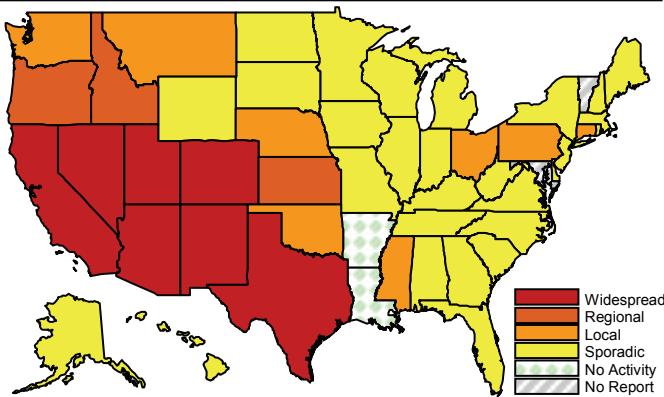
Regionally, the western states are still seeing the most influenza activity (widespread), with little or no activity being identified in the southern states.

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 51



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