

Weekly Influenza Surveillance Update

January 27, 2006

Current Situation

The proportion of patient visits to sentinel providers for influenza-like illness (ILI) during the week ending January 14th was 1.9% (weighted average). Nationally, 2.3% 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 8.0% for the week ending January 20th (week 3), and 7.6% for the week ending January 28th. The national P&I mortality was 7.4% for week 3, with the national threshold for influenza outbreaks being 8.2%.

Nationally, 97% of all isolates tested were influenza A, with over 99% of the influenza A isolates being subtyped as H3N2. Of the 132 A(H3N2) isolates characterized by the Centers for Disease Control and Prevention (CDC), 112 were characterized as A/California/07/2004-like, which is a component of this year's vaccine. Twenty of the A(H3N2) isolates characterized showed reduced titers with antisera produced against A/California/07/2004. One of eight influenza B isolates has been characterized as being similar to B/Shanghai/361/2002, a component of this year's vaccine, and 7 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. Twenty-one cultures from Clark County submitted for testing have been subtyped as H3N2. Antigenic characterization of the H3N2 isolates is not yet available.

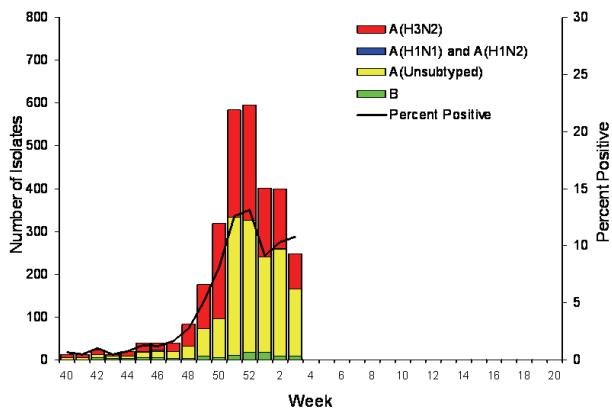
Analysis

After decreasing over the first half of January, influenza activity has stabilized. Although a slight decrease in flu activity is expected in January, current activity is lower than is expected for this time of year. Typically, a short decrease in flu activity is noted in early to mid-January, followed by a steady increase to the season peak in late February. The same trends in influenza activity have been noted throughout western states, with Nevada dropping to the local level of activity for week 3, and surrounding states continue to report regional activity. Only 5 states nationwide are reporting widespread activity. Flu activity is likely to continue throughout the winter and spring, and media reports of flu season already having peaked are premature.

Respiratory Syncytial Virus (RSV) activity in Clark County has been very similar to influenza activity since the beginning of December. RSV reports increased throughout December, then decreased and remained steady throughout January.

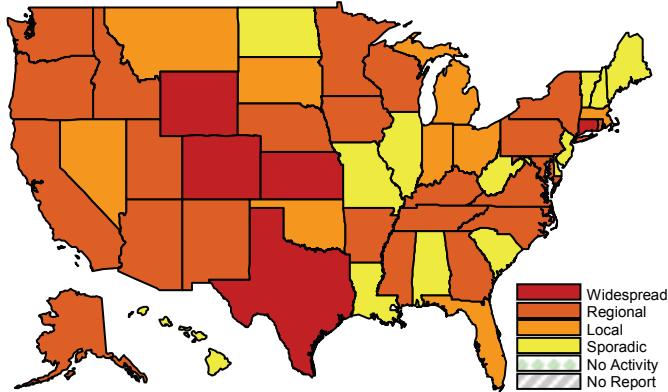
Local emergency rooms are still reporting long delays, although this can be attributed to a surge in the number of mental health patients presenting since the beginning of January.

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 3



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