Influenza Update

March 16, 2007

Current Situation

The proportion of patient visits to sentinel providers for influenza-like illness (ILI) during the week ending March 3rd (week 9) was 3.9%. This is a decrease from the previous weeks (week 7, 5.6% and week 8, 5.4%). Nationally, 2.8% of patient visits to sentinel providers were due to ILI; this is an decrease from the past weeks, but is still above the national baseline of 2.1%. Regionally, the percent of visits ranged from 3.0% in the East North Central to 1.8% in the West North Central. In the Mountain region, which contains Nevada, 2.1% of visits were for ILI (1).

During week 9, the proportion of mortality due to pneumonia and influenza (P&I) in Clark County was 4.2%. The number of P&I deaths has continued to fluctuate (week 7, 7.2%; week 8, 10.4%). Nationally, the P&I mortality was 6.8% for week 9, which is below the epidemic threshold of 7.9% set for week 9 (1).

Nationally, 83.0% (n=12,438) of specimens tested were influenza A and 17.0% (n=2,555) were influenza B. Among influenza A specimens that were subtyped, 88.2% (n=1,692) were influenza A (H1) and 11.8% (n=226) were influenza A (H3) (Chart 1).

The World Health Organization (WHO) has made its recommendations for the 2007-2008 influenza vaccine. The influenza vaccine for the northern hemisphere will contain A/Solomon Islands/3/2006-like (H1N1), A/Wisconsin/67/2005-like (H3N2), and B/Malaysia/2506/2004-like viruses. The influenza A (H1N1) component of the 2006-2007 influenza vaccine has been changed to reflect the recent antigenic variant of A/New Caledonia/20/99. The influenza A (H3N2) and influenza B components will remain the same. The recommendations for the 2007-2008 influenza vaccine were based on antigenic analyses of recently isolated influenza viruses, epidemiologic data, and post-vaccination serologic studies in humans (1).

Analysis

Both nationally and locally in Clark County, influenza activity has decreased in the past weeks. While the total number of influenza cases, nationally, has decreased; the percentage of influenza B has increased.

In Clark County, the 2006-2007 influenza season continues to be mild. Influenza continues to circulate in the community but at low levels. It is not possible to predict if this pattern will continue throughout the rest of the influenza season.

Nationally, influenza activity has been more widespread than has been seen in previous weeks. In Nevada, we are seeing regional activity; which means that outbreaks of influenza or increases in Influenza-like Illness cases and recent laboratory-confirmed influenza is occurring in at least two but less than half of the regions in the state (Chart 2).


Chart 1: U.S. WHO/NREVSS Collaborating Laboratories Summary, 2006-7

Chart 2: Weekly Influenza Activity Estimates Reported by State & Territorial Epidemiologists

Week ending Jan. 6, 2006-Week 1

Source: Centers for Disease Control and Prevention

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