

# FLORIDA INFLUENZA SURVEILLANCE

Week 17: April 26th 2009—May 2nd 2009



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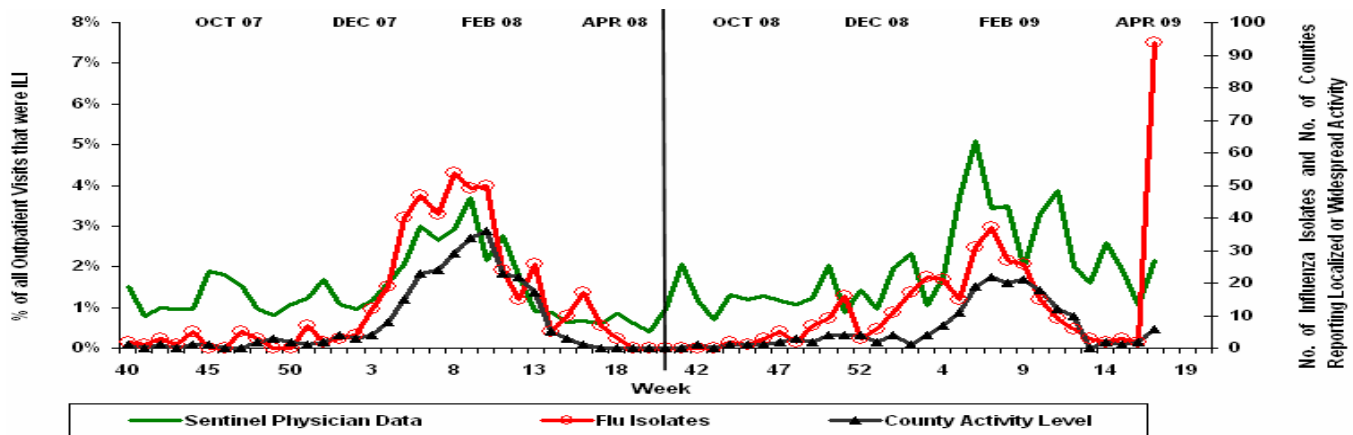
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## I. SUMMARY

This is the thirty-first weekly Florida influenza surveillance report for the 2008-09 season. Influenza surveillance in Florida consists of seven surveillance components\*: 1) Florida Sentinel Physician Influenza Surveillance Network (FSPISN); 2) Florida Pneumonia & Influenza Mortality Surveillance System; 3) State laboratory viral surveillance; 4) County influenza activity levels; 5) Notifiable Disease Reports: Influenza-associated deaths in children, post-influenza infection encephalitis; and novel influenza cases 6) Influenza or ILI outbreaks; 7) Syndromic surveillance.

During week 17 (04/26/09-05/02/09), the proportion of patient visits for influenza-like illness (ILI) as reported by the Florida Sentinel Physician Influenza Surveillance Network was 2.14 percent. This is below the state threshold for moderate activity of 2.98 percent. Ninety-four of the seven hundred and ninety-eight ILI specimens tested by Bureau of Laboratories were positive for influenza. No counties reported widespread activity and six counties reported localized activity. Twenty-nine counties reported sporadic activity and 13 counties reported no activity. Nineteen counties did not report. The graph below shows the progression of the 2007-08 & 2008-09 Florida influenza seasons as monitored by three\*\* of seven surveillance systems.

Each week an activity code for the state as a whole is reported to the Centers for Disease Control and Prevention (CDC). There are five possible categories: No Activity, Sporadic, Local, Regional, or Widespread. Regional activity has been reported in Florida for this reporting week (week 17). Florida meets the CDC regional activity definition. The CDC definition for regional activity is: Outbreaks of influenza or increases in ILI cases and recent laboratory-confirmed influenza in at least two but less than half the regions of the state with recent laboratory evidence of influenza in those regions. CDC report can be viewed at <http://www.cdc.gov/flu/weekly/usmap.htm>.



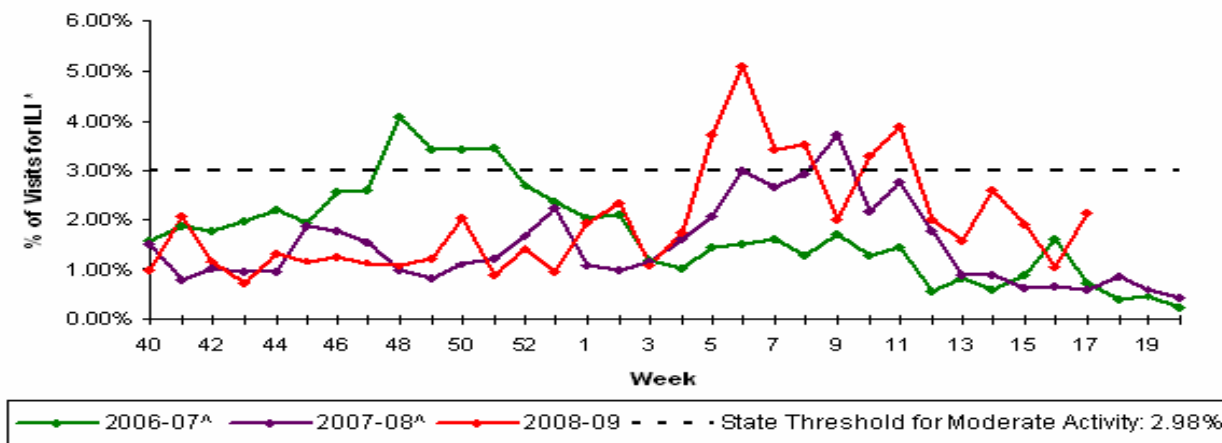
\*The purposes of these surveillance systems are to determine when and where influenza activity is occurring, to identify circulating viruses, to detect changes in the circulating influenza viruses, to track patterns of influenza-associated morbidity and mortality and estimate the overall impact of influenza in the state of Florida.

\*\*1) FSPISN, 2) State Laboratory Viral Surveillance, and 3) County Activity Levels.

## II. FSPISN INFLUENZA-LIKE ILLNESS STATEWIDE GRAPH

During week 17, 2.14%\* of patient visits to Florida sentinel providers were due to ILI. This percentage is below the statewide threshold for moderate activity of 2.98%\*\*. The percentage of visits ranged from 0.00% in the Southwest to 3.13% in the Southeast region.

Percentage of Visits for Influenza-like Illness Reported by Sentinel Providers Statewide Summary 2008-09, 2007-08, and 2006-07



\*FSPISN reporting is incomplete for this week (41% of providers reported). Numbers may change as more reports are received. Data displayed is weighted to the state population.

\*\*The 2008—09 threshold for moderate activity is calculated from FSPISN data. The threshold for moderate activity is the mean percentage of patient visits for ILI during influenza weeks for the previous three seasons plus two standard deviations. Only weeks with 10% or greater of laboratory specimens testing positive are included in the calculation. Due to wide variability in regional level data, it is not appropriate to apply the state baseline to regional data.

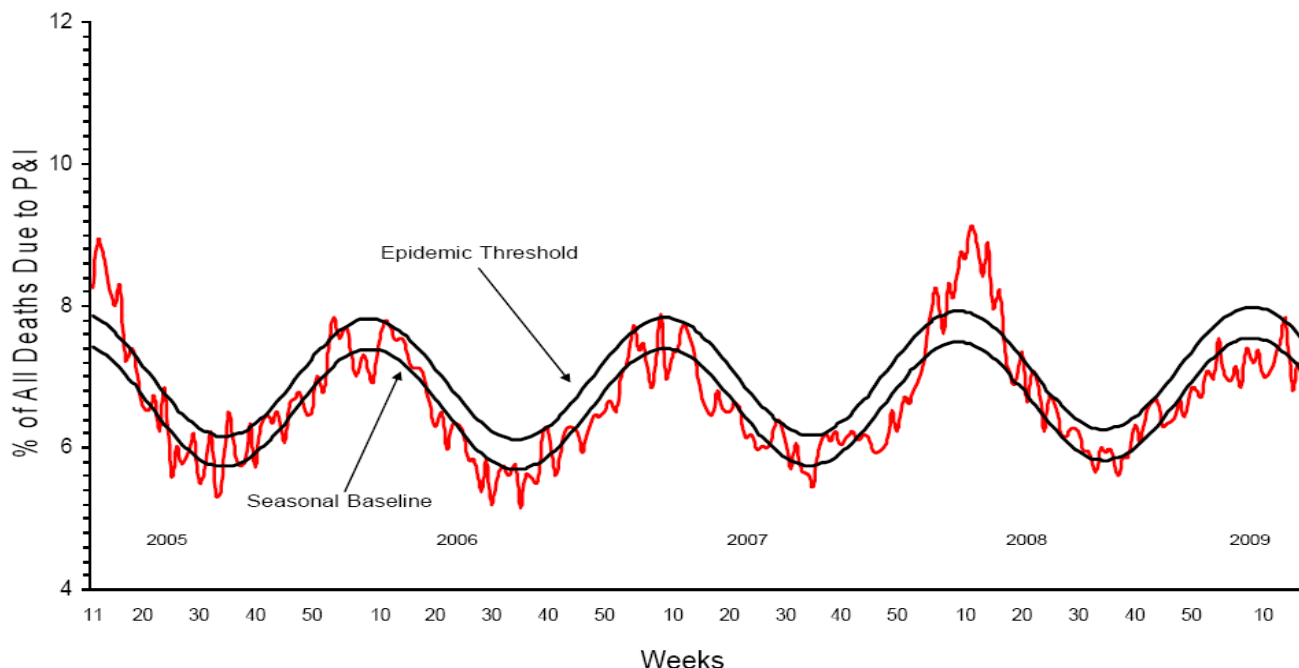
^ There was no week 53 during the 2006-07 and 2007-08 seasons; the week 53 data point for those seasons is an average of weeks 52 and 1.

## III. FLORIDA PNEUMONIA AND INFLUENZA MORTALITY SURVEILLANCE

Due to technical difficulties, the P&I graph for Florida during week 17 will not be displayed in this report. Please refer to the CDC's 122 Cities Mortality Reporting System graph below.

**Pneumonia and Influenza (P&I) Mortality Surveillance:** During week 17, 7.0% of all deaths reported through the 122-Cities Mortality Reporting System were due to P&I. This percentage is below to the epidemic threshold of 7.5% for week 17.

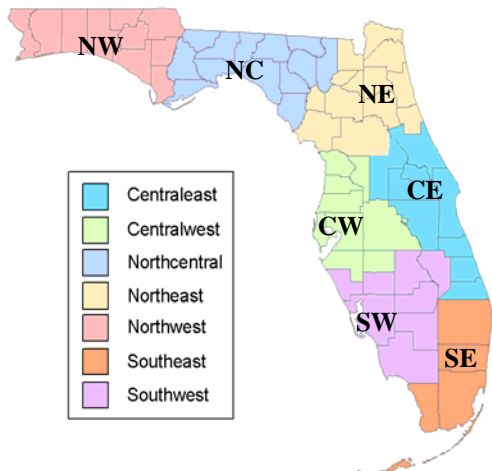
Pneumonia and Influenza Mortality for 122 U.S. Cities  
Week ending 5/2/2009





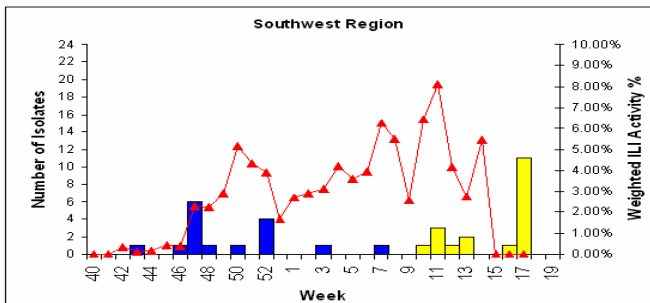
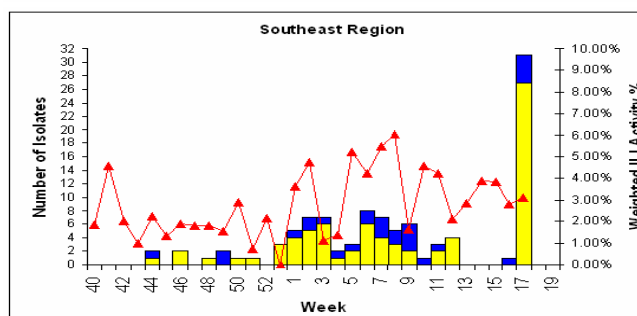
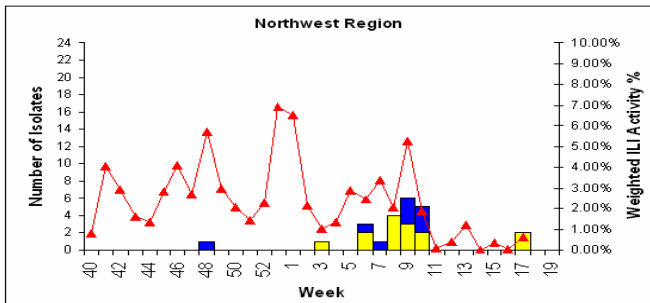
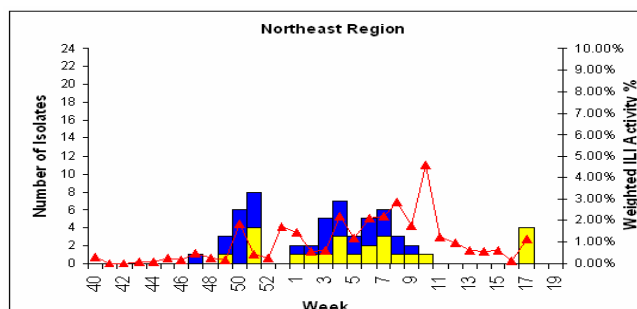
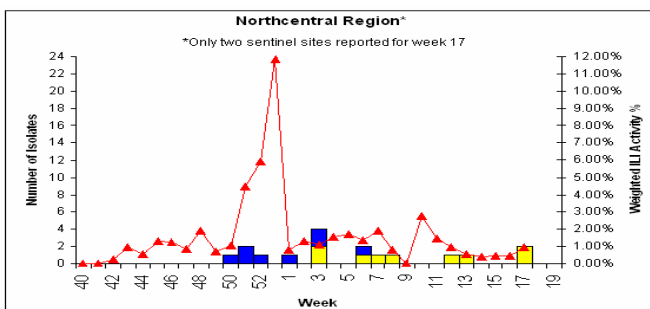
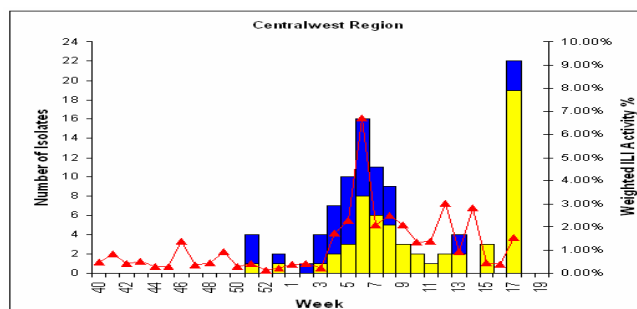
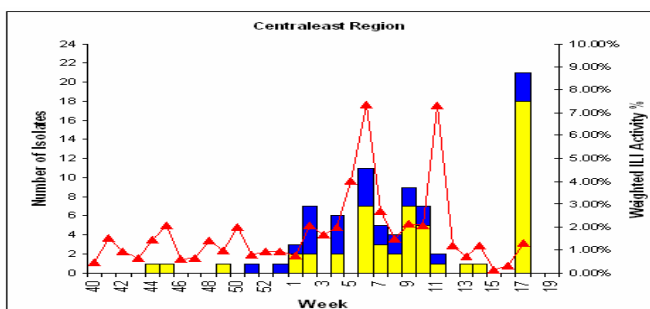
# V. LABORATORY AND INFLUENZA-LIKE ILLNESS (ILI) SURVEILLANCE BY REGION

## Influenza Surveillance Regions



The table below shows the weighted ILI activity by region as reported by Florida sentinel physicians for the 2007-08 & 2008-09 seasons. The graphs below include ILI activity as reported by sentinel physicians and FDOH laboratory data.

Week 17: FSPISN Weighted ILI Activity, by Region 2007-08 & 2008-09 Seasons		
REGION	2008-09 ILI %	2007-08 ILI %
Centraleast	1.30%	0.42%
Centralwest	1.53%	0.07%
Northcentral	0.93%	0.18%
Northeast	1.15%	0.21%
Northwest	0.63%	1.85%
Southeast	3.13%	0.20%
Southwest	0.00%	0.00%



- Influenza A specimens FDOH Laboratories
- Influenza B specimens FDOH Laboratories
- % of visits for ILI, reported by sentinel providers

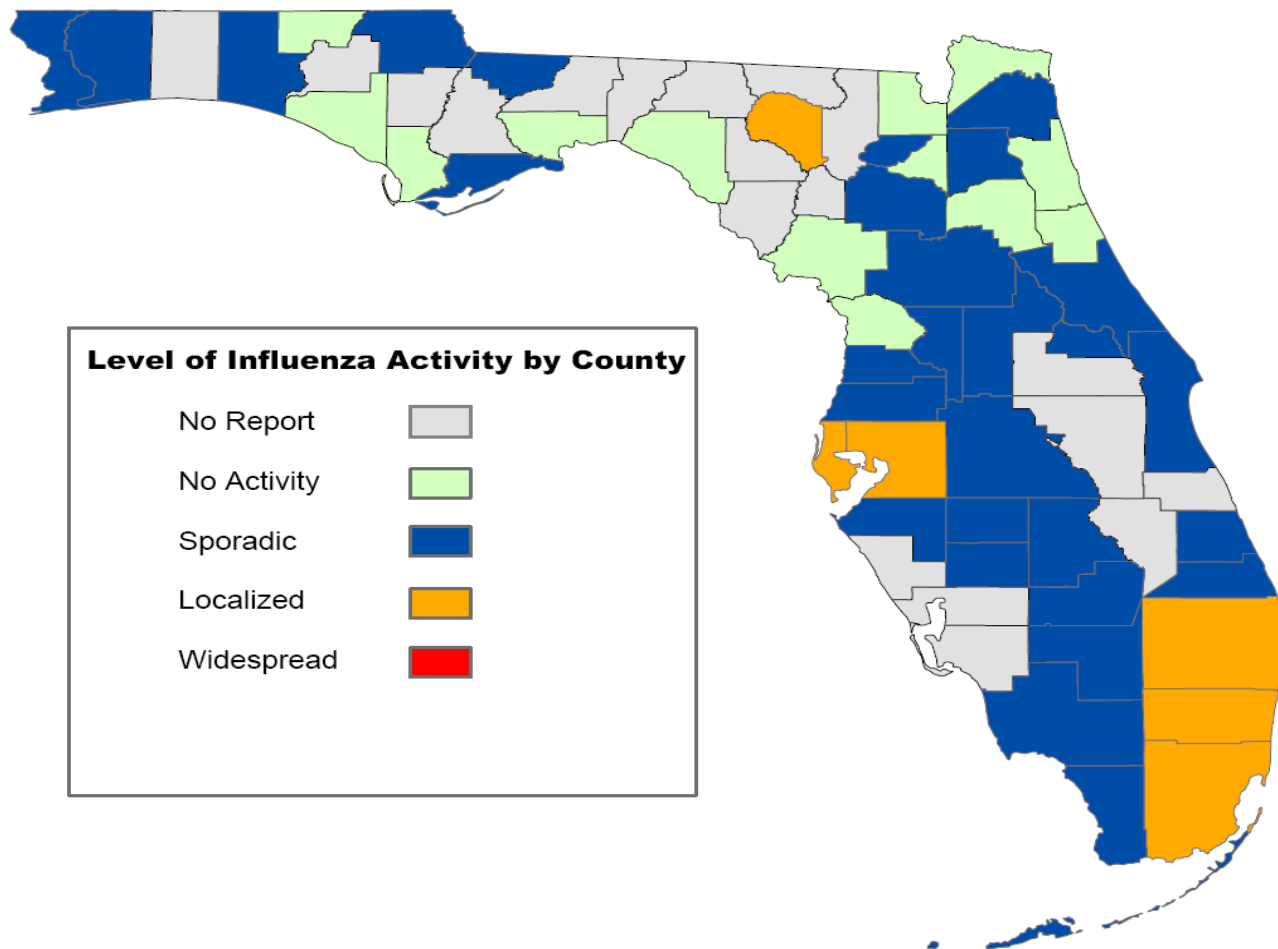
## VI. COUNTY INFLUENZA ACTIVITY MAP

During week 17, no counties reported widespread activity. Six counties reported localized activity (Broward, Miami-Dade, Hillsborough, Palm Beach, Pinellas, and Suwannee). Twenty-nine counties (Alachua, Brevard, Clay, Collier, DeSoto, Duval, Escambia, Franklin Gadsden, Glades, Hardee, Hendry, Hernando, Highlands, Jackson, Lake, Manatee, Marion, Martin, Monroe, Pasco, Polk, St. Lucie, Santa Rosa, Seminole, Sumter, Union, Volusia, Walton) reported sporadic activity. Thirteen counties reported no activity. Nineteen counties did not report. *Please note: data reported from counties reporting after the deadline are recorded but may not be included in the activity map below.*

# Weekly County Influenza Activity

(Week ending May 2, 2009 - Week 17)

County influenza activity levels are reported by county health department epidemiologists



**Florida Department of Health**  
**Bureau of Epidemiology**

**Disclaimer:**  
 This product is for reference purposes only and is not to be construed as a legal document. Any reliance on the information contained herein is at the user's own risk. The Florida Department of Health and its agents assume no responsibility for any use of the information contained herein or any loss resulting there from.  
 Map printed May 5, 2009 at 3:18 pm ET.

## COUNTY INFLUENZA ACTIVITY LEVEL DEFINITIONS

### 0 = No Activity:

Overall clinical activity remains low with no laboratory confirmed cases<sup>†</sup> in the county.

### 1 = Sporadic:

- And/or {
- Isolated cases of laboratory confirmed influenza<sup>†</sup> in the county.
  - An ILI<sup>§</sup> outbreak in a single setting<sup>‡</sup> in the county. (No detection of decreased ILI<sup>§</sup> activity by surveillance systems\*)

### 2 = Localized:

- And/or {
- ILI<sup>§</sup> activity detected by a *single* surveillance system\* within the county. (ILI<sup>§</sup> activity has not been detected by *multiple* ILI surveillance systems.)
  - Two or more outbreaks (ILI<sup>§</sup> or lab confirmed<sup>†</sup>) detected in a *single* setting<sup>‡</sup> in the county.

### AND

- Recent (within past three weeks) laboratory evidence<sup>†</sup> of influenza activity in the county.

### 3 = Widespread:

- And/or {
- An increase in ILI<sup>§</sup> activity detected in  $\geq 2$  surveillance systems in the county.
  - Two or more outbreaks ((ILI<sup>§</sup> or laboratory confirmed<sup>†</sup>) detected in *multiple* settings<sup>‡</sup> in the county.

**No Report:** (No report was received from the county at the time of publication)

<sup>†</sup> Laboratory confirmed case = case confirmed by rapid diagnostic test, antigen detection, culture, or PCR.

<sup>§</sup>ILI = Influenza-like illness, fever  $\geq 100^{\circ}\text{F}$  AND sore throat and/or cough *in the absence* of another known cause.

\*ILI surveillance system activity can be assessed using a variety of surveillance systems including sentinel providers, school/workplace absenteeism, long-term care facility (LTCF) surveillance, correctional institution surveillance, hospital emergency department surveillance and laboratory surveillance.

<sup>‡</sup>Settings include institutional settings (LTCFs, hospitals, prisons, schools, companies) & the community.

## VII. REPORTS OF INFLUENZA OR INFLUENZA-LIKE ILLNESS (ILI) OUTBREAKS

During week 17 there were no seasonal influenza outbreaks reported.

County Health Department epidemiologists should report Influenza and ILI outbreaks via EpiCom at: <https://fdens.com/vabtrs/GateStart.aspx> within the Influenza Forum.

**Total influenza or ILI outbreaks reported as of week 17 (05/02/09): 7**

## VIII. NOTIFIABLE DISEASE REPORTS: INFLUENZA-ASSOCIATED DEATHS AMONG CHILDREN (<18 YEARS) & POST-INFLUENZA INFECTION ENCEPHALITIS

As of the week ending May 2, 2009, there were no influenza-associated deaths among those <18 years of age and/ or post influenza infection encephalitis reported in the state of Florida.

Reportable Disease	# of Cases 08-09 Influenza Season
Influenza-associated deaths among those <18 years of age	3*
Post-influenza infection encephalitis	0

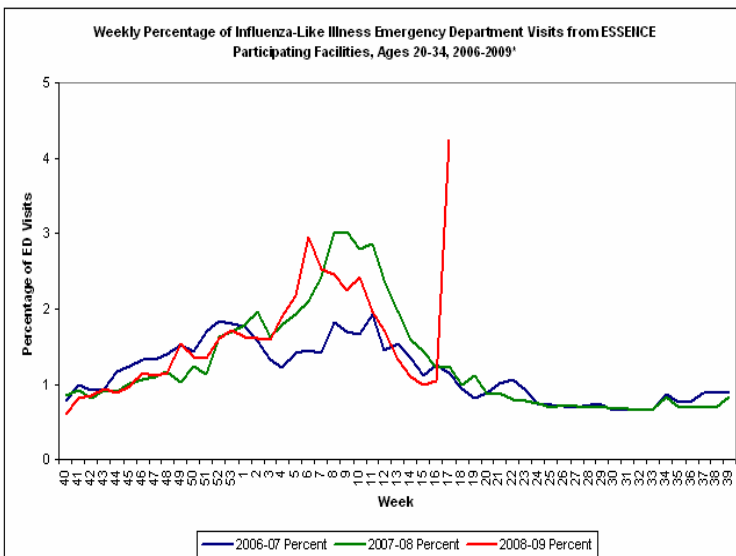
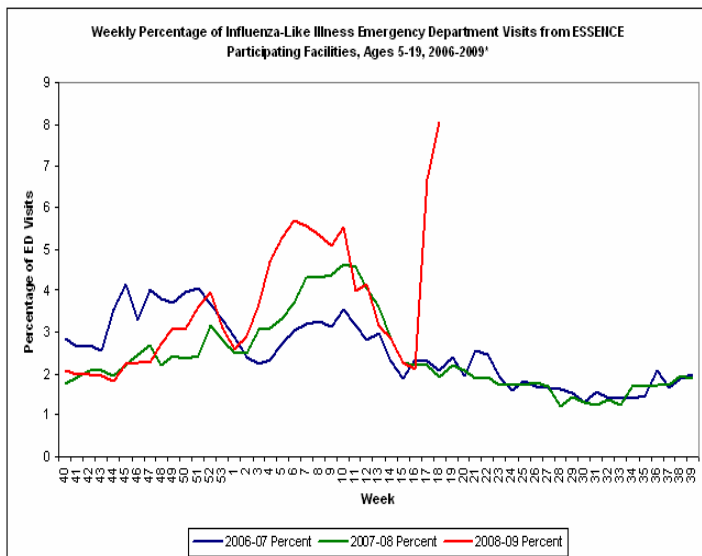
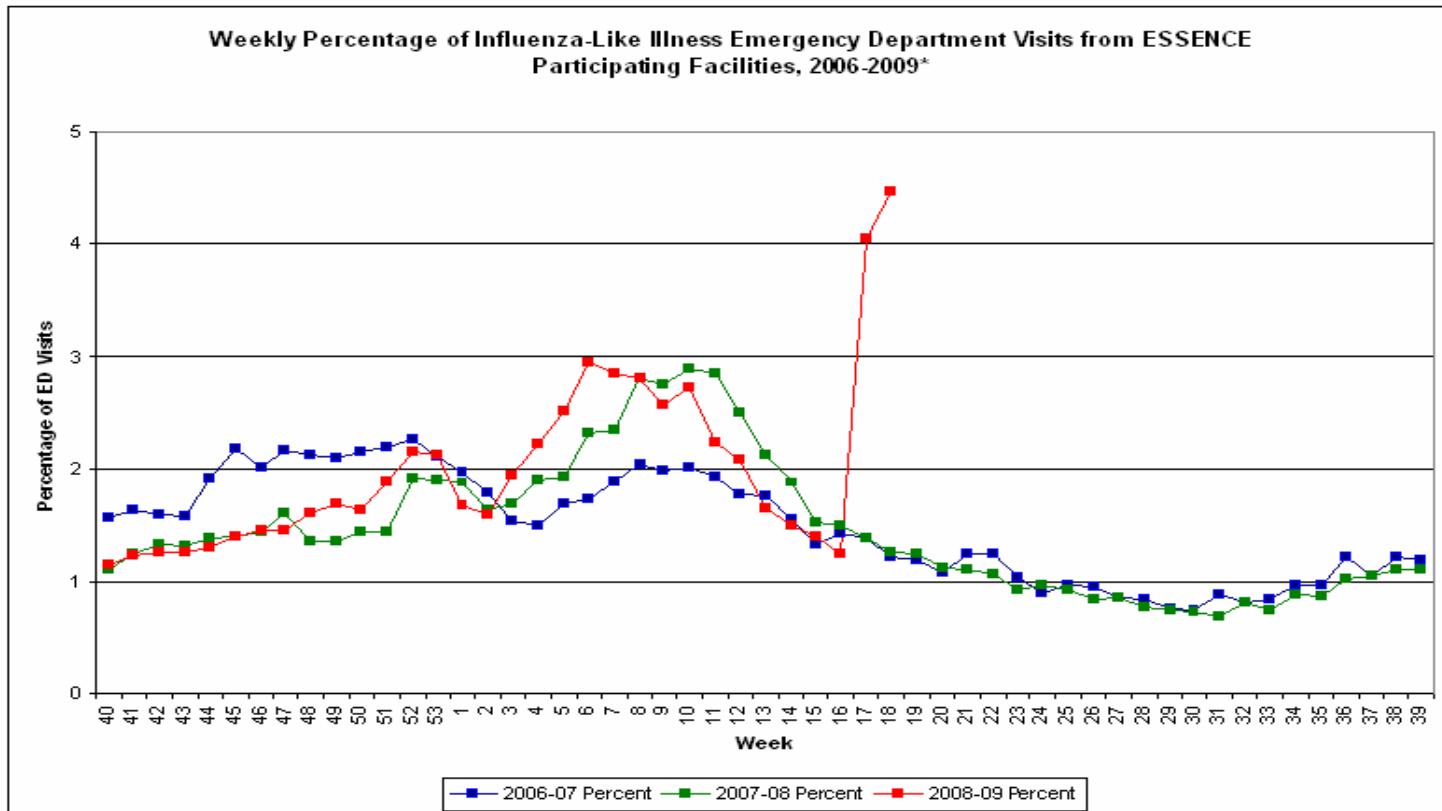
\*Case reported during week 6 was reclassified as a suspect case. Please note that status of reported cases are subject to change upon receipt of additional information.

Influenza-associated deaths among those <18 years of age and/or post-influenza infection encephalitis are reportable; case report forms can be accessed at: [http://www.doh.state.fl.us/disease\\_ctrl/epi/topicscrforms.htm](http://www.doh.state.fl.us/disease_ctrl/epi/topicscrforms.htm).



## IX. SYNDROMIC SURVEILLANCE SUMMARY

Florida uses the Electronic Surveillance System for the Early Notification of Community-based Epidemics (ESSENCE) for syndromic surveillance, which currently collects data from 107\* hospitals. These data are processed into 11 different syndrome categories based on the patient's chief complaint. One of the categories is influenza-like illness (ILI), which is composed of chief complaints that include the words "influenza" or "flu", or either fever and cough or sore throat. The data are collected on a daily basis from participating hospital emergency departments (ED) across the state. Displayed below are the percentage of ILI visits to local EDs from 2006 to 2009 by week.



\*The total number of facilities participating in ESSENCE has increased steadily from 2006 to 2009. In 2007 ESSENCE was implemented as the state syndromic surveillance system. Please note that numbers may change as facility data is updated.

**X. SUMMARY OF WORLDWIDE, UNITED STATES, AND FLORIDA NOVEL INFLUENZA ACTIVITY**

Accessed on: 05/07/09

**Avian Influenza A (H5N1)**

Since the outbreak activity of avian influenza A (H5N1) began at the end of December 2003, there have been a total of 421 confirmed human cases and 257 deaths. Cases and deaths have occurred in the following nations: Azerbaijan 8 cases and 5 deaths; Bangladesh 1 case 0 deaths; Cambodia 8 cases and 7 deaths; China 38 cases and 25 deaths; Djibouti 1 case 0 deaths; Egypt 67 cases and 23 deaths; Indonesia 141 cases and 115 deaths; Iraq 3 cases and 2 deaths; Lao People's Democratic Republic 2 cases and 2 deaths; Myanmar 1 case and 0 deaths; Nigeria 1 case and 1 death; Pakistan 3 cases and 1 death. Thailand 25 cases and 17 deaths; Turkey 12 cases and 4 deaths; and, Vietnam 110 cases and 55 deaths. For a complete analysis and summary of WHO confirmed human cases of H5N1 from 12/1/2003 to current, please visit: [http://www.who.int/csr/disease/avian\\_influenza/ai\\_timeline/en/index.html](http://www.who.int/csr/disease/avian_influenza/ai_timeline/en/index.html)

Changes in the WHO case definition for human infection with avian influenza H5N1 can be found here: [http://www.who.int/csr/disease/avian\\_influenza/guidelines/case\\_definition2006\\_08\\_29/en/index.html](http://www.who.int/csr/disease/avian_influenza/guidelines/case_definition2006_08_29/en/index.html)

During week 17, no new cases of Influenza A H5N1 were reported.

During week 16, no new cases of Influenza A H5N1 were reported.

During week 15, the Ministry of Health and Population of Egypt reported four new confirmed human case of avian influenza. The first case is a 33 year old female from Kellin district, Kfr El Sheikh Governorate. Her symptoms began on April 7th, 2009 and she was hospitalized at Kfr El Sheikh Fever Hospital April 15th where she was started on oseltamivir the same day. She is in a critical condition. The second case is a 25-year old pregnant female from El Marg District, Cairo Governorate. Her symptoms began on April 6th, 2009 and she was hospitalized at Ain Shams University hospital on April 11th where she was started on oseltamivir on April 16th. She is in a critical condition. The third case is 18-month old female from Kellin District, Kafr Elsheikh Governorate. Her symptoms began on April 15th, 2009 and she was hospitalized at Kafr Elsheikh Fever Hospital on April 18th where she was started on oseltamivir on the same day of hospitalization. Her condition is stable. The fourth case is a 4 year old male from Akhmim District, Sohag Governorate. His symptoms began on April 18th, 2009 and he was hospitalized at Sohag Fever Hospital on April 18th where he was started on oseltamivir. He is in a stable condition. Contact with sick and/or dead poultry was noted in all four cases prior to illness.

More information about these cases can be found at [http://www.who.int/csr/disease/avian\\_influenza/updates/en/index.html](http://www.who.int/csr/disease/avian_influenza/updates/en/index.html)

**Influenza A (H1N1) - (Swine Origin) -Accessed 05/07/09**

This report summarizes influenza activity for week ending 05/2/09.

Worldwide, total of 2,353 confirmed human cases and 44 confirmed deaths due to influenza A (H1N1) have been reported, since the virus was first recognized in April 2009. Laboratory confirmed cases and deaths have occurred in the following nations: Austria 1 case, 0 deaths; Canada 201 cases, 0 deaths; China, Hong Kong Special Administrative Region 1 case, 0 deaths; Columbia 1 case, 0 deaths; Costa Rica 1 case, 0 deaths; Denmark 1 case, 0 deaths; El Salvador 2 cases, 0 deaths; France 5 cases, 0 deaths; Germany 9 cases, 0 deaths; Guatemala 1 cases, 0 deaths; Ireland 1 case, 0 deaths; Israel 4 cases, 0 deaths; Italy 5, cases 0 deaths; Mexico 1,112 cases, 42 deaths; Netherlands 1 case, 0 deaths; New Zealand 5 cases, 0 deaths; Portugal 1 case, 0 deaths; Republic of Korea 2 cases, 0 deaths; Spain 73 cases, 0 deaths; Sweden 1 case, 0 deaths; Switzerland 1 case, 0 deaths; United States 896 cases, 2 deaths; United Kingdom 28 cases, 0 deaths.

For a summary of the most up to date H1N1 information please visit: <http://www.who.int/csr/disease/swineflu/en/index.html>



**X. SUMMARY OF WORLDWIDE, UNITED STATES, AND FLORIDA NOVEL INFLUENZA ACTIVITY**

Accessed on: 05/11/09

In the United States, a total of 44 states (including the District of Columbia) have reported confirmed cases of Influenza A (H1N1) swine origin. There have been a total of 2600 cases and three deaths reported as of 05/11/09.

For the latest information about this rapidly evolving situation please visit: <http://www.cdc.gov/h1n1flu/>

In Florida, laboratory confirmed cases of Influenza A (H1N1) - Swine Origin are as follows:

**Confirmed swine influenza H1N1 cases by county (n=56), Florida, as of May 11, 2009**

County	Frequency	Percent
ALACHUA	1	1.79
BREVARD	2	3.57
BROWARD	10	17.86
CLAY	1	1.79
COLLIER	1	1.79
DADE	10	17.86
DUVAL	1	1.79
FLAGLER	1	1.79
HILLSBOROUGH	8	14.29
INDIAN RIVER	1	1.79
LAKE	1	1.79
LEE	7	12.50
MANATEE	1	1.79
MARION	1	1.79
OKEECHOBEE	1	1.79
ORANGE	2	3.57
OSCEOLA	1	1.79
PINELLAS	3	5.36
SARASOTA	2	3.57
SEMINOLE	1	1.79

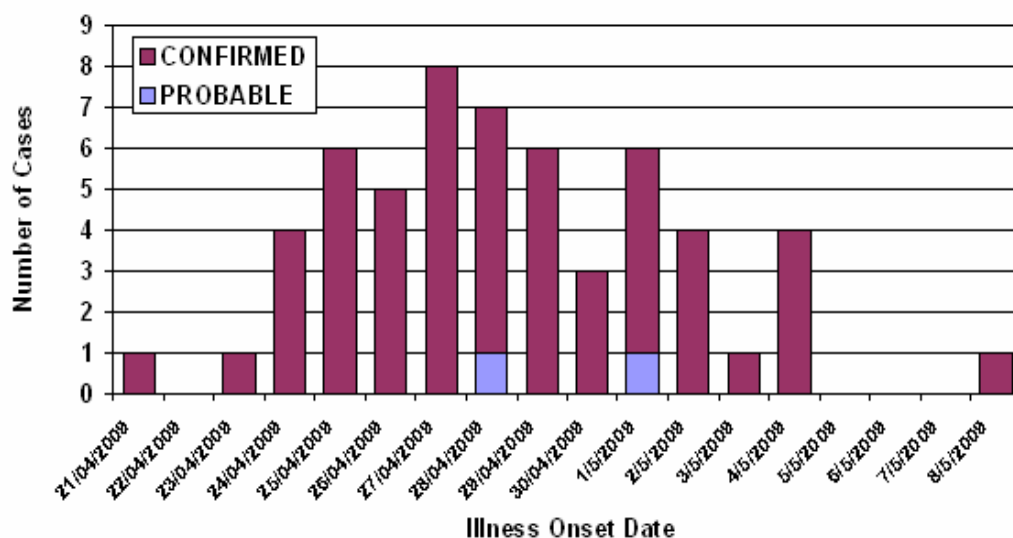
## X. SUMMARY OF WORLDWIDE, UNITED STATES, AND FLORIDA NOVEL INFLUENZA ACTIVITY

**Probable swine influenza H1N1 cases by county (n=3), Florida, as of May 11, 2009**

County	Frequency	Percent
OKALOOSA	2	66.67
PALM BEACH	1	33.33

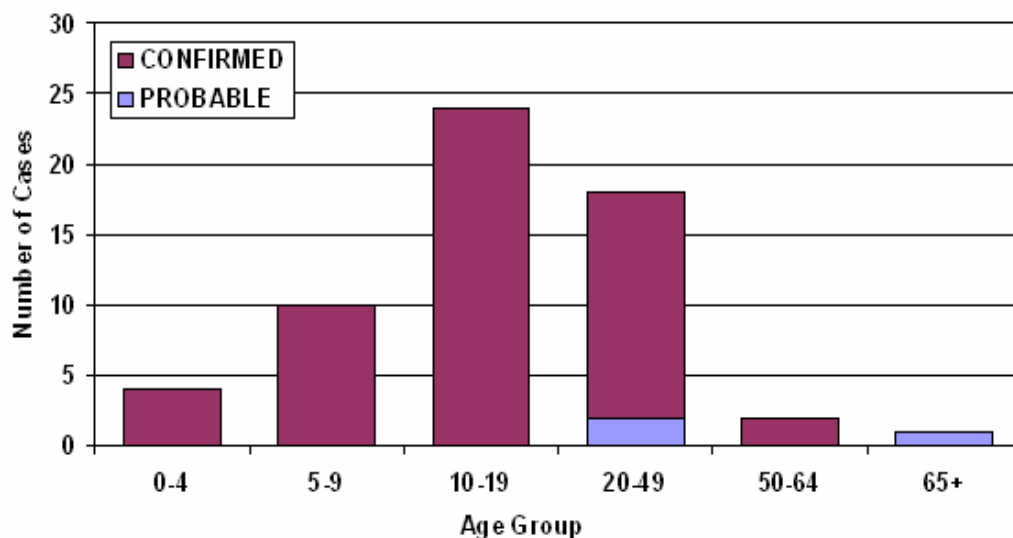
Note: case previously reported as probable from Flagler County was initially determined to not be a Florida resident. However, the case was in the process of relocating and so Florida was determined to be their most recent state of residence. This case was initially deleted from the files, but has since been added back. Cases previously reported as a probable from Dade County (91 year old female, 27 year old male) were found to be negative by the CDC and have been removed from this table.

**Confirmed and probable cases by date of onset\*, Florida, as of May 11, 2009**



\*Note that 1 confirmed case and 1 probable case are missing dates of onset.

**Confirmed and probable cases by age, Florida, as of May 11, 2009**



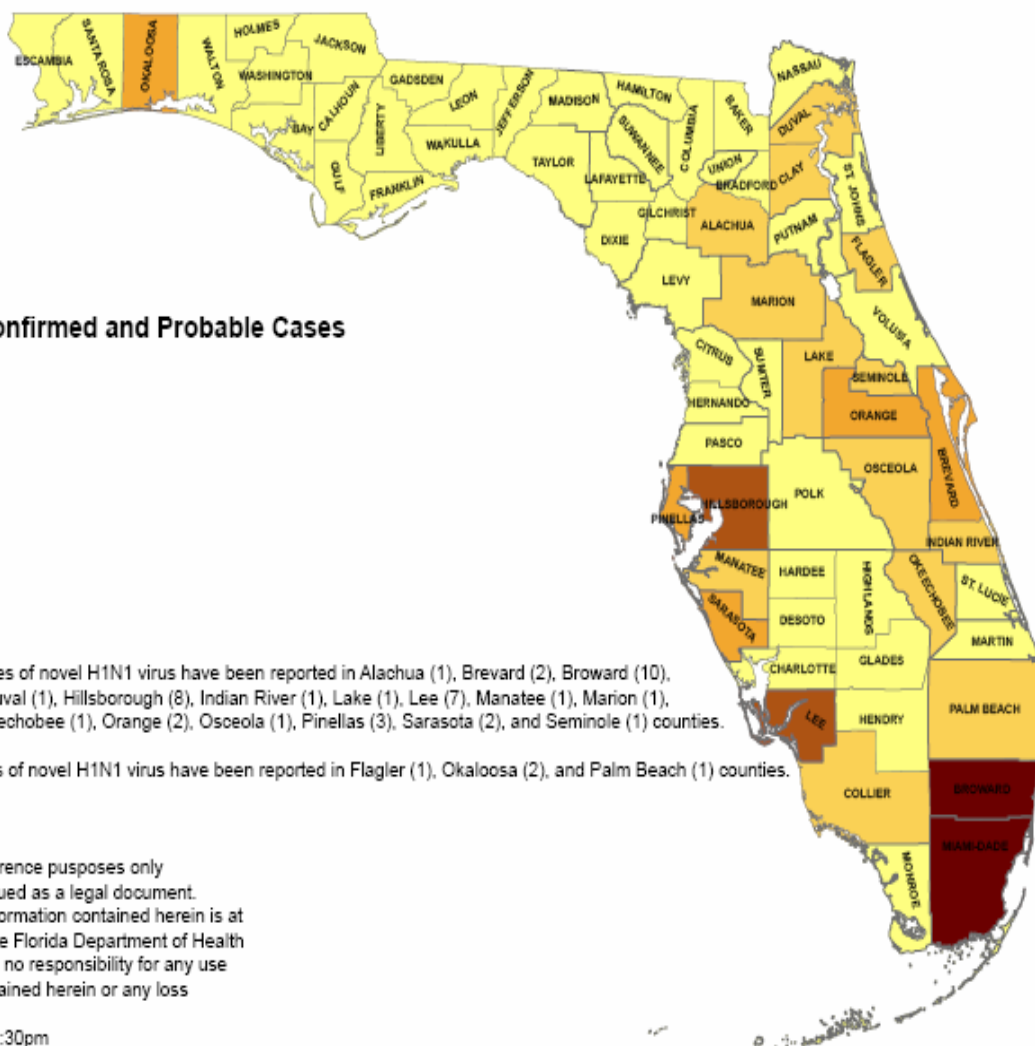
## X. SUMMARY OF WORLDWIDE, UNITED STATES, AND FLORIDA NOVEL INFLUENZA ACTIVITY

Confirmed and probable cases by date of gender and age, Florida, as of May 11, 2009

	Confirmed (n=56)		Probable (n=3)		Total (n=59)	
	#	%	#	%	#	%
<b>Gender</b>						
<b>Female</b>	28	50.00	1	33.33	29	49.15
<b>Male</b>	28	50.00	2	66.67	30	50.85
<b>Total</b>	56		3		59	
<b>Age (range=2-75, average=18.6, median=16)</b>						
<b>0-4</b>	4	7.14	0	0.00	4	6.78
<b>5-9</b>	10	17.86	0	0.00	10	16.95
<b>10-19</b>	24	42.86	0	0.00	24	40.68
<b>20-49</b>	16	28.57	2	6.67	18	30.51
<b>50-64</b>	2	3.57	0	0.00	2	3.39
<b>65+</b>	0	0.00	1	3.33	1	1.69
<b>Total</b>	56		3		59	

## X. SUMMARY OF WORLDWIDE, UNITED STATES, AND FLORIDA NOVEL INFLUENZA ACTIVITY

### Florida Human Cases of Swine Flu Infection, May 10th, 2009



Human cases of influenza due to infection from novel or pandemic strains are reportable in Florida. Reports should be made to the Department of Health 24/7 upon initial suspicion. Reporting guidelines for hospitals and clinicians can be found at [http://www.doh.state.fl.us/disease\\_ctrl/epi/swineflu/index.html](http://www.doh.state.fl.us/disease_ctrl/epi/swineflu/index.html)