

**Influenza Surveillance Report for Summit County, 2009-2010**  
**Report #4 Surveillance Week October 11 to October 17**  
**Centers for Disease Control and Prevention (CDC) Week 41**

**Influenza Activity in Summit County**

- Influenza activity continued to increase in Summit County.
- EpiCenter has reported a steady increase in adult hospital emergency room visits over the past 3 weeks for respiratory and constitutional complaints.
- This week the EpiCenter average for respiratory and constitutional complaints was 34.28% up from 30.6% the previous week.
- There continued to be an increase in the number of people diagnosed with influenza-like illness (ILI). This week there were 178 diagnosed up from 153 the previous week.
- The number of hospitalizations for influenza sharply increased from 18 last week to 51 this period.
- The number of lab tests being performed continued to increase. During week 40, there were 225 tests reported and 101 were positive for influenza A and 1 was positive for influenza B. During week 41, 288 tests were administered and 102 were positive for influenza A.
- There number of absences reported by schools increased by over 1,300.
- The number of prescriptions of oseltamivir and zanamivir greatly increased from 49 the previous week to 284 this period.
- The number of pneumonia-related deaths decreased from 10 to 4 this week.
- Local health departments continued to receive calls about influenza-like illnesses in schools and community.
- Local health departments and some hospitals have begun receiving H1N1 vaccine for health care workers and first responders. There is a localized shortage of seasonal flu vaccine.

**Influenza Activity in Ohio**

- Ohio's influenza activity continues to be **widespread**. This refers to the geographic spread and not the severity of illness.
- 5 schools and 1 child care center closed during the week due to illness.

**Influenza Activity in U.S. CDC Week 41 (October 11 to 17)**

- 46 states reported **widespread** activity (increased by 5 from the previous week); 3 states and Guam had regional activity; and 1 state, District of Columbia and Puerto Rico had local influenza activity.
- All regions again reported elevated levels of out-patients reporting ILI.
- There were 11 influenza-associated pediatric deaths of which 9 were associated with 2009 pandemic A (H1N1) virus infection and 2 were associated with influenza A virus for which the subtype was not determined.
- There have been a total of 95 deaths in children associated with the 2009 pandemic A (H1N1).
- The proportion of deaths attributed to influenza and pneumonia was again above the epidemic threshold as reported to the 122-Cities Mortality Reporting System. (6.9% compared to the national threshold of 6.6%)
- 7.1 % of outpatient visits reported through the U.S. Outpatient Influenza-like Illness Surveillance Network (ILINet) were due to influenza-like illness compared to the national baseline of 2.3 %. It was 6.1% the previous week.
- All 10 regions reported the proportion of outpatient visits for ILI were above their region-specific baseline levels. The percentages of outpatient visits for ILI ranged from 2.7% to 12.5%.
- All subtype influenza A viruses being reported to CDC were 2009 influenza A (H1N1) viruses.

- 12,943 specimens were tested and 4,855 (37.5%) were positive for influenza. Of the positive specimens, 4,844 (99.8%) were Influenza A. Out the Influenza A positives, 3,378 (69.7%) were 2009 pandemic A (H1N1).
- Influenza B virus continued to co-circulate at low levels with 2009 pandemic A (H1N1).
- The majority of 2009 A (H1N1) viruses are susceptible to neuraminidase inhibitor antiviral medication oseltamivir but rare sporadic cases of oseltamivir resistant 2009 influenza A (H1N1) have been detected. Enhanced surveillance is expected.
- All viruses tested remained sensitive to zanamivir.
- For additional information go to <http://www.cdc.gov/h1n1flu/updates/us/>

### Influenza Activity Worldwide

- As of October 17, the World Health Organization (WHO) reports there has been over 414,000 laboratory confirmed cases of 2009 pandemic A(H1N1) and nearly 5,000 deaths..
- Activity in the northern hemisphere is similar to last week. However, respiratory disease activity continues to spread and increase in intensity.
- Influenza activity is low in most European countries, but in Belgium, Israel, the Netherlands, Norway and parts of the United Kingdom, ILI rates are above normal. The number of influenza detections was high, so this may indicate an early start to the influenza season.
- Western Europe and Northern Asia reported increased ILI but not as widespread as North America.
- Only East Asia has reported any significant numbers of influenza A (H3N2) isolates.
- In tropical areas, rates of illnesses are generally declining.
- The temperate region of the southern hemisphere has no significant pandemic related activity.
- For additional information go to: <http://www.who.int/csr/disease/swineflu/en/index.html>

### Participants in Summit County Influenza Surveillance

17 medical providers	1 university health service	13 laboratories
1 workshop	6 nursing homes	Epicenter
3 pharmacy chains	3 residential institutions	
5 emergency departments	3 health departments- vital records offices	
31 private/public/charter schools and 7 districts (121 schools buildings)		

Number of influenza or influenza-like diagnoses by medical practitioners, emergency departments, university infirmary, nursing homes, institutions

Total number of absentees (diagnosis not specified) for selected elementary, middle, high schools and workshop

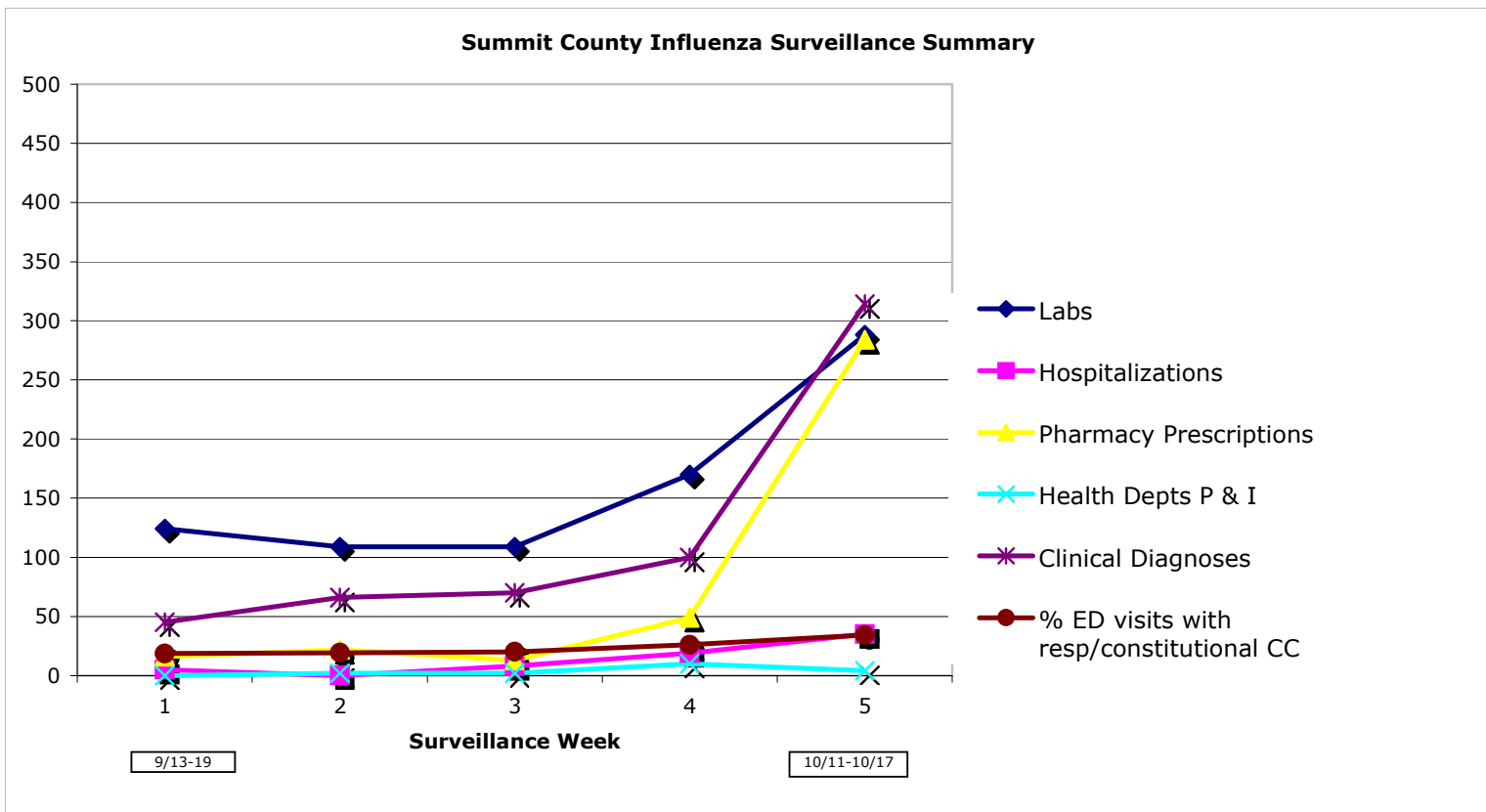
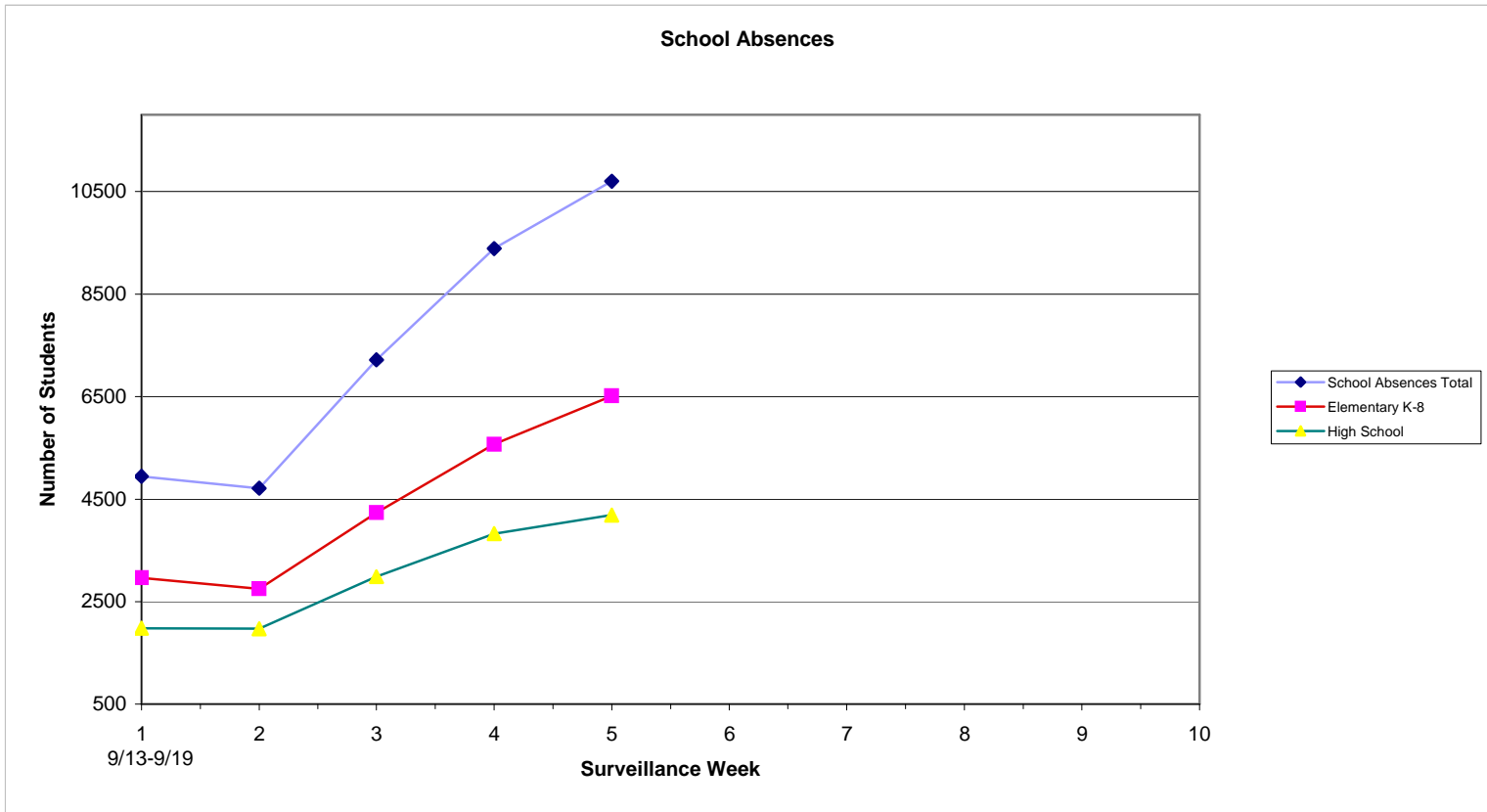
Number of positive influenza cultures and antigen tests from area labs

Total number of four influenza antiviral medications sold in pharmacy chains

Number of pneumonia/influenza deaths reported to CDC by the Akron Health Department, Barberton Health Department and Summit County Health District

Number of confirmed influenza hospitalizations at Summit County hospitals

The percent of respiratory & constitutional visits per week from two hospitals that electronically report ED visits which are categorized into respiratory or constitutional syndrome based on chief complaint.



This report was created by the Akron Health Department's Office of Epidemiology, on October 26, 2009. For questions, please contact Courtney Hudson at 330.375.2988 ext. 3122 or Michelle Papp at 330.375.2988 ext. 6717. Reporting from participants may not be complete each week. Numbers may change as updated reports are received.

For information about influenza resources in Summit County, go to [www.summitflu.org](http://www.summitflu.org)