

Influenza Surveillance Report for Summit County, 2009-2010
Report #6: Surveillance Week October 25 to October 31
Centers for Disease Control and Prevention (CDC) Week 43

Influenza Activity in Summit County

- Influenza activity showed a slight decline this week in Summit County.
- The EpiCenter average for adult emergency room visits for respiratory and constitutional complaints increased slightly from 27.71% to 29.42% this period.
- The number of people diagnosed with influenza-like illness (ILI) decreased. Last period there were 850 (which included reports from several new sites) compared to 548 for this period.
- The number of hospitalizations for influenza decreased from 76 last period to 65 this period.
- The number of lab tests being performed decreased. This period 233 tests were administered and 68 (29.1%) were positive for influenza A compared to last period when 106 (32.2%) tests were positive for influenza A out of the 329 tests administered. No tests were positive for influenza B.
- The number of absences reported by schools decreased by almost 5,400 for the period.
- The number of prescriptions of oseltamivir and zanamivir decreased slightly from 348 the previous period to 339 this reporting period.
- The number of pneumonia-related deaths stayed the same with 12 for the week.
- Local health departments have begun administering vaccine for those in the CDC identified target groups. For a listing of local H1N1 vaccine clinics, go to www.summitflu.org.

Influenza Activity in Ohio (Source: Ohio Department of Health)

- Ohio's influenza activity continues to be **widespread**. This refers to the geographic spread and not the severity of illness.
- Out of all the specimens tested at the ODH lab during this season, only 1 specimen has been positive for seasonal influenza.
- For the 2009-2010 season, there have been 1,466 influenza-associated hospitalizations and 643 were laboratory confirmed 2009 pandemic A (H1N1).
- Year-to-date there have been 22 confirmed 2009 pandemic A (H1N1) influenza-related deaths. This includes 5 pediatric deaths.

Influenza Activity in U.S. (Source: Centers for Disease Control and Prevention)

- 48 states reported **widespread** activity; 2 states had **regional** activity; District of Columbia had **local** activity; and Puerto Rico and Guam reported sporadic activity.
- All regions again reported elevated levels of out-patients reporting ILI.
- 18 influenza-associated pediatric deaths were reported during the week. These deaths occurred between July 12 and October 31, 2009. The 2009 pandemic A (H1N1) virus infection was associated with 15 of the deaths and 3 were associated with influenza A virus for which the subtype was not determined. The CDC reports there has been a total of 129 deaths in children associated with the 2009 pandemic A (H1N1).
- The proportion of deaths attributed to influenza and pneumonia was above the epidemic threshold as reported to the 122-Cities Mortality Reporting System for the fifth week. (7.4% compared to the national threshold of 6.7%)
- Since August 30, there have been 17,838 laboratory-confirmed influenza associated hospitalizations and 672 laboratory-confirmed deaths.
- 7.7 % 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 %.

- All 10 regions reported the proportion of outpatient visits for ILI were above their region-specific baseline levels. The percentage ranged from 5.0% to 10.7% and decreased in 5 out of 10 regions from the previous week.
- 14,151 specimens were tested and 5,258 (37.2%) were positive and 8,893 (62.8%) were negative for influenza. Of the positive specimens, 5,244 (99.7%) were influenza A.
- Out of the influenza A positives, 3,889 (74.2%) were 2009 pandemic A (H1N1); 1,310 (25.0%) subtyping was not performed; 41 (0.8%) were unable to be subtyped; 2 were influenza A (H3) (less than 0.1%) and 2 were influenza A (H1) (less than 0.1%) and 14 were influenza B (0.3%).
- Seasonal influenza A (H1), A (H3) and B co-circulated 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. All viruses tested remained sensitive to zanamivir.
- For additional information go to <http://www.cdc.gov/h1n1flu/updates/us/>

Influenza Activity Worldwide (Source: World Health Organization)

- Over 482,000 laboratory confirmed cases of 2009 pandemic A (H1N1) and 6,000 deaths have been reported.
- Intense and persistent influenza transmission in North America has been reported and there has not been evidence of a peak in activity.
- Increasing levels of respiratory disease and active influenza transmission were reported in parts of the Caribbean, including Cuba and Haiti. Most other countries in the tropical region of Central and South America reported declining influenza activity.
- Evidence of increasing and active transmission of 2009 pandemic A (H1N1) across Northern and Eastern Europe and Central and Western Asia was reported.
- In China after an earlier wave of mixed influenza activity which included seasonal (H3N2) and pandemic A (H1N1), activity is now due to 2009 pandemic A (H1N1).
- Little influenza activity was reported in the temperate region of the southern hemisphere.
- Since the 2009 pandemic A (H1N1) virus emerged, infections in the different species of animals have been reported (pig, ferret, cats and turkey). Limited evidence suggests that infection occurred following direct transmission of the virus from an infected human.
- 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
4 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, and institutions

Total number of absentees (diagnosis not specified) for selected 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 November 9, 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.

