

Week 41: October 6- October 12, 2013

ILLINOIS DEPARTMENT OF PUBLIC HEALTH



Illinois Influenza Surveillance Report

Week 41: Week Ending Saturday, October 12, 2013

Division of Infectious Diseases Communicable Disease Section

10/18/2013

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Summary

- For this reporting week, the proportion of outpatient visits for influenza-like illness (ILI)¹ was **1.20%**.
- Based on CDC criteria, Illinois influenza activity is classified as **no activity** (see CDC FluView Section) for this reporting week.
- Febrile Respiratory Illness (FRI) surveillance² at Naval Recruit Training Command, Great Lakes was **at or below expected value** for this reporting week.
- For this reporting week there were **68** influenza specimens tested by WHO/NREVSS collaborating Illinois laboratories (which includes all Illinois Department of Public Health Laboratories). All specimens but one tested negative for influenza. The positive specimen result was Influenza A, H3N2.
- **One** influenza-associated Intensive Care Unit (ICU) admission³ was reported for this reporting week.
- **No** influenza-associated pediatric deaths were reported for this reporting week.
- For this reporting week, **no** influenza outbreaks were reported in a long-term care facility.

Novel Influenza A

H3N2v

- One infection with an influenza A (H3N2) variant virus (H3N2v) was reported to CDC by Iowa. Contact between the case patient and swine in the week preceding illness was reported. The patient has fully recovered and no further cases have been identified in contacts of the case patient. This is the first H3N2v infection reported for the 2013-2014 influenza season, which began on September 29, 2013.

H7N9

- There are no updates or additional cases to report for Novel Influenza A H7N9.

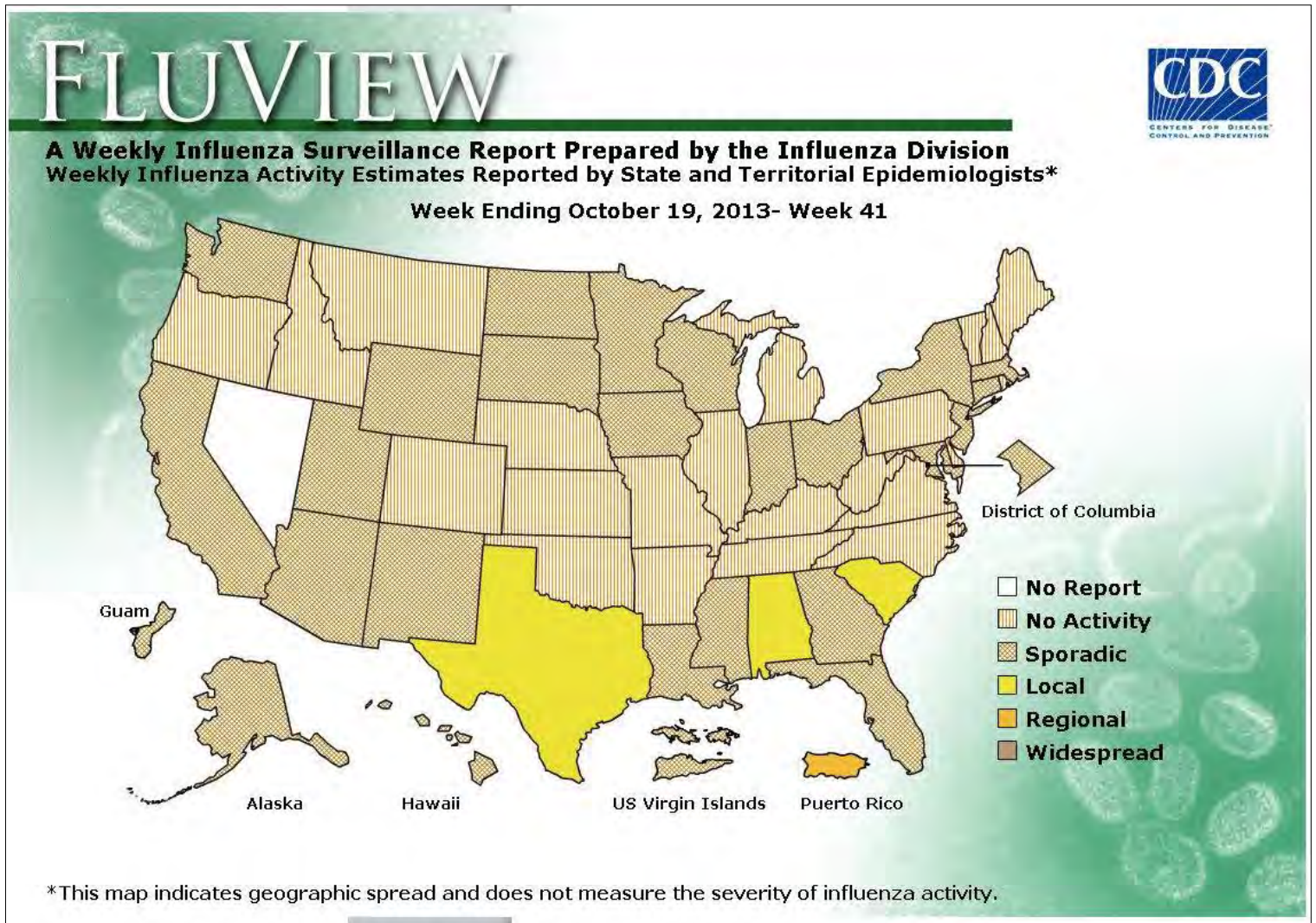
¹ ILI "Influenza like Illness" is defined as fever $\geq 100^{\circ}\text{F}$ and cough and/or sore throat.

² FRI surveillance is ongoing at 8 U.S. military basic training centers, representing all service branches. FRI Rate Status is classified into one of 3 categories:

1. At or below expected value
2. Moderately elevated
3. Substantially elevated

³ For the purpose of diagnosis, influenza can be diagnosed by using the following test: reverse transcription polymerase chain reaction [RT-PCR], viral culture, Immunofluorescence [Direct Fluorescent Antibody (DFA) or Indirect Fluorescent Antibody (IFA) Staining], Enzyme Immuno Assay (EIA) or any rapid diagnostic test. Sensitivities of rapid diagnostic tests are approximately 50-70% when compared with viral culture or reverse transcription polymerase chain reaction (RT-PCR), and specificities of rapid diagnostic tests for influenza are approximately 90-95%. False-positive (and true-negative) results are more likely to occur when disease prevalence in the community is low, which is generally at the beginning and end of the influenza seasons. False-negative (and true-positive) results are more likely to occur when disease prevalence is high in the community, which is typically at the height of the influenza season.

CDC FluView



No activity: No laboratory confirmed cases of influenza and no reported increase in cases of influenza like illness (ILI).

Sporadic: Small numbers of laboratory confirmed influenza cases or a single laboratory confirmed influenza in a single region of the state.

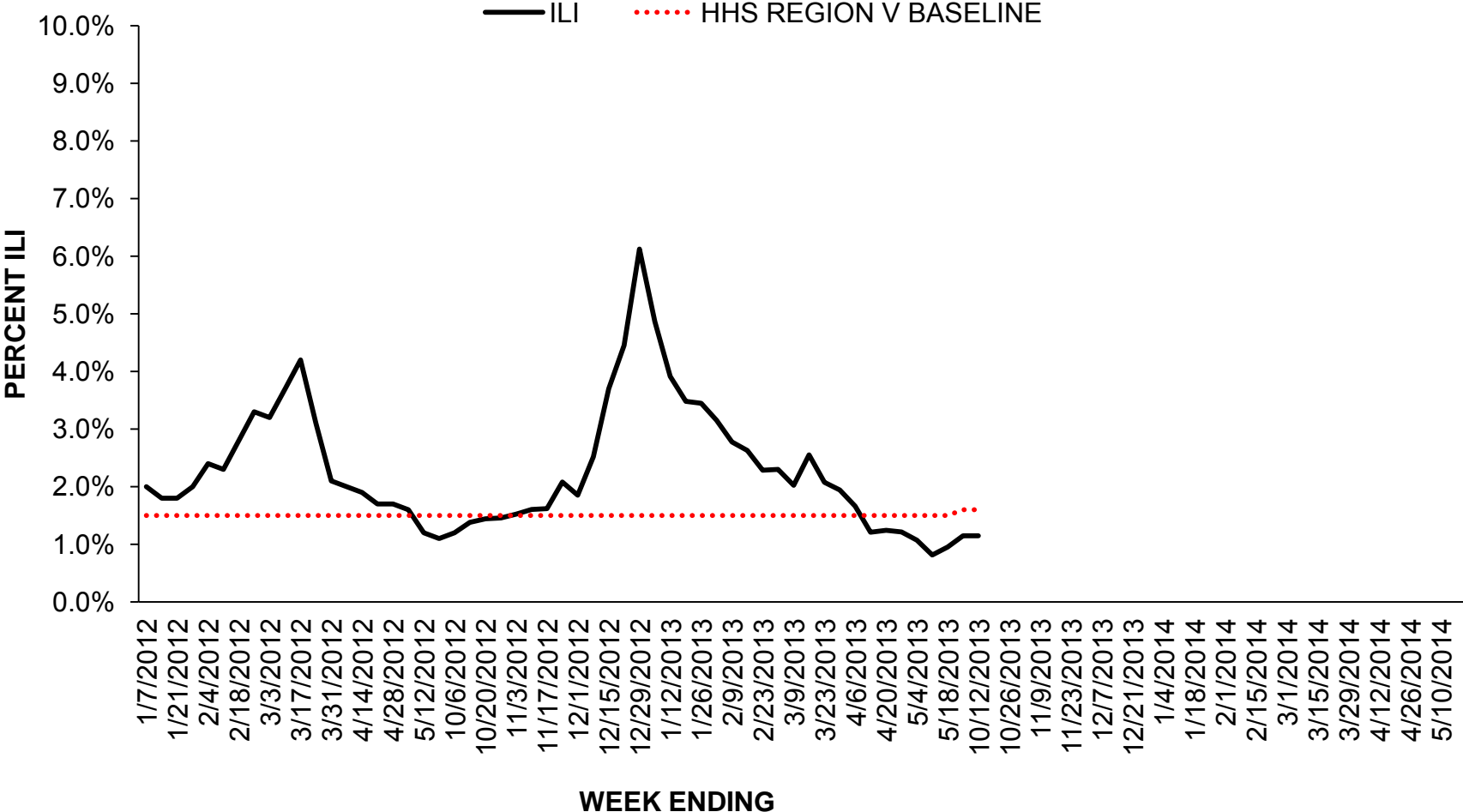
Local: Outbreaks of influenza or increases in ILI and recent laboratory confirmed influenza in a single region of the state.

Regional: Outbreaks of influenza or increases in ILI and recent laboratory confirmed influenza in at least two but less than half the regions of the state.

Widespread: Outbreaks of influenza or increases in ILI cases and recent laboratory confirmed influenza in at least half the regions in the state.

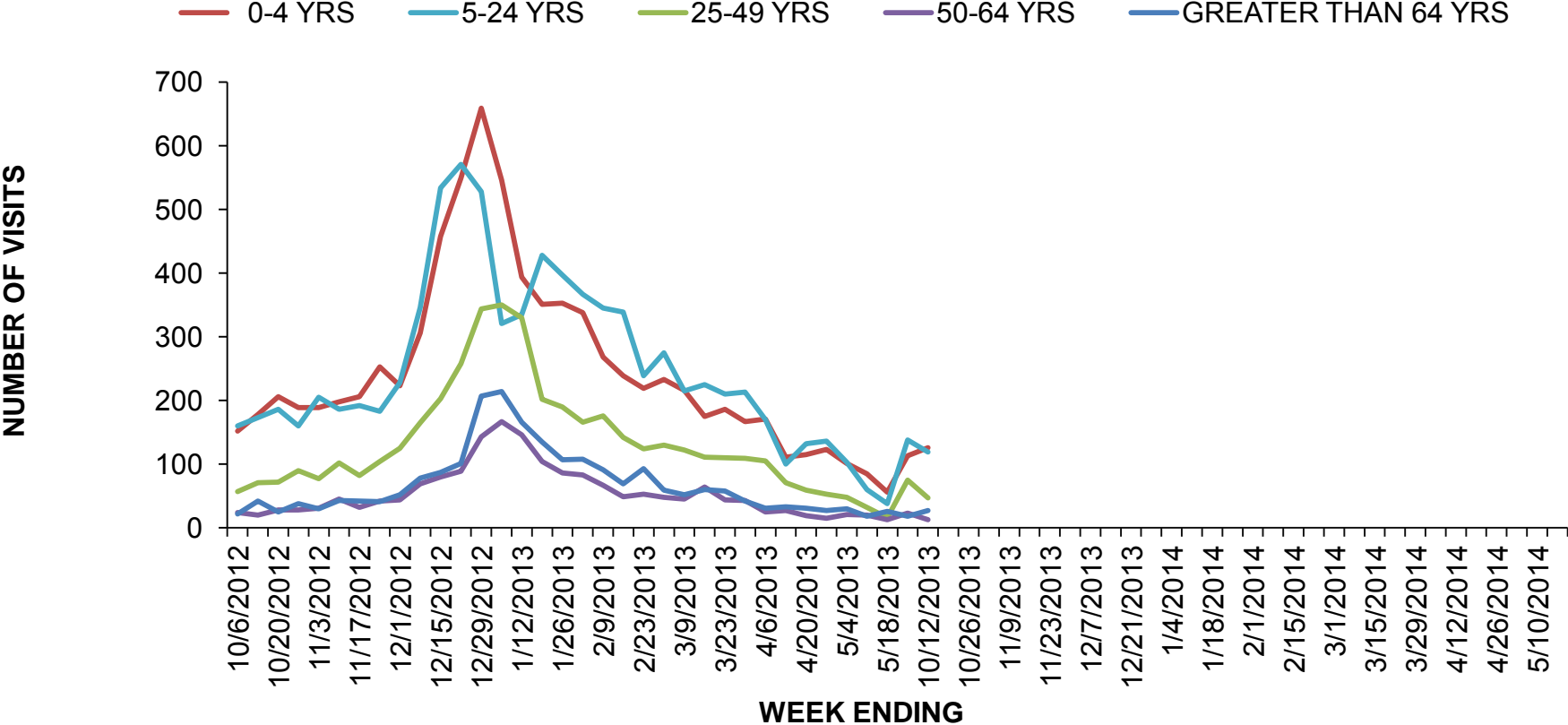
ILINet Provider Surveillance

Influenza Like Illness Outpatient Surveillance 2012-2014



ILI Visits by Age Group

2012-2014 INFLUENZA SEASON PROPORTION OF ILI OFFICE VISITS BY AGE GROUP



Great Lakes Naval Recruit Influenza Surveillance

Febrile Respiratory Illness (FRI) surveillance¹ at the Naval Recruit Training Command, Great Lakes was **at or below expected value** for week 41 (week ending October 12, 2013). For more information visit <http://www.med.navy.mil/sites/nhrc/geis/Pages/default.aspx>

Influenza Intensive Care Unit (ICU) Admissions and Deaths

There was one influenza related ICU admission and no deaths for this reporting week.

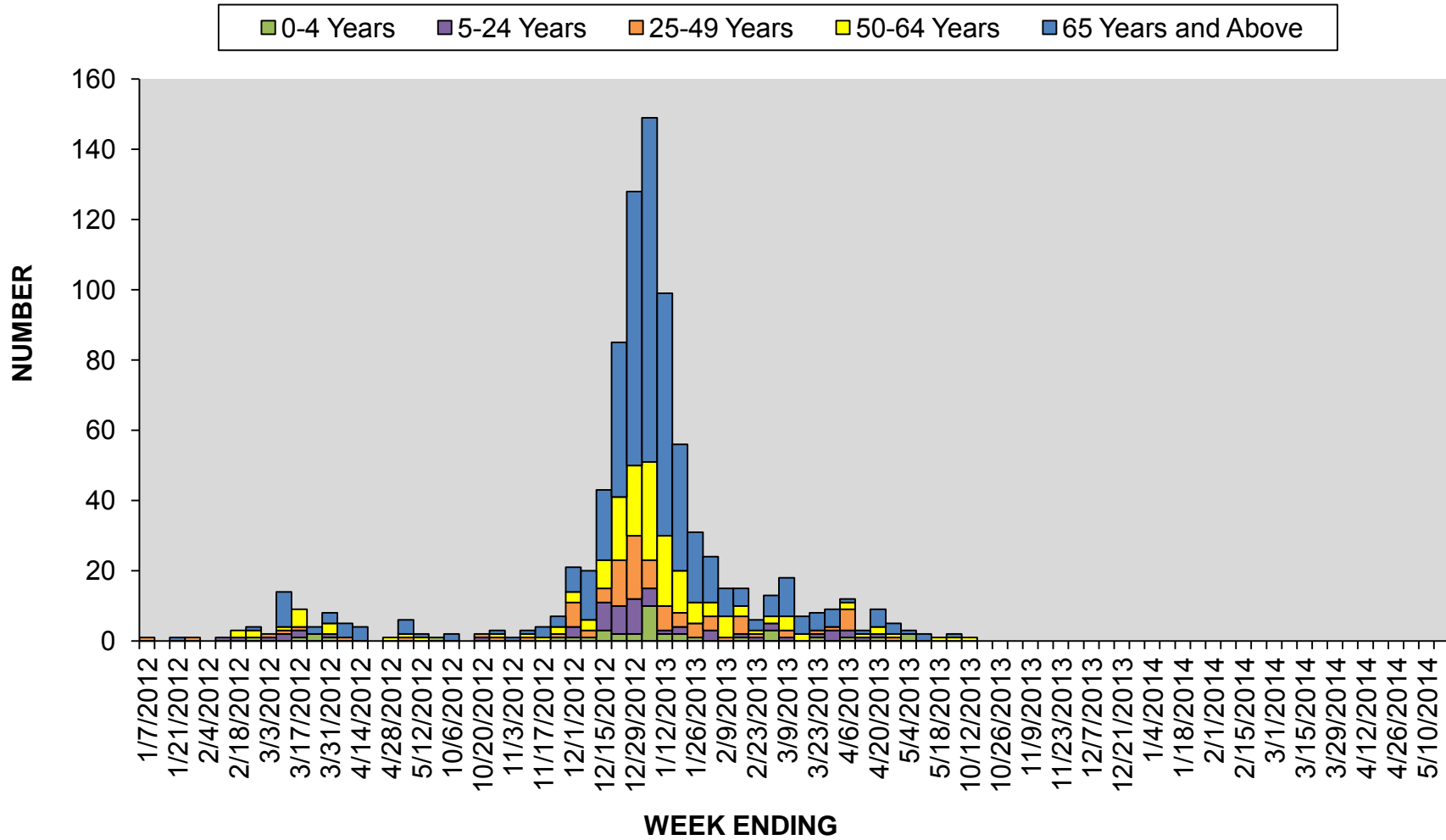
Year	Week No	Admissions	Deaths ⁴
2013	40	2	0
2013	41	1	0

¹ FRI surveillance is ongoing at 8 U.S. military basic training centers, representing all service branches. FRI Rate Status is classified into one of 3 categories:

1. At or below expected value
2. Moderately elevated
3. Substantially elevated

⁴ Deaths are reported for a) adults admitted to an intensive care unit who have a positive culture or PCR test for influenza and b) hospitalized and non- hospitalized children (less than 18 years of age) with a positive influenza test. The degree to which influenza infection is an immediate or underlying cause of death is not ascertained. CDC Influenza-Associated Pediatric Mortality data: <http://gis.cdc.gov/GRASP/Fluview/PedFluDeath.html>

Influenza Related ICU Admissions by Age Group, 2012-2014



Laboratory Surveillance

For this reporting week there were **68** influenza specimens tested by WHO/NREVSS collaborating Illinois laboratories (which includes all Illinois Department of Public Health Laboratories). All specimens but one tested negative for influenza. The positive specimen result was Influenza A, H3N2.

For more information about circulating viruses visit:

- St Louis Children’s Hospital Weekly Virus/Microbiology Update:
<http://slchlabtestguide.bjc.org/Default.aspx?url=63e0653d-fe31-466f-9228-d4de90fa7424>

Year	Week	A (H1)	2009(A)H 1N1	A (H3)	A(Unable to subtype)	A(Sub typing not performed)	B	Total # Tested	% Positive
2013	40	0	0	0	0	0	0	56	0%
2013	41	0	0	1	0	0	0	68	0.01%

Viral Resistance

Information regarding antiviral resistance can be found on the CDC FluView Weekly Influenza Surveillance Report. Additional information on recommendations for treatment and chemoprophylaxis of influenza virus infection with antiviral agents is available at <http://www.cdc.gov/flu/antivirals/index.htm> .

Influenza Outbreaks Reported in Long-Term Facilities (LTC) and Nursing Homes (NH)

There were no outbreaks reported in long-term care facilities for this reporting week.

Region	2013-2014 Influenza Season -Number of outbreaks (%)
Rockford (1)	0(0)
Peoria (2),	0(0)
Edwardsville (4),	0(0)
Marion (5),	0(0)
Champaign (6),	0(0)
West Chicago (7)	0(0)
Chicago/Cook (8)	0(0)
Total	0(0)

IDPH Infectious Diseases Regional Map

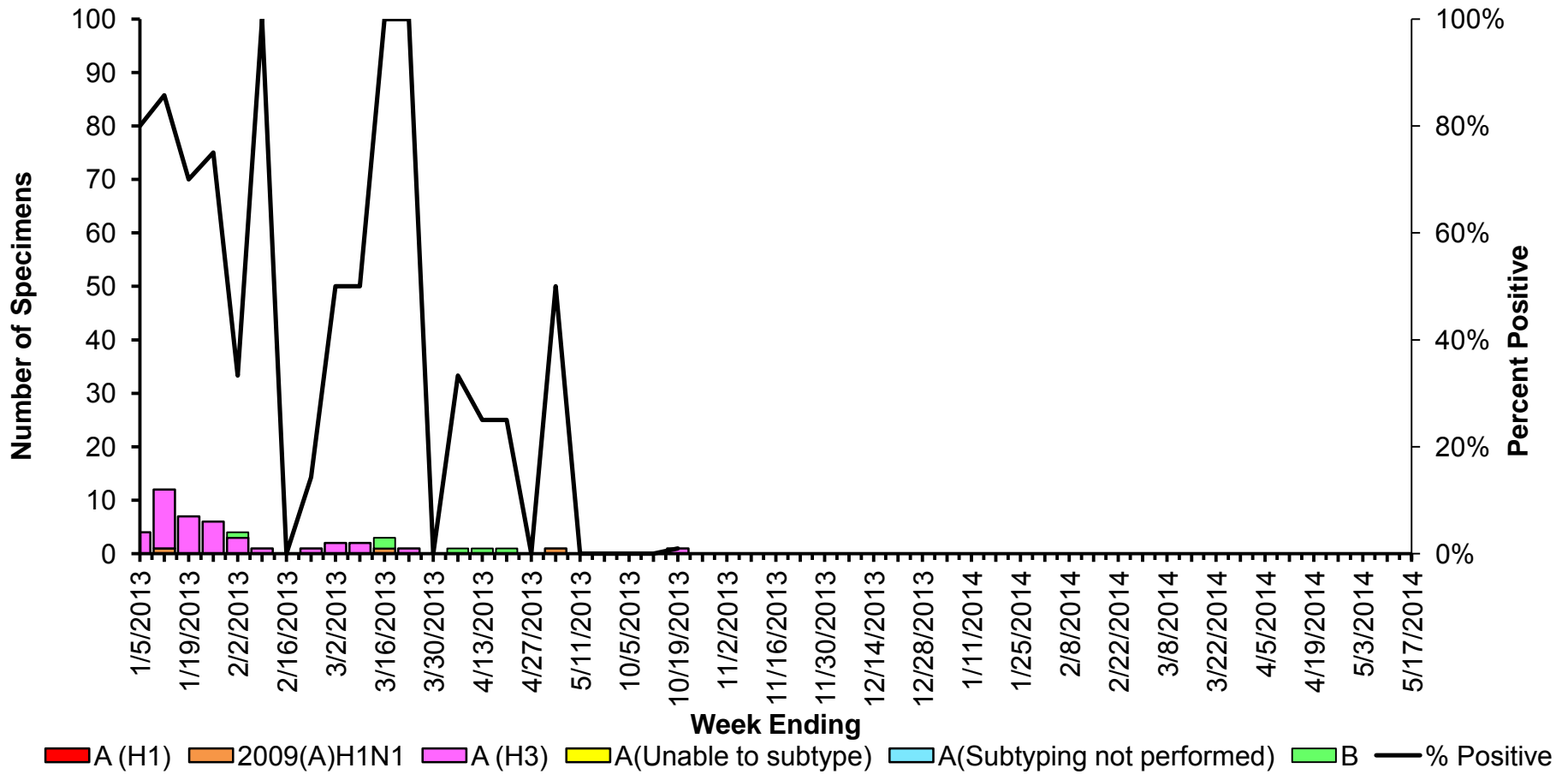


- 1 – Rockford Region
- 2 - Peoria Region
- 4 – Edwardsville Region
- 5 – Marion Region
- 6 - Champaign Region
- 7 – West Chicago Region
- 8 – Chicago/Cook Co Region

Weekly Viral Subtype

Influenza Isolates from Illinois Reported by WHO/NREVSS Collaborating Laboratories, 2013-2014

Influenza Isolates from Illinois Reported by
WHO/NREVSS Collaborating Laboratories
2013-2014



Resources

- Centers for Disease Control and Prevention Influenza Website: <http://www.cdc.gov/flu/>
- Immunization Action Coalition Website: <http://immunize.org/>
- IDPH Seasonal Influenza Website: <http://www.idph.state.il.us/flu/surveillance.htm>
- St Louis Children's Hospital Weekly Virus/Microbiology Update:
<http://slchlabtestguide.bjc.org/Default.aspx?url=63e0653d-fe31-466f-9228-d4de90fa7424>
- CDC Avian Influenza A (H7N9): <http://www.cdc.gov/flu/avianflu/h7n9-virus.htm>.