Influenza Surveillance Report

www.infectiousdisease.dhh.louisiana.gov **Week 45 11/06/11 - 11/12/11**

The Influenza Surveillance Summary Report describes the results of the tracking done by the Louisiana Office of Public Health Infectious Disease Epidemiology Section (IDEpi). This report relies on data supplied by sentinel surveillance sites, including hospital emergency department (ED), laboratories and physicians' offices. Sentinel sites provide weekly data on Influenza Like Illness (ILI) and/or laboratory confirmed cases.

Taken together, ILI surveillance and laboratory surveillance provide a clear picture of the influenza activity occurring in Louisiana each week. If you have any questions about our surveillance system or would like more information, please contact Julie Hand at 504-568-8298 or julie.hand@la.gov.

ILI is defined as an illness characterized by cough and/or cold symptoms and a fever of 100˚ F or greater in the absence of a known cause. While not every case of ILI is a case of influenza, the CDC has found that trends in ILI from sentinel sites are a good proxy measure of the amount of influenza activity in an area. For this reason, all states and territories participating in the national surveillance program monitor weekly ILI ratios from their sentinel surveillance sites.

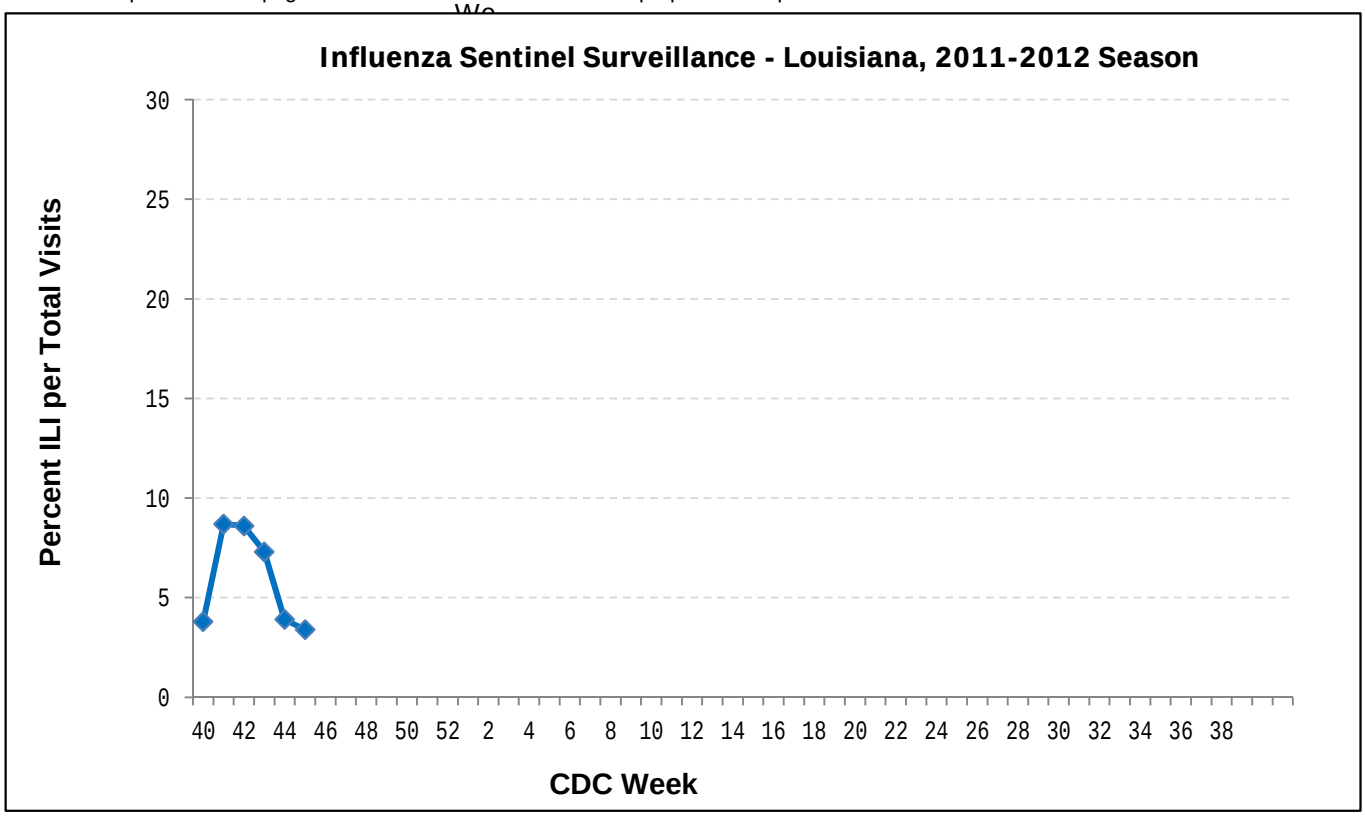
Laboratory testing: Not all sentinel sites have access to laboratory testing. However, many hospitals and physicians' offices do perform some influenza testing. Sites that test for influenza report the number of positive tests each week and the total number of tests performed each week. This information is included on page 3 of this report.

Influenza activity remained stable this week in Louisiana.

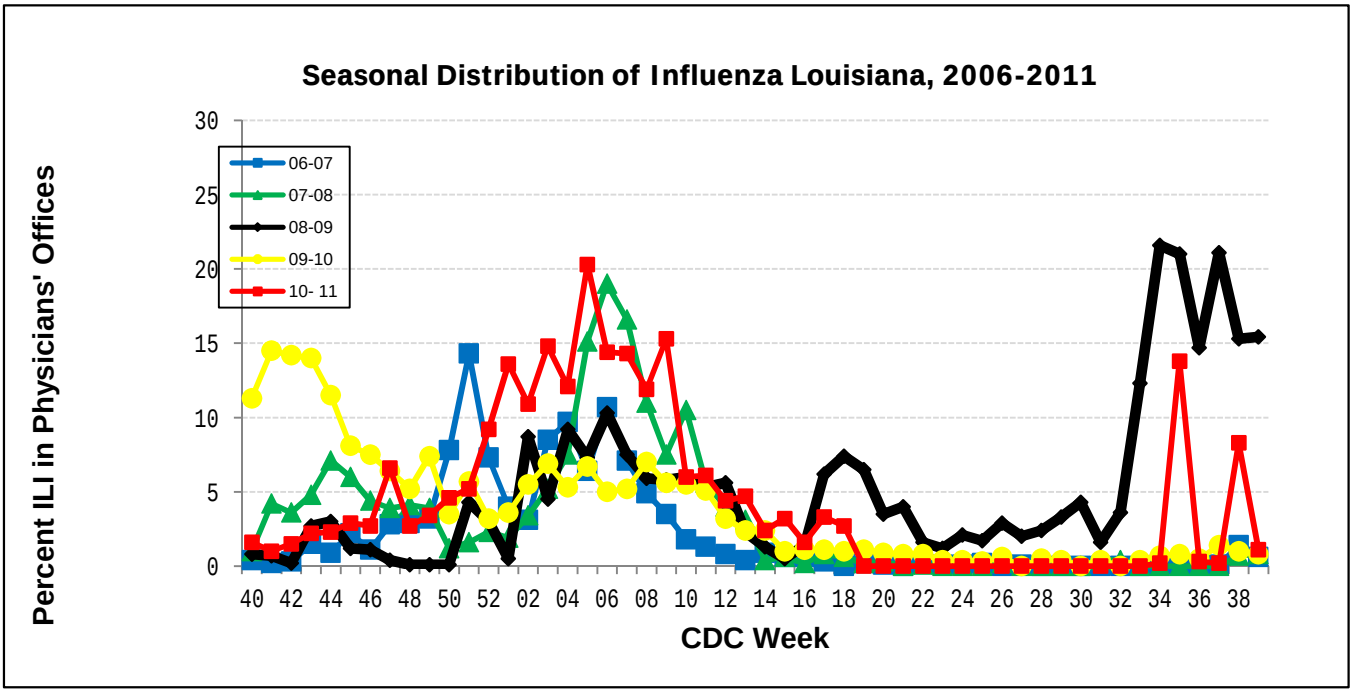
Page 2 : ILI Activity
Page 3: Louisiana Activity
Page 4: National Data Summary
Page 5: Influenza Activity Maps

ILI Surveillance

This graph shows the percentage of visits for ILI over the total number of visits for sentinel surveillance sites. This is the best approach to estimate the magnitude of influenza transmission. ILI counts do include some viral infections other than influenza, but experience over the last 50 years has shown that this approach is a reliable method to estimate influenza transmission. It does not show which strain of influenza virus is responsible. The page on lab surveillance does show the proportion of specimens attributable to each virus strain.

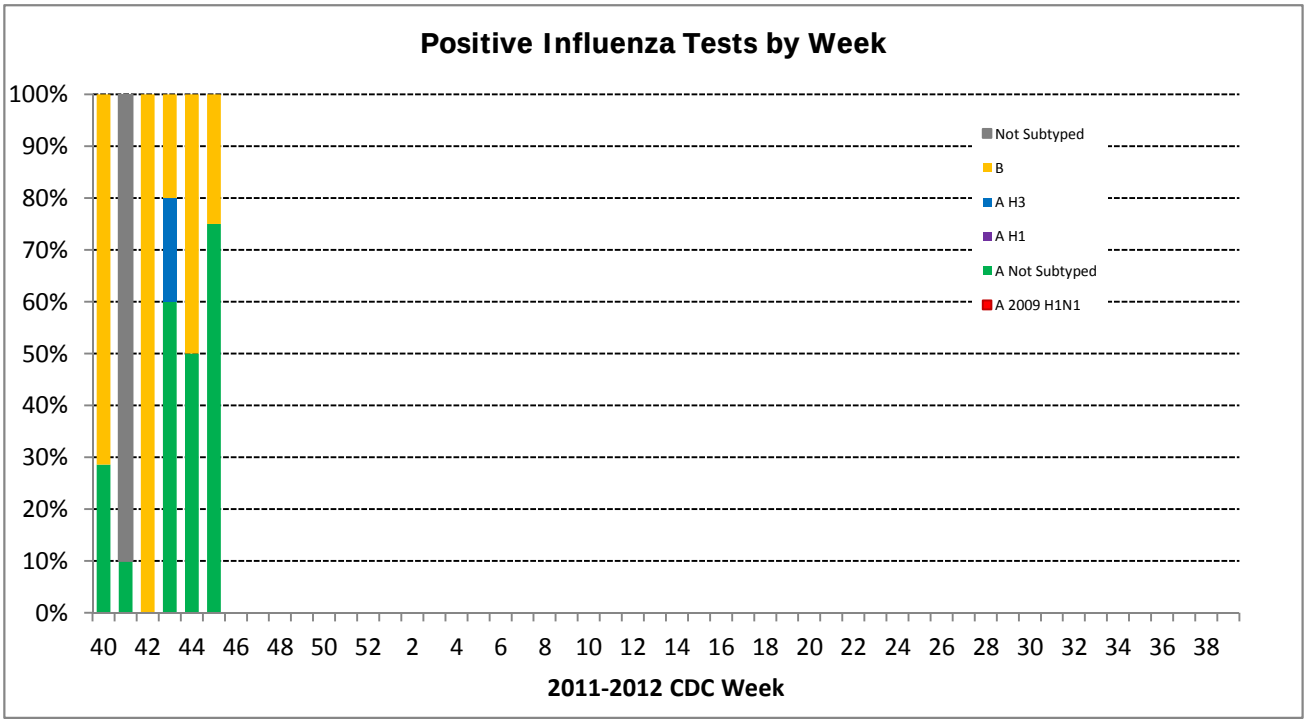


This graph shows the data on ILI surveillance among sentinel physicians' over the past 5 seasons to enable comparisons with previous years and better estimate the amplitude of this season's influenza transmission.



Louisiana Activity

Virologic Surveillance

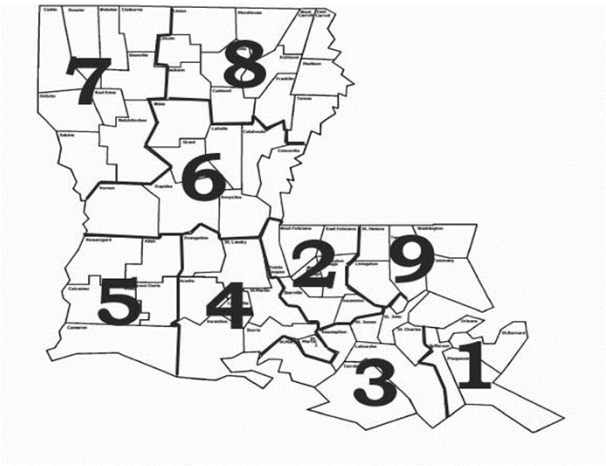


The above graph shows the distribution by virus type from sentinel sites and the State Public Health Laboratory. Sentinel site testing is based on rapid test results. All subtyping is done by PCR at the State Lab.

Geographical Distribution of ILI

Region	% ILI*
1	
2	
3	
4	
5	
6	
7	
8	
9	

** %ILI over the last 4 weeks based on sentinel surveillance data*



Low <2%	
MedLow 2-5%	
MedHigh 5-10%	
Very High >10%	

National Data Summary

During week 45, influenza activity remained low in the United States.

Proportion of deaths attributed to pneumonia and influenza (P&I) was below the epidemic threshold.

No influenza-associated pediatric deaths were reported.

Proportion of outpatient visits for influenza-like illness (ILI) was 1.2%, below the national baseline of 2.4%.

U.S. Virologic Surveillance:

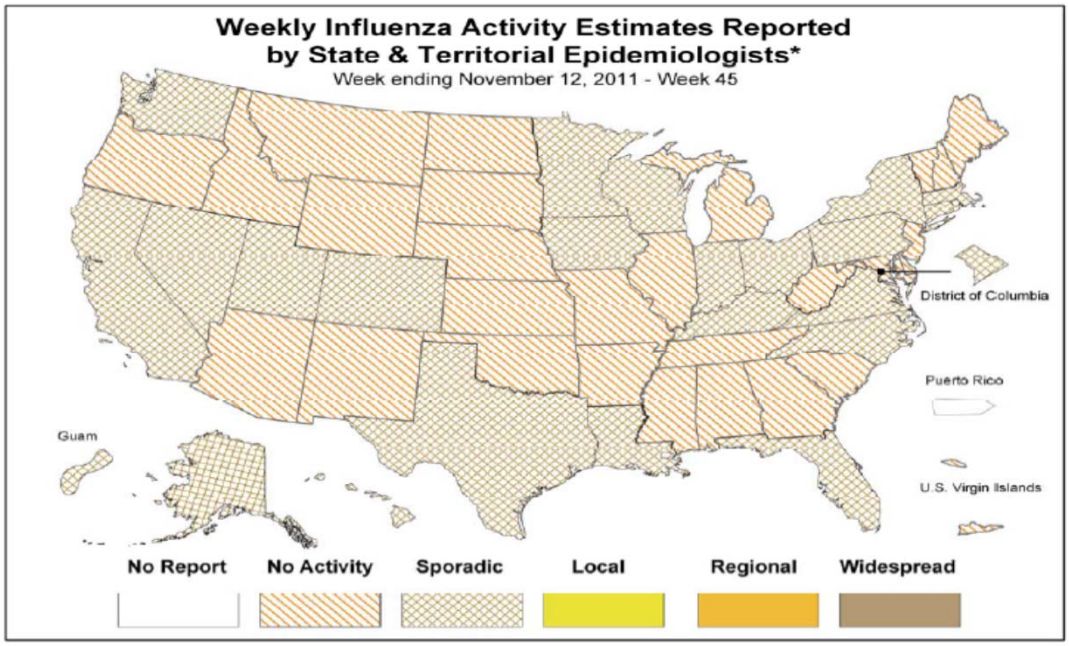
	Week 45
Specimens tested	**2,145**
Positive specimens	**30 (1.4%)**
Positive specimens by type/subtype	
Influenza A	**21 (70%)**
A (2009 H1N1)	1 (4.8%)
A (subtyping not performed)	5 (23.8%)
A (H3)	15 (71.4%)
Influenza B	**9 (30%)**

Antiviral Resistance:

	Viruses tested (n)	Resistant Viruses, Number (%)	Viruses tested (n)	Resistant Viruses, Number
		Oseltamivir		Zanamivir
Influenza A (H3N2)	12	0 (0.0%)	12	0 (0.0%)
Influenza B	2	0 (0.0%)	2	0 (0.0%)
2009 Influenza A (H1N1)	0	0 (0.0%)	0	0 (0.0%)

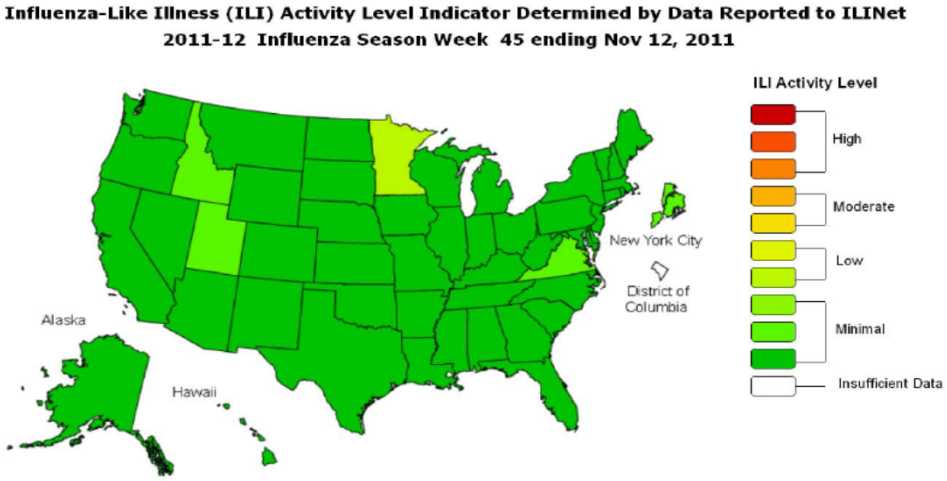
Influenza Activity Maps

Graph 1: Geographic Spread of Influenza as Assessed by State and Territorial Epidemiologists: The influenza activity reported by state and territorial epidemiologists indicates geographic spread of influenza viruses, but does not measure the severity of influenza activity.



* This map indicates geographic spread & does not measure the severity of influenza activity

Graph 2: ILINEt Activity Indicator Map: Data collected in ILINet are used to produce a measure of ILI activity by state. Activity levels are based on the percent of outpatient visits in a state due to ILI and are compared to the average percent of ILI visits that occur during spring and fall weeks with little or no influenza virus circulation.



*This map uses the proportion of outpatient visits to health care providers for influenza-like illness to measure the ILI activity level within a state. It does not, however, measure the extent of geographic spread of flu within a state. Therefore, outbreaks occurring in a single city could cause the state to display high activity levels.
Data collected in ILINet may disproportionally represent certain populations within a state, and therefore, may not accurately depict the full picture of influenza activity for the whole state.
Data displayed in this map are based on data collected in ILINet, whereas the State and Territorial flu activity map is based on reports from state and territorial epidemiologists. The data presented in this map is preliminary and may change as more data is received.
Differences in the data presented here by CDC and independently by some state health departments likely represent differing levels of data completeness with data presented by the state likely being the more complete.