

Influenza Surveillance Report for Summit County, 2009-2010
Report #12: Surveillance Week November December 6 to December 12
Centers for Disease Control and Prevention (CDC) Week

Influenza Activity in Summit County

- Influenza activity declined again this week in Summit County.
- The EpiCenter average for adult emergency room visits for respiratory and constitutional complaints increased slightly going from 19.54% last period to 20.55% this period.
- The number of people diagnosed with influenza-like illness (ILI) continued to decrease. Last period there were 120 diagnoses compared to 66 for this period.
- The number of adult hospitalizations for influenza decreased again going from 11 last period to 8 this period.
- The number of lab tests being performed decreased. This period 41 tests were administered and none were positive for influenza A compared to last period when 4 (5.26%) tests were positive for influenza A out of the 76 tests administered.
- The number of absences reported by schools decreased by almost 7,400 this period.
- The number of prescriptions of oseltamivir and zanamivir decreased to 27 for this period compared to 39 for the last reporting period.
- The number of pneumonia-related deaths increased to 19 this period compared to 13 in the previous period.
- One influenza death was reported.
- Local health departments continued administering vaccine to those in the CDC identified target groups for the period.

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

- Ohio's influenza activity remained **regional**. This refers to the geographic spread and not the severity of illness.
- Out of the 2,958 specimens tested at the ODH lab during this season, only 2 (0.06%) specimens have been positive for seasonal influenza; one was A (H1) and the other was A (H3). Out of the 2,958 specimens tested, 1,185 (40.06%) have tested positive for 2009 pandemic A (H1N1).
- For the 2009-2010 season, there have been 3,075 influenza-associated hospitalizations and 1,431 were laboratory confirmed 2009 pandemic A (H1N1).
- There have been 8 confirmed influenza-associated pediatric mortality reports for the 2009-2010 season of which 5 were confirmed 2009 pandemic A (H1N1).
- Year-to-date there have been 46 confirmed 2009 pandemic A (H1N1) influenza-related deaths.

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

- Eleven states reported **widespread** activity (a decline of 3 from previous week); 20 states, District of Columbia, and Puerto Rico had **regional** activity; 11 states and U.S. Virgin Islands reported **local** activity; 8 states reported **sporadic** activity and Guam reported no activity.
- Influenza activity continued to decrease.
- Nine influenza-associated pediatric deaths were reported during the week. These deaths occurred between August 23 and December 5, 2009. The 2009 pandemic A (H1N1) virus infection was associated with 8 of the deaths and 1 was associated with influenza A virus for which the subtype was undetermined. Since April 26, 2009, the CDC reports there has been a total of 232 deaths in children associated with 2009 pandemic A (H1N1) virus.
- 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 eleventh week. (7.6% compared to the national threshold of 7.2%)
- Since August 30, there have been 35,309 laboratory-confirmed influenza associated hospitalizations and 1,567 laboratory-confirmed deaths.

- For outpatient visits reported through U.S. Outpatient Influenza-like Illness Surveillance Network (ILINet), 2.6% were due to influenza-like illness compared to national baseline of 2.3 %.
- Five out of the 10 regions reported the proportion of outpatient visits for ILI was above their region-specific baseline levels.
- 5,640 specimens were tested and 391 (6.9%) were positive and 5,249 (93.1%) were negative for influenza. Of the positive specimens, 389 (99.5%) were influenza A and 2 (0.5%) were influenza B.
- Out of the influenza A positives, 273 (70.2%) were 2009 pandemic A (H1N1); 108 (27.8 %) subtyping was not preformed; 6 (1.5%) were unable to be subtyped; and 2 were A (H3) (0.5%).
- Seasonal A(H3N2) and influenza B co-circulated at low levels with 2009 pandemic A (H1N1).
- The majority of 2009 pandemic A (H1N1) viruses are susceptible to the neuraminidase inhibitor antiviral medication oseltamivir but rare sporadic cases of oseltamivir resistant 2009 pandemic A (H1N1) viruses 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- WHO)

- There have been 10,582 deaths reported. Over 200 countries and territories have reported laboratory confirmed cases.
- Pandemic influenza activity in the temperate zone of North America remains active and geographically widespread. It appears disease activity has peaked in North America.
- Across continental Europe, geographically widespread and active transmission of pandemic influenza virus continued. However, in Western and Northern Europe disease activity appears to be declining.
- Influenza transmission remains active in much of Western and Central Asia.
- While influenza activity remains active in East Asia, it appears to be declining.
- In the tropical region of Central and South America and the Caribbean, influenza activity remains widespread but disease activity appears to be declining again this period.
- In Northern and Eastern Africa, 2009 pandemic A (H1N1) virus appears to be the predominant virus circulating. In West Africa, a mixture of pandemic and seasonal influenza are circulating.
- Sporadic cases of pandemic influenza continue to be reported in the temperate region of the southern hemisphere. However there is no evidence of sustained community transmission.
- 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 December 21, 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.

