Influenza Weekly Report

2014 Week 12 (March 16 – 22) through 2015 Week 12 (March 22 – 28)

Department of Health and Human Services
Division of Public and Behavioral Health
Office of Public Health Informatics and Epidemiology

Brian Sandoval
Governor
State of Nevada

Romaine Gilliland
Director
Department of Health and Human Services

Richard Whitley, MS
Administrator
Division of Public and Behavioral Health

Tracey D Green, MD
Chief Medical Officer
Division of Public and Behavioral Health

April 2015
Edition 1.0
Data for the graphs and tables on the following pages are provisional and may be updated as additional information becomes available.

**Purpose**

The purpose of this report is to provide an overview of and statistics for the influenza season in Nevada for the local public health authorities, sentinel providers and the public.

**Influenza-Like Illness Network Surveillance (ILINet)**

Respiratory specimens are tested for influenza by the World Health Organization (WHO) and National Respiratory and Enteric Virus Surveillance System (NRVESS) collaborating laboratories by sub-type. During week 12, there were 14,250 specimens collected and tested for influenza, of those 1,590 were positive (11.2%).

**Figure 1**


The Nevada total includes laboratory tests for all Nevada residents including out of state laboratories. During week 12, there were 10 specimens collected and tested for influenza of which 4 were positive (40.0%).

**Figure 2**

Source of Data: CDC: ILINet.
Nevada State Public Health Laboratory (NSPHL) has tested 393 specimens for influenza from sentinel providers, of which 274 have been positive (69.7%). Southern Nevada Public Health Laboratory (SNPHEL) has tested 429 specimens this season of which 104 were positive. Nationally, there have been 591,406 specimens sent to the WHO and NERVSS laboratories of which 115,955 were positive or 19.6%. The national numbers in Table 1 are reflected in Figure 1. The state of Nevada data in Table 1 is reflected in Figure 2. The Nevada total includes laboratory test for all Nevada residents including out of state laboratories.

### Table 1

<table>
<thead>
<tr>
<th>ILINet Surveillance: Influenza Specimens Tested State and Nationally</th>
</tr>
</thead>
<tbody>
<tr>
<td>NSPHL</td>
</tr>
<tr>
<td>-------</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td>Specimens Tested</td>
</tr>
<tr>
<td>Positives to Influenza</td>
</tr>
<tr>
<td>Influenza A:</td>
</tr>
<tr>
<td>A(2009 H1N1)</td>
</tr>
<tr>
<td>A(H3)</td>
</tr>
<tr>
<td>A(Sub-typing not performed)</td>
</tr>
<tr>
<td>Influenza B:</td>
</tr>
</tbody>
</table>

Source of Data: CDC: FluView Report and CDC: ILINet.

Influenza-like Illness (ILI) Surveillance Network has each sentinel providers report the number of patients that meet the ILI case definition and number of patients that visit the provider weekly. The “percentage of visits” is the number of ILI patients divided by the total number of patients visit per week. Nevada’s ILI percentage of visits to providers for week 12 is 1.0% and is below the state baseline 1.4%. Region 9 ILI percentage for week 12 is 2.5% and is below the region baseline of 2.7%. Region 9 includes the following states/territory: Arizona, California, Guam, Hawaii, and Nevada. The national ILI percentage for week 12 is 2.1% and is above the national baseline 2.1, for the 18th consecutive week.

### Figure 3

Percentage of Visits for ILI Reported to Outpatient ILI Surveillance Network, Comparison Between National, Regional, and State, 54 Week Comparison (2014 WK 12 - 2015 WK 12)

Source of Data: CDC: FluView Report and CDC: ILINet.

During week 12, 1.3% of visits to sentinel providers were due to ILI; this is higher than the 2013-2014 influenza season (0.3%). There were 17,610 patients seen by ILI providers during week 11, of which 235 patients presented with ILI; week 11 of 2014, there were 184 patients seen with ILI. There was no week 53 in the previous influenza season displayed below; therefore the week 53 data point for those seasons is an average of week 52 and 1.
Influenza Positive Surveillance (NBS and NETSS)

Positive cases of influenza are reported to the state health authority for surveillance purposes. Table 2 and Figure 6 reflect all positive influenza cases reported to the state. Types of influenza testing include commercial rapid diagnostic test (rapid), viral culture, fluorescent antibody, enzyme immunoassay, RT-PCR (PCR), and Immunohistochemistry. The two most common test types in Nevada are Rapid and PCR tests. During week 12, there were 76 influenza cases reported to the state, 27 influenza A cases, 48 influenza B cases and 1 unknown subtyping.

Table 2

<table>
<thead>
<tr>
<th>Reporting Jurisdiction</th>
<th>Reported Influenza Cases by County Jurisdiction and Influenza Type</th>
<th>Cumulative Influenza Season</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Current Week (Week 12)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>H1N1  A  B  Unknown  Total</td>
<td>H1N1  A  B  Unknown  Total</td>
</tr>
<tr>
<td>Carson City Health and Human Services</td>
<td>0  2  7  0  9</td>
<td>0  929  97  2  1,028</td>
</tr>
<tr>
<td>Rural Community Health Services</td>
<td>0  0  7  0  7</td>
<td>0  561  36  45  642</td>
</tr>
<tr>
<td>Southern Nevada Health District</td>
<td>0  18  20  1  39</td>
<td>1  3,188  257  214  3,660</td>
</tr>
<tr>
<td>Washoe County Health District</td>
<td>0  7  14  0  21</td>
<td>1  1,486  154  51  1,692</td>
</tr>
<tr>
<td>State of Nevada</td>
<td>0  27  48  1  76</td>
<td>2  6,164  544  312  7,022</td>
</tr>
</tbody>
</table>

Source: OPHIE: NBS and SNHD: NETSS.
Hospitalizations

There have been 4 hospitalizations associated with influenza reported to the state health authority during week 12.

Table 3

<table>
<thead>
<tr>
<th>Reporting Jurisdiction</th>
<th>Current Week (Week 12)</th>
<th>Cumulative Influenza Season</th>
</tr>
</thead>
<tbody>
<tr>
<td>Carson City Health and Human Services</td>
<td>0</td>
<td>43</td>
</tr>
<tr>
<td>Rural Community Health Services</td>
<td>0</td>
<td>29</td>
</tr>
<tr>
<td>Southern Nevada Health District</td>
<td>4</td>
<td>286</td>
</tr>
<tr>
<td>Washoe County Health District</td>
<td>0</td>
<td>216</td>
</tr>
<tr>
<td>State of Nevada</td>
<td>4</td>
<td>574</td>
</tr>
</tbody>
</table>

Pneumonia and Influenza (P&I) Mortality Surveillance

The Pneumonia and Influenza (P&I) mortality percentage is the deaths, where Pneumonia or Influenza is listed as the underlying or contributing cause of death, divided by the total deaths in Nevada for each week. As of April 9, there were 20 P&I deaths and 402 total deaths for week 12. The P&I mortality percent is below the threshold at 5.0% (threshold 7.1%). Nationally, the P&I mortality is above the national epidemic threshold at 6.9% for week 12.

Figure 7

Source: OVR: WEVRRS and CDC: FluView.
Technical Notes

- Influenza-like illness (ILI): a fever greater than or equal 100°F with cough and/or sore throat
- Percent positive: The number of positive influenza laboratory tests divided by the total number of tests performed.
- Incidence rate is per 100,000 population as estimated by the state demographer.

This report contains information from national and state-level data sources. Influenza surveillance data is collected by a various systems, including:

- Influenza-like Illness Network (ILINet): a sentinel surveillance system in collaboration with the Centers for the Disease Control and Prevention (CDC) where outpatient providers report ILI information weekly.
- National Electronic Telecommunication System for Surveillance (NETSS): a system whereby data is transmitted to CDC. Influenza data collected through NETSS does not provide influenza sub-typing information.
- National Electronic Disease Surveillance System (NEDSS): a system for collecting data and monitoring disease trends and outbreaks.
- NEDSS Based System (NBS): an implementation of the NEDSS standards. It provides a secure, accurate, and efficient means of collecting, transmitting, and analyzing public health data.

Citations


Comments, suggestions, and requests for further information may be addressed to:

NEVADA INFLUENZA SURVEILLANCE PROGRAM
OFFICE OF PUBLIC HEALTH INFORMATICS AND EPIDEMIOLOGY
4126 TECHNOLOGY WAY, STE 200
CARSON CITY NV 89706
TÉL: (775) 684-5897
FAX: (775) 684-5999

Compiled and Written by:

JEN THOMPSON

Recommended Citation:


This publication was supported by Cooperative Agreement Number TP000534-02 from the Centers for Disease Control and Prevention and/or Assistant Secretary for Preparedness and Response. Its contents are solely the responsibility of the authors and do not necessarily represent the official views of the Centers for Disease Control and Prevention and/or Assistant Secretary for Preparedness and Response.