

Influenza Weekly Report

2014 Week 40 (September 28 – October 4) through 2015 Week 40 (October 4 – 10)

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



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

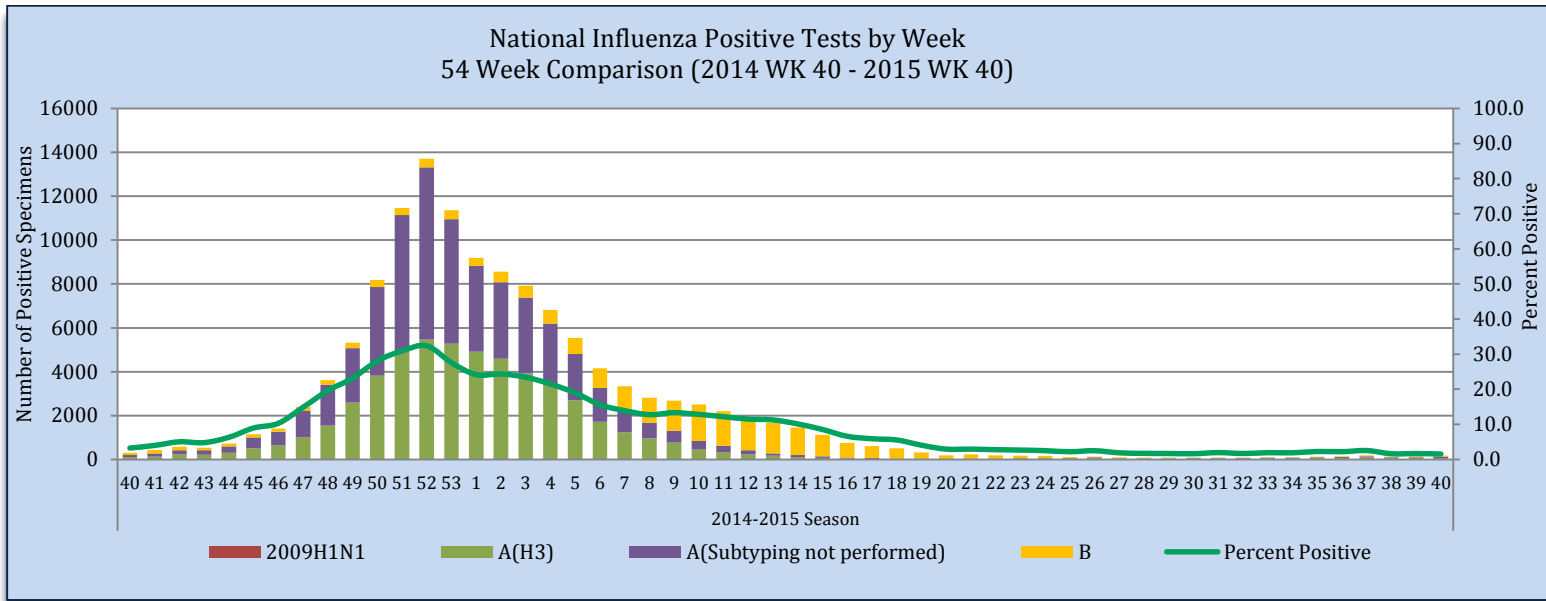
Purpose

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 40, there were 11,598 specimens collected and tested for influenza, of those 177 were positive (1.5%).

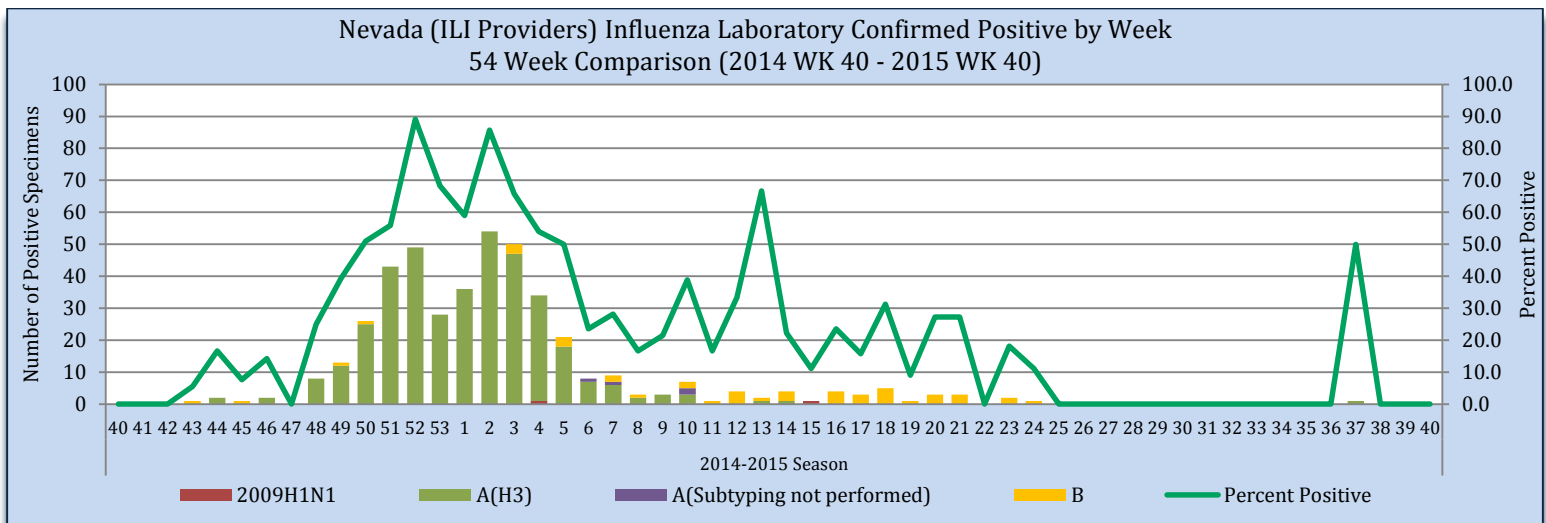
Figure 1



Source of Data: CDC: FluView Weekly Report.

The Nevada total includes laboratory tests for all Nevada residents including out of state laboratories. During week 40, there were 10 specimens collected and tested for influenza of which there were no positives.

Figure 2



Source of Data: CDC: ILINet.

Nevada State Public Health Laboratory (NSPHL) has tested 2 specimens for influenza from sentinel providers, of which there have been no positives. Southern Nevada Public Health Laboratory (SNPHL) has not reported specimens this season. Nationally, there have been 11,598 specimens sent to the WHO and NERVSS laboratories of which 177 were positive or 1.5%. 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.

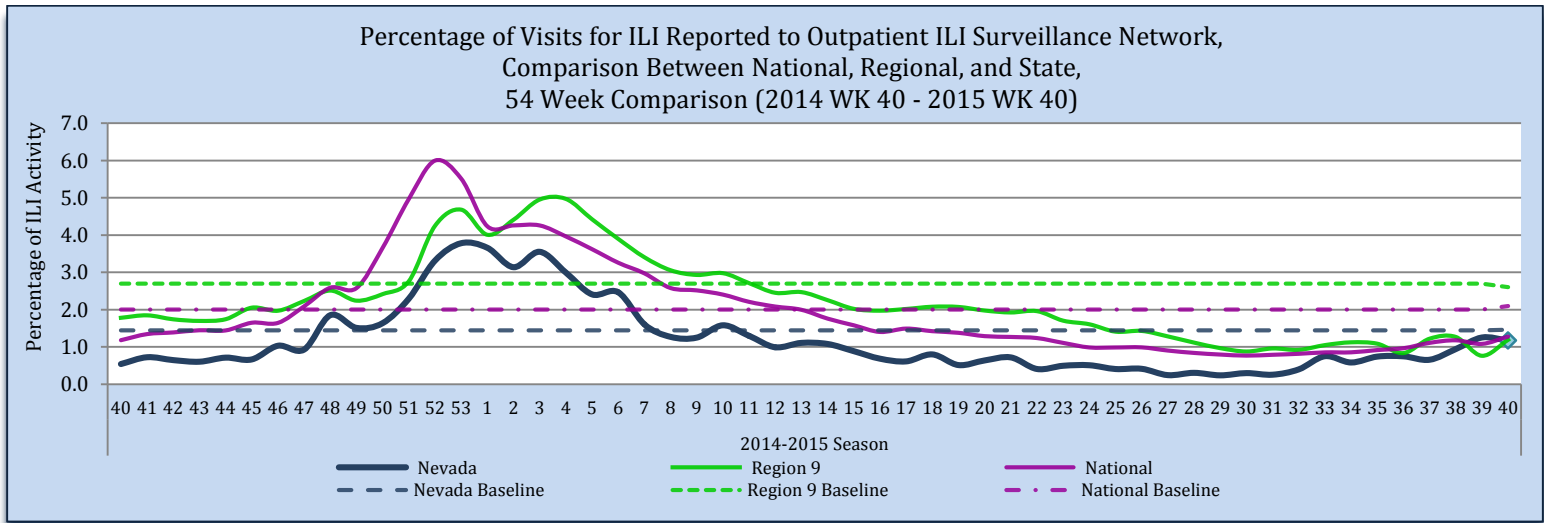
Table 1

ILINet Surveillance: Influenza Specimens Tested State and Nationally										
	NSPHL	SNPHL	State of Nevada (Week 40)		State of Nevada (Season)		National (Week 40)		National (Season)	
			#	%	#	%	#	%	#	%
Specimens Tested	2	0	10		10		11,598		11,598	
Positives to Influenza	0	0	0	0.0	0	0.0	177	1.5	177	1.5
Influenza A:	0	0	0	0.0	0	0.0	131	74.0	131	74.0
A (2009 H1N1)	0	0	0	0.0	0	0.0	4	3.1	4	3.1
A (H3)	0	0	0	0.0	0	0.0	42	32.1	42	32.1
A (Sub-typing not performed)	0	0	0	0.0	0	0.0	85	64.9	85	64.9
Influenza B:	0	0	0	0.0	0	0.0	46	26.0	46	26.0
B (Victoria Linage)	0	0	0	0.0	0	0.0	1	2.2	1	2.2
B (Yamagata Linage)	0	0	0	0.0	0	0.0	0	0.0	0	0.0
B (Sub-typing not performed)	0	0	0	0.0	0	0.0	45	97.8	45	97.8

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 40 is 1.2% and is below the state baseline 1.5%. Region 9 ILI percentage for week 40 is 1.2% and is below the region baseline 2.6%. Region 9 includes the following states/territory: Arizona, California, Guam, Hawaii, and Nevada. The national ILI percentage for week 40 is 1.3% and is below the national baseline 2.0%.

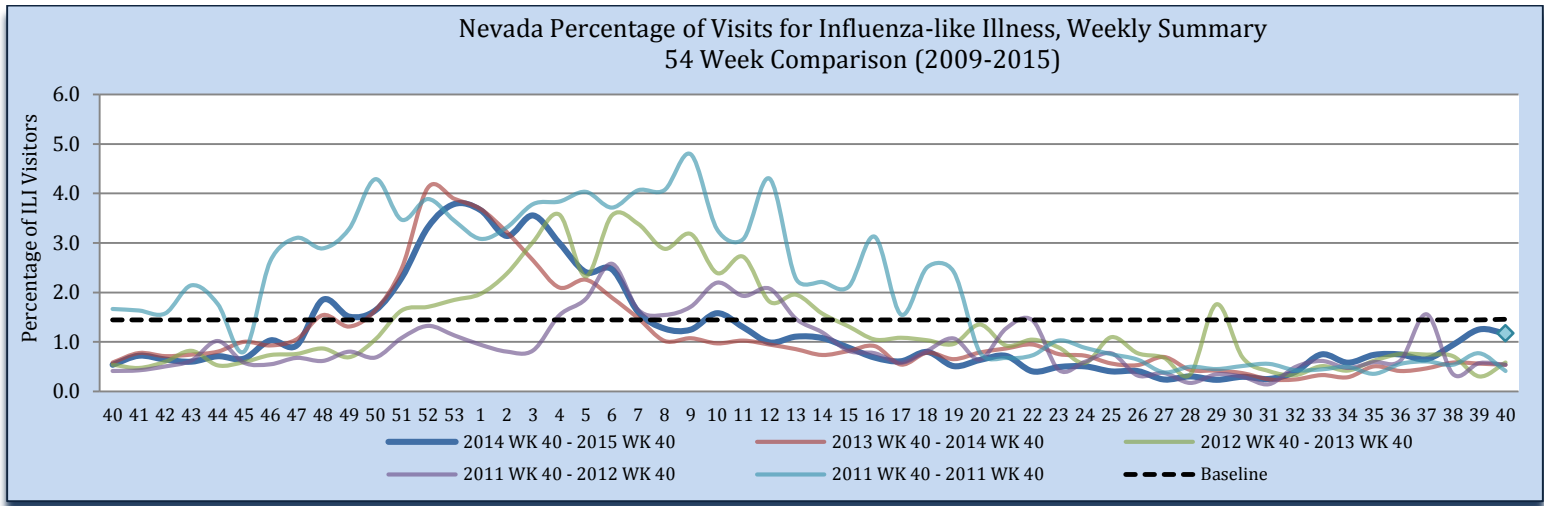
Figure 3



Source of Data: CDC: Flu View Report and CDC: ILINet.

During week 40, 1.2% of visits to sentinel providers were due to ILI; this is higher than the 2014-2015 influenza season (0.5%). There were 9,216 patients seen by ILI providers during week 40, of which 108 patients presented with ILI; week 40 of 2014, there were 92 patients seen with ILI (17,067 total patients seen). 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.

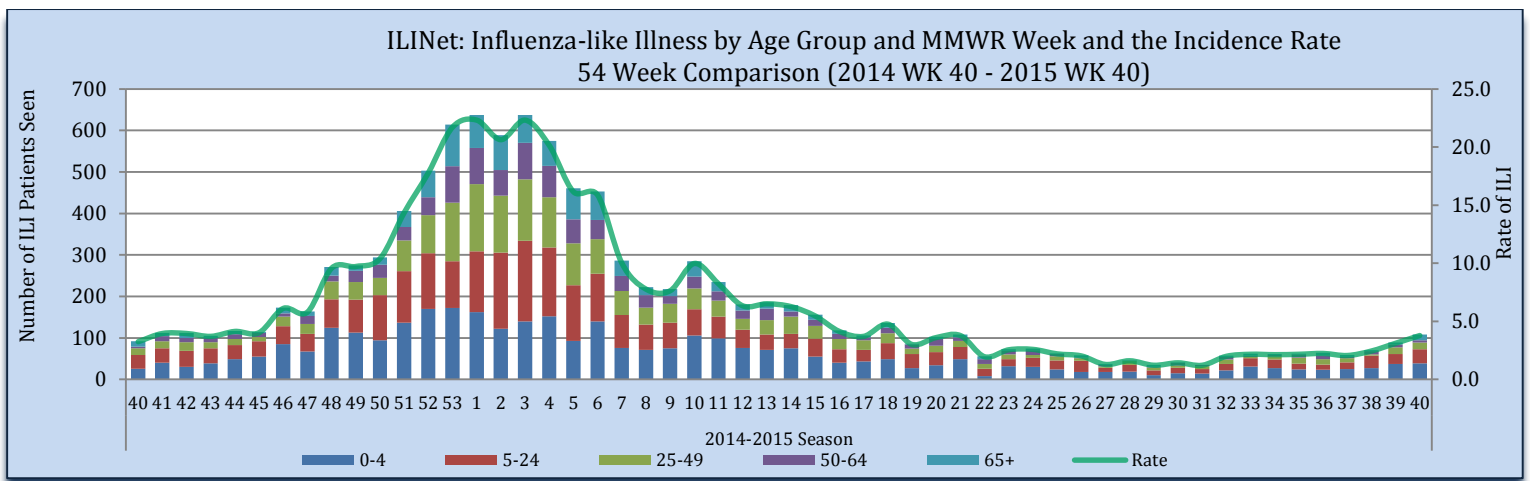
Figure 4



Source of Data: CDC: ILINet.

Influenza-like Illness is reported by age groups, patients age 0-4 were the greatest number of patients seen with ILI, at 39 patients seen, during week 40. The rate for week 40 is 3.8 per 100,000. The rate is calculated by the number of patients presented with ILI, divided by the state population, multiplied by 100,000. The estimated state population for 2015 is 2,855,061.

Figure 5



Source of Data: CDC: ILINet.

Influenza Positive Surveillance (NBS and NETSS)

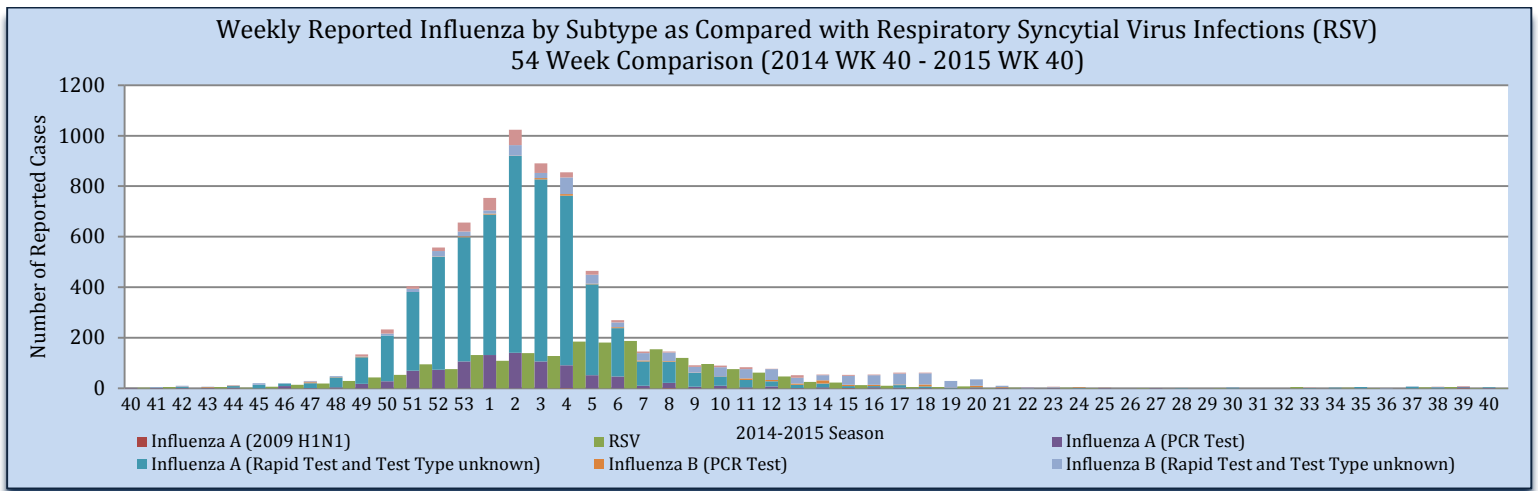
Positive cases of influenza are reported to the state health authority for surveillance purposes. Table 2 and Figure 6 reflect all positive influenza cases reported to the state. Types of influenza testing include commercial rapid diagnostic test (rapid), viral culture, fluorescent antibody, enzyme immunoassay, RT-PCR (PCR), and Immunohistochemistry. The two most common test types in Nevada are Rapid and PCR tests. During week 40, there were 3 influenza cases reported to the state all were influenza A cases.

Table 2

Reporting Jurisdiction	Reported Influenza Cases by County Jurisdiction and Influenza Type									
	Current Week (Week 40)					Cumulative Influenza Season				
	H1N1	A	B	Unknown	Total	H1N1	A	B	Unknown	Total
Carson City Health and Human Services	0	0	0	0	0	0	0	0	0	0
Rural Community Health Services	0	0	0	0	0	0	0	0	0	0
Southern Nevada Health District	0	1	0	0	1	0	1	0	0	1
Washoe County Health District	0	2	0	0	2	0	2	0	0	2
State of Nevada	0	3	0	0	3	0	3	0	0	3

Source: OPHIE: NBS and SNHD: NETSS.

Figure 6



Source of Data: OPHIE: NBS and SNHD: NETSS.

Hospitalizations

There was 1 hospitalization associated with influenza reported to the state health authority for week 40.

Table 3

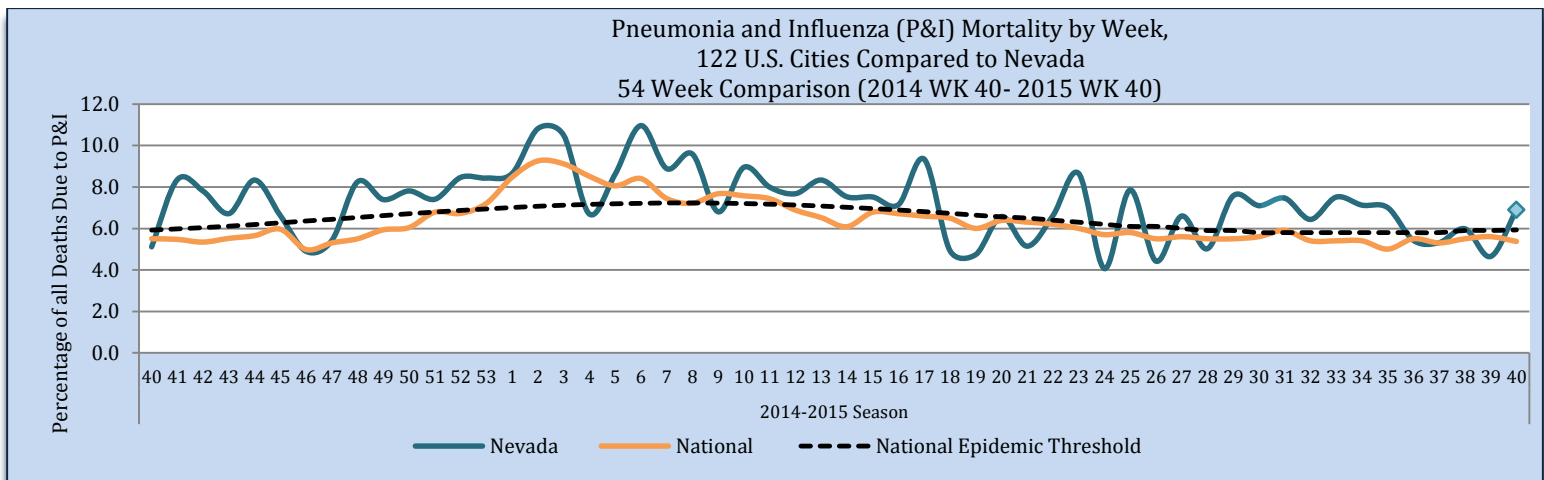
Reporting Jurisdiction	Influenza Hospitalizations			
	Current Week (Week 40)		Cumulative Influenza Season	
	#	%	#	%
Carson City Health and Human Services	0	0.0	0	0.0
Rural Community Health Services	0	0.0	0	0.0
Southern Nevada Health District	1	100	1	100
Washoe County Health District	0	0.0	0	0.0
State of Nevada	1	100	1	100

Source: Reported to Office of Public Health Informatics and Epidemiology from each Jurisdiction.

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 November 2, there were 27 P&I deaths and 392 total deaths for week 40. The P&I mortality percent is above the threshold at 6.9% (threshold 5.9%). Nationally, the P&I mortality is below the national epidemic threshold at 5.4% for week 40.

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 transmits 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

1. CDC. FluView: A Weekly Influenza Surveillance Report. <http://www.cdc.gov/flu/weekly/pastreports.htm>.
2. Nevada State Demographer's Office. 2003-2014 ASRHO Estimates and Projections. Division of Public and Behavioral Health edition. Vintage 2014.
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4. OPHIE. DPBH. NBS. 2013-2014. Accessed November 2015.
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6. Southern Nevada Health District (SNHD). NETSS/Trisano. 2013-2014. Accessed November 2015.

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

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