

# Influenza Weekly Report

2014 Week 42 (October 12 – 18) through 2015 Week 42 (October 18 – 24)

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



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*November 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.

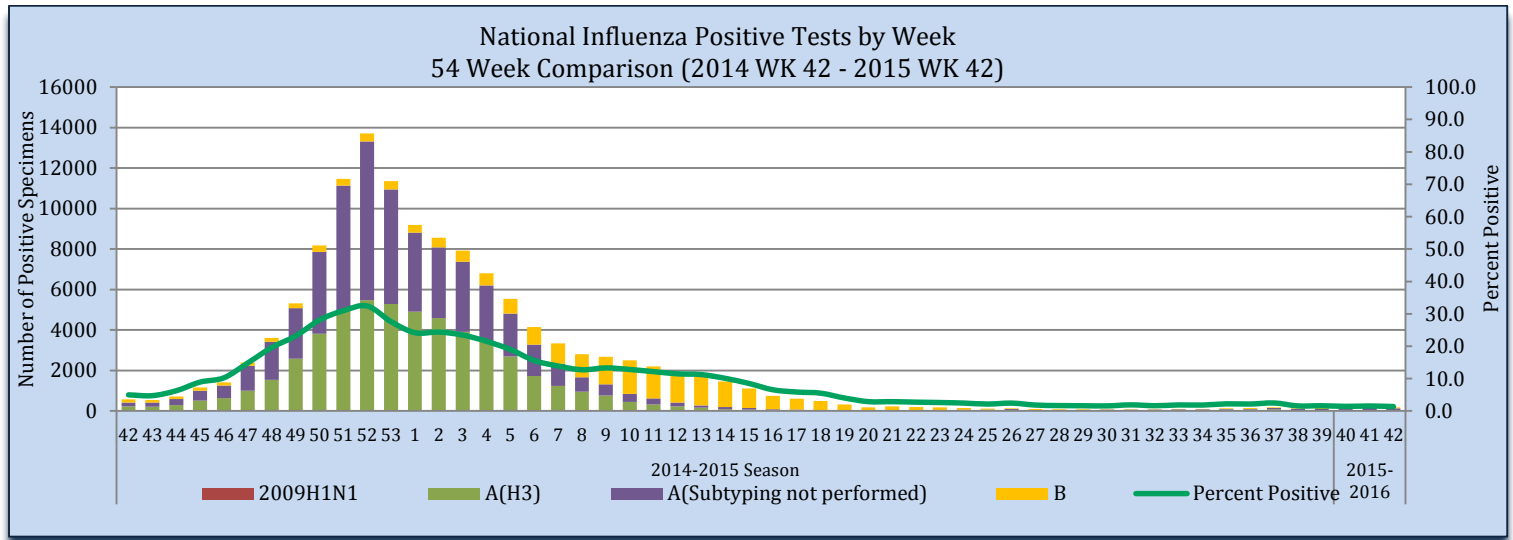
## Purpose

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 42, there were 13,002 specimens collected and tested for influenza, of those 183 were positive (1.4%).

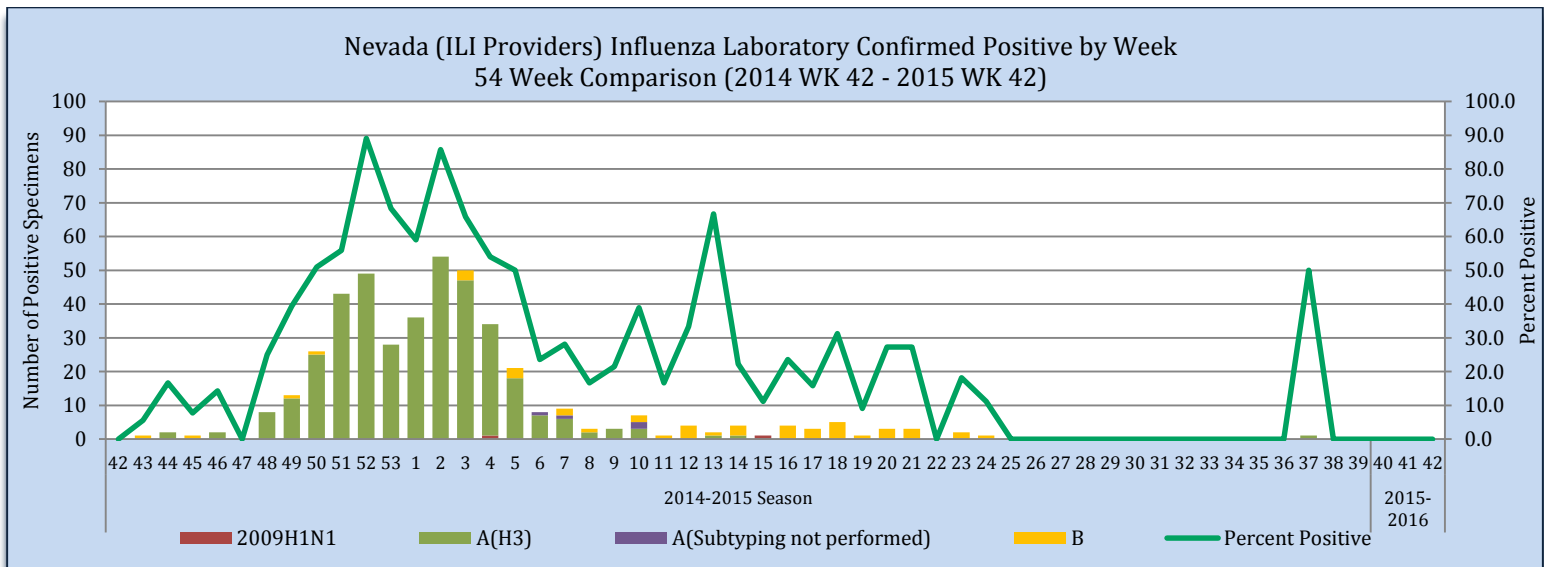
Figure 1



Source of Data: CDC: FluView Weekly Report.

The Nevada total includes laboratory tests for all Nevada residents including out of state laboratories. During week 42, there were 20 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 8 specimens for influenza from sentinel providers, of which there have been no positives. Southern Nevada Public Health Laboratory (SNPHL) has tested 32 specimens this season of which there have been no positives. Nationally, there have been 38,274 specimens sent to the WHO and NERVSS laboratories of which 568 have been 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.

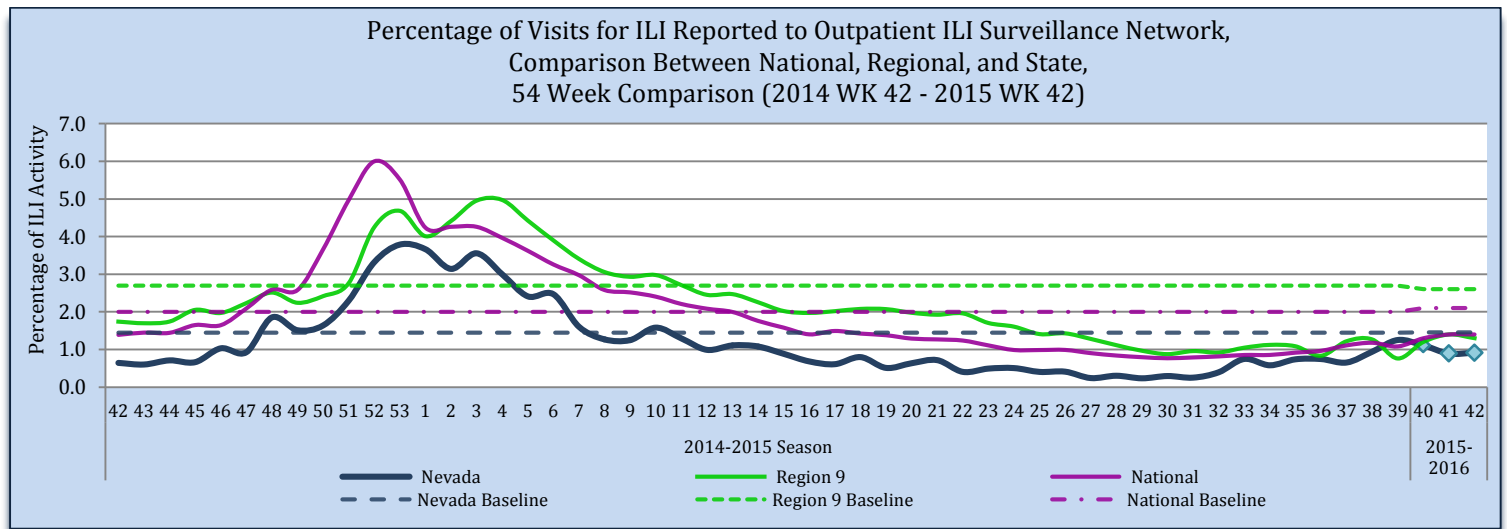
Table 1

ILINet Surveillance: Influenza Specimens Tested State and Nationally										
	NSPHL	SNPHL	State of Nevada (Week 42)		State of Nevada (Season)		National (Week 42)		National (Season)	
			#	%	#	%	#	%	#	%
Specimens Tested	8	32	20		62		13,002		38,274	
Positives to Influenza	0	0	0	0.0	0	0.0	183	1.4	568	1.5
<b>Influenza A:</b>	0	0	0	0.0	0	0.0	136	74.3	415	73.1
A (2009 H1N1)	0	0	0	0.0	0	0.0	8	5.9	16	3.9
A (H3)	0	0	0	0.0	0	0.0	33	24.3	103	24.8
A (Sub-typing not performed)	0	0	0	0.0	0	0.0	95	69.9	296	71.3
<b>Influenza B:</b>	0	0	0	0.0	0	0.0	47	25.7	153	26.9
B (Victoria Linage)	0	0	0	0.0	0	0.0	0	0.0	1	0.7
B (Yamagata Linage)	0	0	0	0.0	0	0.0	0	0.0	3	2.0
B (Sub-typing not performed)	0	0	0	0.0	0	0.0	47	100	149	97.4

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 42 is 0.9% and is below the state baseline 1.5%. Region 9 ILI percentage for week 42 is 1.3% 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 42 is 1.4% and is below the national baseline 2.0%.

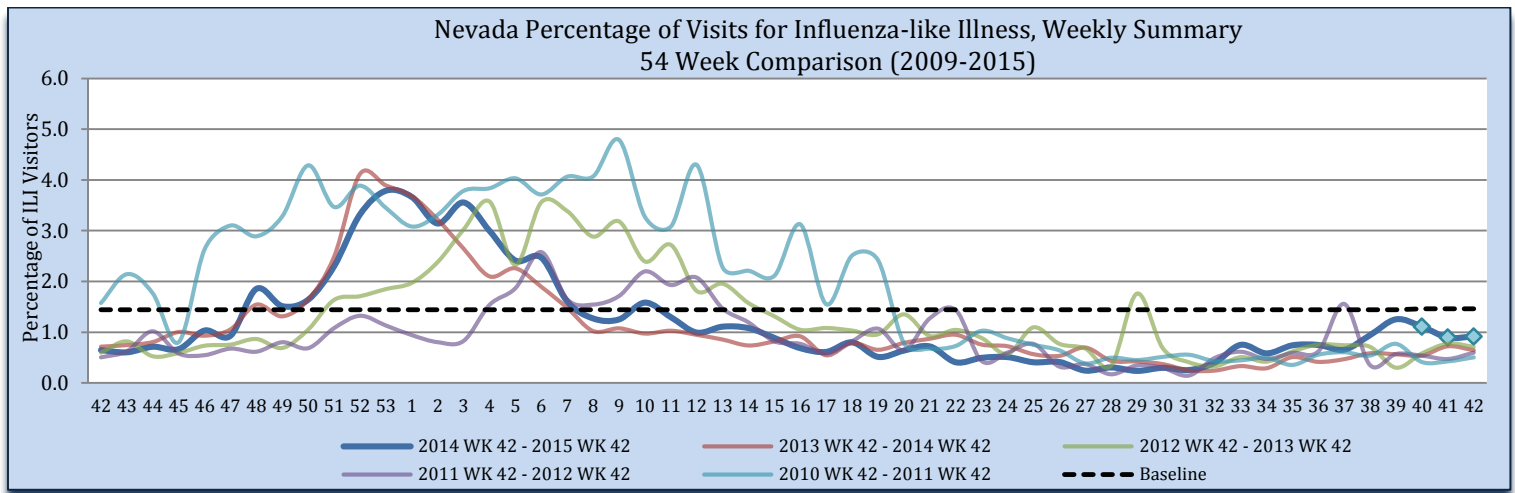
Figure 3



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

During week 42, 0.9% of visits to sentinel providers were due to ILI; this is higher than the 2014-2015 influenza season (0.6%). There were 9,072 patients seen by ILI providers during week 42, of which 83 patients presented with ILI; week 42 of 2014, there were 112 patients seen with ILI (17,381 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.

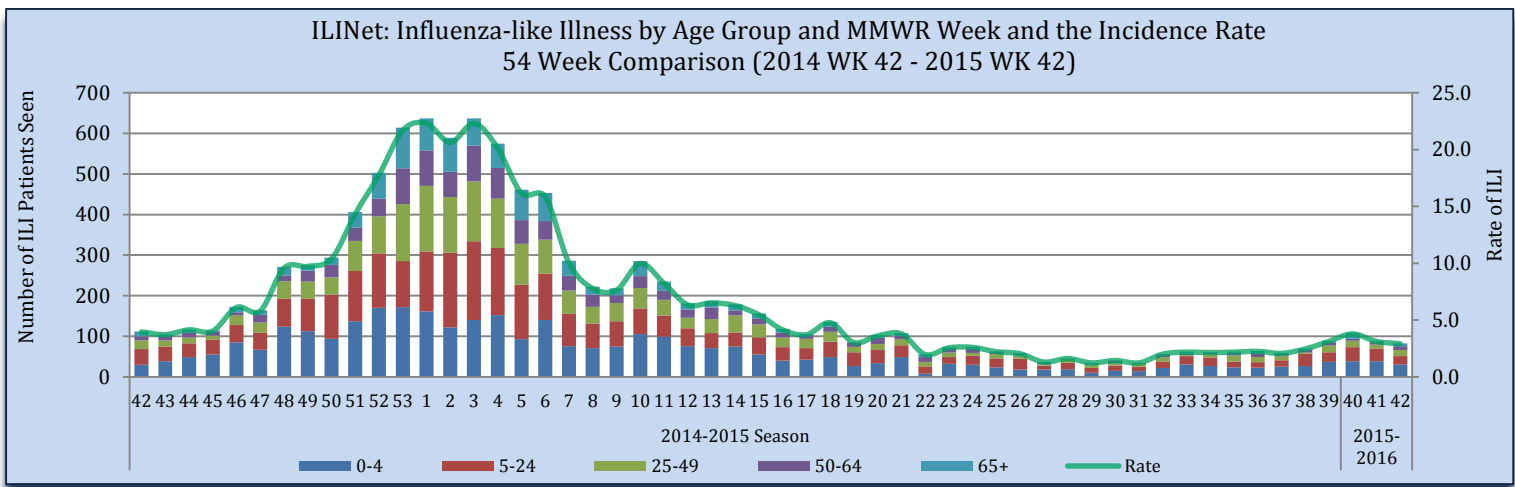
Figure 4



Source of Data: CDC: ILINet.

Influenza-like Illness is reported by age groups, during week 42, patients age 0-4 were the greatest number of patients seen with ILI, at 31 patients seen. The rate for week 42 is 2.9 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)

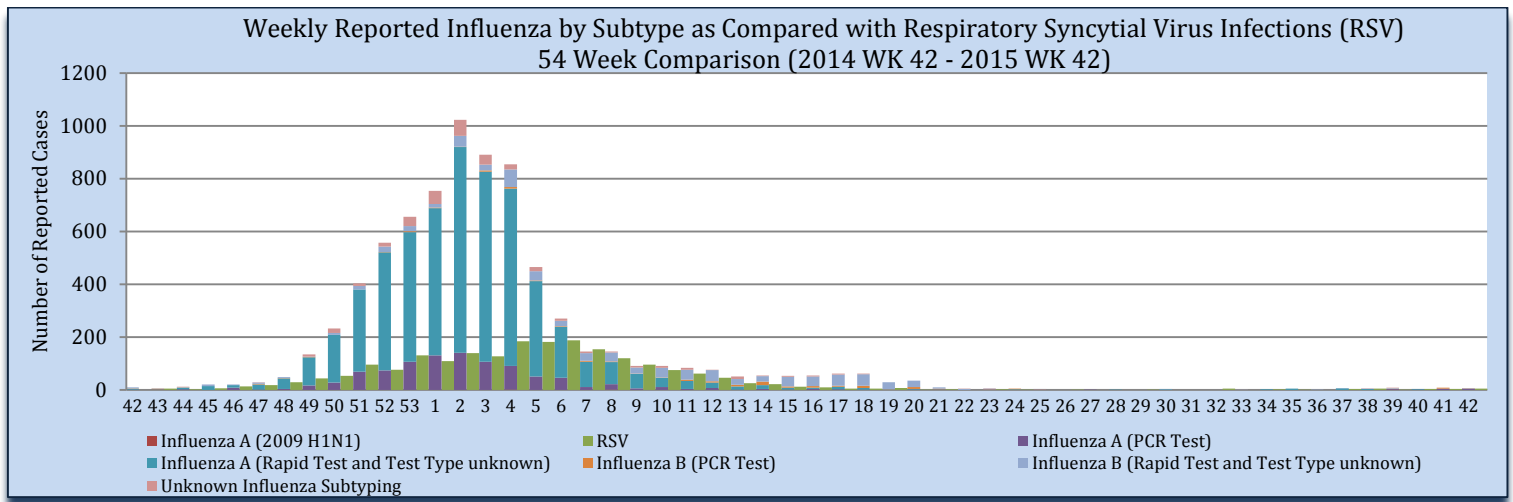
Positive cases of influenza are reported to the state health authority for surveillance purposes. Table 2 and Figure 6 reflect all positive influenza cases reported to the state. Types of influenza testing include commercial rapid diagnostic test (rapid), viral culture, fluorescent antibody, enzyme immunoassay, RT-PCR (PCR), and Immunohistochemistry. The two most common test types in Nevada are Rapid and PCR tests. During week 42, there were 6 influenza cases reported to the state, 4 influenza A, 1 influenza B, and 1 unknown subtyping case.

Table 2

Reporting Jurisdiction	Reported Influenza Cases by County Jurisdiction and Influenza Type									
	Current Week (Week 42)					Cumulative Influenza Season				
	H1N1	A	B	Unknown	Total	H1N1	A	B	Unknown	Total
Carson City Health and Human Services	0	1	0	0	1	0	2	0	0	2
Rural Community Health Services	0	0	0	0	0	0	0	0	0	0
Southern Nevada Health District	0	2	0	0	2	0	5	0	0	5
Washoe County Health District	0	1	1	1	3	0	5	4	1	10
State of Nevada	0	4	1	1	6	0	12	4	1	17

Source: OPHIE: NBS and SNHD: NETSS.

Figure 6



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

### Hospitalizations

There were 3 hospitalization associated with influenza reported to the state health authority for week 42.

Table 3

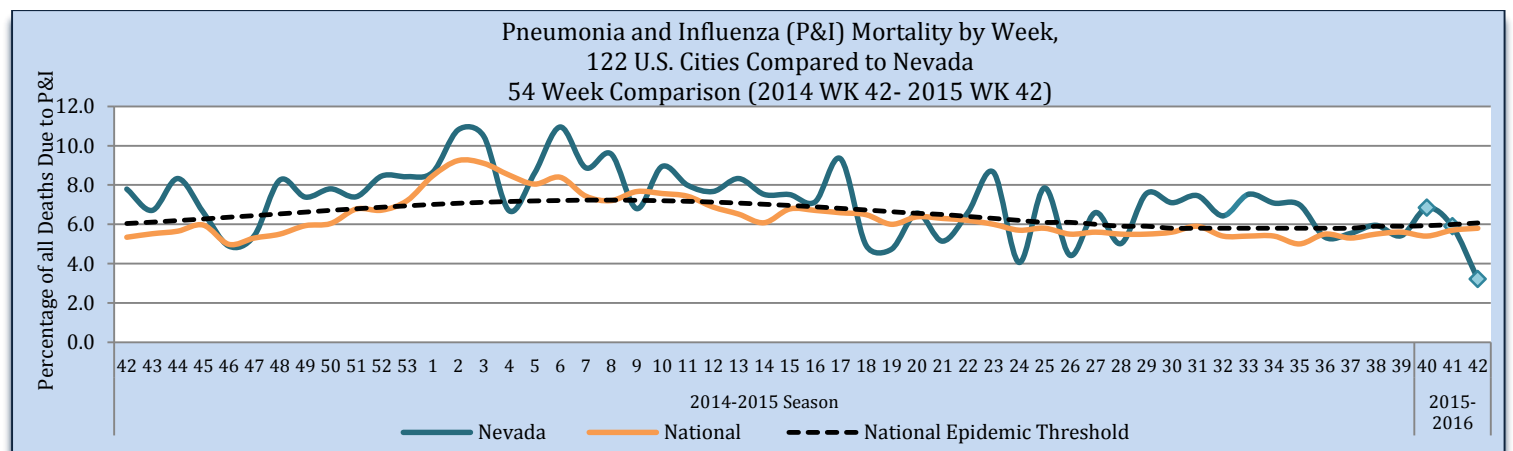
Reporting Jurisdiction	Influenza Hospitalizations		Cumulative Influenza Season	
	#	%	#	%
Carson City Health and Human Services	1	25.0	2	28.6
Rural Community Health Services	0	0.0	0	0.0
Southern Nevada Health District	3	75.0	5	71.4
Washoe County Health District	0	0.0	0	0.0
State of Nevada	4	100	7	100

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 6, there were 12 P&I deaths and 373 total deaths for week 42. The P&I mortality percent is below the threshold at 3.2% (threshold 6.1%). Nationally, the P&I mortality is below the national epidemic threshold at 5.8% for week 42.

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.
3. OPHIE. DPBS. BioSense. 2013-2014. Accessed November 2015.
4. OPHIE. DPBH. NBS. 2013-2014. Accessed November 2015.
5. Office of Vital Records (OVR). DPBH. Web Enabled Vital Records Registry System (WEVRRS) [unpublished data]. 2013-2014. Accessed November 2015.
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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## Recommended Citation:

Division of Public and Behavioral Health. Office of Public Health Informatics and Epidemiology. Influenza Weekly Report, 2014 Week 42 (October 12) through 2015 Week 42 (October 24), Nevada. October 2015 i 42 edition 1.0.

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.

