

Influenza Weekly Report

2017 Week 17 (April 23 – April 29, 2017) through 2018 Week 17 (April 22 – April 28, 2018)

Department of Health and Human Services
Office of Analytics



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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.

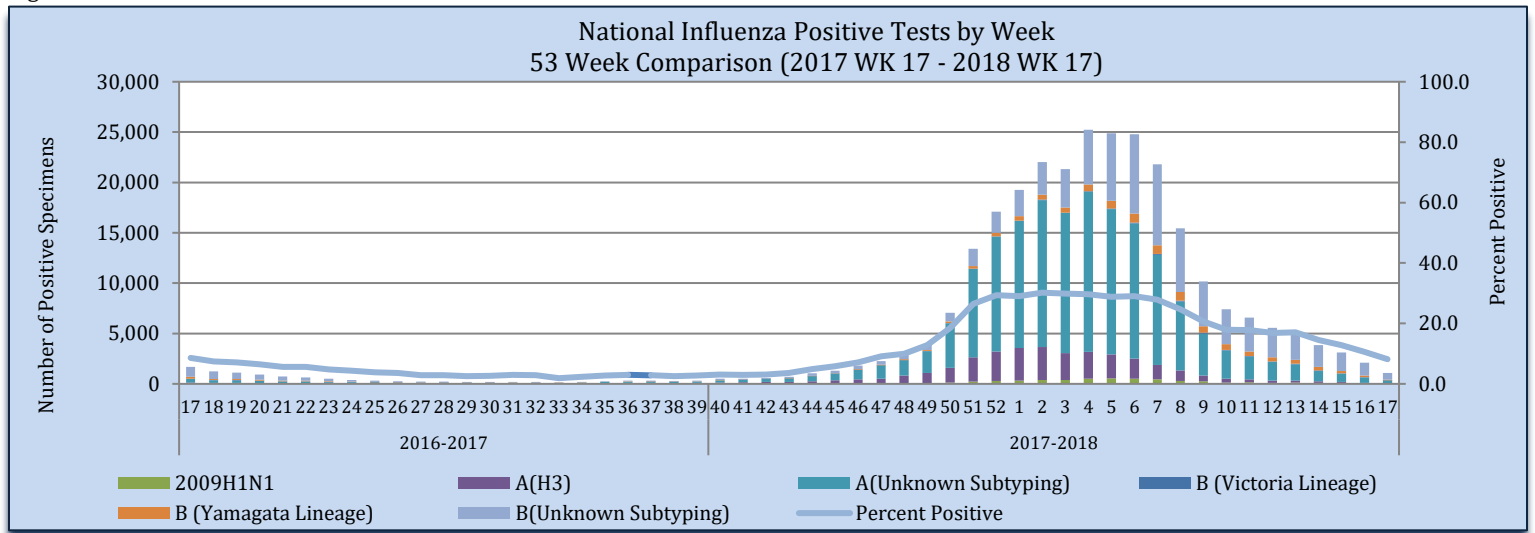
Purpose

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.

Sentinel Provider Data: 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 17, there were 13,261 specimens collected and tested for influenza, of those 1,083 were positive (8.2%).

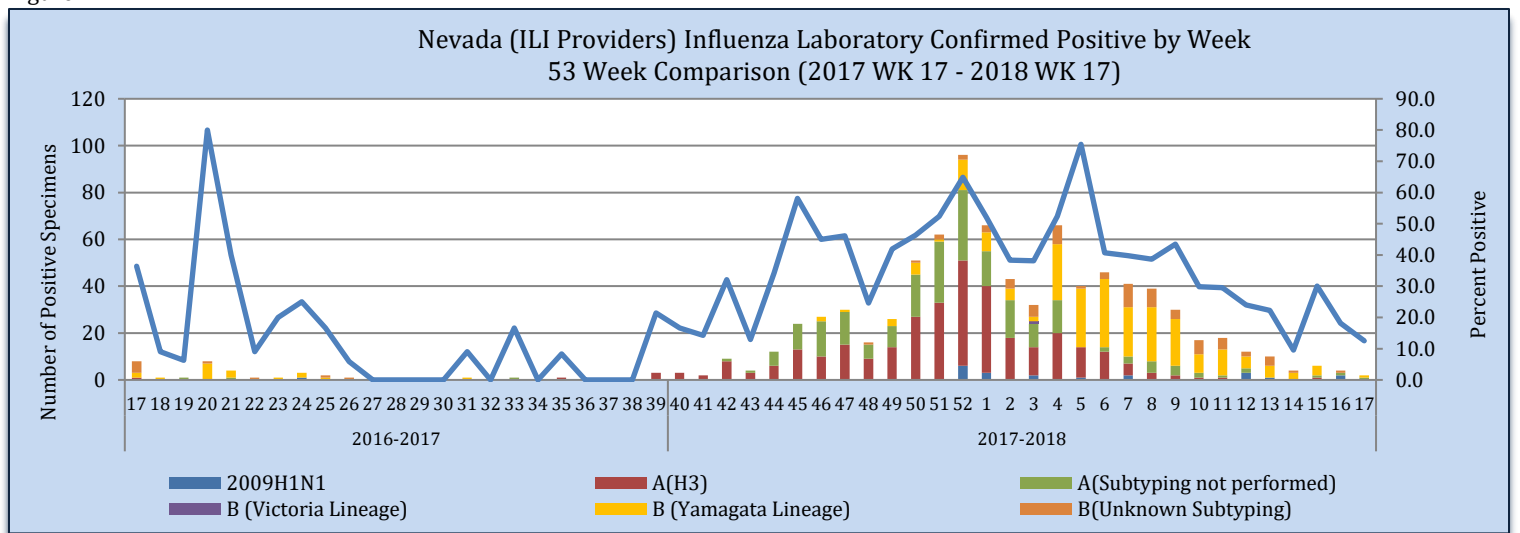
Figure 1



Source of Data: CDC: FluView Weekly Report.

The Nevada total includes laboratory tests for all Nevada residents tested by sentinel providers including out of state laboratories. Laboratory data is obtained from CDC’s ILINet system. During week 17, where there were 16 specimens collected, in which 2 were positive. There is a two-week delay for laboratory surveillance. Data are subject to change as we receive additional reports.

Figure 2



Source of Data: CDC: ILINet.

Nevada State Public Health Laboratory (NSPHL) has tested 632 specimens for influenza from sentinel providers, of which there have been 540 positive (85.4%). Southern Nevada Public Health Laboratory (SNPHL) has tested 112 specimens this season of which there have been 7 positive. Nationally, there have been 1,255,628 specimens sent to the WHO and NERVSS laboratories of which 272,915 have been positive (21.7%). 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 tested by sentinel providers, including out of state laboratories.

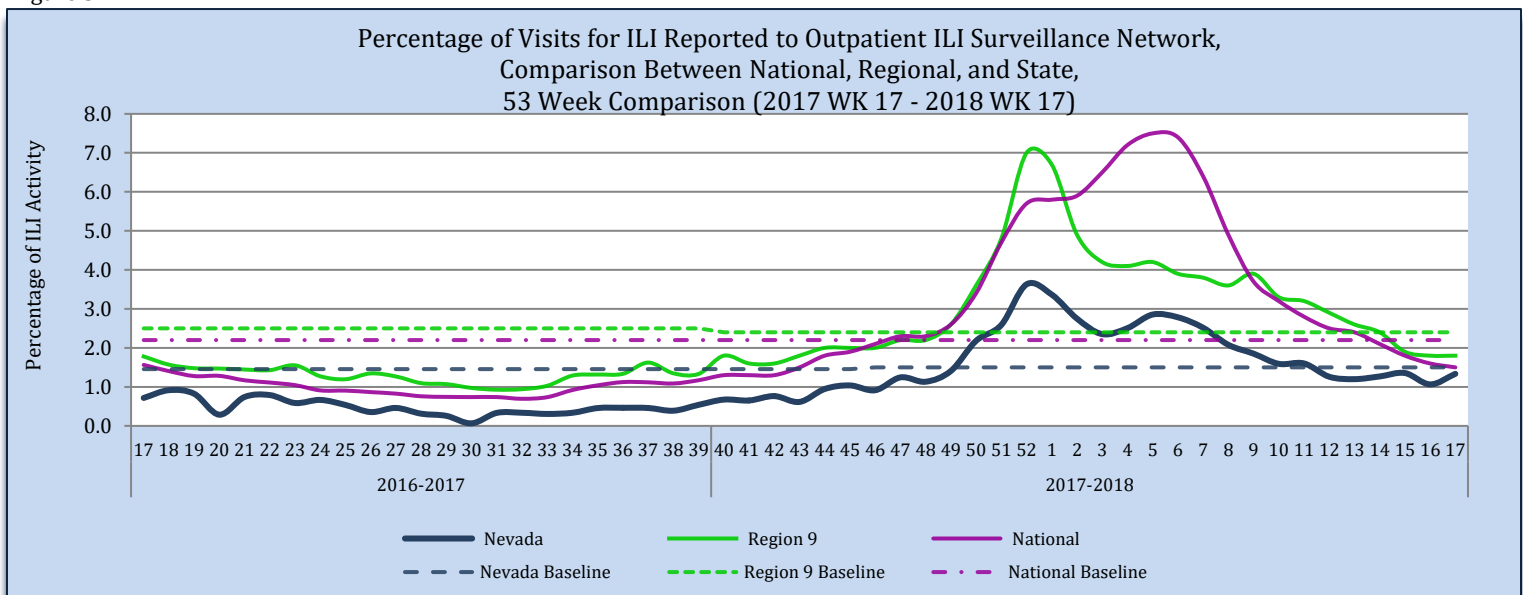
Table 1

	Influenza Specimens Tested State and Nationally through Sentinel Providers										
	NSPHL	SNPHL	All Other Laboratories	State of Nevada (Week 17)		State of Nevada (Season)		National (Week 17)		National (Season)	
				#	%	#	%	#	%	#	%
Specimens Tested	632	112	1,260	16	-	2,004	-	13,261		1,255,628	
Influenza Positives	540	7	295	2	12.5	842	42.0	1,083	8.2	272,915	21.7
Influenza A:	324	4	223	1	50.0	551	65.4	358	33.1	187,493	68.7
A (2009 H1N1)	22	1	1	0	0	24	4.4	21	5.9	5,469	2.9
A (H3)	302	3	8	0	0	313	56.8	15	4.2	31,294	16.7
A (Sub-typing not performed)	0	0	214	1	100	214	38.8	322	89.9	150,730	80.4
Influenza B:	216	3	72	1	50.0	291	34.6	725	66.9	85,422	31.3
B (Victoria Lineage)	1	0	0	0	0	1	0.3	10	1.4	1,228	1.4
B (Yamagata Lineage)	215	0	4	1	100	219	75.3	59	8.1	9,893	11.6
B (Sub-typing not performed)	0	3	68	0	0	71	24.4	656	90.5	74,301	87.0

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

Influenza-like Illness (ILI) Surveillance Network has each sentinel provider report the number of patients seen that meet the ILI case definition and the total number of patients seen for any reason each week. The “percentage of visits for ILI” is the number of ILI patients divided by the total number of patients visit per week. Nevada’s percentage of ILI visits for week 17 is 1.3% which is below the state baseline of 1.5%. Region 9 ILI percentage for week 17 is 1.8% which is below the regional baseline of 2.4%. Region 9 includes the following states/territory: Arizona, California, Guam, Hawaii, and Nevada. The national ILI percentage for week 17 is 1.5% which is below the national baseline of 2.2%.

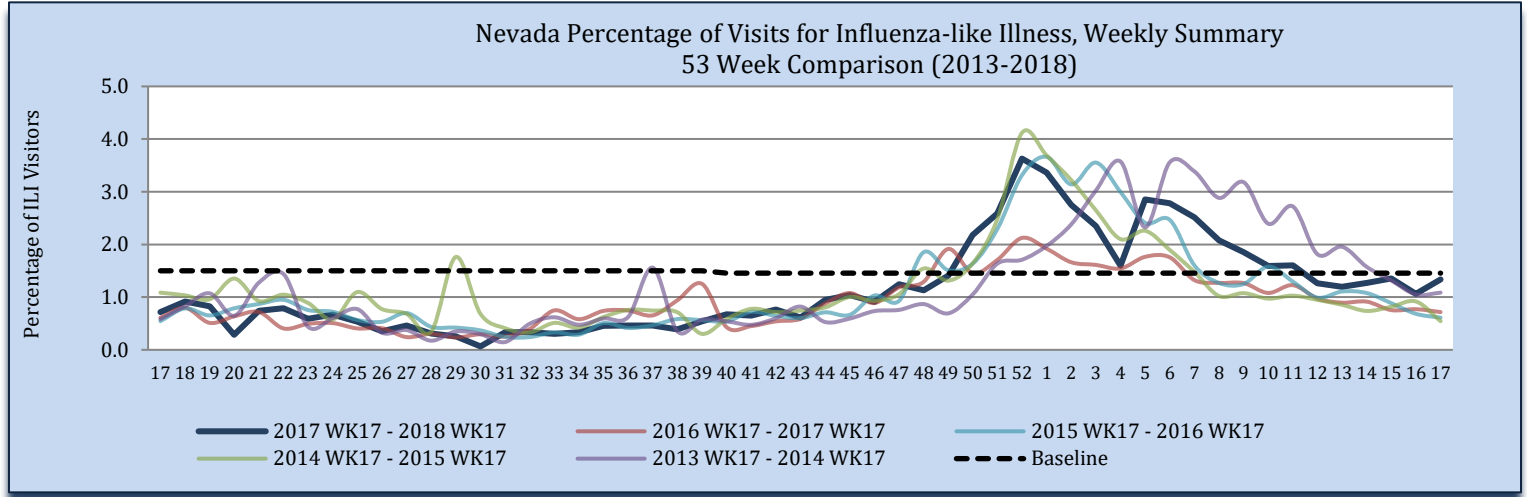
Figure 3



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

During week 17, 1.3% of visits to sentinel providers were due to ILI; this is greater than the 2016-2017 influenza season (0.6%). There were 9,669 patients seen by sentinel providers during week 17, of which 129 patients presented with ILI; week 17 of 2017, there were 146 patients seen with ILI (20,379 total patients seen). Data availability depends on sentinel provider reporting.

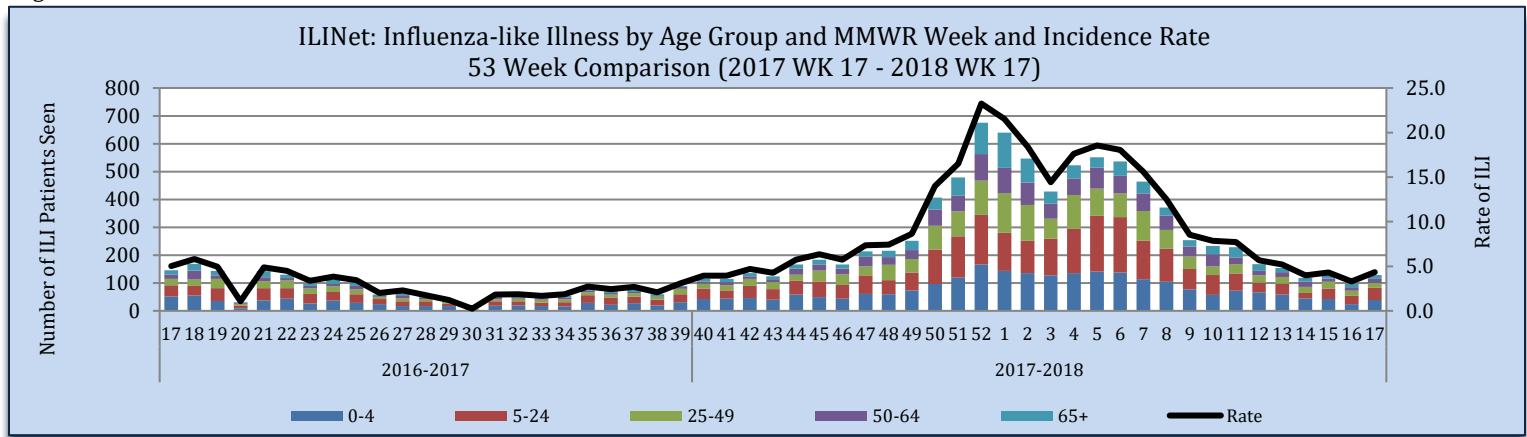
Figure 4



Source of Data: CDC: ILINet.

Influenza-like Illness is reported by age groups. During week 17, patients ages 5-24 were the greatest number of patients seen with ILI, at 44 patients seen. The rate for week 17 is 4.3 per 100,000 population. 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 2018 is 2,969,849.

Figure 5



Source of Data: CDC: ILINet.

Influenza Positive Surveillance (NBS and NETSS)

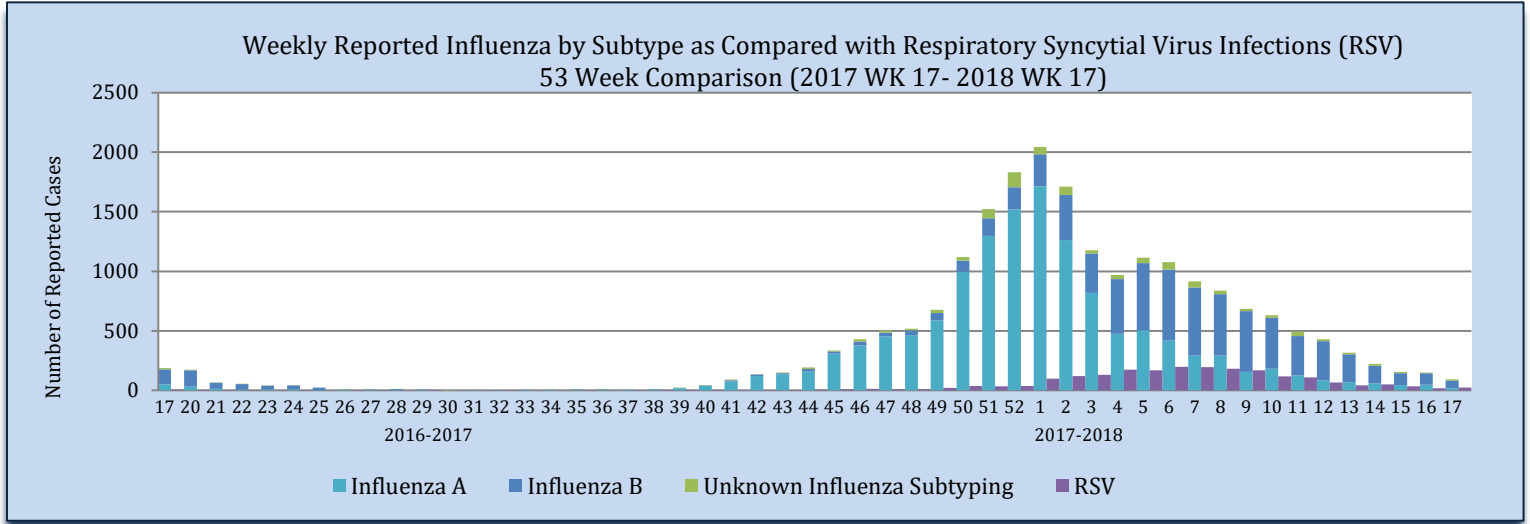
Positive cases of influenza are reported to the state health authority for surveillance purposes. Table 2 and Figure 7 reflect all positive influenza cases reported to the state. Types of influenza testing include commercial rapid diagnostic test (rapid), viral culture, fluorescent antibody, enzyme immunoassay, RT-PCR (PCR), and Immunohistochemistry. The two most common test types in Nevada are Rapid and PCR tests. During week 17, there were 93 influenza cases reported to the state, 18 influenza A, 63 influenza B and 12 unknown subtyping.

Table 2

Reporting Jurisdiction	Reported Influenza Cases by County Jurisdiction and Influenza Type							
	Current Week (Week 17)				Cumulative Influenza Season			
	A	B	Unknown	Total	A	B	Unknown	Total
Carson City Health and Human Services	0	9	1	10	1,315	739	87	2,141
Rural Community Health Services	1	1	0	2	1,086	942	30	2,058
Southern Nevada Health District	9	34	6	49	7,405	3,062	339	10,806
Washoe County Health District	8	19	5	32	3,293	1,831	429	5,553
State of Nevada	18	63	12	93	13,099	6,574	885	20,558

Source: to Office of Analytics: NBS and SNHD: NETSS.

Figure 6



Source of Data: to Office of Analytics: NBS and SNHD: NETSS.

Hospitalizations

There were 9 hospitalizations associated with influenza reported to the state health authority for week 17.

Table 3

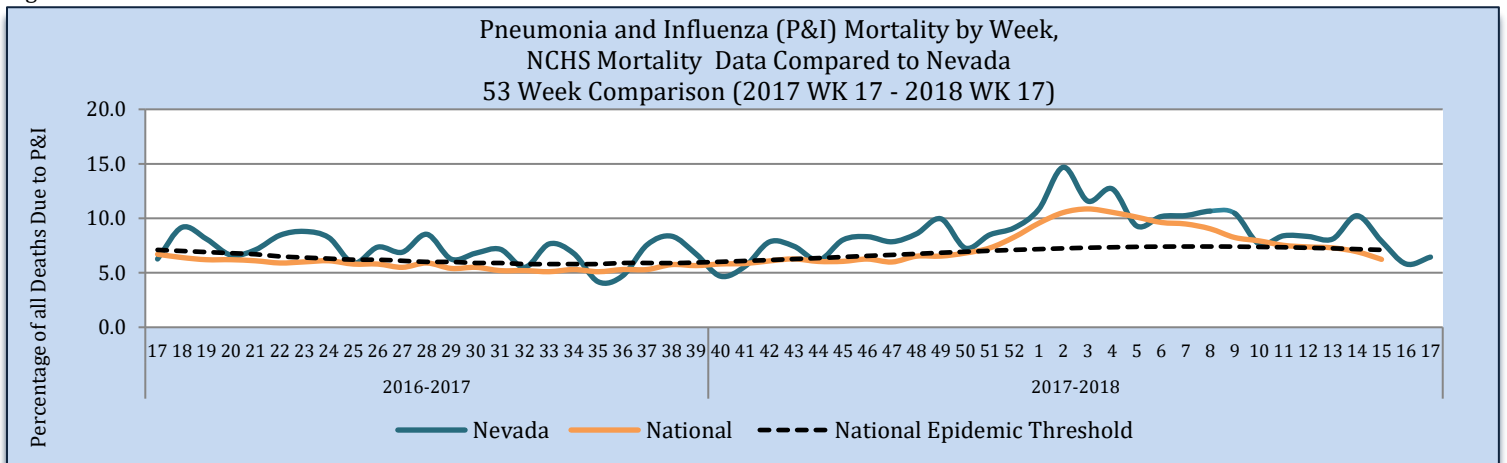
Reporting Jurisdiction	Influenza Hospitalizations			
	Current Week (Week 17)		Cumulative Influenza Season	
	#	%	#	%
Carson City Health and Human Services	2	22.2	158	9.4
Rural Community Health Services	0	0	45	2.7
Southern Nevada Health District	2	22.2	951	56.5
Washoe County Health District	5	55.6	530	31.5
State of Nevada	9	100	1,684	100

Source: Reported to Office of Analytics from each Jurisdiction.

Pneumonia and Influenza (P&I) Mortality Surveillance

The Pneumonia and Influenza (P&I) mortality percentage is all 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 May 8th, there were 23 P&I deaths and 357 total deaths for week 17 in Nevada. Please note that the CDC does not have updated P&I counts for week 16 or week 17.

Figure 7



Source: OVR: WEVRRS and CDC: FluView.

Technical Notes

- Data are subject to changes, additionally, there is a lag in reporting.
- Influenza surveillance procedures vary by jurisdiction.
- 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 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

1. CDC. FluView: A Weekly Influenza Surveillance Report. <http://www.cdc.gov/flu/weekly/pastreports.htm>.
2. Nevada State Demographer's Office. 2003-2020 ASRHO Estimates and Projections. Division of Public and Behavioral Health edition. Vintage 2015.
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4. Office of Vital Records (OVR). DPBH. Web Enabled Vital Records Registry System (WEVRRS) [unpublished data]. 2017-2018. Accessed May 2018.
5. Southern Nevada Health District (SNHD). NETSS/Trisano. 2016-2018. Accessed May 2018.

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