Weekly Report

2016 Week 19 (May 08 - May 14, 2016) through 2017 Week 19 (May 07 - May 13)

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.

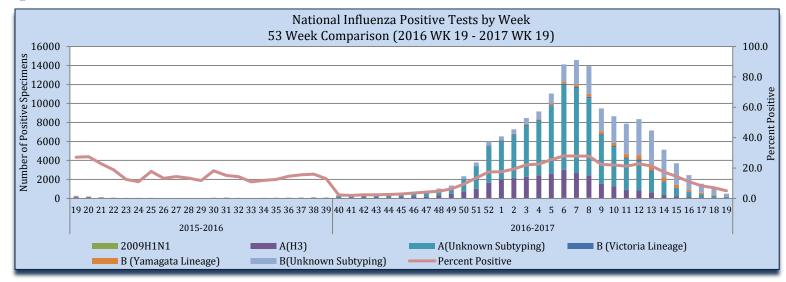
Purpose

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.

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 19, there were 9,820 specimens collected and tested for influenza, of those 496 were positive (5.1%).

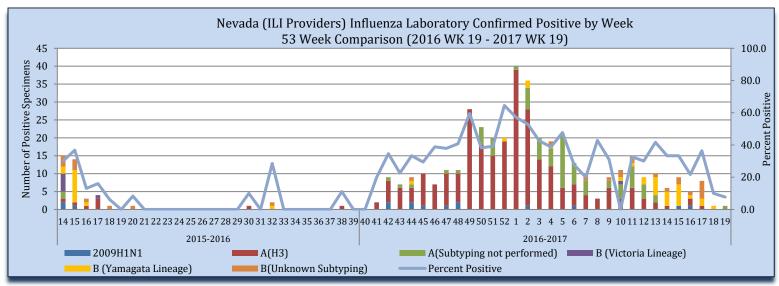
Figure 1



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 19, where there were 13 specimens collected and 1 was 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.

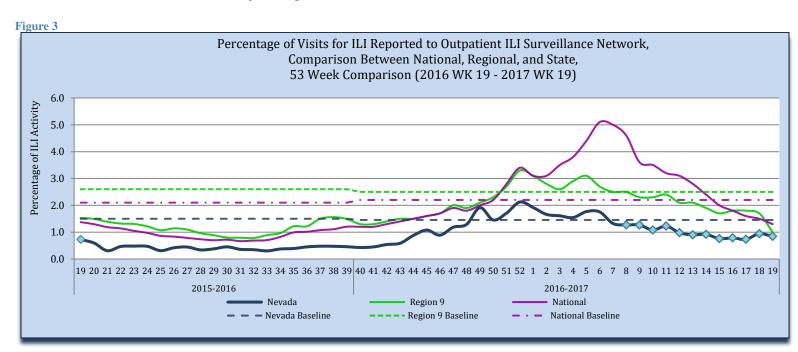
Nevada State Public Health Laboratory (NSPHL) has tested 344 specimens for influenza from sentinel providers, of which there have been 292 positive (84.9%). Southern Nevada Public Health Laboratory (SNPHL) has tested 75 specimens this season of which there have been 7 positives. Nationally, there have been 923,837 specimens sent to the WHO and NERVSS laboratories of which 159,421 have been positive (17.3%). 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 19)		State of Nevada (Season)		National (Week 19)		National (Season)	
				#	%	#	%	#	%	#	%
Specimens Tested	344	75	643	13		1,062		9,820		923,837	
Influenza Positives	292	7	104	1	7.7	403	37.9	496	5.1	159,421	17.3
Influenza A:	264	5	86	1	100.0	355	88.1	143	28.8	115,519	72.5
A (2009 H1N1)	11	0	1	0	0.0	12	3.4	1	0.7	882	0.8
A (H3)	253	5	8	0	0.0	266	74.9	35	24.5	30,306	26.2
A (Sub-typing not performed)	0	0	77	1	100.0	77	21.7	107	74.8	84,331	73.0
<u>Influenza B:</u>	28	2	18	0	0.0	48	11.9	353	71.2	49,902	27.5
B (Victoria Lineage)	1	0	0	0	0.0	1	2.1	5	1.4	1,885	4.3
B (Yamagata Lineage)	27	0	1	0	0.0	28	58.3	23	6.5	4,622	10.5
B (Sub-typing not performed)	0	2	17	0	0.0	19	39.6	325	92.1	37,395	85.2

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

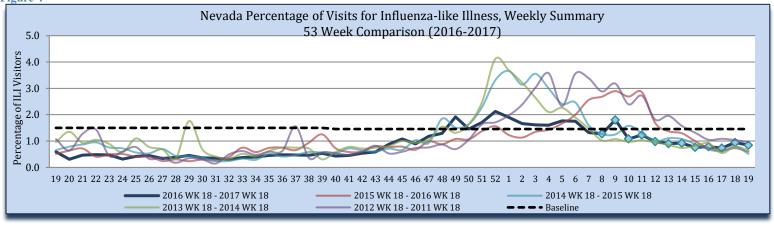
Influenza-like Illness (ILI) Surveillance Network has each sentinel provider report the number of patients seen that meet the ILI case definition and the total number of patients seen for any reason each week. The "percentage of visits for ILI" is the number of ILI patients divided by the total number of patients visit per week. Nevada's percentage of ILI visits for week 19 is 0.8% which is below the state baseline of 1.5%. Region 9 ILI percentage for week 19 is 1% which is the below the region baseline 2.5%. Region 9 includes the following states/territory: Arizona, California, Guam, Hawaii, and Nevada. The national ILI percentage for week 19 is 1.3% which is below the national baseline 2.2%.



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

During week 19, 0.8% of visits to sentinel providers were due to ILI; this is higher than the 2015-2016 influenza season (0.3%). There were 16,865 patients seen by sentinel providers during week 19, of which 142 patients presented with ILI; week 19 of 2016, there were 34 patients seen with ILI (11,039 total patients seen).

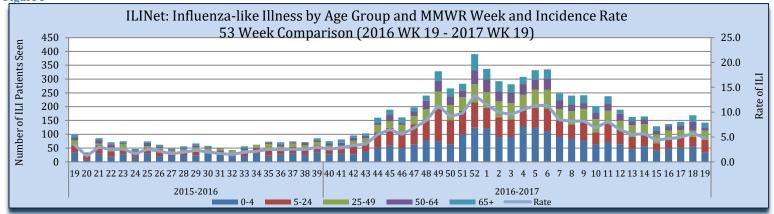
Figure 4



Source of Data: CDC: ILINet.

Influenza-like Illness is reported by age groups. During week 19, patients age 5-24 were the greatest number of patients seen with ILI, at 46 patients seen. The rate for week 19 is 4.8 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 2017 is 2,935,490.

Figure 5



Source of Data: CDC: ILINet.

Influenza Positive Surveillance (NBS and NETSS)

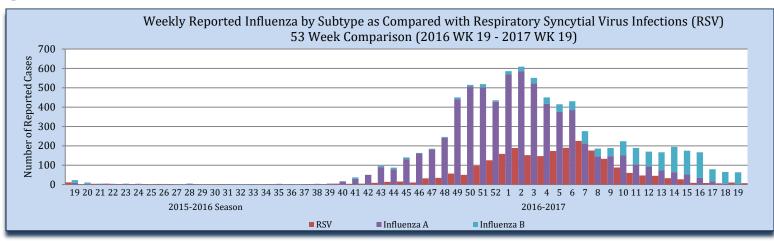
Positive cases of influenza are reported to the state health authority for surveillance purposes. Table 2 and Figure 6 reflect all positive influenza cases reported to the state. Types of influenza testing include commercial rapid diagnostic test (rapid), viral culture, fluorescent antibody, enzyme immunoassay, RT-PCR (PCR), and Immunohistochemistry. The two most common test types in Nevada are Rapid and PCR tests. During week 19, there were 56 influenza cases reported to the state, 3 influenza A, 52 influenza B and 1 unknown subtyping.

Table 2

	Reported Influenza Cases by County Jurisdiction and Influenza Type									
Reporting Jurisdiction	(Current We	eek (Week 19)		Cumulative Influenza Season					
	Α	В	Unknown	Total	A	В	Unknown	Total		
Carson City Health and Human Services	1	20	0	21	831	121	3	955		
Rural Community Health Services	0	2	0	2	582	66	37	685		
Southern Nevada Health District	0	10	0	10	3,402	874	228	4,504		
Washoe County Health District	1	29	2	32	1,989	261	154	2,404		
State of Nevada	2	61	2	65	6,804	1,322	422	8,548		

Source: OPHIE: NBS and SNHD: NETSS

Figure 6



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

Hospitalizations

There were 5 hospitalization associated with influenza reported to the state health authority for week 19.

Table 3

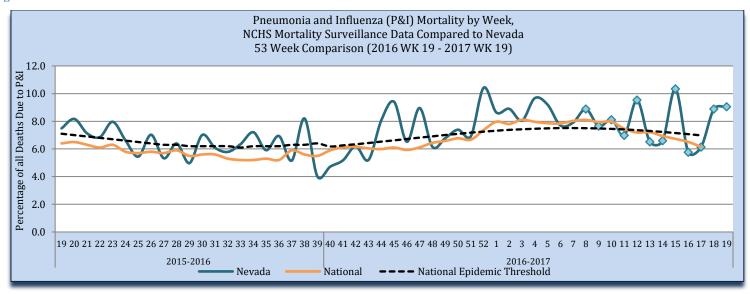
Influenza Hospitalizations								
Donouting Invidintion	Current Weel	κ (Week 18)	Cumulative Influenza Season					
Reporting Jurisdiction	#	%	#	%				
Carson City Health and Human Services	0	0.0	35	6.6				
Rural Community Health Services	0	0.0	20	3.8				
Southern Nevada Health District	0	0.0	178	33.8				
Washoe County Health District	5	100	294	55.8				
State of Nevada	5	100	527	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 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 23rd, there were 30 P&I deaths and 332 total deaths for week 19 in Nevada. The CDC's most up-to-date National and National Epidemic Threshold data was for 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 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. 2003-2020 ASRHO Estimates and Projections. Division of Public and Behavioral Health edition. Vintage 2015.
- 3. OPHIE. DPBH. NBS. 2015-2017. Accessed May 2017.
- 4. Office of Vital Records (OVR). DPBH. Web Enabled Vital Records Registry System (WEVRRS) [unpublished data]. 2015-2017. Accessed May 2017.
- 5. Southern Nevada Health District (SNHD). NETSS/Trisano. 2015-2017. Accessed May 2017.

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