

Weekly Report

2016 Week 18 (May 1 – May 07, 2016) through 2017 Week 18 (April 30 – May 6)

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.

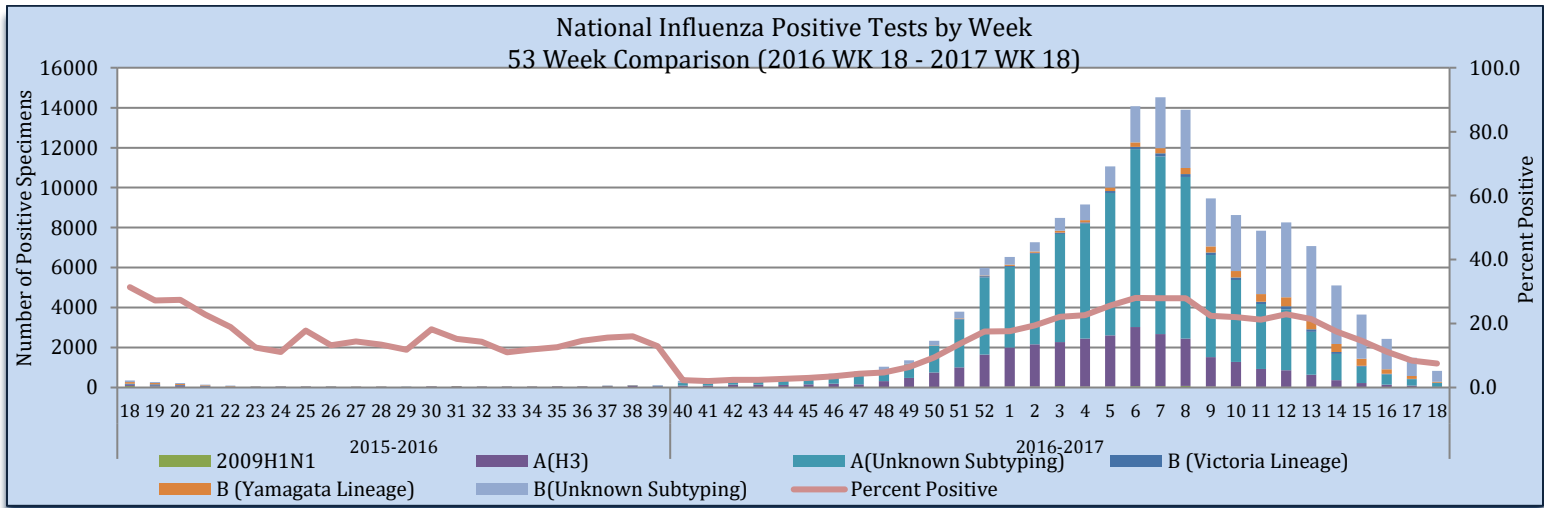
Purpose

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 18, there were 11,047 specimens collected and tested for influenza, of those 827 were positive (7.5%).

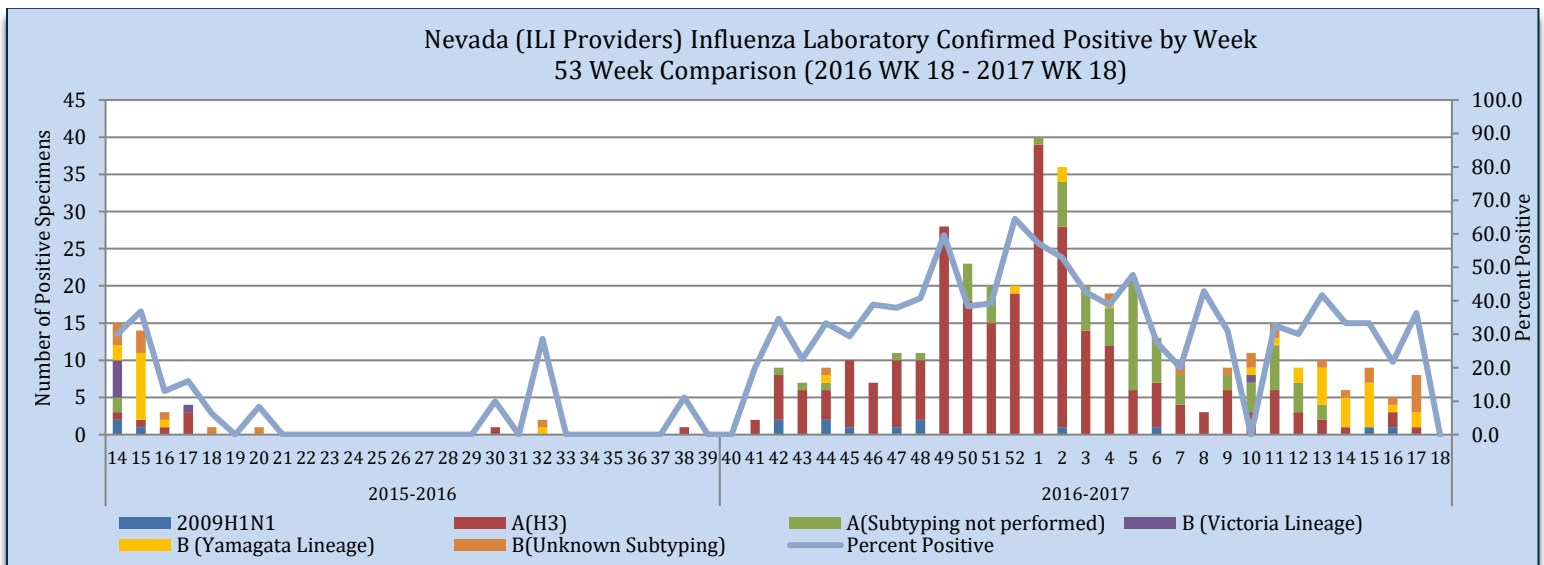
Figure 1



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 18, where there were 9 specimens collected and 0 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 343 specimens for influenza from sentinel providers, of which there have been 291 positive (84.8%). Southern Nevada Public Health Laboratory (SNPHL) has tested 75 specimens this season of which there have been 7 positives. Nationally, there have been 906,576 specimens sent to the WHO and NERVSS laboratories of which 158,222 have been positive (17.5%). 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 tested by sentinel providers, including out of state laboratories.

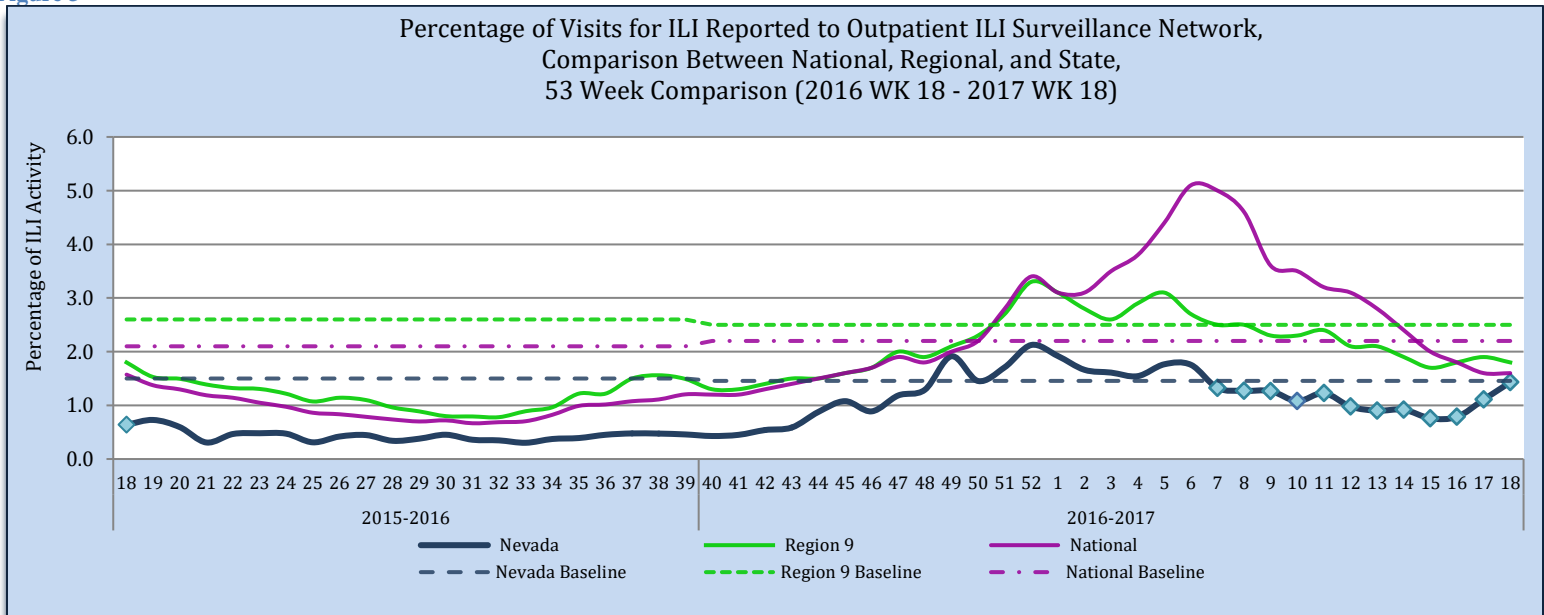
Table 1

Influenza Specimens Tested State and Nationally through Sentinel Providers											
	NSPHL	SNPHL	All Other Laboratories	State of Nevada (Week 18)		State of Nevada (Season)		National (Week 18)		National (Season)	
				#	%	#	%	#	%	#	%
Specimens Tested	343	75	630	9		1,048		11,047		906,576	
Influenza Positives	291	7	103	0	0.0	401	38.3	827	7.5	158,222	17.5
Influenza A:	264	5	85	0	0	354	88.3	223	27.0	115,068	72.7
A (2009 H1N1)	11	0	1	0	0.0	12	3.4	1	0.4	877	0.8
A (H3)	253	5	8	0	0.0	266	75.1	30	13.5	30,222	26.3
A (Sub-typing not performed)	0	0	76	0	0.0	76	21.5	192	86.1	83,969	73.0
Influenza B:	27	2	18	0	0.0	47	11.7	604	73.0	43,154	27.3
B (Victoria Lineage)	1	0	0	0	0.0	1	2.1	15	2.5	1,863	4.3
B (Yamagata Lineage)	26	0	1	0	0.0	27	57.4	42	7.0	4,536	10.5
B (Sub-typing not performed)	0	2	17	0	0.0	19	40.4	547	90.6	36,755	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 18 is 1.4% which is below the state baseline of 1.5%. Region 9 ILI percentage for week 18 is 1.8% 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 18 is 1.6% which is below the national baseline 2.2%.

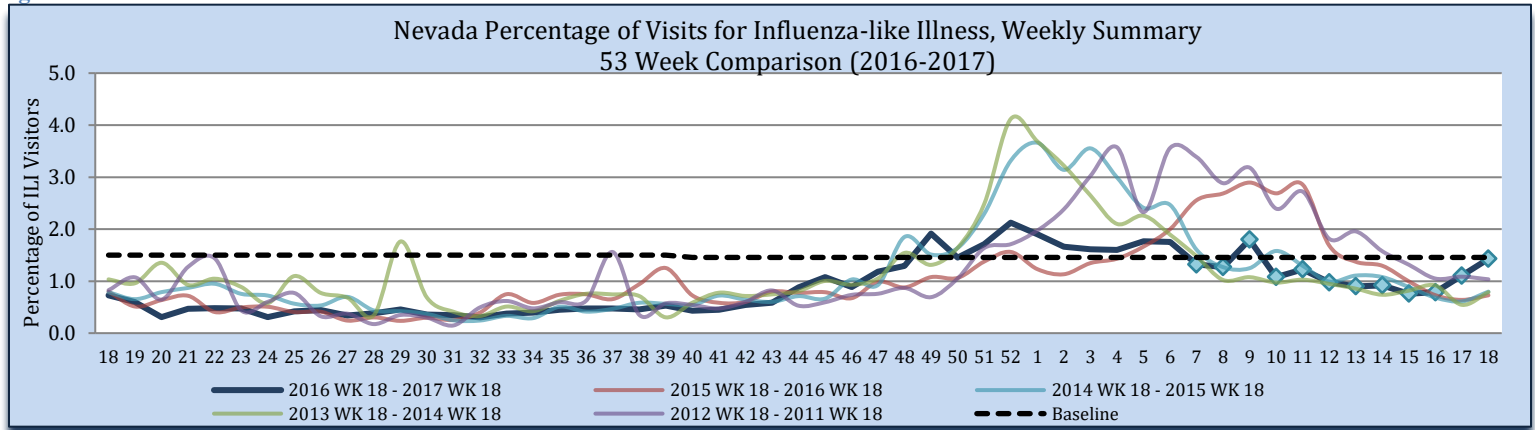
Figure 3



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

During week 18, 1.4% of visits to sentinel providers were due to ILI; this is higher than the 2015-2016 influenza season (0.6%). There were 10,769 patients seen by sentinel providers during week 18, of which 4,154 patients presented with ILI; week 18 of 2016, there were 98 patients seen with ILI (16,473 total patients seen).

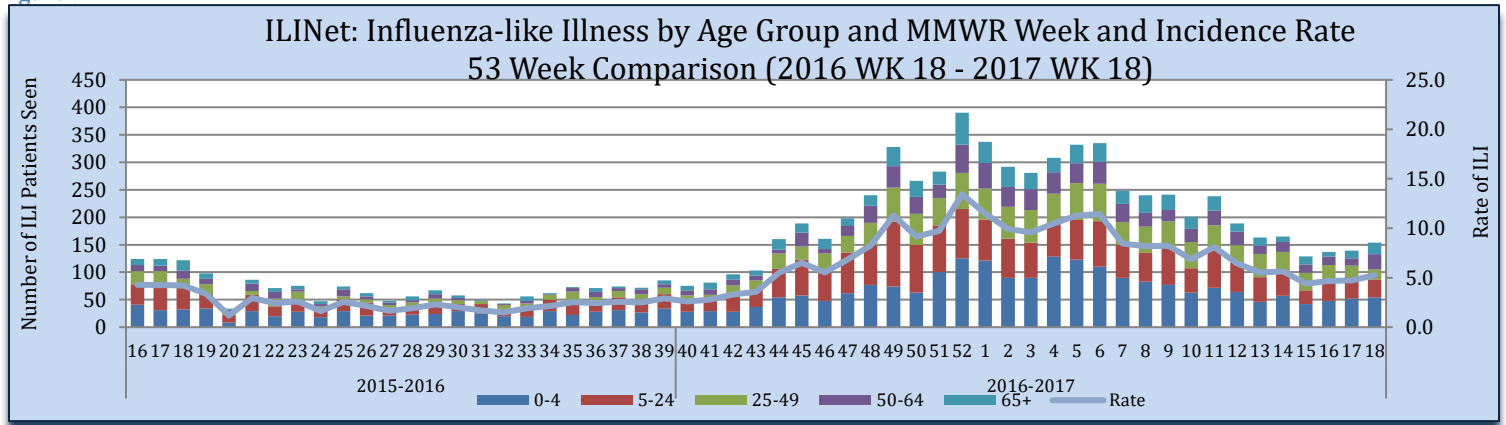
Figure 4



Source of Data: CDC: ILINet.

Influenza-like Illness is reported by age groups. During week 18, patients age 0-4 were the greatest number of patients seen with ILI, at 54 patients seen. The rate for week 18 is 5.2 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)

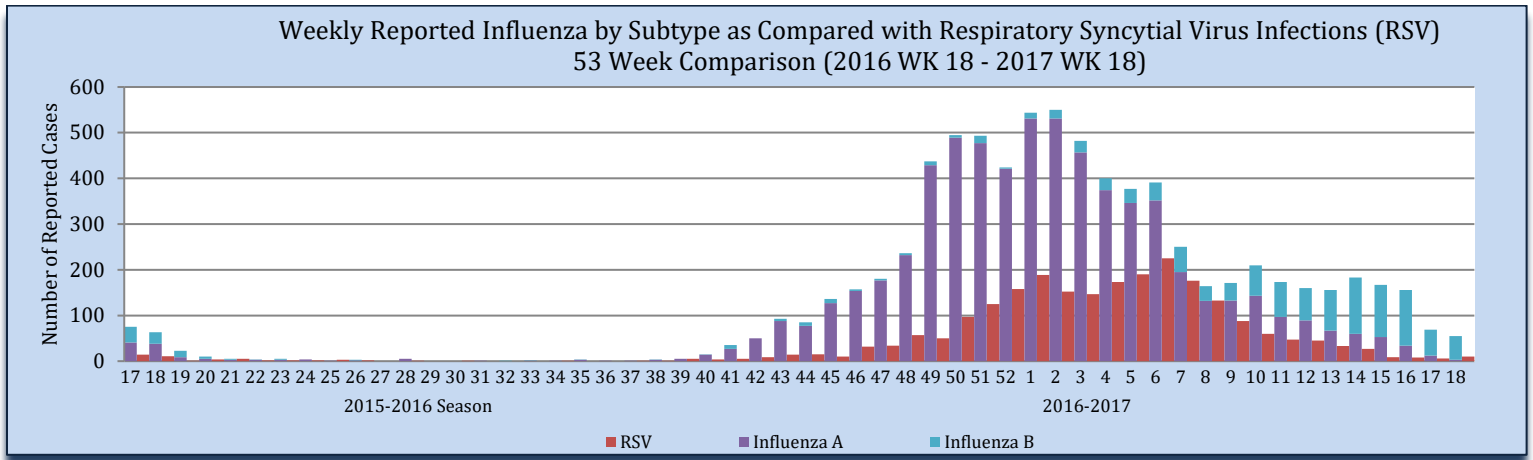
Positive cases of influenza are reported to the state health authority for surveillance purposes. Table 2 and Figure 6 reflect all positive influenza cases reported to the state. Types of influenza testing include commercial rapid diagnostic test (rapid), viral culture, fluorescent antibody, enzyme immunoassay, RT-PCR (PCR), and Immunohistochemistry. The two most common test types in Nevada are Rapid and PCR tests. During week 18, there were 56 influenza cases reported to the state, 3 influenza A, 52 influenza B and 1 unknown subtyping.

Table 2

Reporting Jurisdiction	Reported Influenza Cases by County Jurisdiction and Influenza Type							
	Current Week (Week 18)				Cumulative Influenza Season			
	A	B	Unknown	Total	A	B	Unknown	Total
Carson City Health and Human Services	0	14	0	14	830	101	3	934
Rural Community Health Services	0	5	0	5	582	63	37	682
Southern Nevada Health District	0	0	0	0	2,979	727	226	3,932
Washoe County Health District	3	33	1	37	1,988	232	152	2,372
State of Nevada	3	52	1	56	6,379	1,123	418	7,920

Source: OPHIE: NBS and SNHD: NETSS.

Figure 6



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

Hospitalizations

There were 2 hospitalization associated with influenza reported to the state health authority for week 18.

Table 3

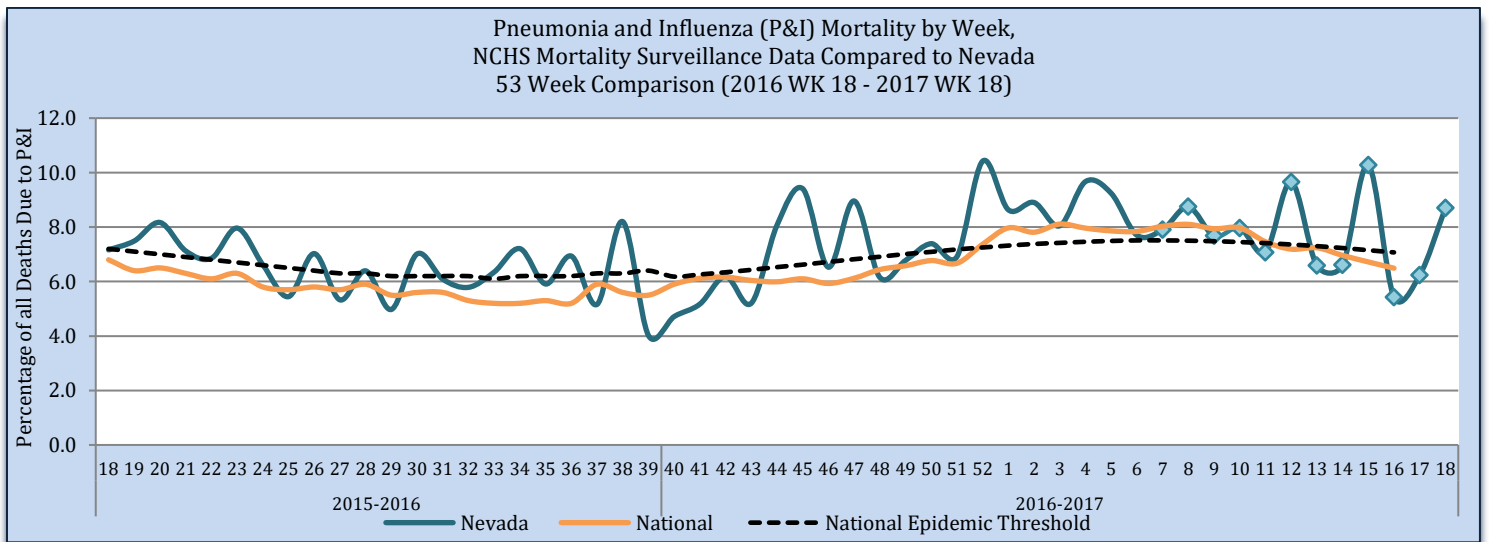
Reporting Jurisdiction	Influenza Hospitalizations			
	Current Week (Week 18)		Cumulative Influenza Season	
	#	%	#	%
Carson City Health and Human Services	0	0.0	35	6.7
Rural Community Health Services	0	0.0	20	3.8
Southern Nevada Health District	0	0.0	178	34.1
Washoe County Health District	2	100	259	55.4
State of Nevada	2	100	492	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 16th, there were 30 P&I deaths and 345 total deaths for week 18 in Nevada. The CDC's most up-to-date National and National Epidemic Threshold data was for week 16.

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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