

Influenza Watch

Los Angeles County

http://lapublichealth.org/acd/flu.htm

Rapid Diagnostic Testing for Influenza

Rapid diagnostic tests for influenza can help in the diagnosis and management of patients who present with signs and symptoms compatible with influenza.

Reliability and Interpretation of Rapid Test Results

The reliability of rapid diagnostic tests depends largely on the conditions under which they are used:

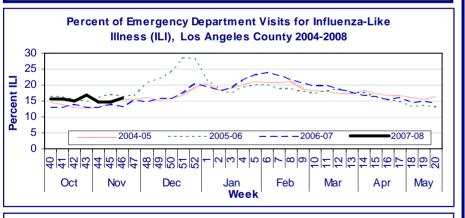
- Median sensitivities of rapid diagnostic tests are approximately 70-75% when compared with viral culture, but median specificities of rapid diagnostic tests for influenza are approximately 90-95% (check package insert).
- False-positive results are more likely to occur when disease prevalence in the community is low (usually at beginning/end of influenza season).
- False-negative results are more likely to occur when disease prevalence is high in the community (usually at the height of the influenza season).

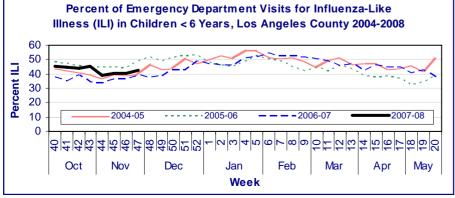
To Minimize False Results

- · Consider purchasing rapid tests with high sensitivity and specificity.
- Collect specimens as early in the illness as possible (within 4-5 days).
- · Follow manufacturer's instructions, including handling of specimens.
- Consider sending specimens for viral culture to confirm results of rapid tests especially when community prevalence of influenza is low and the rapid diagnostic test result is positive and when the rapid diagnostic test result is negative but disease prevalence is high.

Adapted from CDC's Rapid Diagnostic Testing: Information for Health Care Professionals, http://www.cdc.gov/flu/professionals/diagnosis/pdf/flu-rapid-test-clinician.pdf

For more information visit: http://lapublichealth.org/acd/Flu_Sea_Professionals.htm





Important Information

- To date, confirmed cases of influenza have not been reported in LA County.
- ILI activity in all ages is within baseline levels.

In the News

Study finds greater, later role for antivirals in flu patients

A new study published in the early online Dec 15 edition of Clinical Infectious Diseases (CID) suggests that the influenza virus may behave differently in an older, sicker population, giving antiviral medications a role later in the illness course. The results from this study suggest that adults who are hospitalized with serious seasonal influenza infections are more likely to survive if they receive antiviral medications, and older patients may benefit even if treatment is delayed until more than 48 hours after their first symptoms.

Available free of charge at:

http://www.journals.uchicago.edu/CID/journal/issues/v45n12/51609/51609.web.pdf

Influenza Activity: CA & USA

California: During week 45 (November 4 – November 10, 2007), influenza activity in California was **sporadic**, with activity in Northern California higher than Southern California.

For more information see the CA influenza report: www.dhs.ca.gov/ps/dcdc/VRDL/html/FLU/Fluintro.htm

Become a CA Influenza Sentinel Provider:

Contact Melissa Dahlke at flu@dhs.ca.gov or visit: www.dhs.ca.gov/ps/dcdc/VRDL/html/FLU/Flu-sentinel.htm

United States: A low level of influenza activity was measured in the United States during week 45. The proportion of outpatient visits for ILI and acute respiratory illness (ARI) was below baseline levels. Also, the proportion of deaths attributed to pneumonia and influenza was below the epidemic threshold.

For more information see the CA influenza report: http://www.cdc.gov/flu/weekly/fluactivity.htm