



INFLUENZA WATCH LOS ANGELES COUNTY

Los Angeles County (LAC) The total number of positive flu tests remained low during week 4 (January 23 - January 30 (Figure 1). While we would normally expect flu activity to be increasing during this time of year, the % of flu tests that tested positive remained low and is well below 2007-08 and 2008-09 levels (Figure 1). RSV activity continued to increase in week 4 (Figure 2) and has reached a level roughly equivalent to the peak of the 2008-09 season. The percent of emergency department visits due to ILI increased slightly in week 4 but remains lower than previous years (Figure 3).

Table 1: Surveillance System Overview

SURVEILLANCE SYSTEM*	Week 4	2009-10 YTD
Percent Positive Influenza Tests [‡]	1.1	14.8
Percent Positive RSV Tests [‡]	32.7	4.6
Percent Flu A / Flu B [‡]	85.7 / 14.3	99.5 / 0.5
Severe Pediatric Influenza Cases [†]	0 (0)	100 (9)
Respiratory Outbreaks	0	345
Influenza Deaths	0	90

*See <http://apublichealth.org/acd/flu.htm> for a description of surveillance methods. 2009-2010 surveillance started on 8/30/09 (week 35) and ends May 22, 2010 (week 20)

± Sentinel sites (8 participating facilities in week 4)

‡ Sentinel sites (4 participating facilities in week 4)

†The number of deaths is indicated by the parenthesis.

California During week 4 (Jan 24-30), influenza activity in California remained **sporadic**.

<http://www.cdph.ca.gov/PROGRAMS/VRDL/Pages/CaliforniaInfluenzaSurveillanceProject.aspx>

United States Flu activity remained the same in the US during week 4 (Jan 24-30) in which no states reported widespread activity, 6 states reported regional activity, 10 states reported local activity, 31 states reported sporadic activity, and 3 states reported no activity. All subtyped flu A viruses reported to CDC in week 4 were pandemic H1N1 (pH1N1) viruses. www.cdc.gov/flu/weekly

Figure 1: Total Positive Flu and % Positive Flu by Week

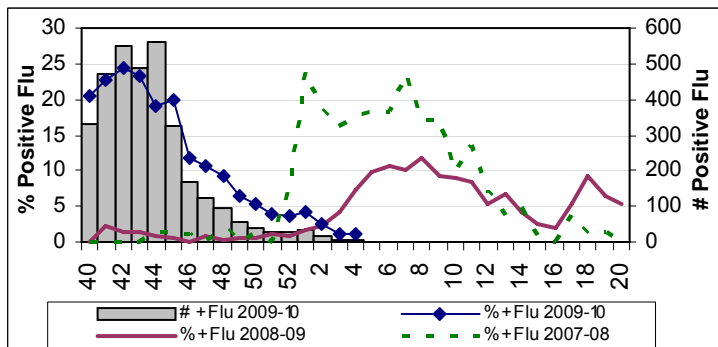


Figure 2: Total Positive RSV and % Positive RSV by Week

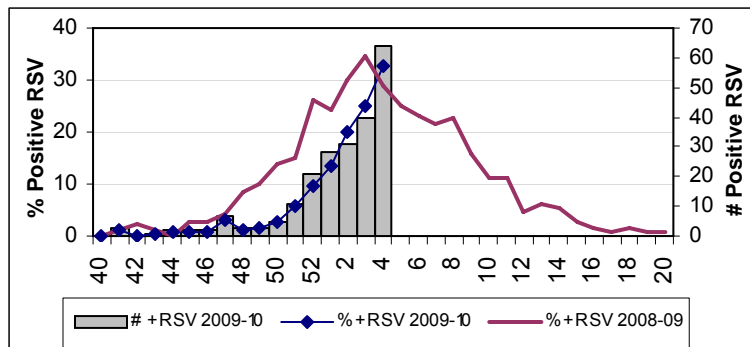
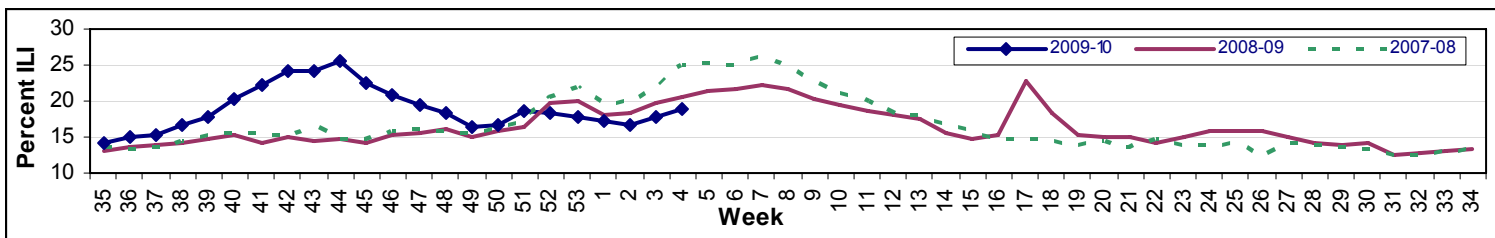


Figure 3: Percent of Emergency Department Visits for Influenza-Like Illness by Week, All Ages



In the News An [MMWR](http://www.cdc.gov/mmwr) dated Jan. 29th summarizes 3 pH1N1 outbreaks in long-term-care facilities (LTCFs). The facilities were located in 3 different states and housed mostly older patients. Attack rates among residents ranged from 6-28% while attack rates among staff ranged from 5-40%. One hospitalization and one death occurred in residents during these 3 outbreaks. After implementation of recommended infection control practices, including the administration of antiviral treatment and pH1N1 vaccine, all 3 outbreaks were contained. These outbreaks demonstrate that, despite data indicating a lower risk of infection from pH1N1 among persons ≥ 65 years old, pH1N1 outbreaks can occur in LTCFs. The California Department of Public Health issued H1N1 infection control guidelines on 2/5/10 for LTCFs which may be found here: <http://www.cdph.ca.gov/HealthInfo/discond/Documents/H1N1-ICGuidanceLTCF.pdf>. Healthcare providers and patients at LTCFs should receive H1N1 and seasonal flu vaccine, and all respiratory outbreaks should be reported to your local health department for infection control guidance and investigation.