



INFLUENZA WATCH LOS ANGELES COUNTY

Los Angeles County (LAC) The total number of positive flu tests remained low during week 6 (February 7 - February 13 (Figure 1). The % of flu tests that tested positive was also low and remains well below 2007-08 and 2008-09 levels (Figure 1). One severe pediatric case occurred during week 6 (Table 1). This case was confirmed to be pandemic H1N1 (pH1N1). RSV activity decreased in week 6 (Figure 2) but remains higher than 2008-09 levels. The percent of emergency department visits due to ILI increased in week 6 but still remains lower than previous years (Figure 3).

Table 1: Surveillance System Overview

SURVEILLANCE SYSTEM*	Week 6	2009-10 YTD
Percent Positive Influenza Tests [‡]	0.7	14.0
Percent Positive RSV Tests [‡]	27.1	7.7
Percent Flu A / Flu B [‡]	80.0 / 20.0	99.5 / 0.5
Severe Pediatric Influenza Cases [†]	1 (0)	102 (9)
Respiratory Outbreaks	0	345
Influenza Deaths	0	96

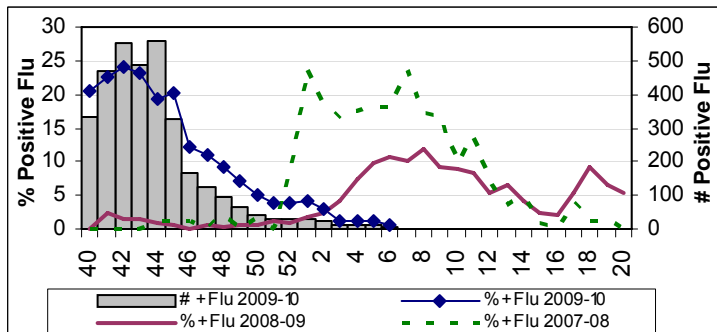
*See <http://lapublichealth.org/acd/flu.htm> for a description of surveillance methods. 2009-2010 surveillance started on 8/30/09 (week 35) and ends May 22, 2010 (week 20)

± Sentinel sites (8 participating facilities in week 6)

‡ Sentinel sites (3 participating facilities in week 6)

†The number of deaths is indicated by the parenthesis.

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



California During week 6 (Feb 7-Feb 13), 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 6 (Feb 7-Feb 13): no states reported widespread activity, 3 states reported regional activity, 9 states reported local activity, 35 states reported sporadic activity, and 3 states reported no activity. All subtyped flu A viruses reported to CDC in week 6 were pH1N1 viruses. www.cdc.gov/flu/weekly

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

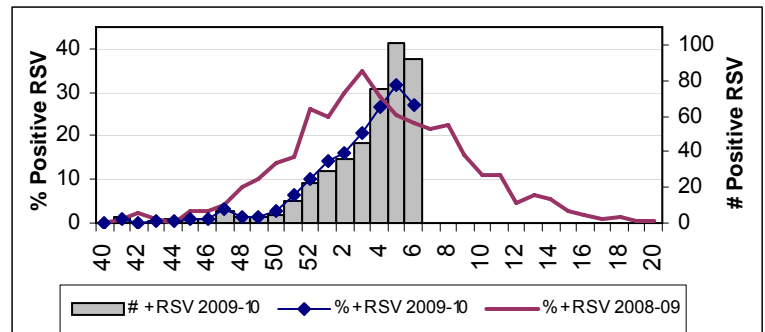
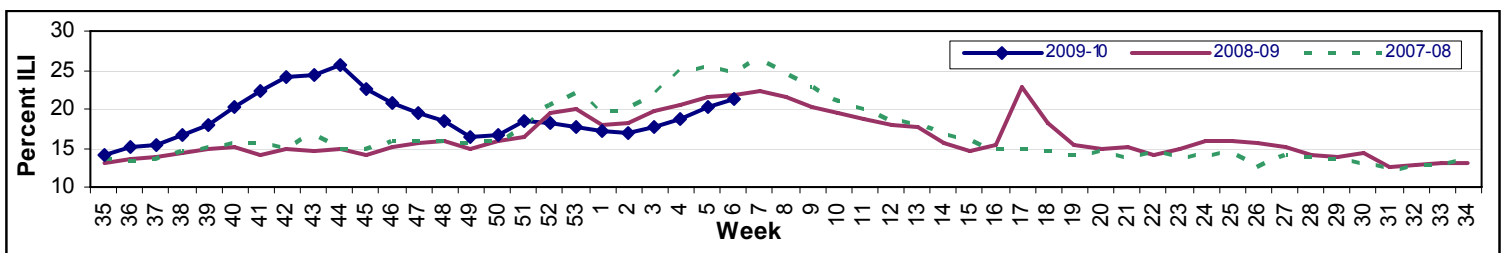


Figure 3: Percent of Emergency Department Visits for Influenza-Like Illness by Week, All Ages



In the News An open-access article published on 12/08/09 in *PLoS Medicine* describes a study designed to estimate the proportion of symptomatic patients infected with pH1N1 who died (symptomatic case fatality ratio, sCFR), required ICU care (sCIR), and required hospitalization (sCHR). The study used data from New York City to estimate numerators for ICU and death. Ratios of symptomatic cases to hospitalizations were estimated from two sources of data, medically attended cases in Milwaukee and self-reported ILI in New York. These estimates were then combined with estimates of the fraction of cases detected for each level of severity to estimate sCFR, sCIR, and sCHR for pH1N1. The calculated sCFR and sCIR were highest in persons ≥ 18 years and lowest in children aged 5-17 years. The estimated sCHR was also lowest in children aged 5-17 years. The results suggest that at the end of this influenza season, the number of deaths due to pH1N1 may be substantially lower to slightly higher than that associated with seasonal flu in previous years, with a greater impact in children aged 0-4 and adults aged 18-64.

<http://www.ncbi.nlm.nih.gov/pmc/articles/PMC2784967/?tool=pubmed>