

# 2009-2010 Influenza Season

(August 30, 2009 – present)

## Utah Public Health

### Situation Report

10/14/2009

Updated Wednesdays at: <http://health.utah.gov/epi/h1n1flu/>



## Status summary as of Wednesday, October 14:

### Utah:

#### Circulation:

- Influenza is currently circulating at a level that is typical for what is seen during regular flu seasons. This level of influenza activity is not typical and is considered very unusually for this time of the year, and is more common with levels seen much later in the flu season. At this time influenza activity appears to be increasing from week to week.
- The indicator used by public health to measure the circulation of influenza in the community is influenza-like illness (ILI) as reported by sentinel clinics. (An ILI sentinel clinic is a clinic that reports to public health the percentage of patient visits seen for influenza-like illnesses).
- For the past week (MMWR week 40), the ILI rate for Utah is 3.0% (up from 1.6% last week).
  - This value is above the ILI outbreak threshold of 1.1%.
  - ILI is up for the second consecutive week.

#### Severity:

- The severity of an influenza outbreak (epidemic or pandemic) is measured by the number of influenza infections that result in hospitalization or death. To date, severity for the 2009 H1N1 Pandemic is comparable to or slightly greater than the severity seen during regular flu seasons.
- At this time there is no evidence that severity for the 2009 H1N1 Pandemic is changing.
- There have been 127 influenza-associated hospitalizations (IAHs) (due to both seasonal and 2009 pandemic strains) reported this season. The current number of IAHs is very unusual for this early in the influenza season.
  - 41 have occurred during the past week.

#### 2009 Pandemic A (H1N1) deaths:

- The severity measure listed above is for influenza caused by all strains (regular seasonal flu and the 2009 Pandemic A (H1N1)). In addition, Utah is collecting data on patient deaths (whether hospitalized or not) known to have been caused by the 2009 Pandemic A (H1N1) strain.
- 3 deaths occurred in Utah during the past week in which the persons had confirmed 2009 Pandemic Influenza A (H1N1).



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- Nationally, the proportion of deaths attributed to pneumonia and influenza (P&I) during the past week was at the epidemic threshold, which is an increase from previous weeks in which P&I attributed deaths were below the epidemic threshold.

#### **Viral circulation and resistance:**

Data in this section comes from the CDC and is collected nationally:

- 99.7% of all influenza isolates typed at national reference labs this week were Influenza A:
  - 99.8% of the subtyped isolates were 2009 Pandemic A (H1N1).
  - 0.1% were seasonal A (H1)
  - 0.1% were seasonal A (H3)
- 0.3% were Influenza B
- The majority of influenza viruses currently circulating in the U.S. are 2009 Pandemic A (H1N1)

This antiviral susceptibility profile is compiled by CDC and represents strains identified since October 1, 2008.

	% resistant to Oseltamivir	% resistant to Zanamivir	% resistant to Adamantanes
2009 Pandemic A (H1N1)	0.5%	0 %	100%
Seasonal A (H1)	99.6%	0%	0.6%
Seasonal A (H3)	0%	0%	100%
Influenza B	0%	0%	N/A

#### **2009 Pandemic Influenza A (H1N1) Vaccine Information:**

- The 2009 Pandemic A H1N1 vaccine is delivered directly to Local Health Departments or designated providers in Utah from the central vaccine distributor. The Utah Department of Health does not control the supply and distribution of the vaccine.
- 2009 Pandemic A H1N1 vaccine shipments arrive in weekly shipments in limited amounts. Check with your Local Health Department or designated provider to find out what type of vaccine they have available and to whom they are giving it.
- Priority groups for the Pandemic H1N1 vaccine are as follows:
  - Pregnant women

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- Persons who live with or provide care for infants under 6 months of age
- Health care and emergency medical services personnel
- Children and young adults aged 6 months through 24 years
- Persons aged 25 through 64 years who have medical conditions that put them at higher risk for influenza-related complications

#### Guidance:

New CDC guidance available at: <http://www.cdc.gov/h1n1flu/whatsnew.htm>

- Question and Answers: 2009 H1N1 Nasal Spray Vaccine (posted Wednesday, Oct. 7, 2009).
- MMWR: Update on Influenza A (H1N1) 2009 Monovalent Vaccines (posted Thursday, Oct. 8, 2009).
- Interim Guidance for Influenza Surveillance: Prioritizing RT-PCR Testing in Laboratories (posted Friday, Oct. 9, 2009).
- Interim Guidance on Infection Control Measures for 2009 H1N1 Influenza in Healthcare Settings, Including Protection of Healthcare Personnel (posted Wednesday, October 14, 2009)
- The FDA issued a health care provider letter warning against reconstituting zanamivir for use by nebulization. This letter is available at: <http://www.fda.gov/Safety/MedWatch/SafetyInformation/SafetyAlertsforHumanMedicalProducts/ucm186081.htm>