



INFLUENZA WATCH LOS ANGELES COUNTY

Los Angeles County (LAC) The total number of positive flu tests as well as the percent of flu tests that were positive increased during week 36 (Figure 1). One severe pediatric flu case occurred during week 36. Four new ILI (influenza-like illness) outbreaks (2 in elementary schools, 1 in a high school, and one in a university) were reported during week 36. The percent of emergency department visits that were due to ILI were higher in week 36 relative to the same time in the previous two influenza seasons.

Surveillance System Overview

SURVEILLANCE SYSTEM*	Week 36	2009-2010 YTD
Percent Positive Influenza Tests [±]	13.8	11.5
Percent Positive RSV Tests [‡]	2.0	0.5
Percent Flu A / Flu B [‡]	100 / 0	100 / 0
Severe Pediatric Influenza Cases [†]	1	4 (1)
Respiratory Outbreaks	4	4

*See <http://lapublichealth.org/acd/flu.htm> for a description of surveillance methods.

± Sentinel sites (8 participating facilities in weeks 36)

‡ Sentinel sites (3 participating facilities)

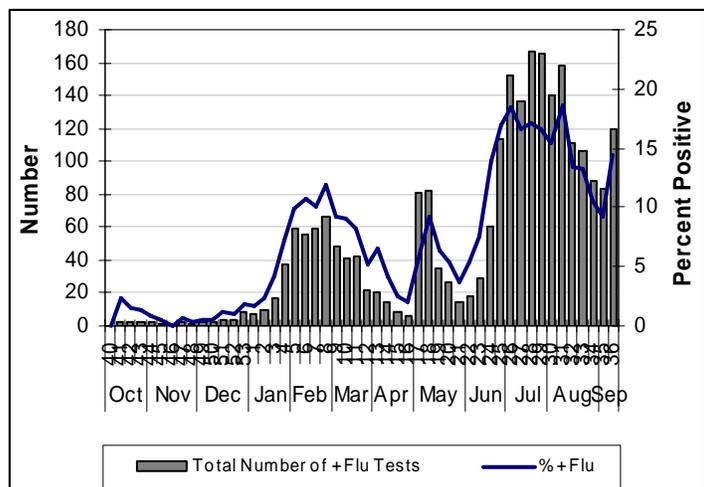
†The number of deaths is indicated by the parenthesis.

California During week 36 (September 6-September 12), influenza activity in California remained **regional**.

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

United States Influenza activity increased across the United States during week 36 (September 6-September 12). In week 36, 21 states reported widespread activity, 9 states reported regional activity, 11 states reported local activity, 8 states reported sporadic activity, and 1 state reported no activity. Approximately 99% of all subtyped influenza A viruses reported to CDC in week 36 were novel influenza A (H1N1) viruses. <http://www.cdc.gov/flu/weekly>

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



*Influenza data represent testing completed in 9 facilities except for week 36 in which data represent testing in 8 facilities.

In the News In an MMWR dated September 18, 2009 the CDC provides an overview of influenza activity from April through August 2009 based on nine different surveillance systems. In the United States, pandemic H1N1 influenza peaked in May and June and declined in July and early August. However, throughout the entire summer, influenza levels remained higher than normal. During the last two weeks of August, there was an increase in influenza activity in certain areas of the United States, especially the southeast, possibly signaling an early start to the 2009-2010 influenza season with pandemic H1N1 predominating at least in the early part of the season. As of 09/04/2009, all H1N1 virus characterized at CDC were antigenically related to the reference strain chosen for the H1N1 monovalent vaccine. Additionally, total influenza hospitalization rates for April-August of 2009 by age were similar to or lower than those of seasonal influenza but higher than usual for this time period. <http://www.cdc.gov/mmwr/preview/mmwrhtml/>

Figure 2: Percent of ED Visits for ILI by Week

