

Influenza Summary Update
(for the week ending October 23, 1999-Week 42)

The following information may be quoted:

Synopsis: During September through October 29, laboratory-confirmed influenza A virus infections were reported in 19 states. During week 42 (October 17 through October 23), South Dakota and Puerto Rico reported regional influenza activity, and 24 other states and the District of Columbia reported sporadic influenza activity. Sentinel physician reports of influenza-like illness were within baseline levels of 0% to 3%, but pneumonia and influenza mortality was above expected levels for week 42.

U.S. World Health Organization (WHO) and National Respiratory and Enteric Virus Surveillance System (NREVSS) Collaborating Laboratory Reports:* During week 42, WHO and NREVSS laboratories reported 532 specimens tested for influenza viruses. Of the 532 specimens tested for influenza, 18 (3%) were positive. Six influenza A(H3N2) viruses, 9 untyped influenza A isolates, and 3 influenza B isolates were reported. The influenza B isolates are travel-related.

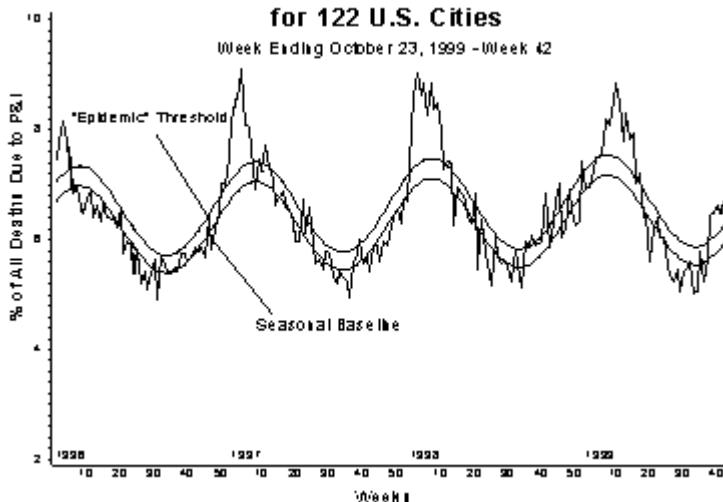
Since October 3, WHO and NREVSS laboratories have tested a total of 1,862 respiratory specimens and 30 (2%) have yielded influenza virus isolates. Twenty-seven (90%) of the 30 isolates identified are influenza type A and 3 (10%) are influenza type B. All of the influenza A viruses subtyped are A(H3N2).

Laboratory-confirmed influenza from all sources: During September through October 29, laboratory-confirmed influenza A virus infections were reported from Alaska, California, Colorado, Florida, Iowa, Massachusetts, Michigan, Missouri, Nevada, New Jersey, New York, North Carolina, Ohio, South Dakota, Tennessee, Vermont, Virginia, Washington, and Wisconsin, and from a ship sailing off the northeastern seaboard. Some influenza A viruses from California, Florida, Iowa, Massachusetts, Michigan, Missouri, North Carolina, and Tennessee, and from the ship have been subtyped as A(H3N2). Influenza B isolates were reported from Tennessee.

Pneumonia and Influenza Mortality: During week 42, the proportion of all deaths due to pneumonia and influenza as reported by the vital statistics offices of 122 U.S. cities was 6.7%. This percentage is above the epidemic threshold of 6.3% for week 42. This period is the fifth consecutive week that the percentage of pneumonia and influenza deaths has exceeded threshold values for this time of year. Whether this increase in the percentage of deaths due to pneumonia and influenza is due to early influenza activity, respiratory illness due to some other pathogen, or reporting changes under way in the 122 Cities Mortality Reporting System is unknown. However, because these changes include a revision of the reporting case definition, the current increase in pneumonia and influenza mortality should be interpreted with caution.

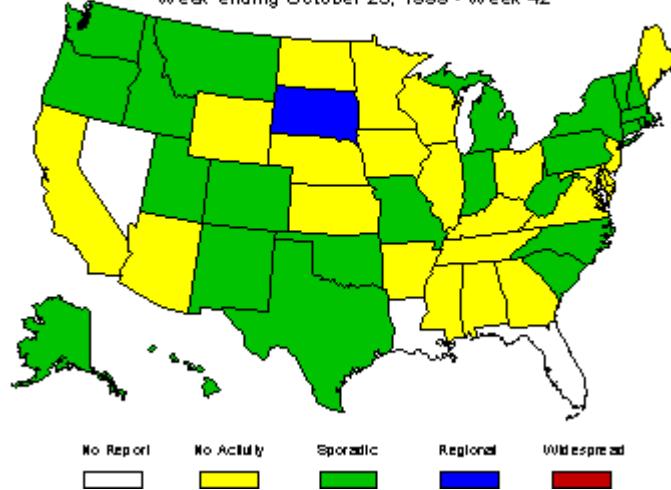
Pneumonia and Influenza Mortality

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Influenza Activity as Assessed by State and Territorial Epidemiologists:** During week 42, influenza activity was reported as regional in South Dakota and Puerto Rico. Twenty-four states (Alaska, Colorado, Connecticut, Hawaii, Idaho, Indiana, Massachusetts, Michigan, Missouri, Montana, New Hampshire, New Mexico, New York, North Carolina, Oklahoma, Oregon, Pennsylvania, Rhode Island, South Carolina, Texas, Vermont, Utah, Washington, and West Virginia) and the District of Columbia reported sporadic influenza activity. Twenty-two states reported no influenza activity and 3 did not report.

Weekly Influenza Activity Estimates Reported
by State & Territorial Epidemiologists
Week ending October 23, 1999 - Week 42



Influenza Morbidity Reports from U.S. Sentinel Physicians:* During week 42, 1% of patient visits to U.S. sentinel physicians were due to influenza-like illness, and ranged from 0% to 3% in the 9 surveillance regions. These percentages are within the baseline levels of 0% to 3%.

*Reporting is incomplete for this week, so numbers and percentages may change as more reports are received.

**Influenza activity is defined as influenza-like illness and/or culture-confirmed influenza.

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URL:<https://web.archive.org/web/20020409151908/http://www.cdc.gov/ncidod/diseases/flu/WeeklyArchives1999-2000/weekly42.htm>
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