

Influenza Surveillance Report

www.infectiousdisease.dhh.louisiana.gov

Week 28 From 7/10/11 - 7/16/11

The Influenza Surveillance Summary Report describes the results of the tracking done by the Louisiana Office of Public Health Infectious Disease Epidemiology Section (IDEpi). This report relies on data supplied by sentinel surveillance sites, including hospital emergency department (ED), laboratories and physicians' offices. Sentinel sites provide weekly data on Influenza Like Illness (ILI) and/or laboratory confirmed cases.

Taken together, ILI surveillance and laboratory surveillance provide a clear picture of the influenza activity occurring in Louisiana each week. If you have any questions about our surveillance system or would like more information, please contact Julie Hand at 504-219-4563 or julie.hand@la.gov.

ILI is defined as an illness characterized by cough and/or cold symptoms and a fever of 100° F or greater in the absence of a known cause. While not every case of ILI is a case of influenza, the CDC has found that trends in ILI from sentinel sites are a good proxy measure of the amount of influenza activity in an area. For this reason, all states and territories participating in the national surveillance program monitor weekly ILI ratios from their sentinel surveillance sites.



Laboratory testing: Not all sentinel sites have access to laboratory testing. However, many hospitals and physicians' offices do perform some influenza testing. Sites that test for influenza report the number of positive tests each week and the total number of tests performed each week. This information is included on page 4 of this report.

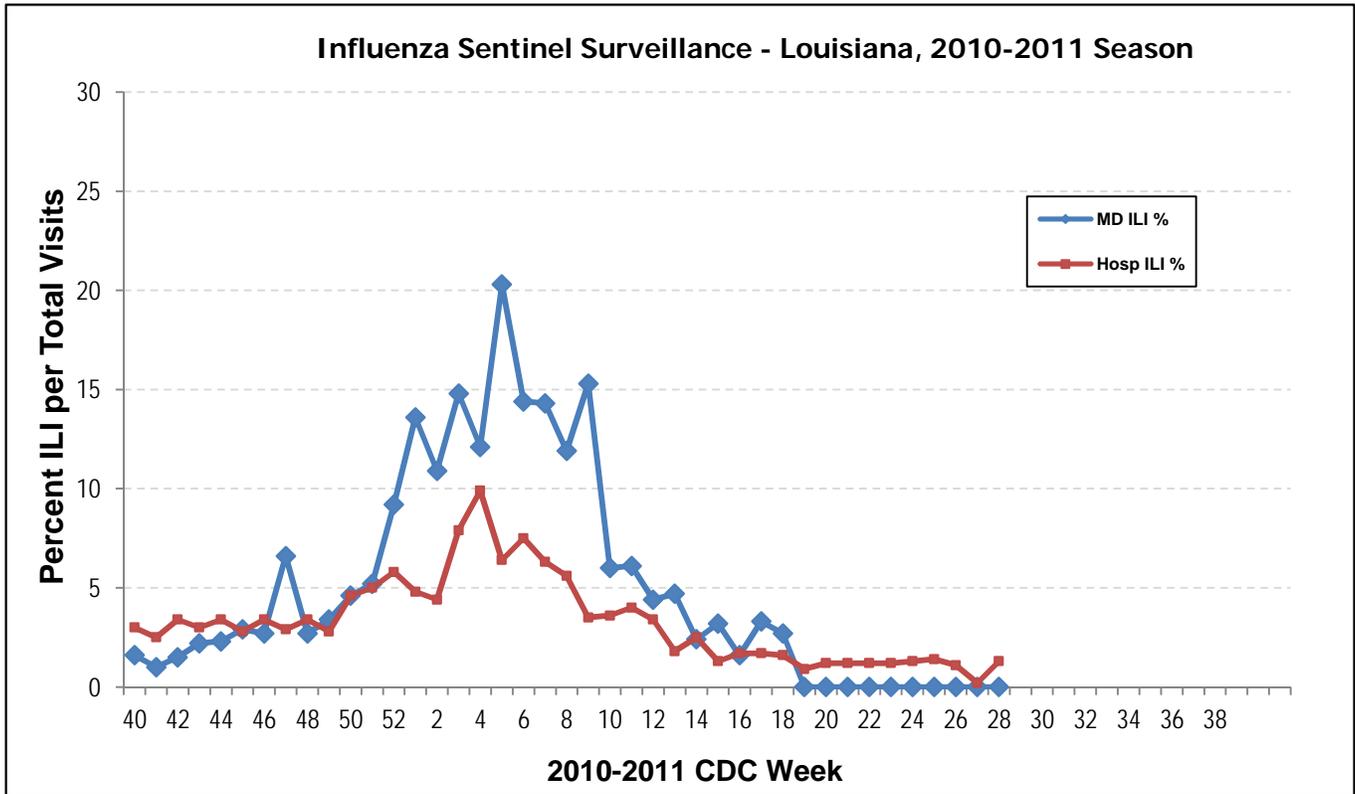
Influenza activity remains extremely low in Louisiana.

Of the Louisiana samples antigenically characterized by CDC, 93% have matched circulating viruses that are included as components of the 2010-2011 influenza vaccine.

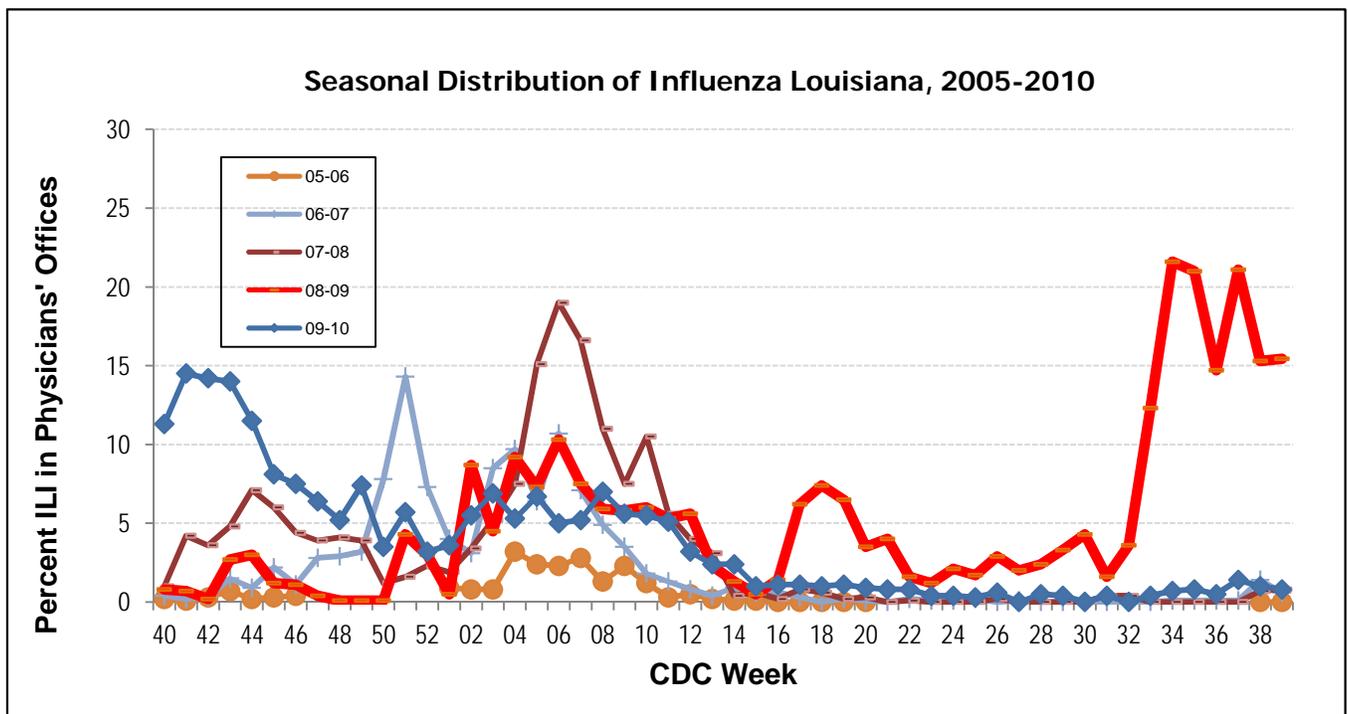
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ILI Surveillance

This graph shows the percentage of visits for ILI over the total number of visits for sentinel physicians' offices and emergency departments. This is the best approach to estimate the magnitude of influenza transmission. ILI counts do include some viral infections other than influenza, but experience over the last 50 years has shown that this approach is a reliable method to estimate influenza transmission. It does not show which strain of influenza virus is responsible. The page on lab surveillance does show the proportion of specimens attributable to each virus strain.



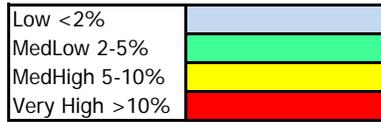
This graph shows the data on ILI surveillance among sentinel physicians' over the past 5 seasons to enable comparisons with previous years and better estimate the amplitude of this season's influenza transmission.



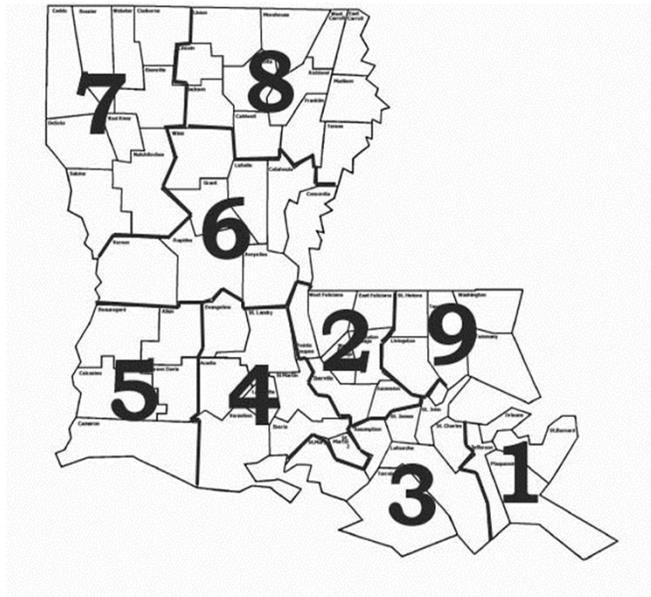
Geographical Distribution of ILI

Region	Parish	%ILI*
Region 1	Jefferson	0.1
	Orleans	1.0
	Plaquemines	
	St Bernard	
	All Region 1	0.6
Region 2	Ascension	
	East Baton Rouge	1.6
	East Feliciana	
	Iberville	
	Pointe Coupee	
	West Baton Rouge	
	West Feliciana	
All Region 2	1.6	
Region 3	Assumption	
	Lafourche	3.1
	St Charles	
	St James	
	St. John	
	St. Mary	0.0
	Terrebonne	0.2
	All Region 3	1.2
Region 4	Acadia	
	Evangeline	
	Iberia	
	Lafayette	0.0
	St Landry	
	St Martin	
	Vermilion	
All Region 4	0.0	
Region 5	Allen	
	Beauregard	
	Calcasieu	1.1
	Cameron	
	Jefferson Davis	0.5
All Region 5	0.9	
Region 6	Avoyelles	
	Catahoula	
	Concordia	
	Grant	
	LaSalle	4.3
	Rapides	0.3
	Vernon	0.0
	Winn	3.7
	All Region 6	2.1
Region 7	Bienville	
	Bossier	
	Caddo	0.8
	Claiborne	
	DeSoto	
	Natchitoches	
	Red River	
	Sabine	
	Webster	
All Region 7	0.8	

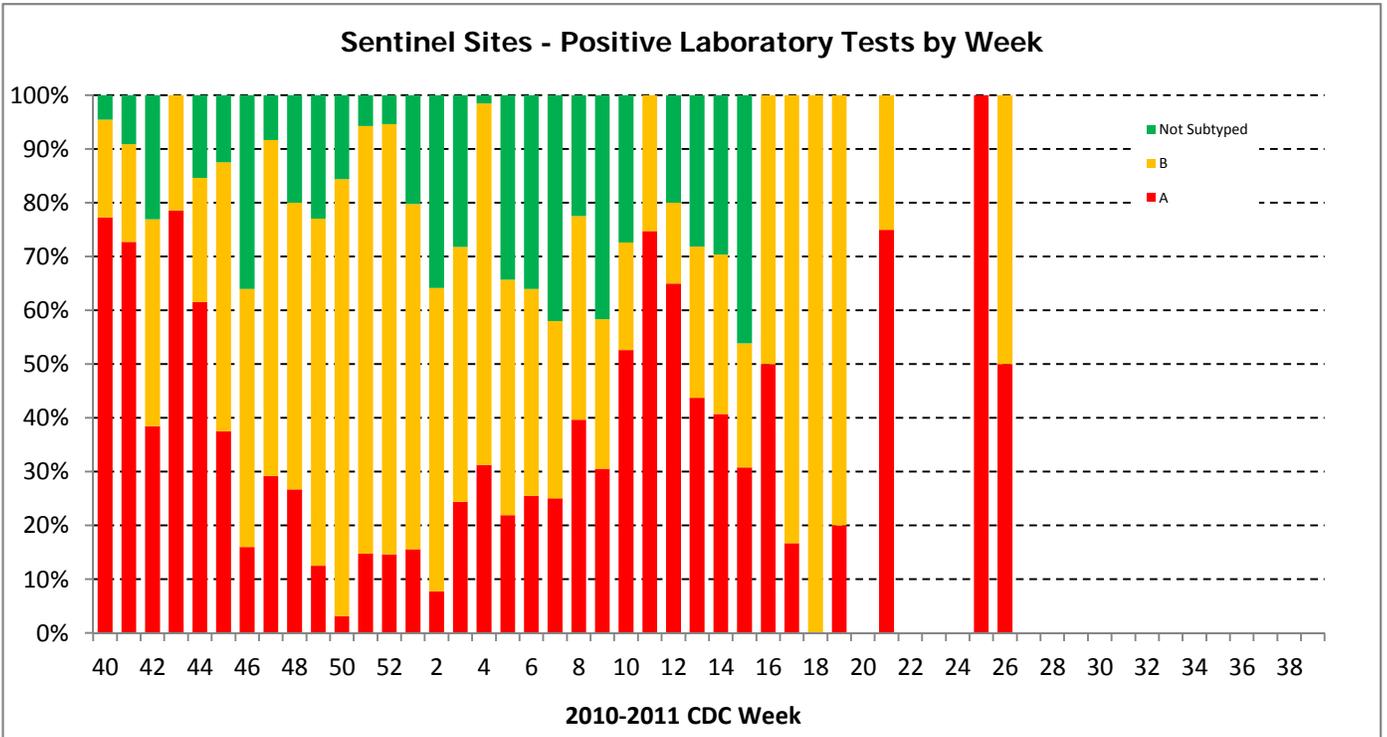
Region	Parish	%ILI*
Region 8	Caldwell	
	East Carroll	
	Franklin	
	Jackson	
	Lincoln	
	Madison	
	Morehouse	0.0
	Ouachita	0.0
	Richland	
	Tensas	
Union	0.0	
West Carroll		
All Region 8	0.0	
Region 9	Livingston	
	St. Helena	
	St Tammany	0.1
	Tangipahoa	1.1
	Washington	0.0
All Region 9	0.5	
Grand Total		



* %ILI over the last 4 weeks based on sentinel surveillance data



Laboratory Surveillance



These graphs show the distribution by virus type. Sentinel site testing is based on rapid test results. The State Public Health Laboratory performs PCR testing on all samples.

