Influenza Update

Surveillance, a Pediatric Death, and Expanded Vaccine Guidelines

This Bulletin updates earlier information about influenza surveillance, pediatric influenza deaths and recommendations for vaccine usage. 1,2

INFLUENZA SURVEILLANCE UPDATE

Laboratory surveillance: As of January 16, 2004, 657 laboratory confirmed cases of influenza were reported to the Alaska Section of Epidemiology.

Laboratory-confirmed Influenza Cases 2003-2004 (N=657)

The Alaska State Public Health Laboratories-Fairbanks (ASPHL-F) cultured 116 influenza A (H3) isolates from all regions of the state. To date, five isolates have undergone further evaluation at the World Health Organization (WHO) reference laboratory in Atlanta, GA. Three isolates were A/Panama, and two were A/Korea (equivalent to A/Fujian).

In addition to viral culture results, 541 positive rapid antigen tests for influenza A and B were reported.

Influenza-like illness (ILI) surveillance: For the week of January 9, 2004, Alaska providers participating in ILI surveillance reported 6.2% of patient visits were due to ILI. This decreased from 10.6% reported for the week of December 6, 2003. The national baseline is 2.5%.

Alaska influenza surveillance is updated regularly at: http://www.akepi.org/id/influenza/influenza.jsp

PEDIENTIC INFLUENZA DEATHS

In mid-November 2003, the U.S. Centers for Disease Control and Prevention (CDC) requested that states report all pediatric influenza deaths. 3 Alaska has had one confirmed pediatric death.

On December 4, 2003, the Alaska State Medical Examiner’s Officer reported the death of a 17-year-old girl from Kotlik, Alaska. The girl had a history of ILI for several days prior to her death. The Medical Examiner took specimens from bronchi, the nasopharynx and the oropharynx, which were submitted to the WHO/CDC influenza laboratory. These specimens were positive for influenza A/Fujian/411/2002 (H3N2) by polymerase chain reaction (PCR). Influenza cultures taken at the time of autopsy were negative at the ASPHL-F.

On December 11, 2003, a 10-month-old girl died in Fairbanks after a febrile illness and was reported to Epidemiology as a possible pediatric influenza death. Laboratory tests at the ASPHL-F and WHO/CDC influenza laboratories were negative for influenza.

INFLUENZA VACCINE RECOMMENDATIONS

An unprecedented demand for a limited supply of influenza vaccine developed in the United States and Alaska during November/December 2003. In response, Epidemiology worked with public and private providers to redistribute remaining state-purchased vaccine to assure availability throughout the state.

On December 12, 2003, the Alaska Immunization Program issued recommendations to only use remaining influenza vaccine to immunize persons at highest risk for complications from influenza. 7 High-risk persons are:

• All children aged 6-23 months of age;
• Adults ≥65 years of age;
• Those ≥2 years old with underlying chronic medical conditions;
• Pregnant women in the second or third trimester.

Over the past month, public health facilities conducted outreach campaigns to assure that high-risk individuals were vaccinated. At this time, approximately 2,000 – 2,500 doses of influenza vaccine are still available in Alaska. These remaining doses may be offered to any person wishing to reduce the probability of becoming infected with influenza.

WHY VACCINATE NOW?

Although surveillance indicates that influenza activity is rapidly declining in Alaska, vaccination may still be of value. Although the predominant influenza strain has been an H3N2 strain (A/Panama and A/Fujian), it is not unusual for influenza H1N1 or influenza B to circulate later in the season. Vaccination may protect individuals from illness, should other influenza strains emerge.

References:
1. Section of Epidemiology. Influenza Update, December 2003: Influenza Vaccine Shortage. Epidemiology Bulletin, December 9, 2003; No. 35. (http://www.cdc.gov/mmwr/preview/mmwrhtml/mm52d1219a1.htm)
3. CDC Update: influenza-Associated Deaths Reported Among Children Aged <13 years – United States, 2003-04 Influenza Season. MMWR 2003;52(Dispatch)1-2. (http://www.cdc.gov/mmwr/preview/mmwrhtml/mm52d1219a1.htm)