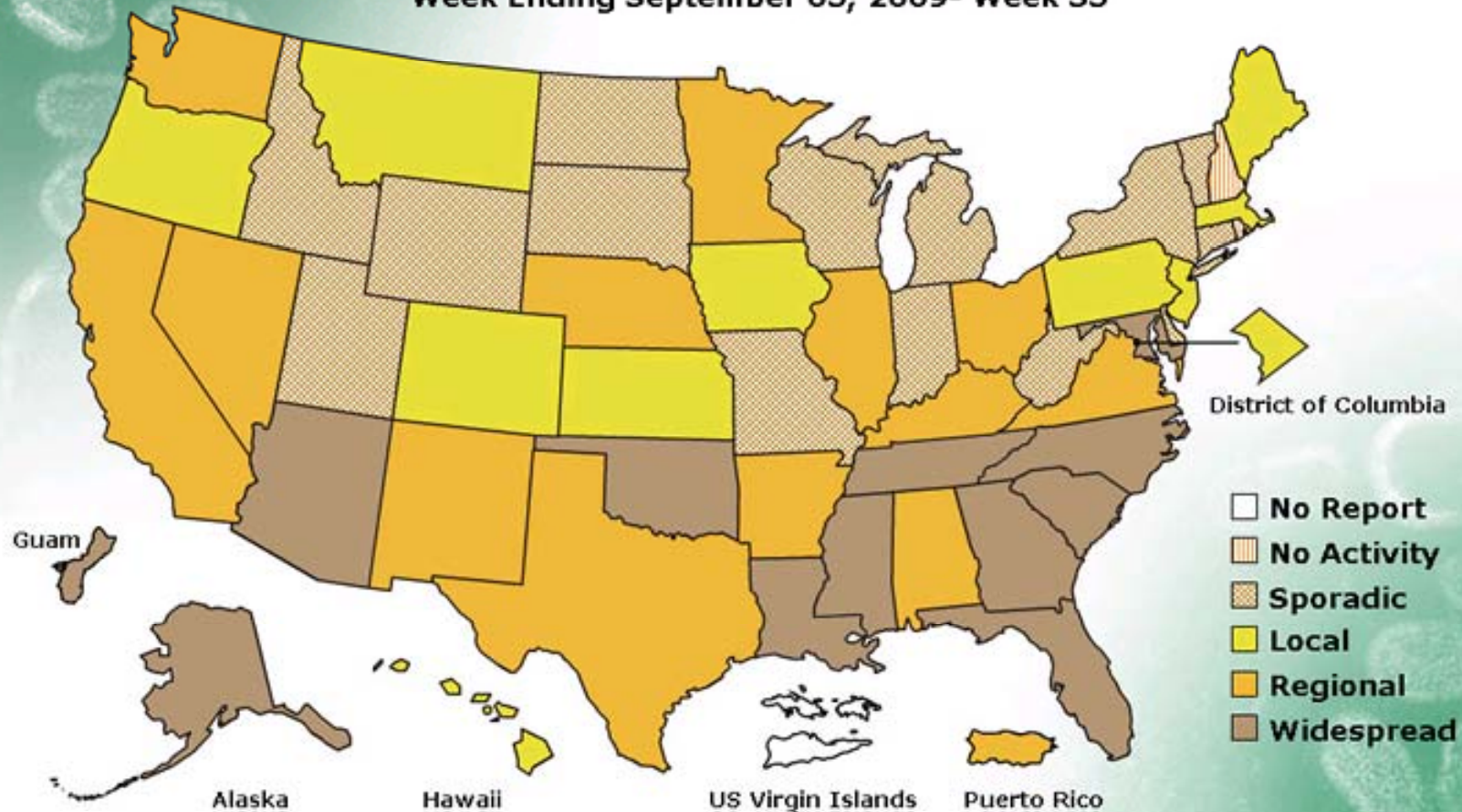


# FLUVIEW



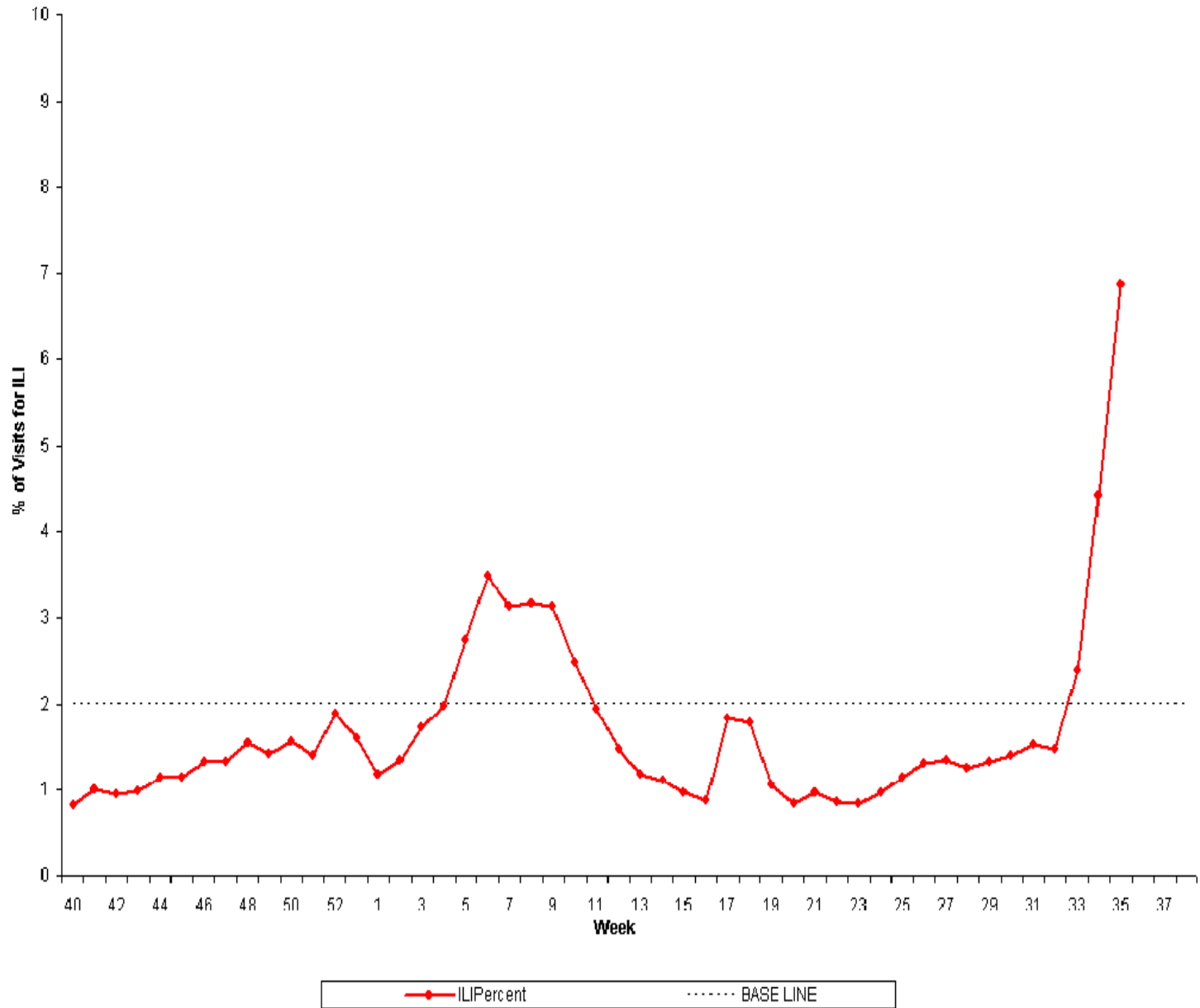
**A Weekly Influenza Surveillance Report Prepared by the Influenza Division**  
**Weekly Influenza Activity Estimates Reported by State and Territorial Epidemiologists\***

**Week Ending September 05, 2009- Week 35**



\*This map indicates geographic spread and does not measure the severity of influenza activity.

WEEKLY PERCENT OF VISITS FOR INFLUENZA-LIKE ILLNESS (ILI) REPORTED BY THE U.S. OUTPATIENT INFLUENZA-LIKE ILLNESS SURVEILLANCE NETWORK (ILINET)  
SUMMARY FOR HHS REGION 4 (AL, FL, GA, KY, MS, NC, SC, TN)



# Novel H1N1 Testing

- Nasopharyngeal swab samples used
- State will perform PCR test H1N1 virus to confirm disease if they have flu-like symptoms and:
  - Hospitalized
  - Pregnant
  - Living in institutional setting
  - Most cases do not meet these criteria

# nH1N1 in United States, 2009

As of 9/3/09:

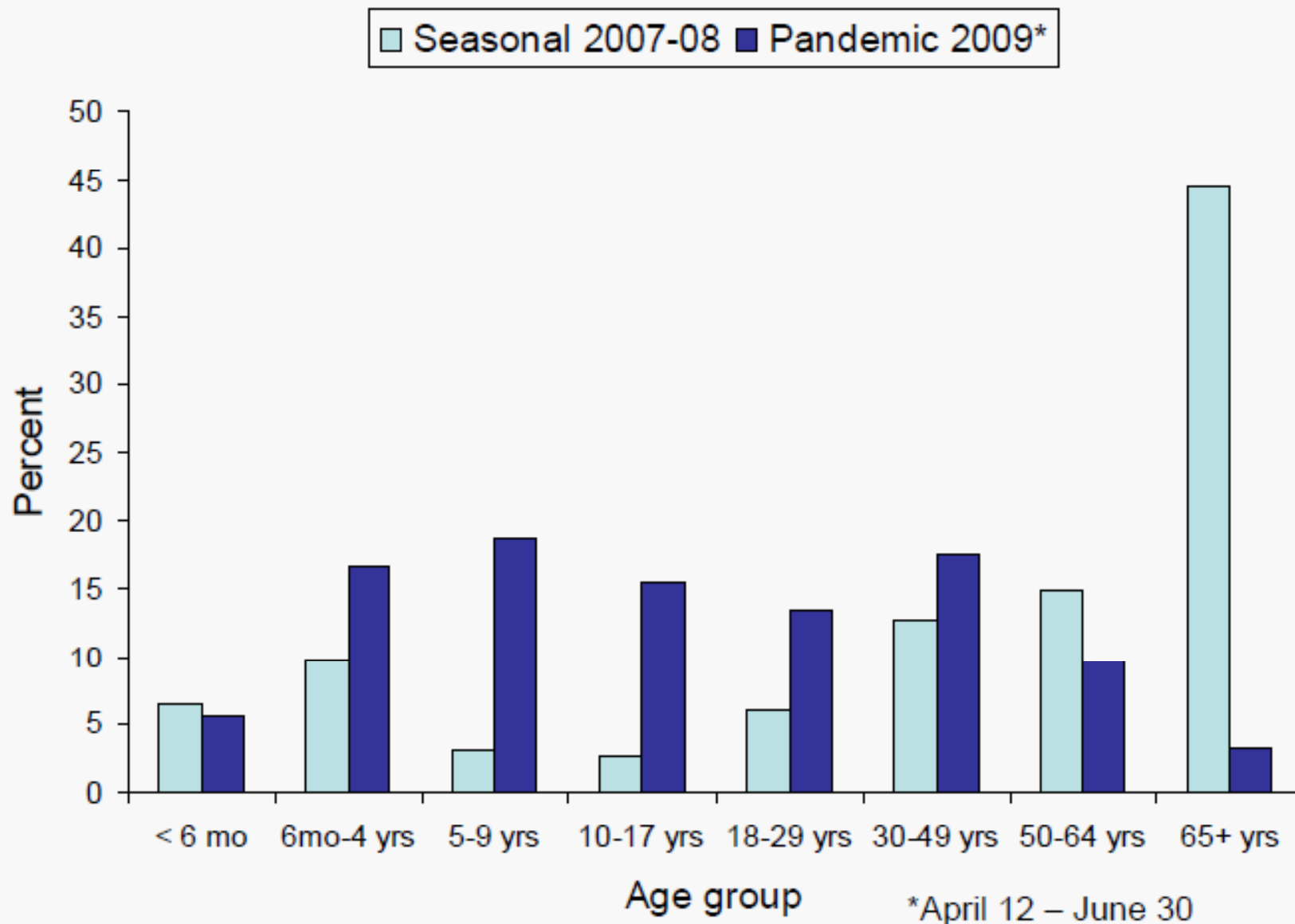
- Highest attack rate in persons 5 to 24 years of age
- 8,843 hospitalizations
- 556 deaths
- 42 pediatric deaths
- 70% of deaths occurred in persons with underlying medical issues

# nH1N1 and Pediatric Deaths

- 36 pediatric deaths
- 67% had high-risk conditions
  - Neurodevelopmental conditions
  - Chronic pulmonary condition
- Eight of 36 were aged  $\geq 5$  years with no reported high-risk conditions
  - Majority had invasive bacterial coinfection
- Of 23 with pathology/culture results available, 43% had a lab-confirmed bacterial co-infection
  - All *Staph aureus* or strep species



### Distribution by Age Group of Persons Hospitalized with Laboratory-Confirmed Seasonal Influenza or novel Influenza A(H1N1), Emerging Infections Program



## nH1N1 and the Southern Hemisphere

- Illness during southern hemisphere influenza season has been similar to United States experience
- Illness rate has peaked and is declining
- At-risk populations similar to that in the U.S.
- New Zealand estimates:
  - 11% of population infected
  - Case-fatality rate 0.005% (similar to seasonal influenza)

# nH1N1 and the Southern Hemisphere

- Virus seems genetically stable
- Healthcare systems were stressed but systems overall were not overwhelmed
- Length of season similar to previous years
- Preliminary data, southern hemisphere flu season is not over

# Schools and nH1N1

- Several hundred closed nation-wide in March at start of nH1N1 cases
- Current CDC recommendations:
  - School closure is not advised for a suspected or confirmed case of novel influenza A (H1N1)
  - Closure not advised unless there is a magnitude of faculty or student absenteeism that interferes with the school's ability to function
- Public Health and Wellness is not sending advisories to schools or workplaces with cases routinely

# nH1N1 Vaccine Production

- Vaccine production process will be similar to seasonal influenza vaccine process
- 5 different manufacturers are producing vaccine
- Killed IM vaccine and LAIV both to be produced
- Both multi-dose vials and pre-filled syringes will be produced
- One dose will apparently be adequate for coverage

# nH1N1 Vaccine is Specifically Recommended for:

- Pregnant women
- Persons between the ages of 6 months and 24 years old
- People ages of 25 through 64 years of age with chronic health disorders or compromised immune systems
- People who live with or care for children younger than 6 months of age
- Healthcare personnel
- Emergency medical services personnel

# If There is a nH1N1 Vaccine Shortage:

Those FIRST recommended to receive vaccine are:

- Pregnant women
- People who live with or care for children younger than 6 months of age
- Health care personnel
- Emergency medical services personnel
- Children 6 months through 4 years of age
- Children 5 through 18 years of age who have chronic medical conditions
- Initial shortage seems likely

# nH1N1 Vaccine Providers in the Community:

- Public Health
- Primary care providers
- Hospitals
- Pharmacies
- Other facilities that provide immunizations
- Providers and facilities that want to receive and distribute vaccine can sign up at <https://khelps.chfs.ky.gov>

# Anticipated Delivery Schedule for nH1N1 Vaccine

- Vaccine likely to arrive in late September to early October
- 5 to 10 million doses will be distributed nationally initially
- Vaccine will be distributed by:
  - Regular VFC distributor for orders over 100 doses
  - Local health departments for smaller orders

# Vaccine Financing

- CDC will provide the vaccine to local entities for free
- Administration fee payment is still being discussed
  - Billing insurance?
  - Stimulus funds?

# Public Health nH1N1 Vaccine Clinic Sequence

- First vaccine allotment to be provided to health care workers
  - Then,
- Open clinics for high risk groups
  - Then,
- School clinics
- Open clinics
- Please sign up with the Medical Reserve Corps to help!