

**** Beginning Week 9, Influenza Reports will be sent out biweekly. ****

San Joaquin County

- As of 2/27/10, there were a total of 223 hospitalized cases of 2009 H1N1 influenza reported in SJC. This includes 60 ICU cases and 16 fatal cases of 2009 H1N1 influenza.

California

- In CA, 2009 H1N1 influenza activity remains “sporadic” this week. Reports of ILI from sentinel providers continue to decrease.
- As of 2/27/10, there have been 8,798 hospitalizations and/or fatal cases of 2009 H1N1 influenza reported to CDPH. Of these cases, 1,923 cases required intensive care. A total of 546 deaths due to 2009 H1N1 influenza have been reported to CDPH.
- In the last several weeks, a low percentage of specimens tested positive for influenza by the CA Viral and Rickettsial Disease Laboratory (VRDL) and RLN. This week, of the 3 influenza A positive specimens tested by RLN, one was A/H3 while the remaining two specimens were unsubtype-able. No flu B was detected by either VRDL or RLN.
- This week, 30% (473, N = 1591) of specimens tested at sentinel laboratories were positive for RSV; 29% were positive during the previous week. Additionally, 16% (83, N = 521) of specimens tested for other respiratory viruses were positive, an increase of 4% from last week. Of those that tested positive for other respiratory viruses, 10% were human metapneumovirus and 5% were rhinovirus.

Table 1. Respiratory Laboratory Network (RLN)* Influenza PCR Surveillance Results, Week 8 (Feb. 21 – Feb. 27, 2010)

	Flu A (% of total, N)	Unsubtype-able** (% of Flu A)	H3 (% of Flu A)	RSV (% of total, N)
All RLN	3 (2%, 188)	2 (67%)	1 (33%)	0 (0%, 29)
Northern	2 (1%, 142)	2 (100%)	0 (0%)	0 (0%, 0)
Central	0 (0%, 24)	0 (0%)	0 (0%)	0 (0%, 0)
Southern	1 (5%, 22)	0 (0%)	1 (100%)	0 (0%, 0)

*17 RLN laboratories reporting, including:
 Northern CA: Contra Costa, El Dorado, Marin, Sacramento, San Francisco, San Mateo, Santa Clara, Shasta, Sonoma
 Central CA: Fresno, Monterey, San Joaquin, Tulare
 Southern CA: Long Beach, Orange, Riverside, San Luis Obispo

**At this time, Unsubtypeable Flu A is presumed to be H1N1

Human Metapneumovirus (hMPV)

- Human metapneumovirus (hMPV) was first discovered in the Netherlands in 2001. Despite its relative newness, hMPV appears to be a fairly common respiratory virus. Seroprevalence studies conducted in the Netherlands revealed that by age 5 years, 100% of patients showed evidence of past infection of hMPV. In the United States, evidence suggests that hMPV is the causative agent of infant bronchiolitis in 5-15% of cases. Though hMPV predominantly affects infants and children, it can cause respiratory illness in adults of all ages, in patients with cancer, in the elderly population (as a cause of serious lower respiratory tract infection) and in adults with underlying chronic medical conditions. Like respiratory syncytial virus (RSV), hMPV is seasonal, with higher rates of infection during the winter months.

Figure 1. Percent of school absences due to ILI by disease week, Manteca Unified School District, 2006-2010.***

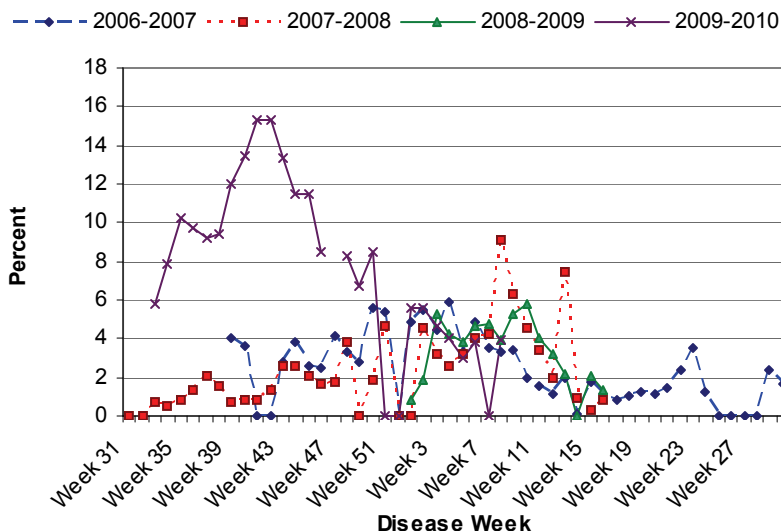
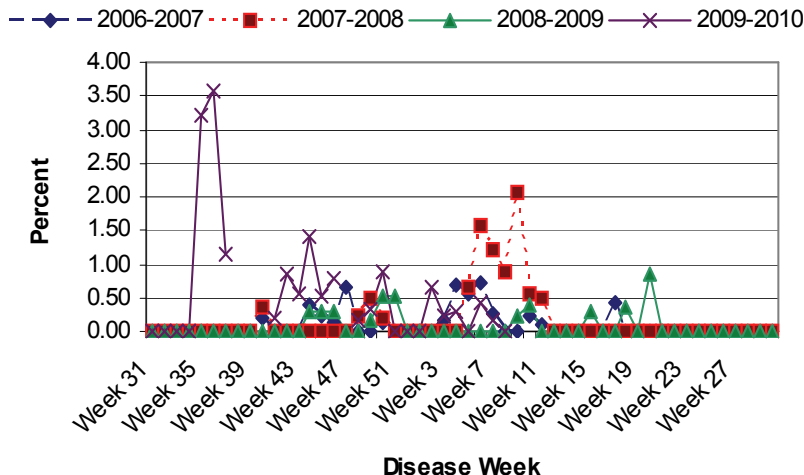


Figure 2. Percent of clinic visits due to ILI in Stockton Unified schools by disease week, 2006-2010.****



*** Manteca Unified schools were on holiday break during Week 47 (11/22/09-11/28/09), Weeks 51 and 52 (12/20/09-1/2/10), and Week 7 (2/14/10-2/20/10).

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