



STARK COUNTY INFLUENZA SNAPSHOT, WEEK 02

Week 2, ending January 16, 2010 with updates through 01/22/2010.

All data are preliminary and may change as more reports are received.

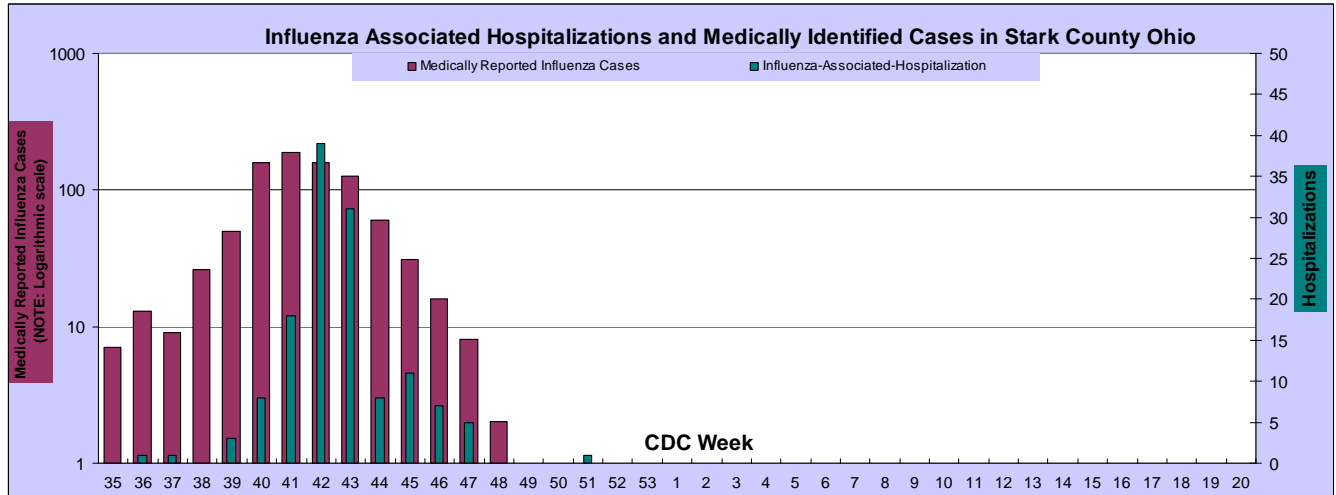
During week 02, (January 10-16, 2010) indicators of influenza like activity were all very low at the County, State and National levels, with one significant exception. During week 2, 8.0% of all deaths reported through the 122-Cities Mortality Reporting System were due to P&I. This percentage was above the epidemic threshold of 7.6% for week 2.

- For the third consecutive week there was no influenza-like illness or influenza-associated hospitalizations reported. This reflects a downward trend occurring during the past 12 weeks in overall influenza-like activity within Stark County. (Graph 1)
- Due to low levels of activity, demographic information has not changed significantly over the past 6 weeks. For medically reported cases, not hospitalized, the average age is 16.7 years with a range of 4 months to 79 years and a median of 11 years. Additionally, **64%** of the reports are in the age group of 5 to 24 years.
- Hospitalized cases ranged in age from ≤ 1 month to 80 years with a median of 37 years. The most affected age group, based on percentage, is 25-50 years at 35%. Young children aged 0-4 years continue to be hospitalized at the highest rate, >8 per 10,000 population.
- Reports from three Sentinel Providers reported **0.2%** of all patient visits for Influenza-Like-Illness (ILI) in Stark County. The National level of ILI visits **decreased** to 1.8%. This is only the second week during the 2009/2010 season that the National level of ILI fell below the baseline level of 2.3%. (See Graph 2)
- Combined Constitutional and Respiratory visits to Emergency Departments in Stark County **decreased to 18.66%**, a decrease from week 1 and the lowest level seen since CDC Week 35, 2009. The overall number of total patient visits by Stark County residents to emergency departments remained steady and at baseline levels for this time of year. Note: The highest average number of visits for these syndromes usually occurs in CDC week 7 (late February) and is 26.79%, increases are also seen in the weeks following large holidays. (See Graph 3)
- For week 02, both Cough/Cold (C/C) Products and Thermometer sales continued their overall **downward** trend, and remained below expected values for this time of year. (See Graphs 4 and 5)
- According to the 31 area schools reporting absenteeism information, the median percentage of student absenteeism remained steady at 3.9%. (See graph 6)
- For the second week in a row there were NO states reporting Widespread geographic activity. The state of Ohio remains at **sporadic** geographic influenza activity. Note: this indicator is reported to the CDC by each state and does not describe severity of disease. Sporadic geographic activity is defined as: Small numbers of laboratory confirmed influenza cases or a single laboratory confirmed influenza outbreak has been reported, but there is no increase in cases of ILI. (See National Map)
- Nationally, the CDC identified **>98%** of cocirculating strains of influenza (seasonal influenza A (H1), A (H3), and 2009 influenza A (H1N1) and influenza B) as *2009 influenza A (H1N1)*. Ohio **identified** one Influenza A/H3 during week 45 and a seasonal Influenza A/H1 during week 39, all other 1,188 Ohio isolates are related to the 2009 influenza A (H1N1) strain.
- National Pneumonia and Influenza (P & I) Mortality Surveillance **increased significantly to 8.0%** of all deaths reported through the 122 Cities Mortality Reporting System as due to P & I. This percentage is **above** the epidemic threshold of 7.6% for week 2.

For questions, or to receive this report weekly by email, send requests to either chenning@cantonhealth.org or schanzk@starkhealth.org.

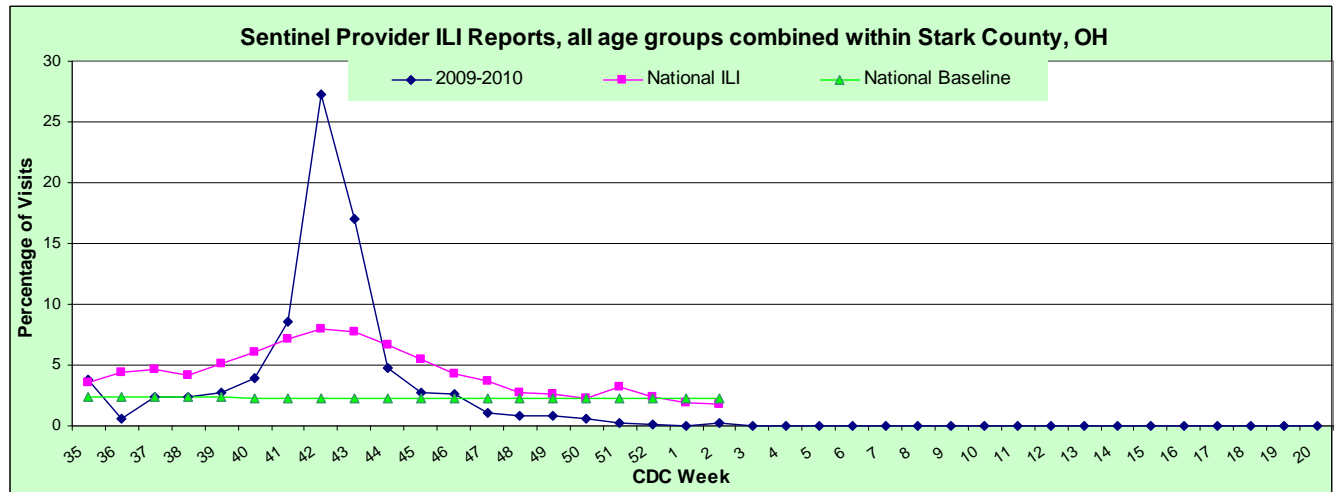
Graph 1: Influenza Cases reported to Local Health Departments

Note: Influenza is only reportable if associated with a hospitalization; therefore, this only represents a small number of actual influenza cases in Stark County.

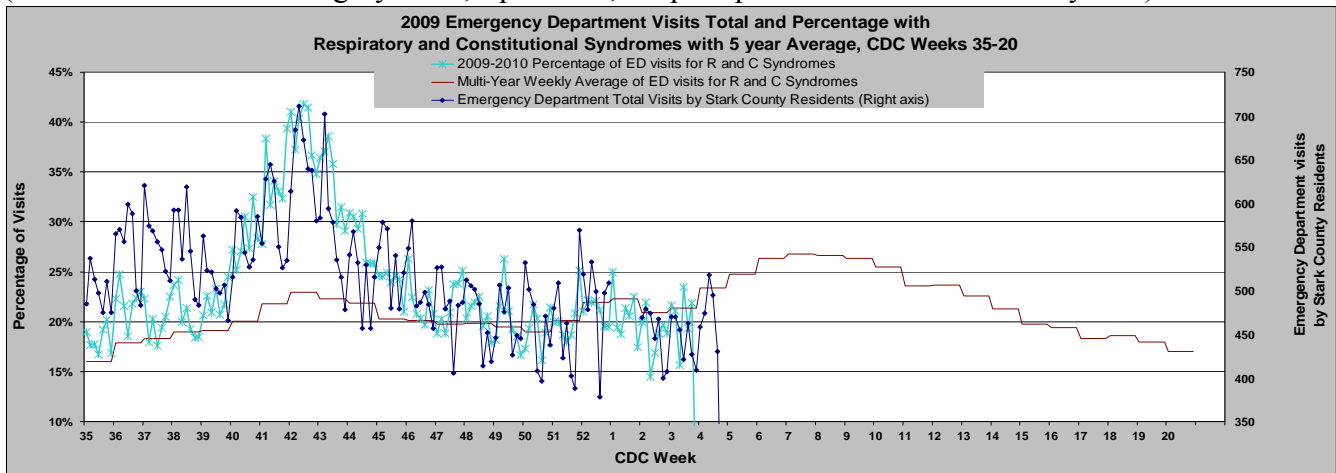


Graph 2: Sentinel Provider Reported Influenza-Like-Illness in Stark County

Sentinel Providers-An influenza sentinel provider conducts surveillance for influenza-like illness (ILI) in collaboration with the state health department and the Centers for Disease Control and Prevention (CDC). Data reported by Stark Counties 4 provider's s are combined with other influenza surveillance data to provide a national picture of influenza virus and ILI activity.

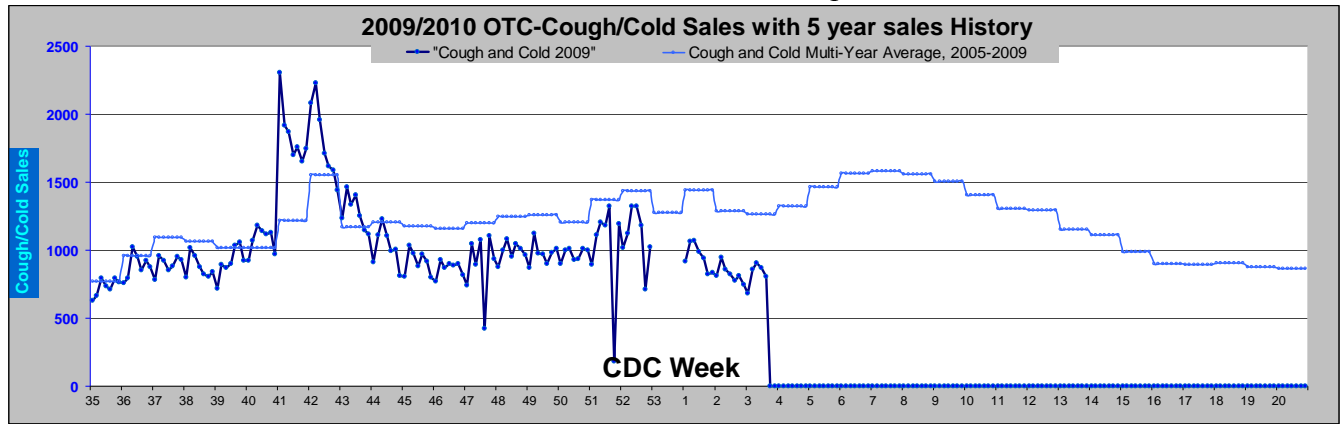


Graph 3: Emergency Department Visits for combined Respiratory and Constitutional Syndromes (Source Health Monitoring Systems, EpiCenter, hospital patient visit surveillance system)



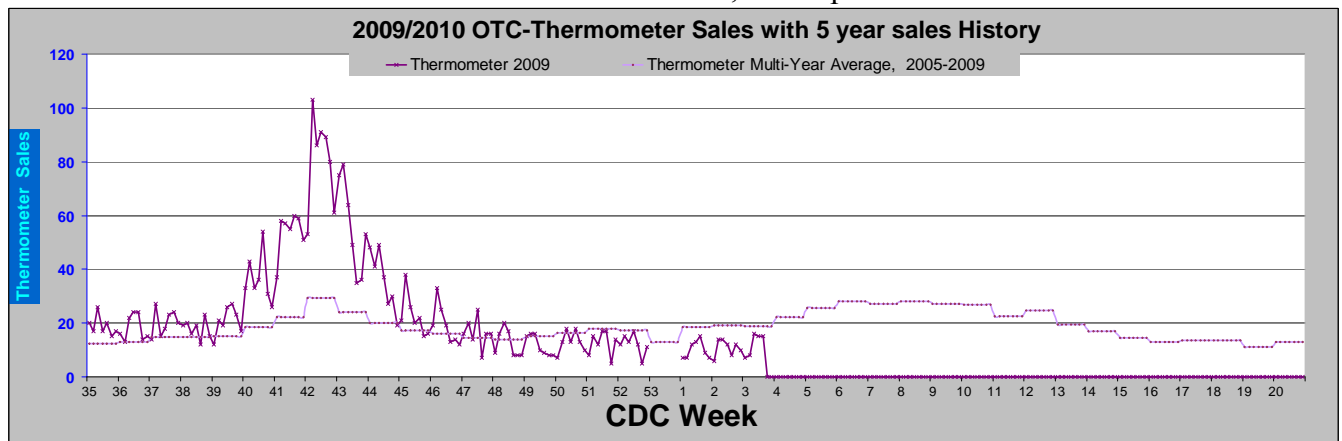
Graph 4: Over-The-Counter Sales of Cough/Cold Product Sales in Stark County

Source: RODS Real time Outbreak Disease Surveillance, Retail pharmaceutical sales.



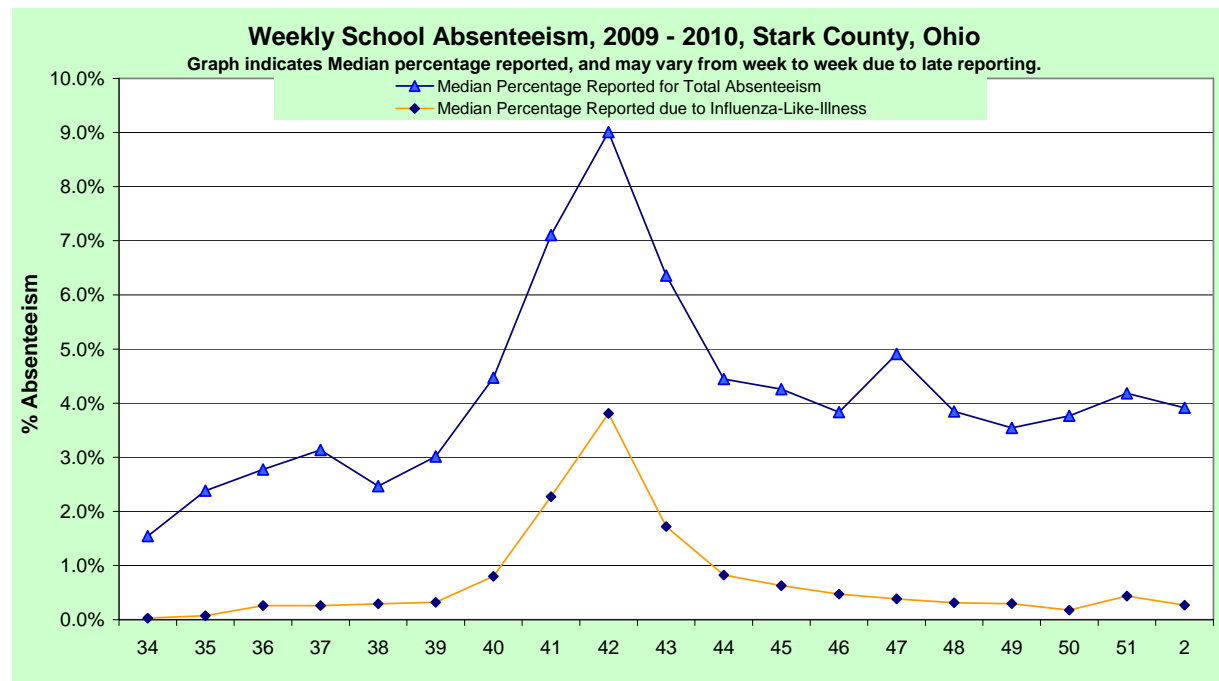
Graph 5: Over-The-Counter Sales of Thermometers in Stark County

Source: RODS Real time Outbreak Disease Surveillance, Retail pharmaceutical sales.



Graph 6: School Absenteeism, 2009-2010, Stark County, Ohio.

(Source: Voluntary reporting by area public and private schools. Schools report overall absenteeism and five illness categories including influenza –like-illness and gastrointestinal illness.)



Map Weekly Influenza Activity Estimates Reported by State and Territorial Epidemiologists

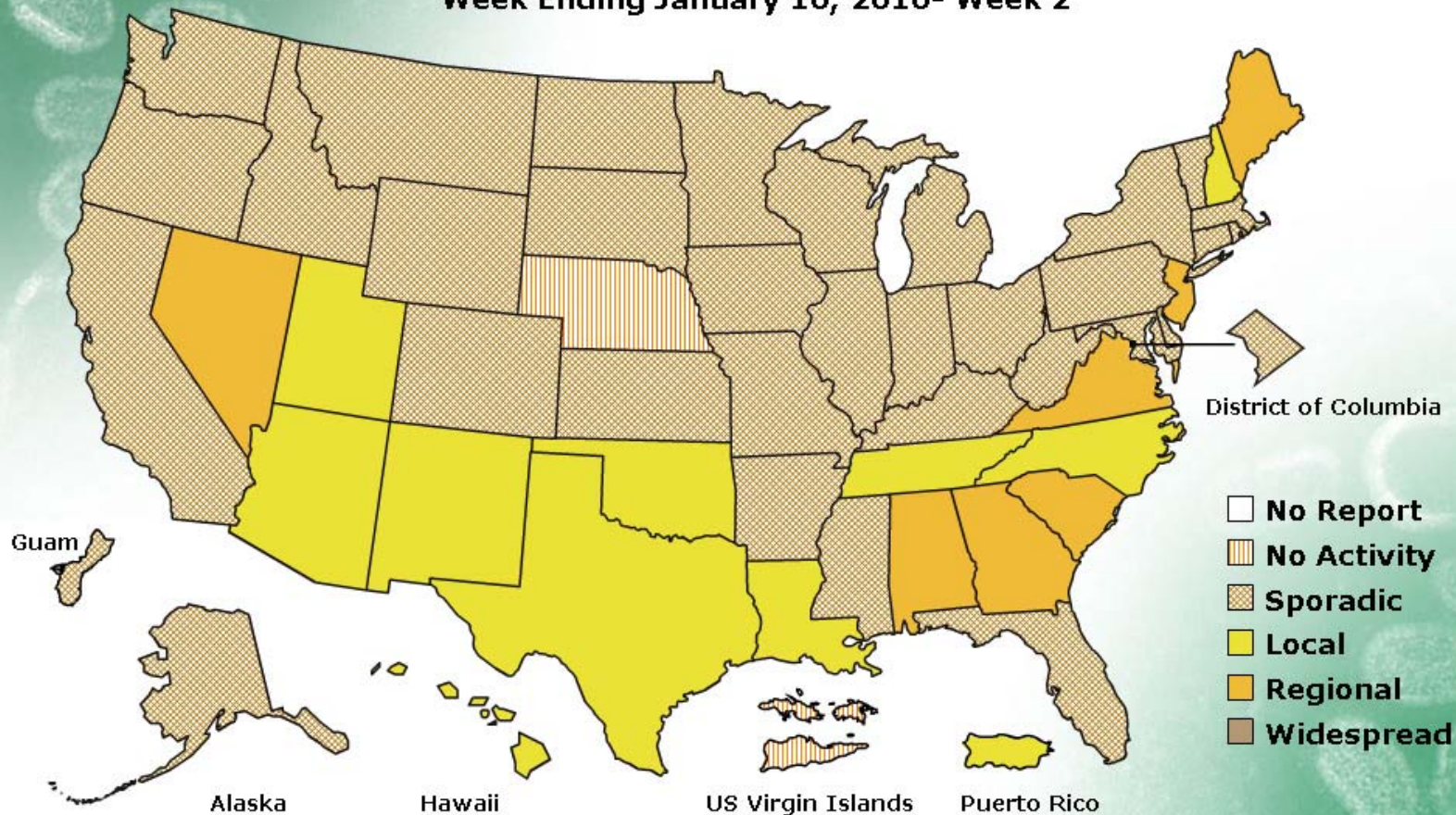
(Source: <http://www.cdc.gov/flu/weekly>)

FLUVIEW



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

Week Ending January 16, 2010- Week 2



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