

INFLUENZA WEEKLY UPDATE

2005/38: 17 September – 23 September 2005

Summary

Influenza in the population is estimated using the number of GP consultations for flu like illnesses. For 2005 this started on April 4 and reached a peak during the week beginning Monday June 18. Since then levels have steadily decreased. Current levels are at baseline.

The health districts with the highest rate last week were Eastern Bay of Plenty and Taranaki. Over 65% of the cases this week were in adults aged more than 20 years and over 21% were in children aged 5-19 years.

So far this year 88% of the laboratory tested cases were influenza B with a small number of influenza A cases.

Thresholds used to describe influenza-like activity*

Term used		Consultation rate (per 100 000 population)
Baseline		<= 49
Normal seasonal activity	low	50-99
	moderate	100-149
	high	150-249
higher than expected		250-399
severe epidemic		>= 400

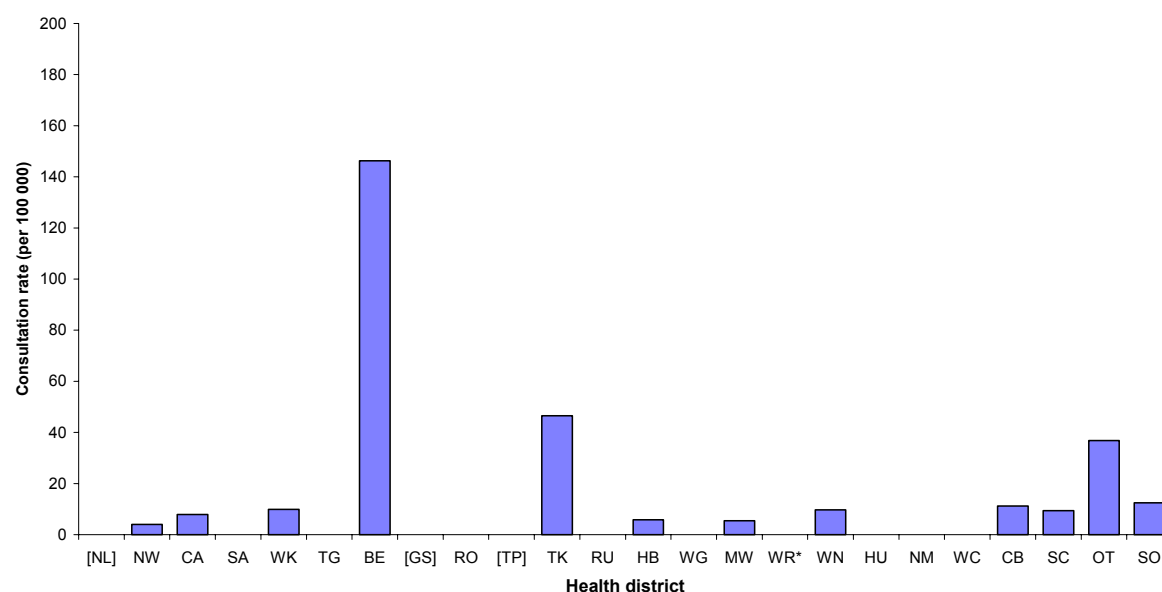
*Note: This was published in *New Zealand Public Health Report 2001*, 8(1):9-12 "Influenza surveillance and immunisation in New Zealand, 1990-1999"

In the past week, a total of 32 consultations for influenza-like illness were reported from 75 general practices in 20 out of 24 health districts. This gives a weekly consultation rate of 11.5 per 100 000 patient population.

Figure 1 compares the consultation rates for influenza-like illness for each health district over the past week. Eastern Bay of Plenty had the highest consultation rate (146.3 per 100 000), followed by Taranaki (46.5 per 100 000).

Figure 1

*Weekly consultation rates for influenza-like illness by health district
week ending 23 September 2005*



[] Health districts not participating

* Health district did not participate for the week

Eight swabs were sent from the sentinel surveillance in the past week. Twelve swabs were received by virology laboratories. Of these, five influenza viruses were identified, two as A/New Caledonia/20/99 (H1N1)-like, one each as A/California/7/2004 (H3N2)-like, influenza B (yet to be antigenically typed), and B/Shanghai/361/2002-like. The distribution by health district is shown in Table 1.

Table 1.

	WN	HU	OT	Total
A/California/7/2004 (H3N2) - like	0	0	1	1
A/New Caledonia/20/99 (H1N1) - like	1	1	0	2
B	0	0	1	1
B/Shanghai/361/2002-like	0	0	1	1
Total	1	1	3	5

In addition, four influenza viruses were reported this week from the laboratory-based (non-sentinel) surveillance. Of these, three were influenza A (yet to be sub-typed) and one as A/New Caledonia/20/99 (H1N1)-like. The distribution by health district is shown in Table 2.

Table 2.

	CA	SA	WK	Total
A	0	1	2	3
A/New Caledonia/20/99 (H1N1) - like	1	0	0	1
Total	1	1	2	4

Figure 2 shows the cumulative total of influenza isolates confirmed (sentinel and laboratory-based surveillance) to the end of week 38, 23 September 2005. A total of 835 influenza viruses were identified, 539 as B/Hong Kong/330/2001-like, 73 as influenza B (yet to be antigenically typed), 106 as B/Shanghai/361/2002-like, 17 as B/Sichuan/379/1999-like (belonging to B/Shanghai lineage), 66 as A/California/7/2004-like, 17 as influenza A (yet to be sub-typed), eight as A/New Caledonia/20/1999-like, six as A/Wellington/1/2004-like, and three as A/Fujian/411/2002-like.

Figure 2

Cumulative laboratory-confirmed isolates by health district to 23 September 2005

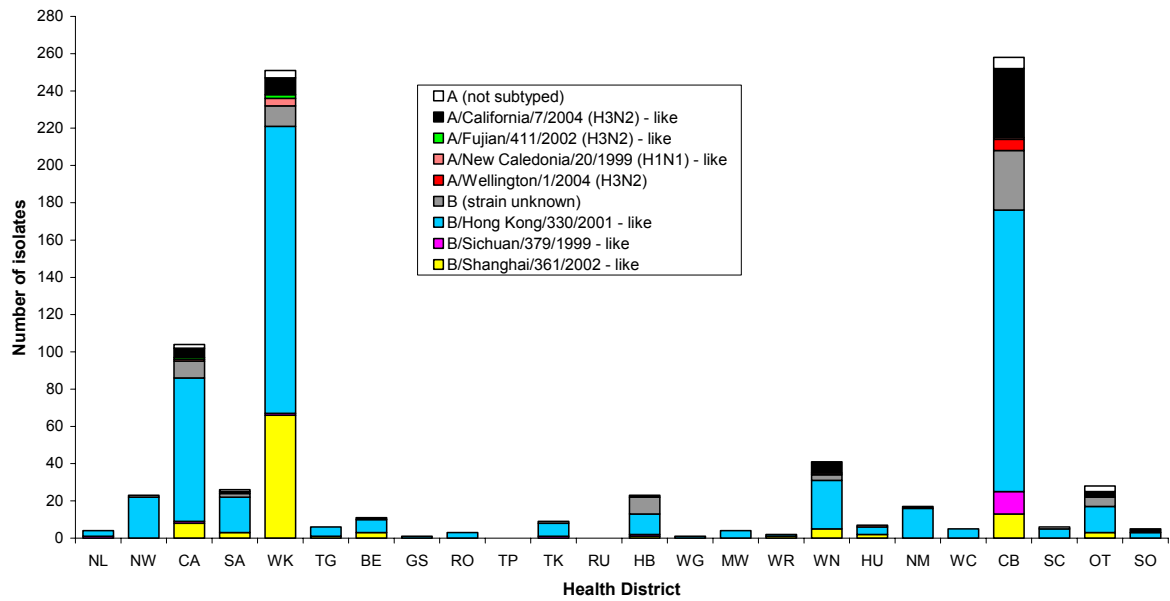


Figure 3 shows the weekly national consultation rates for 2003 and 2004 seasons, and 2005 so far. The current rate of influenza is lower than at the same time last year.

Figure 3

Weekly consultation rates for influenza-like illness in New Zealand, 2003, 2004 and 2005

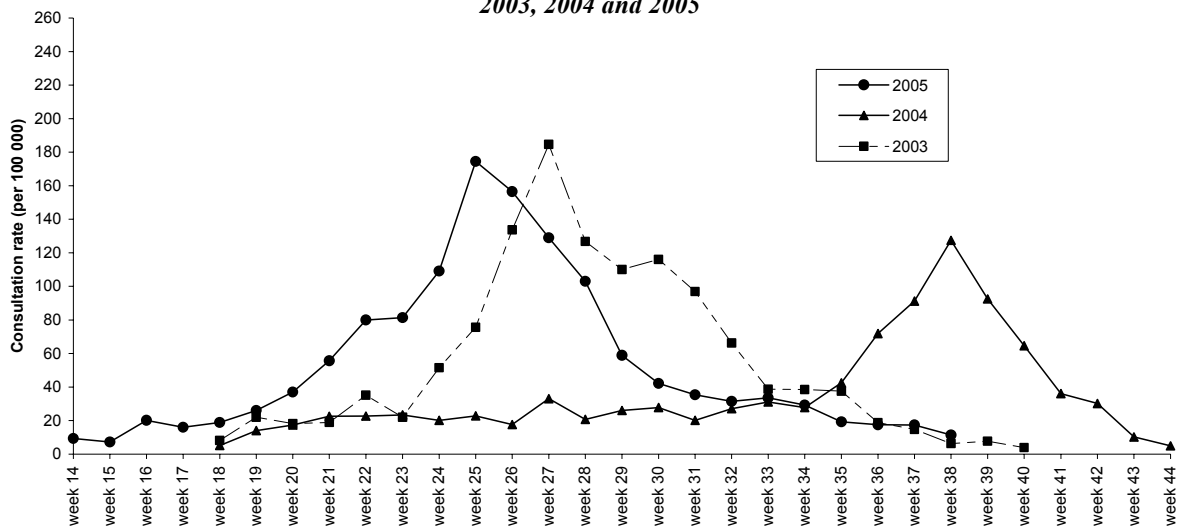
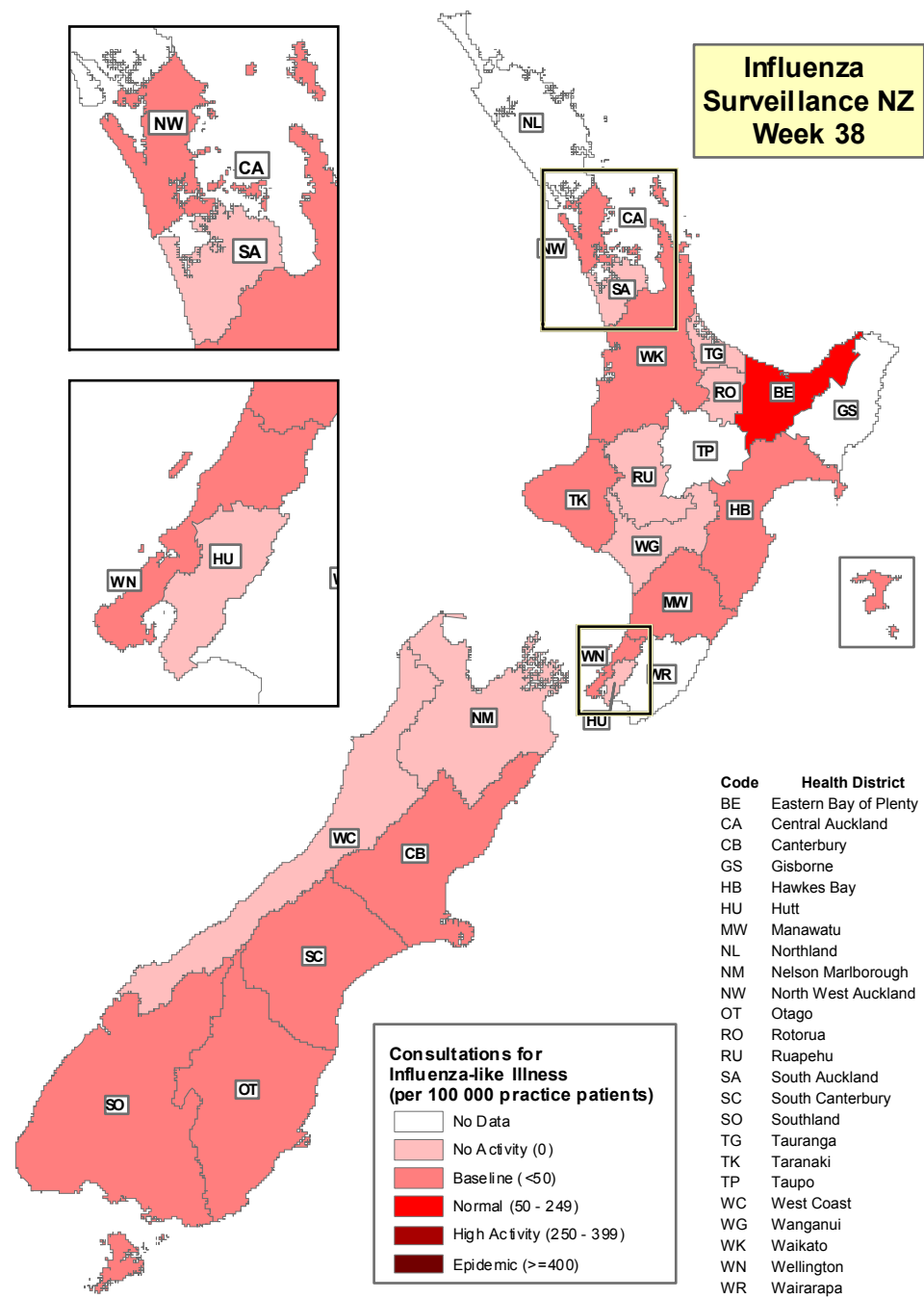


Figure 4 illustrates consultation rates for influenza-like illness mapped by health district for week 38, 2005.

Figure 4



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