

Surveillance

En Español



Influenza
(Flu)

ICD-9 487; ICD-10 J10,11

Related Topics: Protecting Yourself During the Cold and Flu Season, Avian Flu and SARS

Immunization Flu Reports

Overview	2006-2007	2005-2006	2004-2005	2003 - 2004	2002 - 2003
2001 - 2002	2000 - 2001	1999 - 2000	1998 - 1999		

2005 - 2006 Texas Influenza Surveillance Information

The flu activity level for the week ending January 7, 2006 is widespread. Flu activity has continued to increase across the state.

Increased influenza activity was reported in all 11 Health Service Regions (HSRs) for week 1, with the exception of HSR 8, which reported that flu activity had remained comparable to the previous week. For a map of Health Service Regions, please visit the following website:

<http://www.dshs.state.tx.us/regions/state.shtm>

During week 1, the DSHS lab received and isolated its first influenza B of the season from two specimens from Dallas County. Both isolates were identified as B/Shanghai/361/2002-like (members of the B/Yamagata lineage). These isolates are similar to the B component of the current vaccine. To date, all influenza B isolates have been obtained in Dallas County. Other counties are encouraged to send any influenza B positive specimens to the DSHS lab for further analysis.

Culture confirmed influenza A was identified in Bexar, Castro, Dallas, Harris, Hemphill, Smith, and Tom Green Counties during week 1. At present, all influenza A isolates that have been subtyped at the DSHS lab have been identified as H3N2. Results on five of the isolates have come back from the Centers for Disease Control and Prevention (CDC) and all five were further characterized as A/California/07/2004-like, which is one of the A components of this season's vaccine.

DSHS has received the first report of an influenza-associated pediatric death in a 14 year-old from Dallas. The patient became ill on or around 12/19/05 and was subsequently hospitalized in the ICU of Children's Medical Center where she died from Acute Respiratory Distress Syndrome on 01/01/06. She tested positive for influenza A by direct fluorescent antibody (DFA). *Staph aureus* was cultured from blood. Patient had a history of dilated cardiomyopathy. She had not received the current season's influenza vaccine. Autopsy results are pending.

While influenza-associated pediatric death is not yet reportable in Texas, it was designated as a nationally notifiable condition in 2004 by CDC. The Texas Department of State Health Services requests that all influenza-associated pediatric deaths be reported to either a Health Service Region or to the Infectious Disease Control Unit in Austin at (512) 458-7676.

No school closures or institutional outbreaks were reported during week 1.

For more information on flu surveillance activities in the State of Texas, please visit the following website:

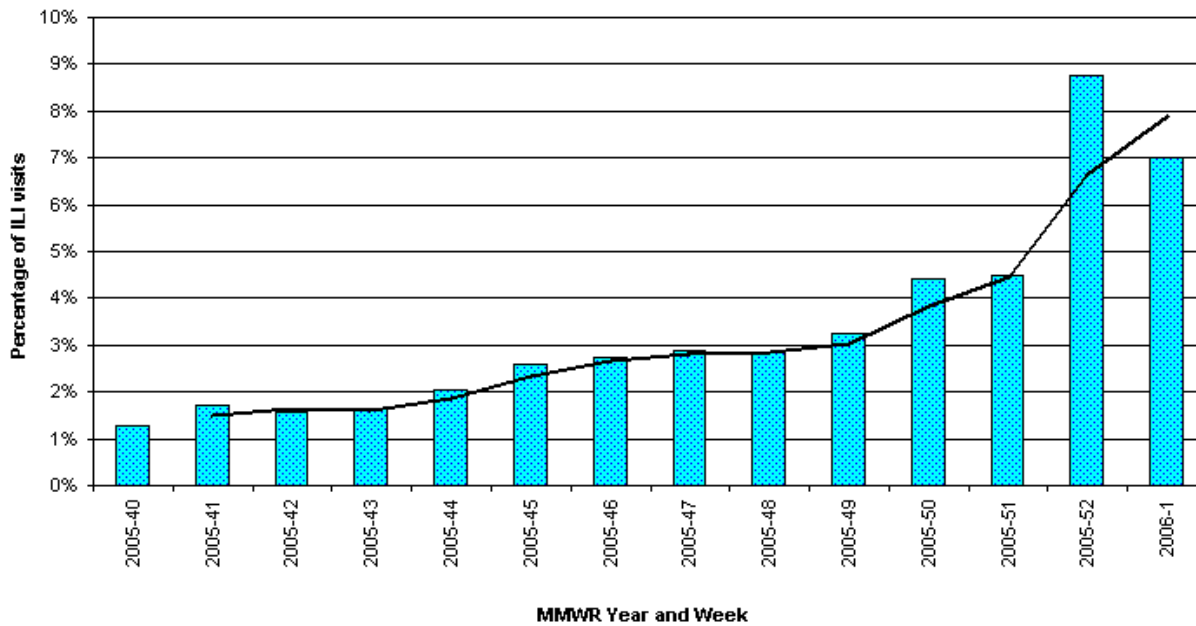
<http://www.dshs.state.tx.us/idcu/disease/influenza/surveillance/>

Data from the Sentinel Provider Surveillance Network (SPSN) indicates a slight decrease in influenza-like illness (ILI) from the previous week; however, fewer providers reported during this period.

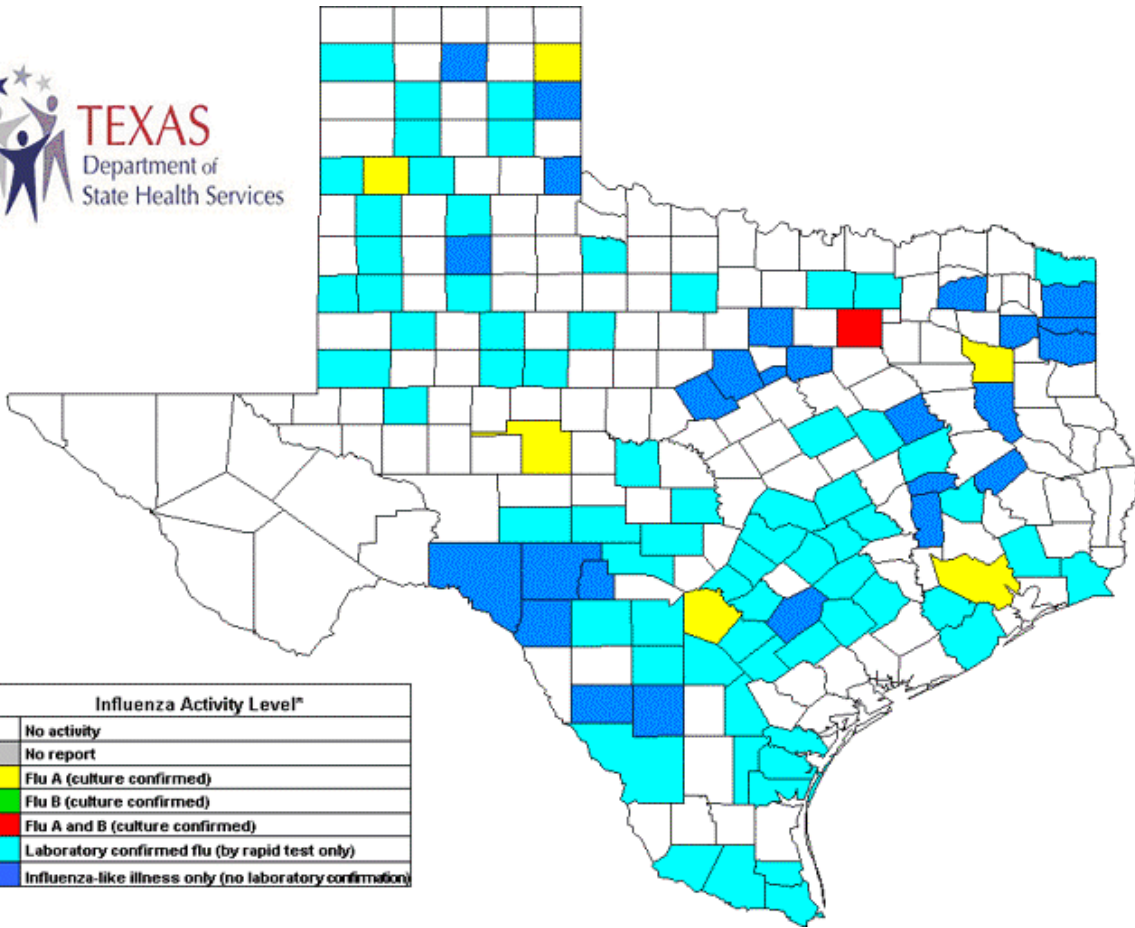
PERCENTAGE OF VISITS FOR INFLUENZA-LIKE-ILLNESS REPORTED BY SENTINEL PROVIDERS IN TEXAS

Week	# Reporting	Age 0-4	Age 5-24	Age 25-64	Age over 64	Total ILI	Total Patients	% ILI
2005-46	37	102	142	117	18	379	13824	2.74
2005-47	35	95	119	93	6	313	10897	2.87
2005-48	43	144	163	128	9	444	15657	2.83
2005-49	39	118	181	116	3	418	12894	3.24
2005-50	44	160	268	190	13	631	14307	4.41
2005-51	42	103	136	50	5	294	6526	4.50
2005-52	35	158	215	344	27	744	8480	8.77
2006-01	32	134	179	275	39	627	8948	7.00

**Percentage of Physician Visits Due to Influenza-Like Illness,
Texas Sentinel Providers Surveillance Network,
2005-2006 Season**



**Statewide Influenza Activity For the Week Ending January 7, 2006
(MMWR Week 1)**



*Influenza activity corresponds to current MMWR week only and does not reflect previous weeks' activity

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Texas Department of State Health Services - Infectious Disease Control Unit
1100 West 49th Street, Suite G301, Mail Code: 1943 - Austin, TX 78756-3199
(512) 458-7455 - Fax: (512) 458-7601 - E-Mail

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