



http://www.cdhd.wa.gov

November 2014

# CHELAN-DOUGLAS PUBLIC HEALTH

## Current Conditions of Interest

### TO REPORT A NOTIFIABLE CONDITION:

Phone (509) 886-6400

Fax (509) 886-6478

**After hours call:**

(509) 886-6499

*"Always Working for a Safer and Healthier Community"*

### Enterovirus D68

[Link](#) [CDC Enterovirus D68](#)

#### Surveillance

U.S. healthcare professionals are not required to report known or suspected cases of EV-D68 infection to health departments because it is not a nationally notifiable disease in the United States. Also, CDC does not have a surveillance system that specifically collects information on EV-D68 infections.

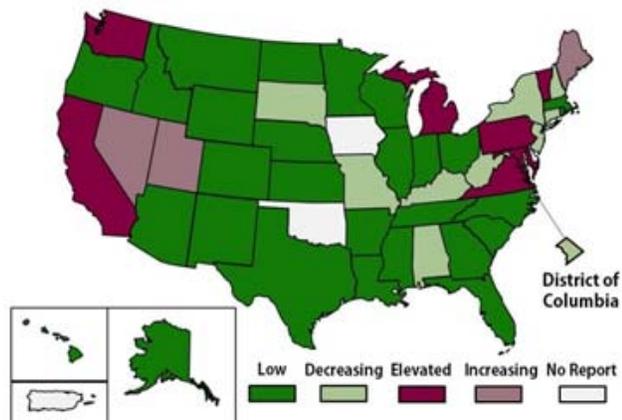
No data is currently available regarding the overall burden of morbidity or mortality from EV-D68 in the United States. Any data CDC receives about EV-D68 infections or outbreaks are voluntarily provided by labs to CDC's National Enterovirus Surveillance System (NESS). NESS collects limited data, focusing on circulating types of enteroviruses and parechoviruses.

#### Activity of Enterovirus D68-like Illness in States

- For the week of October 26—November 1, 2014, 47 states and the District of Columbia submitted assessments to CDC of activity of EV-D68-like illness.

- Compared to the previous week—
  - 37 states and the District of Columbia reported low or decreasing activity.
  - 7 states reported elevated activity.
  - 3 states reported increasing activity.

- Reports from states during the fourth week of reporting continue to indicate reduced EV-D68-like illness activity overall. However, three new states are reporting increased activity. At about this time, respiratory illnesses caused by other viruses, like influenza and respiratory syncytial virus (RSV), are becoming more common, and enterovirus infections are expected to be declining. It is unlikely that the increasing activity reported in three states is caused by EV-D68. Therefore, as previously foreshadowed, we will remove the map after this week.



Between September 8 and October 29, 2014, the Washington State Public Health Lab has submitted specimens from 68 patients for enterovirus testing/typing at CDC's picornavirus laboratory. These patients were residents of 15 Washington local health jurisdictions\* and 2 other states.\*\*

\*Asotin, Benton-Franklin, Chelan-Douglas, Clallam, Clark, Grant, Island, King, Kitsap, Pierce, Skagit, Snohomish, Spokane, Whatcom, Yakima; \*\*Montana and Idaho

- For a larger image and details of EV-D68-like illness activity in states, see <http://www.cdc.gov/non-polio-enterovirus/outbreaks/EV-D68-activity.html>.

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## Washington State Influenza Updates Week 44

[Link](#) Weekly Influenza Updates

- During week 44, the proportion of outpatient visits for influenza-like illness (ILI) was below the baseline of 1.1 percent.
- No novel viruses were detected in Washington State during week 44.
- During week 44, 3 out of 246 specimens tested by the World Health Organization/National Respiratory and Enteric Virus Surveillance System (WHO/NREVSS) collaborating laboratories in Washington were positive for influenza. One was positive for influenza A(H3) and two were positive for influenza A (subtyping not performed).

### Laboratory Data

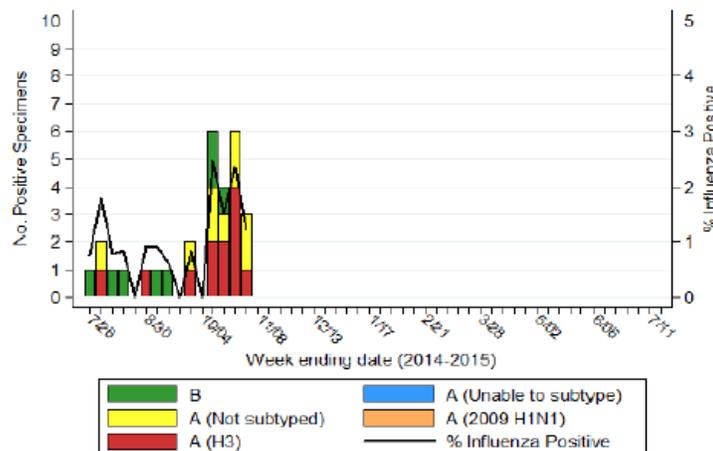
#### World Health Organization (WHO) & National Respiratory and Enteric Virus Surveillance System (NREVSS)

Four laboratories in Washington participate in the WHO/NREVSS surveillance network: The Washington State Public Health Laboratories, Seattle & King County Public Health Laboratory, University of Washington Virology Laboratory, and Seattle Children's Hospital Laboratory. WHO/NREVSS laboratory data from Washington are shown in the following table and figure.

**Table 1: Washington Influenza Specimens — Weekly & Cumulative**

Week Ending	No. Labs Reporting	A(H1)	A (2009 H1N1)	A (H3)	A (Unable to subtype)	A (Subtyping not performed)	B	Total Flu	Total # Tested	% Flu Positive
Oct 11	4	0	0	2	0	2	2	6	243	2.5
Oct 18	4	0	0	2	0	1	1	4	262	1.5
Oct 25	4	0	0	4	0	2	0	5	255	2.4
Nov 1	4	0	0	1	0	2	0	3	246	1.2
Cumulative since Oct 11	4	0	0	9	0	7	3	18	1,006	1.8

**Figure 1: WHO/NREVSS Laboratory Data, Washington, 2014–2015**





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### Washington State Influenza Updates Week 44

#### Antigenic Characterization

Antigenic characterization has been conducted on one influenza specimen collected in the 2014-2015 season.

The influenza A(H3N2) specimen was characterized as A/Texas/50/2012-like, the influenza A(H3N2) component of both the 2013-2014 and 2014-2015 influenza season vaccines.

#### Antiviral Resistance Testing

The WA State Public Health Laboratories (PHL) perform antiviral resistance testing on selected influenza A(2009 H1N1) specimens for surveillance purposes. PHL uses CDC pyrosequencing protocols to identify a mutation in the neuraminidase of the influenza A(2009 H1N1) virus that confers oseltamivir resistance (H275Y). No testing has yet been conducted on any specimens from the 2014-2015 season.

#### Novel Influenza A Viruses

No influenza A(H3N2v), a swine flu virus first detected in humans in 2011, or avian influenza A(H7N9) virus infections have been detected in Washington this season.

#### Outpatient Influenza-like Illness Surveillance Network (ILINet) Data

ILI is defined as fever (temp  $\geq 100^{\circ}\text{F}$  /  $37.8^{\circ}\text{C}$ ) plus cough and/or sore throat. During CDC week 44, 27 sentinel providers in Washington reported data through the U.S. Outpatient Influenza-like Illness Surveillance Network (ILINet). Of 3,136 visits reported, 19 (0.6%) were due to ILI. Note that the number of Sentinel Clinics and Providers reporting each week has been variable; efforts are underway to facilitate more consistent reporting week-to-week. Some clinics are reporting ILI separately for each provider.

**Figure 4. Percentage of ILI Visits Reported by Sentinel Providers, Washington, 2013–2015**

