

New York State Department of Health

Influenza-Like Illness Surveillance Program (ILINet)

2013-14 Influenza Season Summary

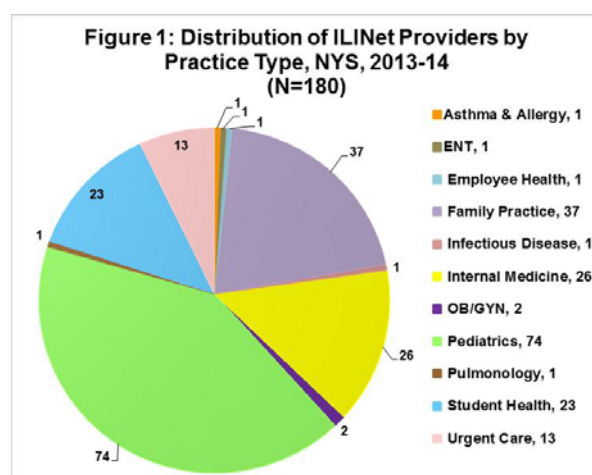
Inside this issue:

Season Overview	1
Program Data	1
Laboratory Data	2
Provider Reporting	3
Provider Retention	3
ILINet Provider Map	4
Upcoming 2014-15 Season Highlights	4

Season Overview

Three influenza viruses circulated during the 2013-14 season; the relative proportion of influenza 2009 A (H1N1), A(H3N2), and influenza B viruses varied both geographically and temporally, with influenza A (H1N1) being the predominant virus early in the season and influenza B being the predominant virus at the end of the season. NYS experienced geographically widespread influenza activity¹ for 24 consecutive weeks beginning the week ending December 14, 2013 through the week ending May 24, 2014.

The New York State (NYS) ILINet Program consists of 180 providers from 37 counties² (see map on page 4). Figure 1 shows the distribution of ILINet providers by practice type.

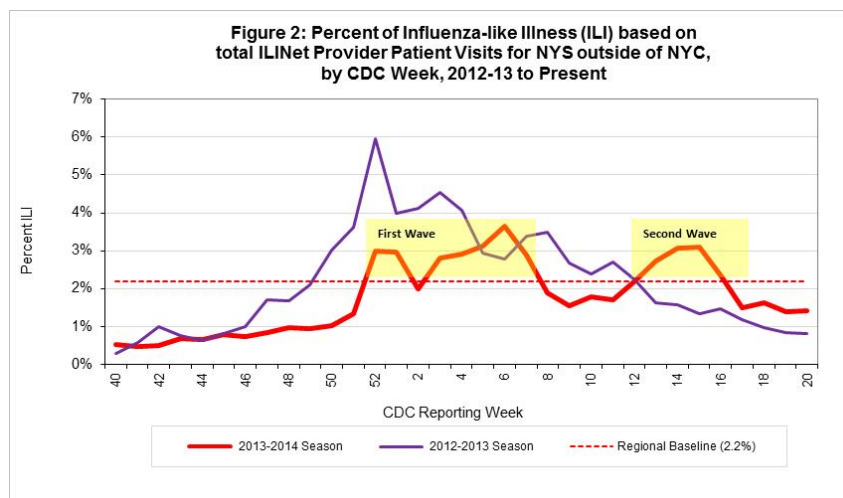


Program Data

ILINet providers reported almost 516,000 patient visits this season with an average of 15,634 total patient visits per week, an increase compared to 13,843 visits per week last season. The average weekly number of patients with influenza-like illness (ILI) was 273, slightly lower than last season at 303.

Figure 2 is a two-season comparison showing the percent of ILI reported in NYS. The

(Continued on page 2)



¹Widespread influenza activity is defined as increased or sustained numbers of lab-confirmed cases of influenza reported in at least 31 of the 62 NYS counties.

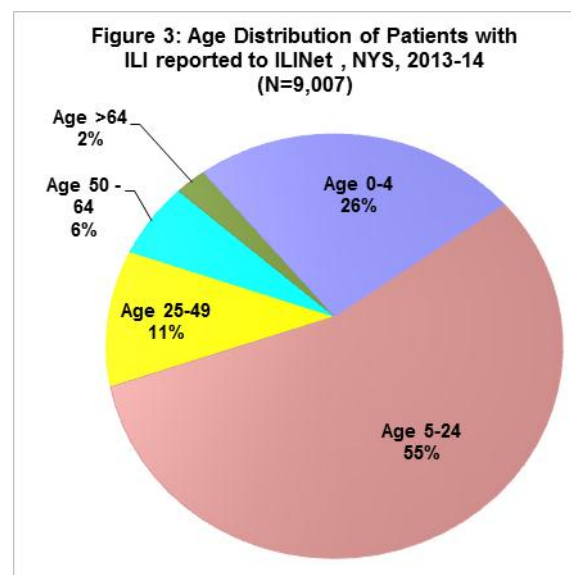
²The New York City Department of Health and Mental Hygiene (NYCDHMH) coordinates their own ILINet program of health care providers located in New York City (NYC).

Information on the NYC program is available at: <http://www.nyc.gov/html/doh/downloads/pdf/imm/influenza-mdflyer20050623.pdf>

(Continued from page 1)

weekly percentage of visits for ILI ranged from 0.49% to 3.65%, with an overall average of 1.75%. The 2013-14 season was unique in that NYS experienced two separate “waves” of intense influenza activity. During the first wave, influenza A 2009 (H1N1) was the predominant virus circulating, and ILI activity peaked at 3.65% the week ending February 8, 2014. During the second wave, influenza B was the predominant virus, and ILI peaked at 3.11% the week ending April 12, 2014. ILI activity exceeded the epidemic threshold of 2.20% for seven weeks during the first wave and for five weeks during the second wave.

Figure 3 reflects the percentage of patients diagnosed with ILI by age group. The proportion of ILI seen in the 0-4 year and 5-24 year age groups likely reflects the preponderance of providers in pediatrics, family medicine and student health.

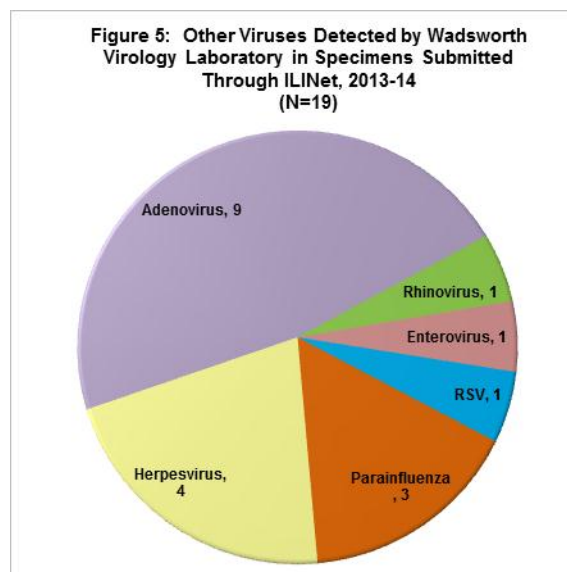
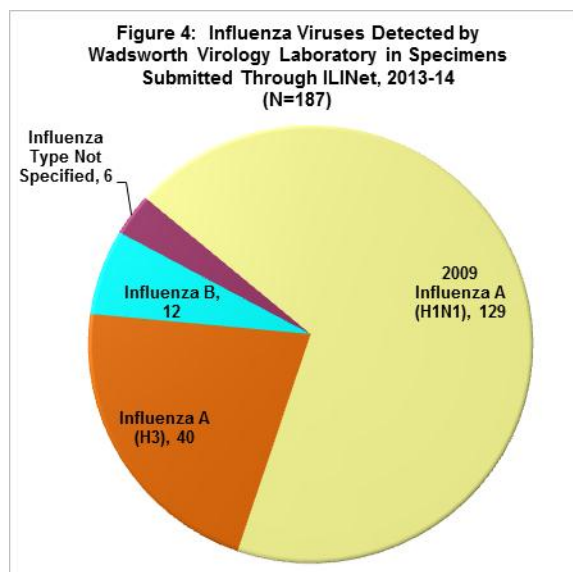


Laboratory Data

In 2013, NYSDOH Wadsworth Laboratory implemented the CDC-APHL Influenza Virologic Surveillance Right Size Roadmap.³ The intent of the Roadmap is to provide all state laboratories with the tools necessary to determine the number of respiratory specimens needed each week in order to achieve situational awareness and the ability to detect novel or variant influenza viruses. Specimens submitted by ILINet providers are a vital component of Wadsworth Lab's meeting the requirements in the Roadmap, because the specimens submitted are from the outpatient population.

During the 2013-14 season, ILINet providers submitted 405 respiratory specimens from 37 ILINet providers. This is an increase of 153% over the 2012-13 season, when we received 160 specimens. Of the 405 specimens submitted, 46% were positive for influenza (Figure 4). Non-influenza viral agents were identified in 19 specimens (Figure 5). ILINet specimens were also used in antiviral resistance studies at NYSDOH's Wadsworth Laboratory. None of the ILINet specimens this season were found to have antiviral resistance.

In addition to subtyping all positive influenza A specimens, for the upcoming 2014-15 season Wadsworth Laboratory will be testing all positive influenza B specimens to identify their lineage (Victoria or Yamagata).



³Additional information about the CDC-APHL Influenza Virologic Surveillance Right Size Roadmap can be found at this link:

<http://www.aphl.org/aphlprograms/infectious/influenza/Pages/Influenza-Virologic-Surveillance-Right-Size-Roadmap.aspx>

Provider Reporting

Data submitted by the ILINet providers is the primary source of outpatient influenza surveillance in NYS and nationally. CDC requests that ILINet providers submit their weekly ILI data by **noon each Tuesday**. The CDC gauges completeness of ILINet surveillance, or reporting coverage for the influenza season, by assessing the number of *regularly reporting* ILINet providers. CDC defines a *regularly reporting* provider as one who reports their weekly data at least 50% of reporting weeks during the season, but not necessarily by the CDC deadline date. On an average week, 86% of NYS providers reported their data, but not necessarily by the CDC deadline. The percentage of providers reporting by the CDC deadline ranged from 9%-72% each week, with an overall seasonal average of 52%, an increase of 25% over last season (Table 1).

Table 2 shows percent of reporting providers by month. 87% of providers were considered regular reporters; 52% of the providers reported 100% of the season. CDC encourages providers to report their ILI data year-round. Currently, 66% of providers report their data year-round.

Table 1: Timeliness of ILINet Provider Reporting by CDC Deadline for the 2013-14 season	
Month/Year	Average Percent of Providers Reporting (N=167)
CDC Deadline of noon each Tuesday	52%
1-3 days after deadline	29%
4-7 days after deadline	4%
8-14 days after deadline	5%
15-30 days after deadline	5%
More than 30 days	5%

Table 2: Percent of Regularly Reporting Providers Each Month for the 2013-14 Season	
Month/Year	Percent Reporting (N=180)
October 2013	88%
November 2013	90%
December 2013	86%
January 2014	86%
February 2014	90%
March 2014	86%
April 2014	81%
May 2014	79%

Provider Retention

NYSDOH would like to recognize and thank the following providers who have participated in ILINet Program for 10 or more consecutive years .

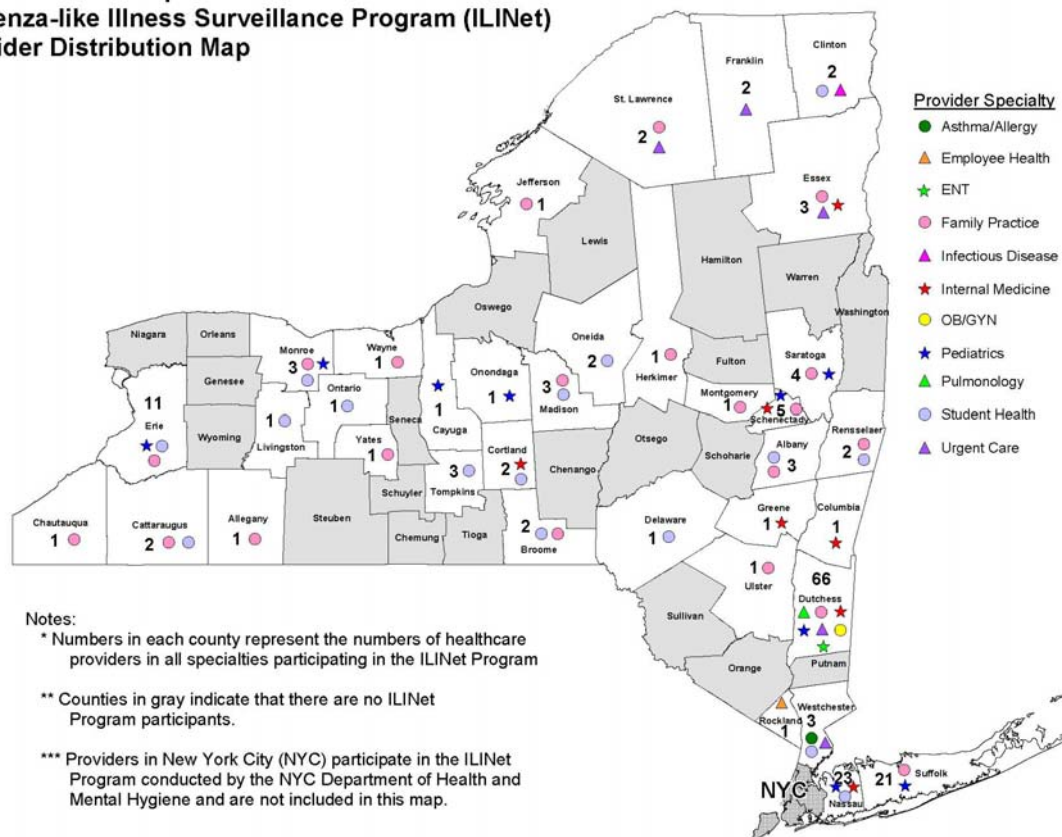
21 Years

David M. Newman, MD, Evergreen Family Medicine
Mark J. Zunich, MD

10-15 Years

Neka Anyaogu, MD, Ellis Hospital Family Health Center
Adrienne Belluscio, RN, Purchase College Health Services, SUNY
Susan Berger, NP, Cazenovia College Student Health
Robert Berke, MD, Family Health Medical Services
Bruce Bowling, MD, Endwell Family Practice
Jae Lyn Burke, RPA-C, High Peaks Health Center
Devin Coppola, MD, SUNY Cortland - Student Health Service
Patricia Creahan, ANP, Director, Canisius College Student Health Center
Brian Daggett, MD, Kinderhook Medical Care
Christopher Depner, MD
Karin Freeman, RN, Hobart & William Smith College, Hubbs Health Center
Karen Gabriel, FNP-C, Student Counseling & Health Services SUNY Delhi College
Karl Gauss, MD, Cortland Internist Associates
Kira Geraci-Ciardullo, MD
Phillip C. Gioia, MD, MPH, Children's Health Specialists
Douglas L. Haas, DO
Carrie Hogan, MSN, ANP, Siena College Health Service
Linda Imboden, MD, Brighton Hill Pediatrics
Michael Leonard, MD, Binghamton University, Decker Student Health Services Center
Edward D. Lewis, MD, Lewis Pediatrics
Daniel Palmateer, MD, Canton Family Physicians, PC
Ananthakrishnan Ramani, MD, Mountain View Medical Practice
Peter Reynolds, RPA-C, Helen Hayes Hospital - Employee Health
Justine Schaff, MD, Ithaca College Hammond Health Center
Nianne T. VanFleet, RN, Cornell University - Gannett Health Center

**New York State Department of Health
Influenza-like Illness Surveillance Program (ILINet)
Provider Distribution Map**



Highlights for the

Upcoming 2014-15 Season:

- ◆ Continue year-round reporting and submission of patient specimens.
- ◆ The 2014-15 reporting workfolders will be sent out to providers in September.
- ◆ The 2014-15 influenza season begins the week ending October 4, 2014.
- ◆ Wadsworth Laboratory will be testing positive influenza B specimens for lineage.
- ◆ Don't forget to request shipping supplies for submitting specimens to Wadsworth Laboratory.

New York State Department of Health

Donna Gowie, ILINet Program Coordinator
Bureau of Communicable Disease Control
Empire State Plaza, Corning Tower, Room 651
Albany, NY 12237-0627

Direct Number: (518) 473-4269
Main Number: (518) 473-4439
Fax: (518) 474-7831
Email: donna.gowie@health.ny.gov

October 2014



Sun	Mon	Tue	Wed	Thu	Fri	Sat
9/28	9/29	9/30	1	2	3	4
	2014-15 Influenza Reporting Season Begins					
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	26
27	28	29	30	31		