



Florida Department of Health

Novel Influenza A (H1N1) Guidance

Focus Area: Surveillance

Guidance document number 2009-4

Novel Influenza A H1N1 Surveillance Strategies Questions and Answers

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1. Why has the Florida Department of Health (FDOH) stopped reporting numbers of all confirmed and probable novel H1N1 flu cases?

Because of the extensive spread of novel H1N1 flu within Florida and the United States, it has become extremely resource-intensive to count individual cases. In addition, only a small proportion of people with respiratory illness are tested for novel H1N1. As a result, the number of confirmed and probable case counts represents a significant underestimation of the true number of novel H1N1 flu cases in Florida, so the true benefit of reporting these numbers each week is questionable. Several special groups will continue to be monitored very closely to help determine the severity of the novel H1N1 flu virus.

2. What surveillance system will Florida use to replace counting confirmed and probable novel H1N1 flu cases?

Instead of reporting confirmed and probable novel H1N1 flu cases, Florida will use the traditional flu surveillance systems to track the progress of both the novel H1N1 flu pandemic and seasonal influenza. These systems work to determine when and where flu activity is occurring, track flu-related illness, determine what flu viruses are circulating, detect changes in flu viruses and measure the impact of flu on emergency department visits and deaths.

3. What do FDOH's traditional flu surveillance systems entail?

Several systems are in place to monitor influenza activity. These include:

1. Viral surveillance, which monitors:
 - a. The percentage of specimens tested for influenza that are positive for influenza,
 - b. The types and subtypes of influenza viruses circulating,
 - c. Resistance to influenza antiviral medications, and
 - d. The emergence of new strains.
2. Sentinel physician surveillance for influenza-like illness, which monitors the percentage of doctor visits for symptoms that could be the flu.
3. Emergency department surveillance, which tracks numbers of patients presenting with influenza-like illness to participating facilities.
4. County influenza activity code reporting, which summarizes the geographic spread of influenza by tracking the number of counties affected and the degree to which they are affected.

5. Deaths from the Florida Pneumonia and Influenza Surveillance System that reports the total number of deaths and the percentage of those that are coded as influenza or pneumonia in the 24 most populous Florida counties.
6. The number of laboratory-confirmed deaths from influenza among children.

Routine seasonal influenza surveillance does not count individual flu cases, except in the case of pediatric influenza deaths, but instead monitors activity levels and virus characteristics.

4. How is data from Florida's traditional flu surveillance system reported?

A weekly influenza surveillance report is published each Friday by the Bureau of Epidemiology. Usually the report is published from October through mid-May, but in light of the current novel H1N1 flu investigation, weekly publication of the influenza surveillance report is continuing over the summer months.

5. Why is the state influenza surveillance report dated a week earlier than the date it is posted?

Flu surveillance data collection is based on a reporting week that starts on Sunday and ends on Saturday of each week. Each surveillance participant is requested to summarize weekly data and submit it by Tuesday afternoon of the following week. Those data are then downloaded, compiled, and analyzed at the Bureau of Epidemiology.

6. Will FDOH expand its flu surveillance to track the progress of novel H1N1 flu for the upcoming flu season?

FDOH continues to work with the Centers for Disease Control and Prevention (CDC) and the Council of State and Territorial Epidemiologists (CSTE) to determine ways to enhance surveillance for novel H1N1 flu during the 2009-10 flu season. FDOH is participating in an enhanced influenza surveillance pilot project and is actively working to obtain additional information about hospitalizations.