

West Virginia Department of Health and Human Resources Information for the Public: Influenza Surveillance in West Virginia

How does the West Virginia Department of Health and Human Resources Influenza Surveillance System work?

West Virginia has three major sources of information about influenza:

- Influenza-like Illness (ILI) Reporting: Every week local health departments collect reports of cases of “influenza-like illness” from doctors’ offices and clinics. These totals are reported weekly to the state health department.
- Sentinel Provider Surveillance: Every week during influenza season, a hand full of participating providers from around the state report the number of patient visits for influenza-like illness. These providers may also test patients for influenza.
- Virology Surveillance: Sentinel providers and/or hospital laboratories send specimens to the WVDHHR Office of Laboratory Services for testing to determine if influenza A or B is present. These specimens are also subtyped to determine if they are vaccine-strain.

All of the above systems are important, but each gives different information. Influenza-like Illness (ILI) reporting and the Sentinel Provider Surveillance system tell us *how much* influenza-like illness is present in our state and *where* outbreaks are occurring. Virology Surveillance tells us *what type* of influenza virus is causing illness.

Why concern myself with influenza?

Influenza can be a serious illness. Influenza and pneumonia are the sixth leading cause of death in the United States, and in an average year it is estimated that 36,000 people die of influenza, and many more are hospitalized. Most public health scientists think we are overdue for an influenza pandemic. In a pandemic year, the death rate may rise several-fold.

As time goes on, however, doctors have more and better ways to treat and prevent influenza. The influenza vaccine is 70-90% effective in preventing illness in individuals less than 65 years of age. Among the elderly living in nursing homes, the vaccine is 50-60% effective in preventing hospitalization or pneumonia, and 80% effective in preventing death. Medications, such as amantadine and rimantadine, are also effective in preventing influenza A. There is also a new vaccine- the live attenuated influenza vaccine (LAIV) for use in healthy children and adults aged 5-49 years. Vaccine efficacy is around 85-90% for LAIV. There are some restrictions on the use of this vaccine. Talk to your doctor.

In order to effectively protect patients from influenza, a doctor needs to know if influenza virus is circulating in the community and whether the circulating strain is covered by the vaccine. The West Virginia Department of Health and Human Resources is making an effort to get this information to physicians faster than ever before so they can use the information to protect their patients’ health.

How can I keep from getting the flu?

Get the vaccine. The best time to get the vaccine is during October and November, but vaccination can continue into December and later, as long as vaccine is available. The following persons are at higher risk of complications from influenza and should obtain the influenza vaccine:

- Persons aged 65 years of age and older;
- Residents of nursing homes and other chronic-care facilities that house persons of any age who have chronic medical conditions;
- Adults and children who have chronic disorders of the pulmonary or cardiovascular systems, including asthma;
- Adults and children who have required regular medical follow-up or hospitalization during the previous year because of chronic metabolic diseases (including diabetes mellitus), renal dysfunction, hemoglobinopathies, or immunosuppression (including immunosuppression caused by medications or by human immunodeficiency virus);
- Children and teenagers (aged six months to 18 years) who are receiving long-term aspirin therapy and therefore might be at risk for developing Reye syndrome after influenza infection;
- Women who will be in the second or third trimester of pregnancy during the influenza season; and
- Health care workers or individuals who care for at-risk persons or live in the same household with high risk persons.

The following persons are *encouraged* to get a flu shot every year:

- Persons aged 50-64 years of age;
- Healthy children six to 23 months of age, and their household contacts and out-of-home caretakers;
- Household contacts and out-of-home caretakers of infants less than six months of age;
- People who provide essential community services;
- People at high risk for flu complications who travel to Southern hemisphere between April and September, or who travel to the tropics or in organized tourist groups at any time;
- People living in dormitories or under other crowded conditions; and
- Anyone who wants to reduce their chance of catching influenza.

What should I do if the health department reports influenza in my community and I didn't get the vaccine this year?

In most cases, you can still get the vaccine, even after influenza season has started. Just remember that it will take two weeks before the vaccine will protect you, so if you have any of the health conditions listed above, talk to your doctor. Your doctor may recommend medication with or without influenza vaccine to protect you during influenza season.