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U.S. Army Influenza Activity Report

Week Ending 02 March 2013 (Week 9)

2012-2013 Seasonal Influenza Vaccination Coverage

As of 27 FEB 2013

97%	DOD
98%	Army Active Duty
93%	Army Guard
85%	Army Reserve

SYNOPSIS: During week 9, Army Influenza-Like Illness (ILI) activity was slightly higher than the same time last season. For the first time this influenza season, influenza B predominated in typed specimens in both the Army and the civilian populations.

- **ILI Activity:** Army incident ILI outpatient visits in week 9 were 3% higher than the same week last year.
- **Influenza cases:** Two hospitalized influenza cases were reported to USAPHC in week 9. 80 hospitalized cases have been reported during this influenza season, 71 in dependents and 9 in Active Duty.
- **Acute Respiratory Disease at BCT sites:** ARD rates remain low; one location did not report. Surveillance testing in previous weeks detected some influenza, mostly influenza A viruses.
- **Viral specimens:** During week 9, 337 of 1330 (25%) laboratory specimens tested were positive for respiratory pathogens. Influenza B accounted for 39% of positive specimens. Most of the influenza positive specimens were from ERMC (40%); 20% were from PRMC, and 17% from WRMC.

Geographic Spread

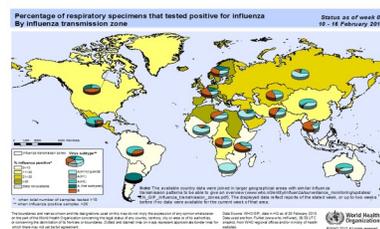


United States

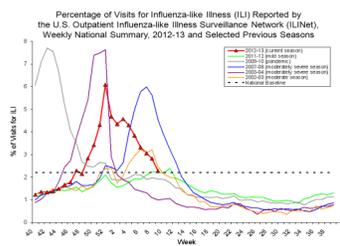
- During week 9, only 9 states reported widespread activity; Puerto Rico and 24 states reported regional activity. D.C. and 17 states reported local or sporadic activity. Guam reported no influenza activity.

Global

- Influenza activity was noted to be decreasing overall in North America. Influenza activity continued increasing in eastern Europe, but decreased in some northern and western countries. Influenza decreased in most of Asia and remains low in the southern hemisphere.

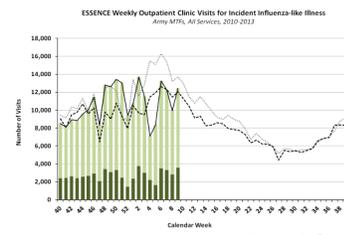


ILI Activity United States



- For week 9, 2.3% of outpatient visits reported through ILINet were due to ILI, which is above the national baseline of 2.2%.
- 7 of 10 regions reported a proportion of outpatient visits for ILI above their specific baselines.
- The percentage of ILI outpatient visits ranged from 1.2 to 3.1% across regions.

ILI Activity Army



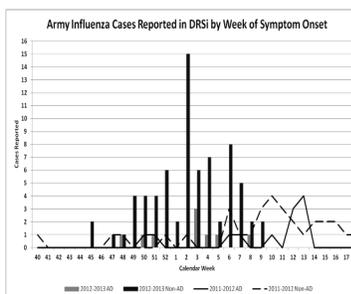
- During week 9, incident ILI activity was 3% higher than at the same time last year, but 9% lower than during the 2010-2011 season.
- Active Duty (AD) Service Members (SMs) accounted for 29% of incident ILI clinic visits during week 9; in 2011-2012, AD SMs comprised 29% of ILI clinic visits on average.

Laboratory Respiratory Specimen Testing

Army MTF Laboratory Results, 2012-13					
Test Result	Week 6	Week 7	Week 8	Week 9	Season Total
Influenza A	242	156	116	118	9401
Influenza B	102	127	89	130	2000
Adenovirus	11	12	8	12	348
Enterovirus	0	1	1	0	15
Parainfluenza	20	9	12	15	840
RSV	124	115	69	62	3100
Negative	1152	1126	930	993	87837
Total Results	1651	1546	1225	1330	4422

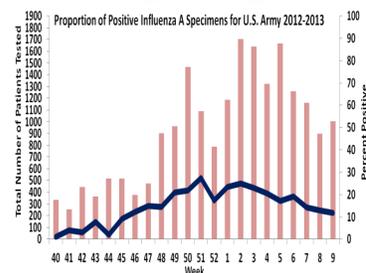
- 25% (337) of respiratory specimens were positive during week 9; influenza B accounted for 39% of positive specimens.
- Influenza A accounted for 35% of positive specimens, and RSV for 18%.
- Parainfluenza and adenovirus each accounted for 4% of positive specimens.

DRSi Influenza Case Reporting



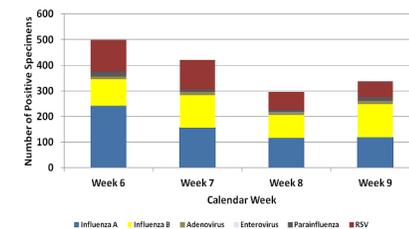
- 2 dependents with hospitalized influenza were reported in DRSi during week 9.
- A total of 80 hospitalized influenza cases have been reported this season for the US Army, 71 in dependents and 9 in AD SMs.
- At the same time last influenza season, only 4 AD SMs were reported hospitalized with influenza.

Laboratory Testing for Influenza A



- The proportion of positive influenza A tests in week 9 (12%) remained stable from week 8 (13%).
- 78 of the 118 (6%) positive influenza A specimens in week 9 were from non-AD personnel.
- 39 (33%) of the 118 positive influenza A specimens were from ERMC, 33 (28%) were from SRMC, and 18 (15%) were from WRMC.
- PRMC reported 15 (13%) and NRMC reported 11 (9%) influenza A cases, respectively.

Positive Respiratory Specimen Results from Army MTFs by Virus, 2012-2013 Influenza Season



Additional Resources: Army Influenza Reports; ARD Reports; AFHSC Influenza Reports; NHRC FRI Reports; DoD Global Influenza Surveillance Program; DoD Pandemic Influenza Watchboard; CDC; WHO

Key: ILI-Influenza-Like Illness; DRSi- Disease Reporting System Internet; ARD-Acute Respiratory Disease; NHRC- Naval Health Research Center; ADV-Adenovirus; RSV-Respiratory Syncytial Virus; DEP- Disease Epidemiology Program; SM-Service Member

Questions?

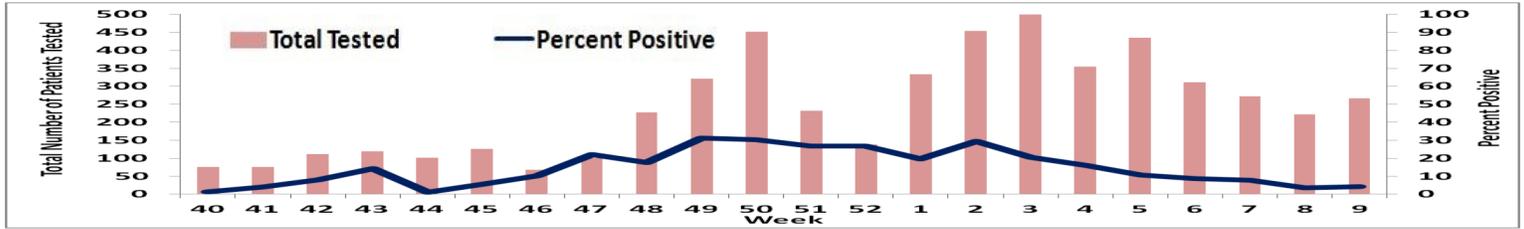
Email USAPHC-DEP
410-417-3774



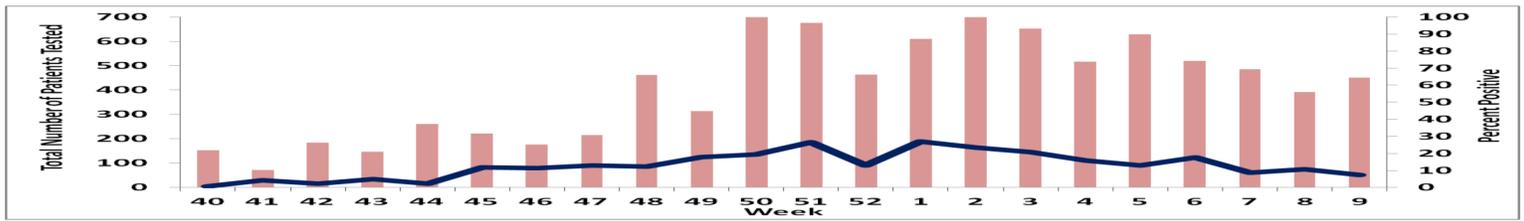
U.S. Army Influenza Activity Report

Proportion of Influenza A Positive Specimens by Week and Region, Army Medical Laboratories, 2012-13

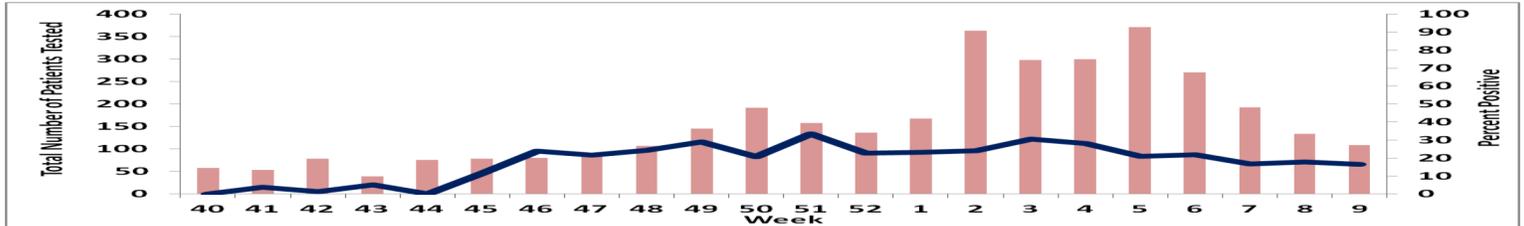
Northern Regional Medical Command (NRMC)



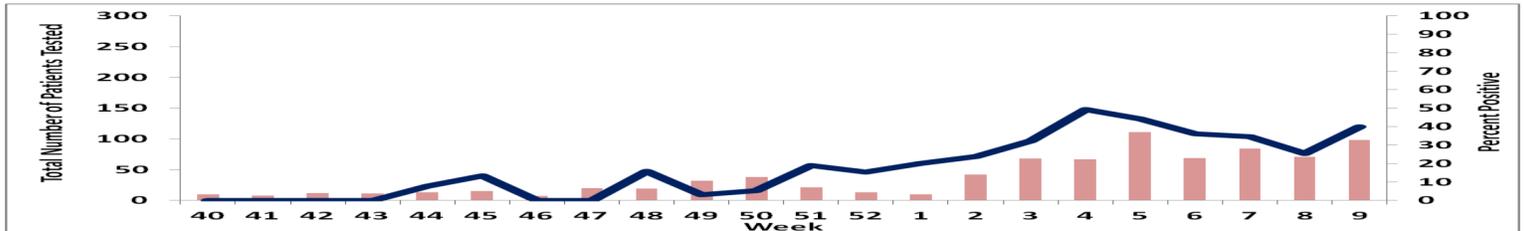
Southern Regional Medical Command (SRMC)



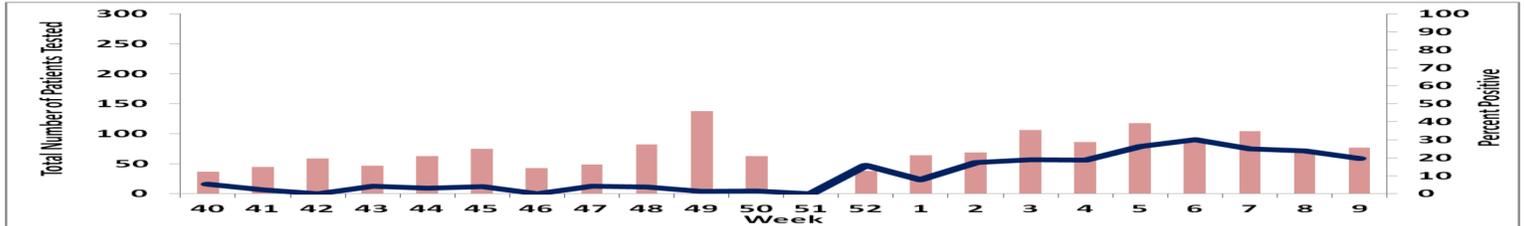
Western Regional Medical Command (WRMC)



European Regional Medical Command (ERMC)



Pacific Regional Medical Command (PRMC)



Number of Positive Influenza A Specimens by Duty Status and Region

Region	Week 2		Week 3		Week 4		Week 5		Week 6		Week 7		Week 8		Week 9	
	AD	Non-AD														
NRMC	52	82	52	53	27	30	18	28	6	21	6	15	2	6	6	5
SRMC	55	127	22	113	19	63	14	67	22	70	15	27	9	33	11	22
WRMC	20	67	23	68	20	64	18	60	10	49	7	25	5	19	4	14
ERMC	4	6	5	17	11	22	14	35	12	13	12	17	7	11	14	25
PRMC	5	7	4	16	5	11	9	22	15	12	8	18	7	10	3	12
CENTCOM	0	0	2	0	0	0	1	1	6	6	8	7	3	4	2	0

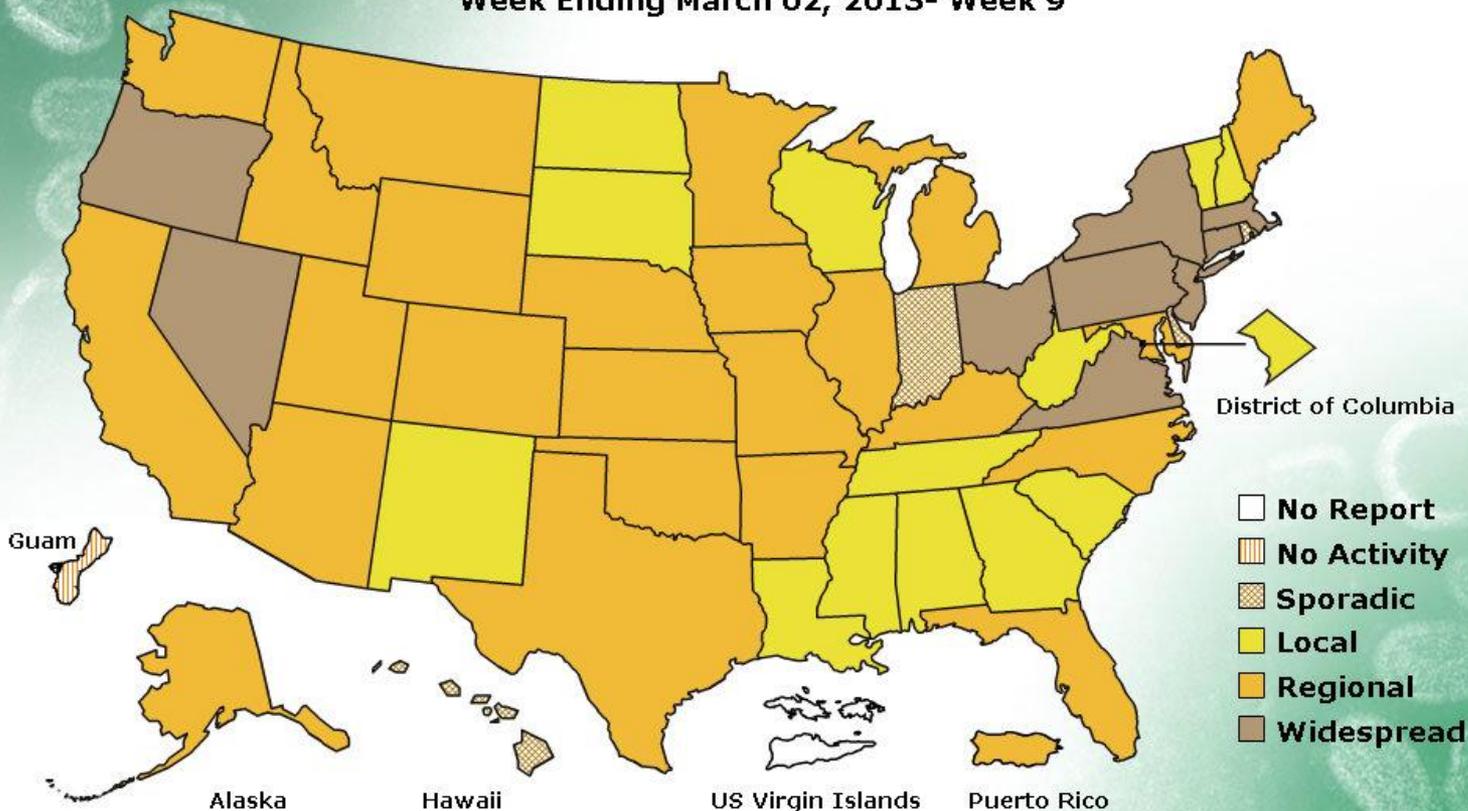
Locations providing week 9 laboratory data as of 7 March 2013: Korea, Ft Belvoir, Ft Benning, Ft Bliss, Ft Bragg, Ft Campbell, Ft Carson, Ft Drum, Ft Eustis, Ft Gordon, Ft Hood, Ft Irwin, Ft Jackson, Ft Lee, Ft Leonard Wood, Ft Lewis, Ft Meade, Ft Polk, Ft Riley, Ft Rucker, Ft Sam Houston, Ft Sill, Ft Stewart, Ft Wainwright, Landstuhl, Redstone Arsenal, and Tripler

FLUVIEW



A Weekly Influenza Surveillance Report Prepared by the Influenza Division
Weekly Influenza Activity Estimates Reported by State and Territorial Epidemiologists*

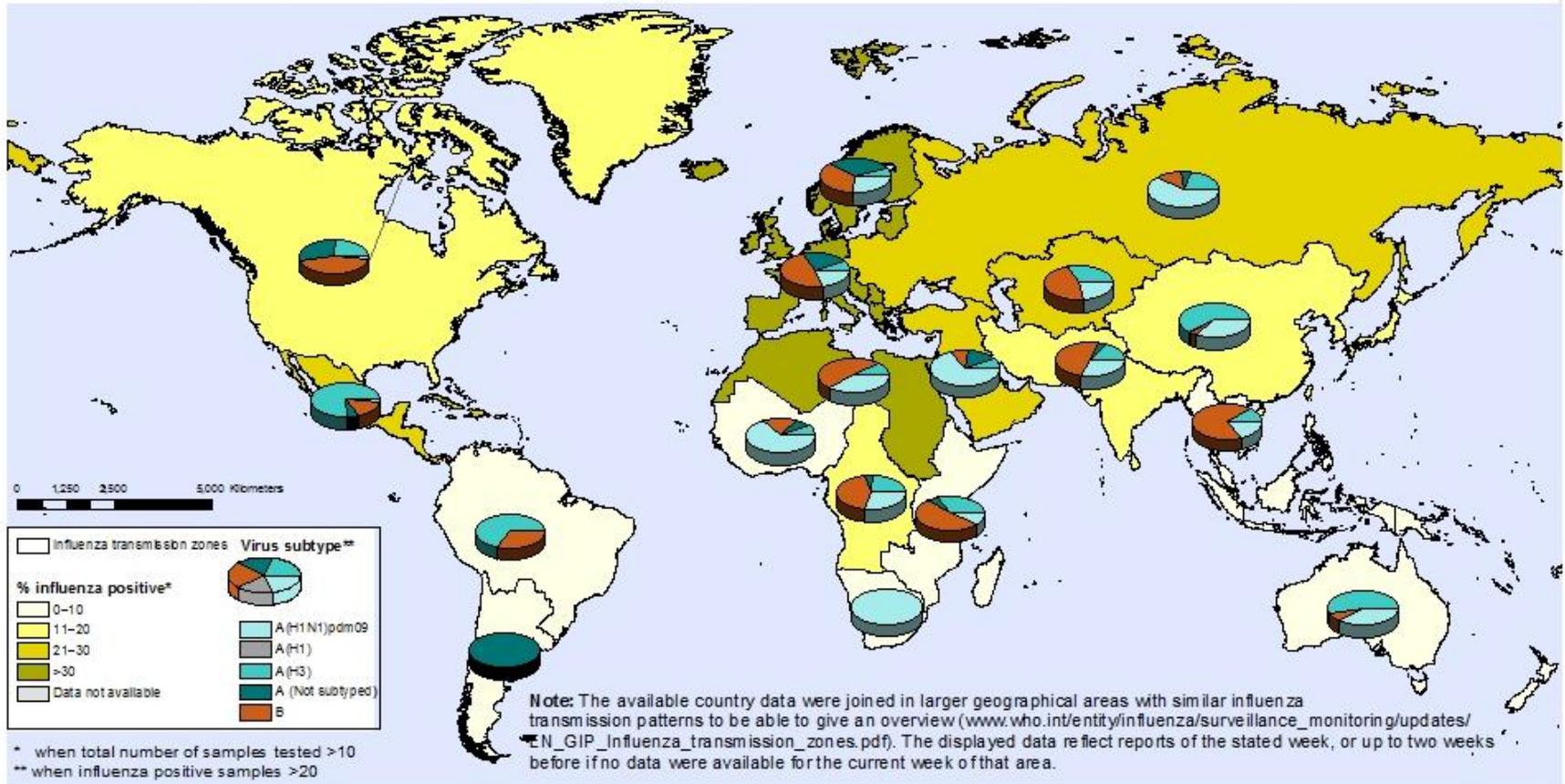
Week Ending March 02, 2013- Week 9



*This map indicates geographic spread and does not measure the severity of influenza activity.

Percentage of respiratory specimens that tested positive for influenza By influenza transmission zone

Status as of week 07
10 - 16 February 2013



The boundaries and names shown and the designations used on this map do not imply the expression of any opinion whatsoever on the part of the World Health Organization concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. Dotted and dashed lines on maps represent approximate border lines for which there may not yet be full agreement.

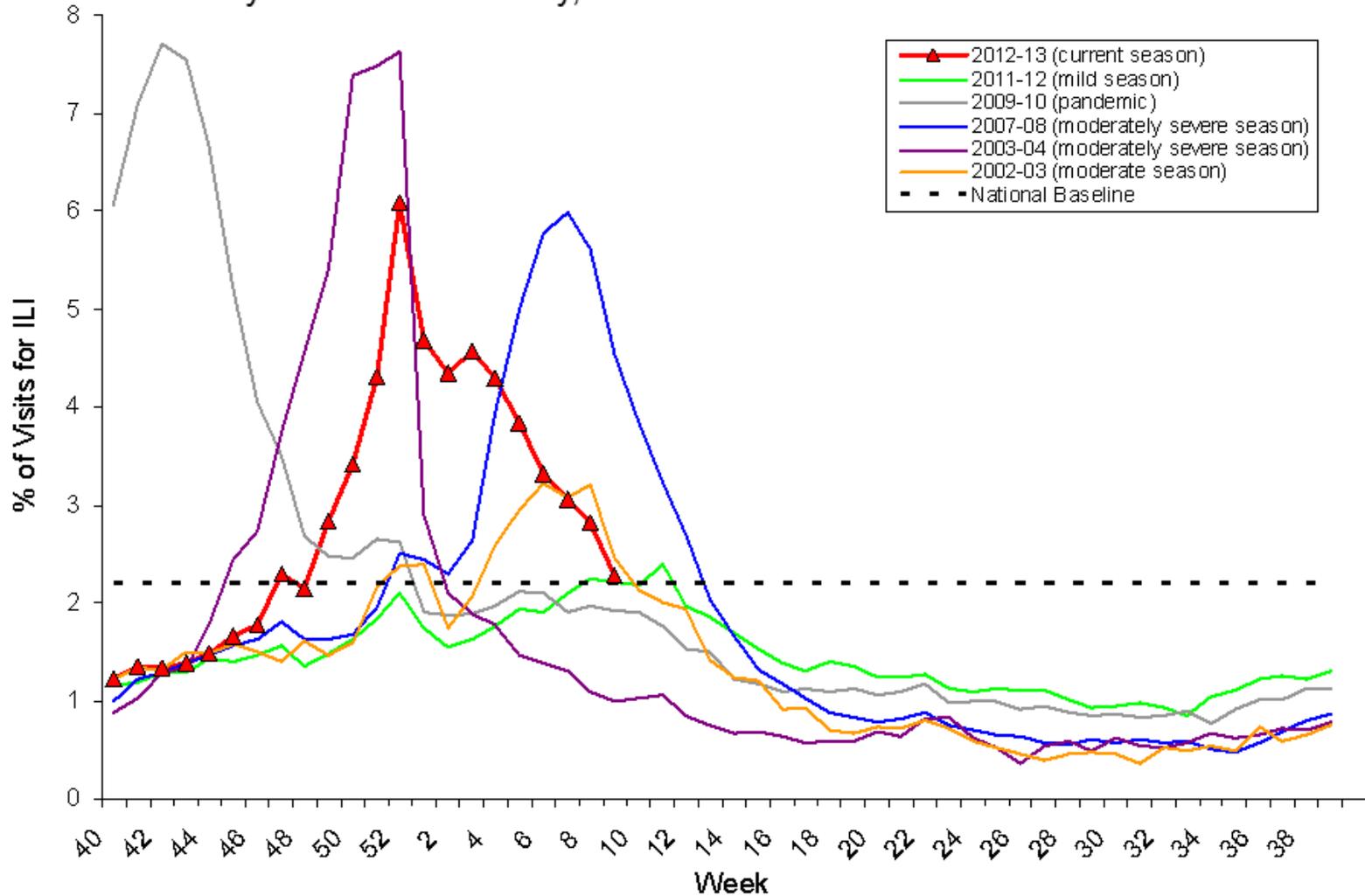
Data Source: WHO/GIP, data in HQ as of 26 February 2013
Data used are from FluNet (www.who.int/flu-net), 08:58 UTC snapshot, from WHO regional offices and/or ministry of health websites.



http://www.who.int/influenza/gisrs_laboratory/updates/summaryreport/en/index.html

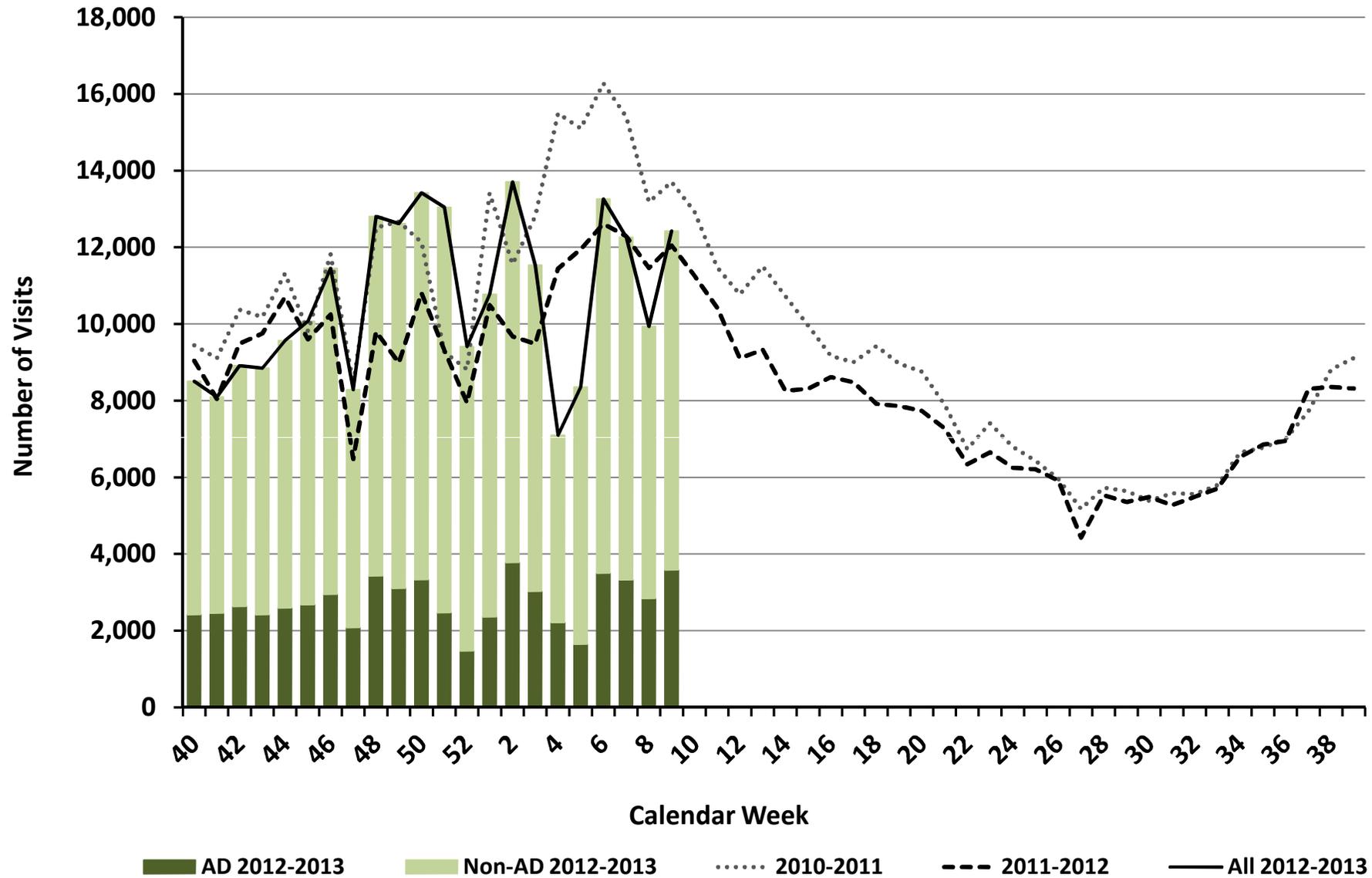
http://www.who.int/influenza/surveillance_monitoring/updates/latest_update_GIP_surveillance/en/index.html

Percentage of Visits for Influenza-like Illness (ILI) Reported by the U.S. Outpatient Influenza-like Illness Surveillance Network (ILINet), Weekly National Summary, 2012-13 and Selected Previous Seasons



ESSENCE Weekly Outpatient Clinic Visits for Incident Influenza-like Illness

Army MTFs, All Services, 2010-2013

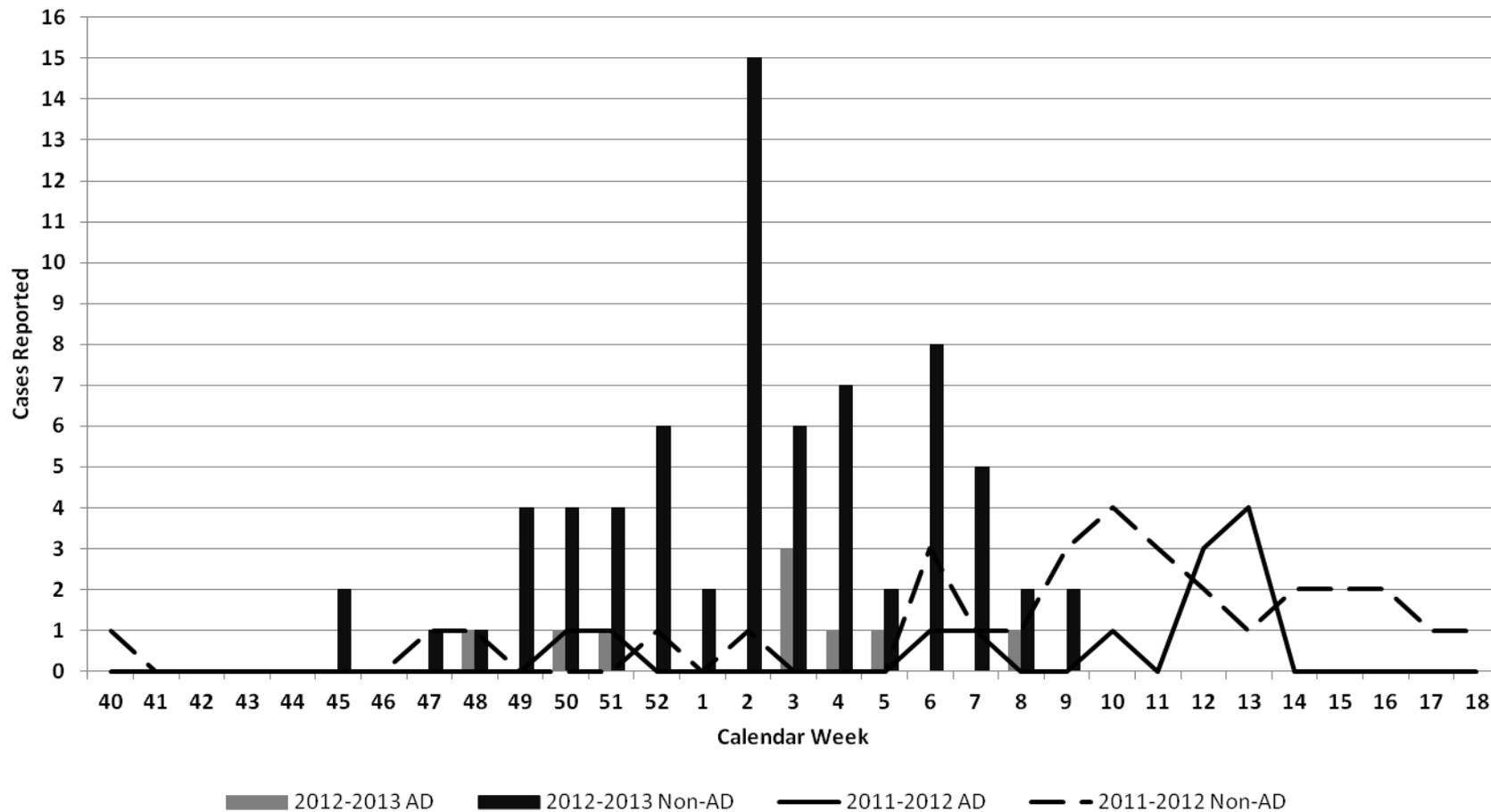


Clinic visits for ILI are obtained from ESSENCE. Data as of 7 March 2013.

Army MTF Laboratory Results, 2012-13

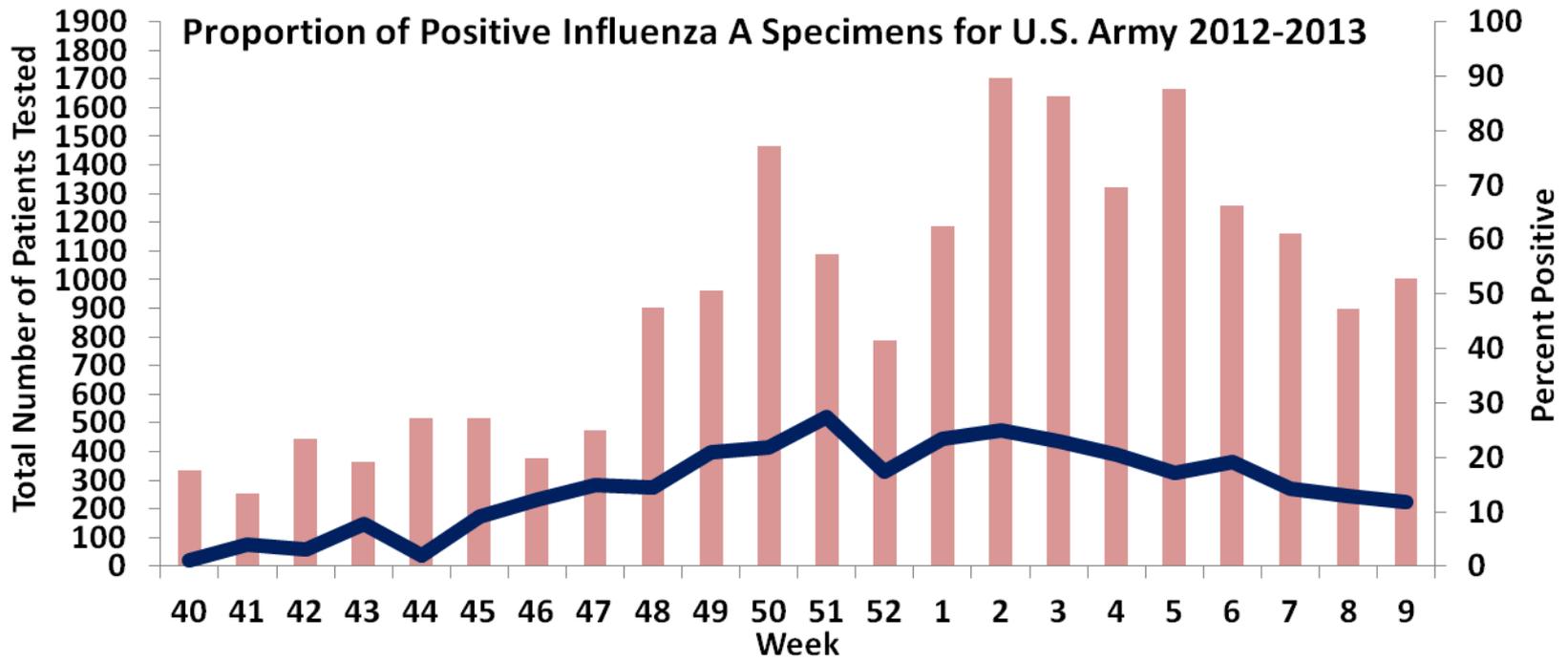
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Army Influenza Cases Reported in DRSi by Week of Symptom Onset



Note: Reportable influenza cases are defined as only cases that have been hospitalized and are under the age of 65. See [Armed Forces Reportable Medical Events Guidelines and Case Definitions](#) for more information

Data as of 27 February 2013.



Positive Respiratory Specimen Results from Army MTFs by Virus, 2012-2013 Influenza Season

