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This newsletter includes information from the national flu summary. Although official influenza season has ended, influenza viruses may still be circulating. Surveillance sites: Please continue to report influenza-like illnesses and flu cases to OC Epidemiology.

- **CDC reports 83 children died of influenza during the 2007-08 season.** The number of pediatric deaths is greater than in 2006-07 (68) and in 2005-06 (35). Overall the flu season was worse than the previous two years but similar to 2004-05. Of the children >6 months of age for whom vaccination status was known, 92% had not received influenza vaccine. Influenza vaccination of all children (6 months-18 years) is recommended for the 2008-09 season. See www.cdc.gov/mmwr (June 27, 2008 ed).
- **CDC study reveals flu vaccination coverage low among persons with asthma.** National Health Interview Survey data on flu vaccination among all persons with asthma aged ≥ 2 years during the 2004-05 and 2005-06 flu seasons revealed that 36.2% of persons aged ≥ 2 years with asthma received flu vaccine during the 2005-06 season. Among persons with asthma in 2005-06, those aged 50-64 and ≥ 65 years (for whom flu vaccination is recommended regardless of health status) had the highest flu vaccination rates of 48.6% and 75.7%, respectively. Vaccination coverage among persons with asthma is still well below *Healthy People 2010* targets of 60% of persons aged 18-64 years with high-risk conditions and 90% of all persons aged ≥ 65 years. See www.cdc.gov/mmwr (June 20, 2008 ed).
- **CDC funds faster diagnostic tests to distinguish between seasonal and avian influenza.** A total of \$12.9 million in contracts were awarded to two companies for initial phase development of tests that will distinguish seasonal from avian influenza viruses in three hours; current tests for H5N1 can take up to 24 hours. See www.cidrap.umn.edu/cidrap/content/influenza/panflu/news/jun1708tests.html.
- **Roche announces program to facilitate business stockpiling of antivirals.** Under the new plan, Roche will store and rotate the stockpile (to avoid expiration) of the oseltamivir (Tamiflu®) for an annual fee of \$6 per 10 tablet treatment course. If and when the stockpile is needed and requested, the business would pay the prevailing wholesale price to purchase their dedicated doses. See www.cidrap.umn.edu/cidrap/content/influenza/biz-plan/news/jun2608tamiflu.html.
- **Study finds an adjuvanted, low-dose H5N1 vaccine candidate to be safe, immunogenic, and induce cross-reactive immune responses.** This multicenter, randomized, blind-observer phase 1 trial compared groups of 50 healthy young adults who received two doses, spaced 21 days apart, of an influenza A/Vietnam (H5N1) vaccine in specified doses with or without adjuvant. Even with the lowest adjuvanted vaccine dose (1.9 micrograms) tested to date, an immune response was induced in 72% of subjects after two doses. In addition, adjuvanted vaccine induced cross-neutralizing antibodies to an A/Indonesia (H5N1) strain in 39%-65% of samples, versus 7% without adjuvant. No serious vaccine-related adverse events occurred. See www.journals.uchicago.edu/doi/abs/10.1086/590913.

Orange County** and National Summary

- To date, there have been 1,142 total reported influenza cases in OC; 570 A, 274 B, & 298 A/B unspecified. Of the 570 influenza A, 237 have been subtyped: 74 A/H1 and 163 A/H3.
- Nationally, influenza A viruses predominated overall. Of the antigenically characterized flu viruses (N=1,161), the majority of A/H1 (n=407), A/H3 (n=404), and B (n=350) viruses were as follows: A/Solomon Islands/3/2006-like (n=270; 66%), A/Brisbane/10/2007-like (n=243; 60%), and B/Yamagata lineage (n=342; 98%, of which 304 (89%) were B/Florida/04/2006-like), respectively. Note: A/Solomon Islands/3/2006 was the H1N1 component of the 2007-08 vaccine but will be replaced by A/Brisbane/59/2007 in the 2008-09 vaccine; A/Brisbane/10/2007 (H3N2) and B/Florida/04/2006 were not in this past season's vaccine but will be included in 2008-09.

Recommended Resources

CDC: <http://www.cdc.gov/flu/weekly/>;
OC: <http://www.ochealthinfo.com/epi/flu/surveillance.htm>;
CA: <http://www.dhs.ca.gov/ps/dcdc/VRDL/html/FLU/Fluintro.htm>;
HHS: <http://www.pandemicflu.gov/>; General: <http://www.cdc.gov/flu>

**Note: The number of reported cases does NOT correspond to the total number of cases occurring in OC as not all labs participate, the surveillance programs are not population based, and testing may be influenced by many factors such as public interest.



If you have any comments about this flyer, contact Alina Burgi or Pamela Hipp at (714) 834-8180.
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