1. Influenza Notifications and ASPREN Influenza Like Illness

Figure 1: Laboratory confirmed influenza notifications in Queensland from 1st January 2010 to 11th October 2010, by onset week and type. Also, Consultation rates for influenza like illness in Queensland reported to the ASPREN sentinel network 1st January 2009 to 11th October 2010.

Data Sources: Queensland Health Notifiable Conditions Register 11/10/2010 and ASPREN website 11/10/2010

Influenza Notifications
Year to date 1949 cases of influenza (1804 type A, 142 type B and 3 untyped) have been notified to Queensland Health. 783* of the influenza A notifications are confirmed as pandemic (H1N1) 2009 infection while 81* have been H3N2. Figure 1 shows notifications for influenza A and B by week of onset. An increasing trend in notifications is noted from around week 29. The number of laboratory confirmed cases decreased slightly from week 35, reached a plateau for weeks 37 and 38 before showing a decreasing trend in weeks 39 and 40. The recent week’s data (week 41) may be incomplete.

*Counts reported here are lower than those reported in the 4th October report. This is the result of data cleaning and is not an error.
Notifications are highest in the 10 – 19 and 20 – 39 age groups for males and females respectively (Figure 2).

**ASPREN**

ASPREN is a national syndromic surveillance program co-ordinated by the Discipline of General Practice at the University of Adelaide and The Royal Australian College of General Practitioners. One of the conditions under surveillance is influenza like illness (ILI).

General practitioners (GP) participating in the ASPREN program contribute data on the proportion of consultations which are ILI related. Currently there are 20 Queensland GPs participating in the program.

Figure 1 shows ILI rates for consultations with Queensland GPs participating in the ASPREN program. There is rising trend from week 30 to 36 which is consistent with the rise in laboratory confirmed influenza notifications. The highest rate of ILI presentation was 30.1 per 1000 consultations in recent week (41), which represents a sharp rise from the previous week. Recent week’s data may be incomplete.
2. Hospital Admissions in Queensland

Table 1: Hospital admissions in Queensland due to confirmed pandemic (H1N1) 2009 cases by Health Service District, from 1st January to 11th October, 2010

<table>
<thead>
<tr>
<th></th>
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<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Cairns and Hinterland</td>
<td>12</td>
<td>1</td>
<td>5</td>
<td>0</td>
</tr>
<tr>
<td>Cape York</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Central Queensland</td>
<td>1</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Central West</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Children's Health Services</td>
<td>19</td>
<td>1</td>
<td>5</td>
<td>1</td>
</tr>
<tr>
<td>Darling Downs-West Moreton</td>
<td>29</td>
<td>1</td>
<td>8</td>
<td>1</td>
</tr>
<tr>
<td>Gold Coast</td>
<td>28</td>
<td>2</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Mackay</td>
<td>2</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Metro North</td>
<td>37</td>
<td>6</td>
<td>12</td>
<td>4</td>
</tr>
<tr>
<td>Metro South</td>
<td>26</td>
<td>5</td>
<td>8</td>
<td>3</td>
</tr>
<tr>
<td>Mt Isa</td>
<td>2</td>
<td>0</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>South West</td>
<td>1</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Sunshine Coast-Wide Bay</td>
<td>9</td>
<td>0</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Torres Strait-Northern Peninsula</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Townsville</td>
<td>4</td>
<td>0</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Private Hospitals§</td>
<td>15</td>
<td>1</td>
<td>5</td>
<td>1</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>185</strong></td>
<td><strong>17</strong></td>
<td><strong>47</strong></td>
<td><strong>10</strong></td>
</tr>
</tbody>
</table>

*data extracted from Epilog at 09:17 11/10/2010 and was correct at time of extract
†accuracy of counts from public hospitals depends on the timeliness of data entry and may underestimate admission depending on the time of data extract.
§ Private hospital data last updated 27/09/2010

Epilog is a web based application which is used to store data related hospitalisation due to pandemic (H1N1)2009 infection in Queensland public hospitals and selected private hospitals. Analysis and reporting of data helps to inform strategies for optimizing health services and providing the best possible care for hospitalised cases.

Cumulative and current confirmed pandemic (H1N1) 2009 influenza admissions to hospital generally, and ICU specifically, are summarized in Table 1 by Health Service District (HSD).

Fifty percent (81/162) of patients admitted to public hospitals (overall) were male compared with 56% (22/39) admitted to ICU. The number of hospitalisations is highest in the 0-4 age group. Hospitalisation of females in the 20-29 year age group was approximately four times higher than males in the same group. Males above forty years show a higher frequency of hospitalisation compared with females of similar age (Figure 3).
Figure 3: Age and gender profile of confirmed pandemic (H1N1) 2009 influenza cases admitted to public hospitals in Queensland 1st January to 11th October 2010

Figure 4: Confirmed pandemic (H1N1) 2009 influenza cases admitted to public hospitals in Queensland by day of admission 1st July to 11th October 2010

Pandemic (H1N1) 2009 influenza admissions have been steadily increasing since week 34. A decreasing trend is apparent from week 39, although week 41 shows an increase. ICU admissions show a similar pattern to admissions overall (Figure 4). There have been two deaths attributed to Pandemic (H1N1) 2009 influenza since 1st January 2010.
Figure 5: Hospital Bed Occupancy of confirmed pandemic (H1N1) 2009 influenza cases admitted to public hospitals in Queensland 1st July to 11th October 2010

Total bed occupancy, due to confirmed pandemic (H1N1) 2009 influenza, showed a peak on 17th September followed by a fluctuating trend into early October. A decreasing trend is now apparent (Figure 5).
3. Antiviral Courses Dispensed (from the National Stockpile) by Community Pharmacies

Figure 6: Weekly courses of oseltamivir (Tamiflu®) dispensed by community pharmacies from 1st January to 11th October, 2010, with monthly moving average.
Source: Pharmacy Guild of Queensland 10/10/2010

Figure 6 shows a sharp rise in the number of weekly courses of oseltamivir dispensed by community pharmacies between week 33 and week 37, followed by decreasing trend during weeks 38 and 39. Courses dispensed in the most recent week (week 41) show a slight increase although the monthly moving average show a plateau.

4. Influenza Activity in Australia (reporting period 25th September to 1st October, 2010)

- Levels of influenza-like illness (ILI) in the community increased through most surveillance systems this reporting period. Local, regional and widespread activity was reported within jurisdictions. The number of laboratory confirmed notifications decreased this reporting period.
- There were 666 laboratory confirmed notifications of influenza during this reporting period, including 498 pandemic (H1N1) 2009 cases. Notifications of laboratory confirmed influenza were highest in SA.
- Results from sentinel laboratory surveillance systems for this reporting period show that 17% of the respiratory tests conducted over this period were positive for influenza, which is the same as the last reporting period. In 2010, a total of 1072 specimens have been positive for influenza (of

Compiled by the Epidemiology, Surveillance and Research Unit
Communicable Diseases Branch
Health Protection Directorate
Division of the Chief Health Officer
EPI@health.qld.gov.au
12,793 specimens tested), of which 68% were pandemic (H1N1) 2009, 9% were A/H3N2, 21% were influenza B and 2% were influenza A untyped.

- As at 1 October 2010, there have been 8,282 confirmed cases of influenza entered into the National Notifiable Diseases Surveillance System (NNDSS) in 2010 up to 1 October. A total of 42,485 confirmed cases of pandemic (H1N1) 2009 have occurred in Australia since May 2009.
- Sentinel hospitals reported a decrease in the number of influenza associated hospitalisations compared to previous weeks, with 13 admissions during the reporting period, including 11 for pandemic (H1N1) 2009. ANZICS reported nine ICU admissions for influenza and the APSU reported four cases of influenza complications in children (<15 years) during this reporting period.

5. **International Influenza Activity (reporting period 25th September to 1st October, 2010)**

The WHO has advised that the world is no longer in phase 6 of influenza pandemic alert, and has moved into the post pandemic period. As at 1 August 2010 there have been over 18,449 deaths associated with pandemic (H1N1) 2009 influenza worldwide since April 2009.

In New Zealand, the ILI consultation rate peaked in early August and has now returned to below baseline levels. Of the influenza viruses identified through sentinel and non-sentinel swab testing in the past week, 81% were pandemic (H1N1) 2009 influenza.

Source: Australian Influenza Surveillance Report No. 39, 25 September 2010 – 1 October 2010


6. **Virology**

*Typing and antigenic characterisation – WHO Collaborating Centre for Reference & Research on Influenza (WHO CC) in Melbourne*

From 1 January to 3 October 2010, there were 870 Australian influenza isolates subtyped by the WHO CC.

Table 2: Typing of influenza isolates from the WHO Collaborating Centre, from 1st January to 3rd September 2010

<table>
<thead>
<tr>
<th>Type/Subtype</th>
<th>ACT</th>
<th>NSW</th>
<th>NT 5</th>
<th>QLD</th>
<th>SA</th>
<th>TAS</th>
<th>VIC</th>
<th>WA</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>A(H1N1)</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Pandemic (H1N1)2009</td>
<td>16</td>
<td>33</td>
<td>123</td>
<td>230</td>
<td>77</td>
<td>1</td>
<td>213</td>
<td>95</td>
<td>788</td>
</tr>
<tr>
<td>A(H3N2)</td>
<td>2</td>
<td>2</td>
<td>0</td>
<td>8</td>
<td>0</td>
<td>2</td>
<td>9</td>
<td>16</td>
<td>39</td>
</tr>
<tr>
<td>B</td>
<td>0</td>
<td>3</td>
<td>0</td>
<td>4</td>
<td>5</td>
<td>0</td>
<td>16</td>
<td>15</td>
<td>43</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>18</td>
<td>38</td>
<td>123</td>
<td>242</td>
<td>82</td>
<td>3</td>
<td>238</td>
<td>126</td>
<td>870</td>
</tr>
</tbody>
</table>

SOURCE: WHO CC

Please note: There may be up to a month delay on reporting of samples.
Isolates tested by the WHO CC are not necessarily a random sample of all those in the community, hence proportions of pandemic (H1N1) 2009 to seasonal are not representative of the proportions circulating.
Antigenic characterisation of 460 pandemic (H1N1) 2009 isolates has shown 416 to be the A/California/7/2009-like strain and 4 a low reactor version of this strain. Antigenic characterisation of 29 type A/H3N2 isolates has shown 22 to be the A/Perth/16/2009-like and 7 to be the A/Perth/16/2009-like low reactor versions of the strain. One isolate was antigenically characterised as a low-reactor version of B/Florida/4/2006-like and 10 were characterised as B/Brisbane/60/2008-like (Attachment A).

Source: Australian Influenza Surveillance Report No. 39, 25 September 2010 – 1 October 2010

Antiviral Resistance

Pandemic (H1N1) 2009
The WHO Collaborating Centre in Melbourne has reported that from 1 January 2010 to 3 October 2010, no isolates (out of 529 tested) have shown resistance to oseltamivir or zanamivir by enzyme inhibition assay (EIA) and two pandemic (H1N1) 2009 isolates (out of 41 tested) have shown the H275Y mutation known to confer resistance to oseltamivir.

Source: Australian Influenza Surveillance Report No. 39, 25 September 2010 – 1 October 2010

2011 Southern Hemisphere Vaccine
The WHO announced this week that the recommended vaccines for use in the 2011 influenza season (southern hemisphere winter) contain the following:

- an A/California/7/2009 (H1N1)-like virus;
- an A/Perth/16/2009 (H3N2)-like virus;
- a B/Brisbane/60/2008-like virus

Source: Australian Influenza Surveillance Report No. 38, 18 September 2010 – 24 September 2010