Influenza is a highly contagious acute respiratory illness that causes substantial morbidity and mortality worldwide each year. In an average season, influenza is associated with 20,000 deaths and 110,000 hospitalizations in the U.S. Periodic pandemics due to new subtypes cause much more illness and death. This health status update describes how we track influenza in Utah, how physicians and other health care providers can assist with that tracking or surveillance effort, and several new medicines available for influenza treatment.

**Influenza Surveillance**

Influenza surveillance guides vaccine development, detects outbreaks that prompt preventive treatment, and guides treatment decisions in patients with influenza-like clinical illness. The UDOH tracks influenza based on cases of laboratory-confirmed influenza, cases of influenza-like illness reported from sentinel reporting sites, and school absenteeism rates.

Tracking culture-confirmed cases is important for identifying which virus types are circulating. Subtype information also helps guide global vaccine development.

- During the 1998-99 season, 84 culture-confirmed cases were detected, an increase over the previous season (50 cases).
- Influenza A was more common (67 cases), but both type A and type B circulated during 1998-1999. In the 1999-2000 season, 50 cases have been detected through 1/1/2000. Most have been type A, but type B has also been detected.
- During 1998-1999, 3,331 cases of influenza-like illness were reported by 13 sentinel physician’s offices, clinics, and university health centers. Cases were reported from October 1998 through March 1999, and peaked during the fourth week of January. During the 1999-2000 season, cases began to be reported in October, and increased substantially in early December.

Absenteeism rates are reported by 16 schools and 4 school districts throughout Utah. During 1998-1999, absenteeism rates remained at about 5% throughout the influenza season. As of 12/25/99, absenteeism rates had not increased appreciably. At the time of this update, influenza is considered widespread in Utah. Physicians should consider preventive treatment for unvaccinated high risk patients.

**Influenza Immunization**

Immunization is the most important way to prevent influenza and its potentially serious complications. Influenza vaccine is effective for preventing both types A and B. Due to both changes in the viruses and decreasing immunity over time, vaccination should be given each season, ideally during October or November. Vaccination is most important for the elderly and those with chronic illness, who experience the most serious complications. In 1997, only 65% of Utahns over age 65 reported they had a flu shot in the past year (Utah BRFSS).

**Antiviral Drugs**

Immunization is the best way to prevent influenza and control outbreaks, but antiviral agents also can be used for preven-
Physicians can participate in influenza surveillance by submitting a standard throat culture or washing collected during the first three days of illness and kept cold during transport to the state laboratory. The test is free.

Physicians and others can get current information on flu surveillance in Utah at: [http://hlunix.state.ut.us/els/epidemiology/commdisease/influenza/FluSurv.HTML](http://hlunix.state.ut.us/els/epidemiology/commdisease/influenza/FluSurv.HTML).

Physicians can participate in influenza surveillance by submitting a standard throat culture or washing collected during the first three days of illness and kept cold during transport to the state laboratory. The test is free.

Physicians and others can get current information on flu surveillance in Utah at: [http://hlunix.state.ut.us/els/epidemiology/commdisease/influenza/FluSurv.HTML](http://hlunix.state.ut.us/els/epidemiology/commdisease/influenza/FluSurv.HTML).

Physicians can participate in influenza surveillance by submitting a standard throat culture or washing collected during the first three days of illness and kept cold during transport to the state laboratory. The test is free.

Physicians and others can get current information on flu surveillance in Utah at: [http://hlunix.state.ut.us/els/epidemiology/commdisease/influenza/FluSurv.HTML](http://hlunix.state.ut.us/els/epidemiology/commdisease/influenza/FluSurv.HTML).

Physicians can participate in influenza surveillance by submitting a standard throat culture or washing collected during the first three days of illness and kept cold during transport to the state laboratory. The test is free.

Physicians and others can get current information on flu surveillance in Utah at: [http://hlunix.state.ut.us/els/epidemiology/commdisease/influenza/FluSurv.HTML](http://hlunix.state.ut.us/els/epidemiology/commdisease/influenza/FluSurv.HTML).