Arkansas Department of Health & Human Services
Division of Health
Paul K. Halverson, DrPH, Director
P.O. Box 1437, Slot H-48, Little Rock, AR 72203-1437
Telephone: 501-661-2000    TDD: 501-234-4399

March 16, 2006

Weekly Report: Influenza Summary Update for the week ending March 4, 2006-Week 9

CDC has antigenically characterized 305 influenza viruses [250 influenza A (H3N2), 18 influenza A (H1), and 37 influenza B viruses] collected by U.S. laboratories since October 1, 2005. Of the 250 influenza A (H3N2) viruses, 201 were characterized as A/California/07/2004-like, which is the influenza A (H3N2) component recommended for the 2005-06 influenza vaccine, and 49 viruses showed reduced titers with antisera produced against A/California/07/2004. Of the 49 low-reacting viruses, 23 were tested with antisera produced against A/Wisconsin/67/2005 (the H3N2 component selected for the 2006-07 vaccine), and 19 are A/Wisconsin-like. The hemagglutinin proteins of 16 influenza A (H1) viruses were similar antigenically to the hemagglutinin of the vaccine strain A/New Caledonia/20/99, and 2 showed reduced titers with antisera produced against A/New Caledonia/20/99. Twenty of the influenza B viruses that have been characterized belong to the B/Yamagata lineage. Two were similar to B/Shanghai/361/2002, the recommended influenza B component for the 2005-06 influenza vaccine, and 18 were characterized as B/Florida/07/2004-like. B/Florida/07/2004 is a minor antigenic variant of B/Shanghai/361/2002. Seventeen influenza B viruses were identified as belonging to the B/Victoria lineage and all were similar to B/Ohio/1/2005, the influenza B component selected for the 2006-07 vaccine.

During week 9, 25 states (Alabama, Arkansas, Colorado, Connecticut, Delaware, Florida, Georgia, Indiana, Iowa, Kansas, Kentucky, Louisiana, Maryland, Minnesota, Montana, New York, North Carolina, Ohio, Pennsylvania, Rhode Island, South Carolina, Tennessee, Texas, Vermont, and Virginia) and New York City reported widespread influenza activity. Thirteen states (Illinois, Maine, Michigan, Missouri, Nebraska, Nevada, New Hampshire, New Jersey, North Dakota, Oklahoma, South Dakota, Wisconsin, and Wyoming) reported regional influenza activity. Eight states (Alaska, California, Hawaii, Idaho, Massachusetts, Mississippi, Oregon, and West Virginia) and the District of Columbia reported local influenza activity. Four states (Arizona, New Mexico, Utah, and Washington) reported sporadic influenza activity.

Composition of the 2006-07 Influenza Vaccine:

WHO has recommended that the 2006-07 trivalent influenza vaccine for the Northern Hemisphere contain A/New Caledonia/20/99-like (H1N1), A/Wisconsin/67/2005-like (H3N2), and B/Malaysia/2506/2004-like viruses. The influenza A (H3N2) and the influenza B components have been changed from the 2005-06 season vaccine components. A/Wisconsin/67/2005 is an antigenic variant of the current vaccine strain A/California/07/2004. Influenza B viruses currently circulating can be divided into two antigenically distinct lineages represented by B/Yamagata/16/88 and B/Victoria/2/87 viruses. The updating of the influenza B component to B/Ohio/1/2005 (which is antigenically equivalent to B/Malaysia/2506/2004) represents a change to the B/Victoria lineage. This recommendation was based on antigenic analyses of recently isolated influenza viruses, epidemiologic data, and post-vaccination serologic studies in humans.
Arkansas Influenza Reports:

The Division of Health continues to receive daily reports of influenza activity in Arkansas. To date, all counties have reported either positive cultures and/or antigen results for Influenza A and/or B. Based on the daily reports we receive, influenza season does not appear to be decreasing in most of the state.

If you have any questions please feel free to contact Dr. Sandy Snow at 501-661-2102 or fax to 501-661-2300 or e-mail to ssnow@healthyarkansas.com