



DEPARTMENT OF DEFENSE

AFHSC Influenza Surveillance Summary



29 March 2011

DoD Summary

- In Week 11, ESSENCE counts of total MHS clinic visits for influenza-like-illness (ILI) decreased by 15.6% compared to Week 10 and were 36.5% lower than the peak counts in Week 6.
- Active duty immunization coverage within the DoD is at 96%.

Laboratory Surveillance

United States Air Force School of Aerospace Medicine (Source: global, lab-based military sentinel surveillance)

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- There has been an overall decrease in influenza positives; co-circulating strains are influenza A/H1, A/H3, and B.
- Overall DoD weekly outpatient ILI visit proportions decreased in Week 10 to 5.54% from 5.81% the previous week; this decrease is within the average 8-year trend.

Naval Health Research Center (Source: lab-based recruits, shipboard and border surveillance)

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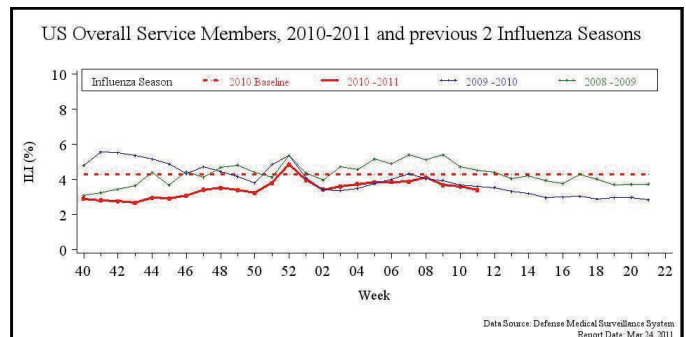
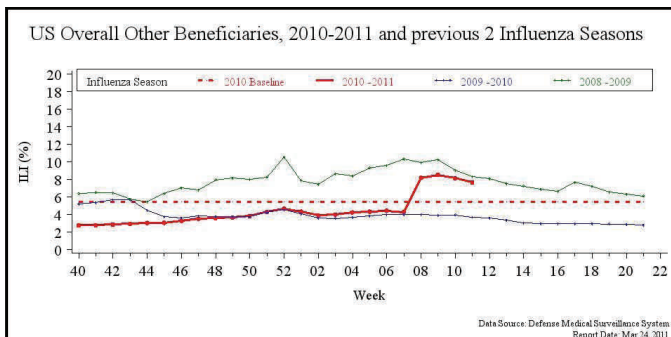
- Continue to see all influenza types with steady percent positive samples. A/H1 predominates among influenza positive recruits.
- Type 4 adenovirus remains the predominant cause of febrile respiratory illness at most recruit training centers.
- Type 14 adenovirus is also present at MCRD Parris Island and MCRD San Diego.

Electronic Surveillance

AFHSC (Source: Defense Medical Surveillance System (DMSS); medical encounter database and reportable events)

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- The percent of all outpatient visits due to ILI decreased this week for all groups except PACOM. Beneficiary populations remained at or above baseline, while service member percents remained below baseline (Graph 1 & 2).



Graph 1: Percent of Servicemember Outpatient Visits with ILI Graph 2: Percent of Servicemember Outpatient Visits with ILI

Global Surveillance Network

DoD Overseas Laboratories:

Continue to see low levels of circulating ILI activity among surveillance sites in West Africa (GVF, Univ. of Buea, USAMRU-K). Moderate influenza activity in East Africa, predominately influenza B and A/H1 (USAMRU-K). Increased ILI activity at surveillance sites in South America with low numbers of specimens positive for influenza (NAMRU-6).

WHO - H5N1: The WHO has reported two additional confirmed cases of human H5N1 during the past two weeks, one case each in Bangladesh and Indonesia, neither case was fatal. The WHO has not confirmed a second reported case from Bangladesh.

Immunization Coverage

(Active Component)	DoD-All*	ARMY	MARINES*	NAVY*	COAST GUARD	AIR FORCE
Seasonal Influenza Vaccine	96%	97%	96%	92%	97%	99%

Sources: DoD ALL-MILVAX, ARMY-MEDPROS, MARINES-MRRS, NAVY-MRRS, COAST GUARD-MRRS, AIRFORCE-AFCITA
*Underestimates due to time lag in reporting systems

AFHSC Suggested Sampling Strategy for Future Surveillance and Monitoring of Influenza Activity at DoD Installations

Samples Collected (Per Week): **6-10** samples from ILI (*Fever $\geq 100.5^{\circ}F$ AND cough or sore throat*) patients seen at representative clinics on a given installation **AND ALL** patients hospitalized with respiratory symptoms or clinically diagnosed pneumonia; or part of case clusters (>5 cases) among high risk groups (*i.e. basic/advanced military trainees; shipboard or deployed service members; health care professionals*)

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