The national influenza surveillance system in New Zealand is an essential public health tool for assessing incidence and trends as well as implementing strategies to control influenza. This report summarises the data collected from sentinel general practice (GP) surveillance and non-sentinel surveillance for week 42 (17 – 23 October 2011).

### SUMMARY OF THIS REPORT:

Influenza-like illness (ILI) through sentinel surveillance was reported in 19 of 20 District Health Boards (DHB) giving an overall national consultation rate of 10.7 per 100 000 (39 ILI consultations). One hundred and sixty-seven swabs were received from sentinel (8) and non-sentinel surveillance (159). Twenty-four viruses were identified from sentinel (2) and non-sentinel surveillance (22). These were: A(H3N2) (15), A (not sub-typed) (5), and B (4).

### INFLUENZA-LIKE ILLNESS SURVEILLANCE

In the past week, a total of 39 consultations for influenza-like illness were reported from 78 general practices in 19 of 20 DHBs. This gives a weekly national consultation rate of 10.7 per 100 000 patient population (lower than the consultation rate of 26.6 per 100 000 in week 41). Figure 1 shows the weekly national consultation rates for 2009, 2010 seasons, and 2011 so far. The current rate of influenza-like illness is below the baseline.

Figure 1: Weekly consultation rates for influenza-like illness in New Zealand, 2009, 2010 and 2011

* A weekly rate <50 ILI consultations per 100 000 patient population is considered baseline activity. A rate of 50–249 is considered indicative of normal seasonal influenza activity, and a rate of 250–399 indicative of higher than expected influenza activity. A rate >400 ILI consultations per 100 000 patient population indicates an epidemic level of influenza activity.
Figure 2 compares the consultation rates for influenza-like illness for each DHB over the past week. South Canterbury DHB (80.9 per 100 000, 6 cases) had the highest consultation rate, followed by Waitemata (28.4 per 100 000, 3 cases) and Canterbury (24.8 per 100 000, 14 cases) DHBs.

![Figure 2: Weekly consultation rates for influenza-like illness by DHB, week ending 23 October 2011](image)

[ ] District health board did not participate for the week.
Figure 3 maps the consultation rates for influenza-like illness by DHB.

**Figure 3: Consultation rates for influenza-like illness mapped by DHB for week 42, 2011**

**Influenza Surveillance NZ Week 42**

**Consultations for influenza-like illness (per 100 000 practice patients)**

- No data
- No activity (0)
- Baseline (<50)
- Normal (50 - 249)
- High activity (250 - 399)
- Epidemic (≥400)

**Code** | **District Health Board**
---------|-------------------------
AK       | Auckland
BP       | Bay of Plenty
CB       | Canterbury
CC       | Capital and Coast
CM       | Counties Manukau
HB       | Hawke's Bay
HU       | Hutt Valley
LS       | Lakes
MC       | MidCentral
NL       | Northland
NM       | Nelson Marlborough
SC       | South Canterbury
SN       | Southern
TK       | Taranaki
TW       | Tairawhiti
WC       | West Coast
WG       | Whanganui
WK       | Waikato
WM       | Waitemata
WR       | Wairarapa
VIROLOGICAL SURVEILLANCE
A total of eight swabs were received by virology laboratories from sentinel surveillance. Of these, two viruses were identified: A(not sub-typed) (1) and A(H3N2) (1). The distribution by DHB is shown in Table 1.

Table 1: Influenza viruses from sentinel surveillance for week 42 by DHB

<table>
<thead>
<tr>
<th>Antigenic Strain</th>
<th>AK</th>
<th>CB</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>A(not sub-typed)</td>
<td>1</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>A(H3N2)</td>
<td>1</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>1</td>
<td>1</td>
<td>2</td>
</tr>
</tbody>
</table>

Figure 4: Total influenza viruses from sentinel surveillance by type and week reported, weeks 18–42 and the total percentage positive from the swabs received

In addition, 159 swabs were received by virology laboratories from non-sentinel surveillance. Of these, 22 viruses were identified: A(H3N2) (14), A(not sub-typed) (4) and B (4) (Figure 5). The distribution by DHB is shown in Table 2.

Table 2: Influenza viruses from non-sentinel surveillance for week 42 by DHB

<table>
<thead>
<tr>
<th>Antigenic Strain</th>
<th>WM</th>
<th>AK</th>
<th>CM</th>
<th>WK</th>
<th>TK</th>
<th>MC</th>
<th>CC</th>
<th>CB</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>A (not sub-typed)</td>
<td>0</td>
<td>1</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>1</td>
<td>0</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>A(H3N2)</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>6</td>
<td>1</td>
</tr>
<tr>
<td>B</td>
<td>0</td>
<td>1</td>
<td>1</td>
<td>5</td>
<td>0</td>
<td>3</td>
<td>5</td>
<td>5</td>
<td>1</td>
</tr>
<tr>
<td>A(H1N1)pdm09</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>2</td>
<td>0</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>1</td>
<td>1</td>
<td>3</td>
<td>7</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>7</td>
<td>22</td>
</tr>
</tbody>
</table>
Figure 5: Total influenza viruses from non-sentinel surveillance by type and week reported, weeks 18–42 and the total percentage positive from the swabs received.

Figure 6 shows the cumulative total of influenza viruses confirmed (sentinel and non-sentinel surveillance) from week 1 to the end of week 42 (23 October 2011). A total of 1244 influenza viruses were identified: influenza B (589) including 264 of B/Brisbane/60/2008 - like viruses and three B/Florida/4/2006 - like virus, A(H1N1)pdm09 (106) including 24 A/California/7/2009 (H1N1) - like virus, A(H3N2) (417) including 191 A/Perth/16/2009 (H3N2) - like virus, and A (not sub-typed) (132). The major circulating influenza strains (B/Brisbane/60/2008 - like, A/California/7/2009 (H1N1) - like and A/Perth/16/2009 (H3N2) - like strains) are covered by the current influenza vaccine.

Figure 6: Cumulative laboratory-confirmed viruses by DHB, weeks 1–42 2011

1 Pandemic A(H1N1)09 is now called A(H1N1)pdm09