1. Summary of the National Adult and Influenza Immunization Summit Call – 9/5/2013

Announcements – L.J Tan (IAC)

L.J welcomed everyone to the first official partner call for the 2013–2014 influenza season. The calls will now return to a routine weekly schedule (each Thursday at 1 p.m. ET) unless partners are notified of a cancellation. Attendees were reminded to please contact either L.J Tan or LaDora Woods if they would like to be added to the agenda to share news about any future events or items of interest.

Influenza Surveillance and H7N9 Update – Scott Epperson (CDC)

Scott reported that, as we would expect, the summer has been quiet for seasonal influenza. The few specimens that have been submitted for testing were a mixture of 2009 H1N1, H3N2, and B strains. Of the 6 B specimens testing positive over the summer, 5 were of the Yamagata lineage and 1 was Victoria, making it difficult to reach any conclusions about what we might anticipate in the coming season. The 2013–2014 season officially begins on September 29.

This summer, only 17 cases of H3N2v have been reported from 4 states. The majority (14/17) of reported cases were in Indiana, while Illinois, Michigan, and Ohio each reported 1 case. Similar to last year, the majority (16/17) of the cases were in children. In general, illness has been mild, with no reported deaths and only 1 hospitalization. In Indiana, the bulk of cases (12/14) had disease onset in late June, and the remaining cases in the other states were identified sporadically during July and early August. There has been no sustained human-to-human transmission. All cases reported exposure to swine within 7 days of disease onset, predominantly at agricultural/state fairs. It is anticipated this will lessen as the fair season winds down throughout the country, but CDC will continue to work closely with state and local health departments to maintain surveillance and conduct appropriate PCR testing.

L.J asked about the current epidemiology of influenza in the Southern Hemisphere. Scott noted that countries in this hemisphere continue to see a mix of viruses and a mix in severity from country to country.

Several partners had questions related to quadrivalent vaccine. In particular, because last season showed about 2/3 of type B specimens were the Yamagata strain and 1/3 were Victoria, it is becoming difficult for providers to operationalize ACIP’s “no preference” statement for quadrivalent over trivalent vaccine. But providers recognize that the number of doses of quadrivalent vaccine anticipated to be available this year is insufficient for the entire population. Carolyn Bridges reminded partners that, although the quadrivalent vaccine provides better coverage, effectiveness data presented at the Summit indicate some level of cross-protection between B strains.
stress with both providers and patients is that ANY influenza vaccine is better than no influenza vaccine, and trivalent vaccine has served us well for many years.

ACIP does not plan to issue additional guidance on the use of quadrivalent vs trivalent vaccine. Partners discussed whether any type for prioritization could be offered to a provider who has both types of vaccine available. Although not an official recommendation, it was suggested that providers might consider using quadrivalent vaccine in younger children (>3 years of age), as they are less likely to have been exposed to both B lineages in the past. Similar considerations might be given for high risk adults. L.J plans to raise these concepts with influenza experts at CDC to determine if any additional information might be forthcoming.

Questions also were raised about the current status of H7N9. To date, there have been no cases outside of China, and only a small proportion of cases (3/144) have been reported since April. Additional H7N9 information is available here.

ACIP Influenza Update – L.J Tan (IAC)

L.J reported that the only new development for influenza vaccine was the mid-August approval of GSK’s FluLaval Quadrivalent vaccine, for use in persons >3 years of age. The ACIP’s influenza recommendations are expected to be published in the MMWR on September 20.

Partner Discussion on sanofi High Dose Vaccine

Participants discussed whether additional information was available related to sanofi’s recently released press release reporting a 24.2% increase in efficacy for persons age 65+ when comparing Fluzone High-Dose vaccine with standard dose vaccine. The press release on this topic was issued on August 26. L.J will determine if someone from sanofi might be available to discuss this issue during a future Summit call.

2. The CDC/Influenza Division Weekly Influenza Surveillance Report for week 35 (ending August 31, 2013) is available here, and region specific data may be viewed here. During week 35, 5.6% of all deaths reported through the 122-Cities Mortality Reporting System were due to P&I. This percentage was below the epidemic threshold of 6.1% for week 35. One new influenza-associated pediatric death was reported to CDC during the reporting week. One death associated with influenza B virus occurred during week 6 (ending February 9, 2013). A total of 161 influenza-associated pediatric deaths have been reported during the 2012–2013 season. Nationwide during week 35, 0.6% of patient visits reported through the U.S. Outpatient Influenza-like Illness Surveillance Network (ILINet) were due to influenza-like illness (ILI). This percentage is below the national baseline of 2.2%. An Influenza Summary Update of the influenza activity reported by state and territorial epidemiologists indicates the geographic spread of influenza viruses, but does not measure the intensity of influenza activity. Archives of previous FluViews are available here.

3. Novel Influenza H3N2v activity

One additional infection with influenza A (H3N2) variant (H3N2v) virus was reported to CDC during week 35 from Michigan. A total of 18 H3N2v cases have been reported this summer in Illinois (2), Indiana (14), Michigan (2), and Ohio (1). So far during 2013, one person has been hospitalized as a result of H3N2v illness; no deaths have occurred. At this time no ongoing human-to-human transmission has been identified and all 18 cases have reported close contact with swine in the week prior to illness onset.

Because of reporting schedules, state totals posted by CDC may not always be consistent with those reported by state health departments. If there is a discrepancy between state and CDC case counts, data from the state health department should be used as the most accurate number.

Early identification and investigation of human infections with novel influenza A viruses is critical in order to evaluate the extent of the outbreak and possible human-to-human transmission. Additional
**Information** on influenza in swine, variant influenza infection in humans, and strategies to interact safely with livestock are available from CDC.

CDC’s **key points** regarding recent human infections with influenza H3N2 variant (H3N2v) virus infections in the United States were released on September 6.

4. **More Information from CDC**

CDC has released a **letter** to health care providers about influenza vaccination. The letter emphasizes that a provider’s recommendation for vaccine is key in a patient’s decision to get vaccinated, and it encourages providers to positively influence influenza vaccination coverage rates for the coming season. CDC hopes that this letter will assist in outreach efforts to health care providers as the flu season draws near.

5. **1st Flu Case Confirmed In Los Angeles County**

The Department of Public Health Monday confirmed Los Angeles County’s **first influenza case** of the season. The strain was identified as Influenza A H1N1, which is covered by this year’s vaccine along with two or three additional strains that research shows could be common this flu season.

6. **Prophylactic and Therapeutic Efficacy Data of VIS410 Against Multiple Influenza Strains**

Preclinical **data** presented recently showed the broadly protective properties of VIS410, a novel engineered human antibody, as an effective preventive and therapeutic investigational agent against influenza A subtypes. In the preclinical study, VIS410 had an additive effect when used in combination with anti-viral drugs in the treatment of influenza.

7. **New Product Created from National Influenza Vaccination Disparities Partnership**

A **new technology** is showing promise as the basis for a much-needed home test to diagnose influenza quickly, before the window for taking antiviral drugs slams shut and sick people spread the virus to others. Such a fast, inexpensive diagnostic test — similar to the quick throat swabs for strep throat and to home pregnancy tests — is especially important for flu.

8. **Patch Allows Potential Self-Administration of Vaccines!**

In a new **study** published in the September issue of *Clinical and Vaccine Immunology*, researchers reported that mice given a single influenza vaccine dose demonstrated 100 percent protection against infection with an influenza virus 14 months later. The researchers coat the microneedles with dry virus-like particles and a stabilizing agent, so that it doesn’t necessarily need to be refrigerated. When the patch is placed on the skin, the microneedles, which are seven-tenths of a millimeter in length, dissolve into the skin and disperse the vaccine. Additional information is available here.

9. **Influenza Shots May Reduce Risk of Heart Attacks for High Risk Groups**

Researchers reviewed 239 observational studies between 1918 and 2011, looking at risk factors for complications of influenza including developing pneumonia or needing ventilatory support, admission to hospital or its intensive care unit or dying. Their **study** suggests that while influenza itself did not increase the risk of a heart attack, the jab itself appeared to have a protective effect, reducing the chance of a heart attack by 45 per cent.
10. New Moms And Obese People May Be At Increased Risk For Influenza

New mothers and obese people may be at an increased risk for complications stemming from influenza, according to a new study from researchers at McMaster University in Canada.

Researchers examined data collected as part of 239 observation studies carried out between 1918 and 2011. They found that pregnant women and the obese were both at significantly increased risks of death and other severe complications linked with a bout of influenza. The report, which was conducted by McMaster University and published online in the journal of the British Medical Association, also found that ethnic minorities and pregnant women did not have more complicated influenza and would not require priority vaccination.

11. Some Teen Vaccination Rates Approach National Targets

Coverage rates among teenagers with the tetanus, diphtheria, and acellular pertussis (Tdap) vaccine and the meningococcal conjugate (MenACWY) vaccine are nearing national targets, while coverage with the human papillomavirus (HPV) vaccine remains low, according to a report published on August 30, 2013, in the Centers for Disease Control and Prevention’s Morbidity and Mortality Weekly Report (MMWR). Additional information may be viewed here.

12. Upcoming Clinician Outreach and Communication Activity (COCA) Call/Webinar: Protecting Children at Highest Risk for Influenza Complications

**Date:** Tuesday, September 24, 2013  
**Time:** 2:00 - 3:00 pm (Eastern Time)  
**Dial In Number:** 888-233-9077  
**Passcode:** 3873879

**Webinar:** Children with chronic medical conditions, including asthma, diabetes, and neurologic and neurodevelopmental disorders, are at higher risk for influenza-associated complications. Using antiviral therapies early and aggressively in these vulnerable children can lessen the impact of influenza infection. Clinicians have a critical role in taking action to immunize these children and their close contacts. During this COCA Call, subject matter experts from CDC and the American Academy of Pediatrics will discuss strategies that primary care providers and medical subspecialists can use in partnership with parents to improve influenza prevention and control in children at highest risk. Continuing Education credit is available. Click here for additional information.

13. Stay in Touch with Families Fighting Flu (FFF)

Stay in-the-know on all things FFF! Sign-up now to receive the group’s newsletter, Fighting Influenza – Official News from Families Fighting Flu.

Receive a report of top influenza news from a variety of national and local news sources by submitting your e-mail address here. These e-mails are sent daily September through at least April, and weekly during the late spring and summer months.

14. NFID Flu Season Awareness Night at Washington Nationals: 9/16/13

To help spread the word about the importance of annual flu vaccination, NFID is sponsoring the 2nd Annual Flu Season Awareness Night at the Washington Nationals game in Washington, DC vs. the Atlanta Braves on September 16, 2013. Tickets within the reserved group of discounted field level seats may be purchased online (until September 12), with a portion of ticket sales being donated to NFID.
Planned activities at the game include the following:

- NFID public service announcement “Are You That Guy?” showing on the Jumbotron prior to the start of the game;
- Scoreboard welcome message between 4th and 5th innings;
- Staff at the community kiosk inside the stadium distributing educational materials and vouchers for those receiving flu vaccines at Harris Teeter stores;
- Special guest appearance and photo opportunity with the Flu Bugs at the community kiosk.

15. Scientists Find Possible Human Bird Flu Link

Chinese scientists have discovered that a type of H7N9 bird flu can bind with a human receptor, which explains how the virus can infect human beings. Research focused on how H7N9 infected human beings, examining the two earliest reported virus types, known as isolates. These were SH-H7N9 and AH-H7N9, discovered in Shanghai Municipality and Anhui Province respectively. Researchers found that SH-H7N9 reported in Shanghai preferentially binds the avian receptor analog, whereas the AH-H7N9 from Anhui Province binds both avian and human receptor analogs. Additional information is available in Science.

16. Surveillance for Avian Influenza A(H7N9), Beijing, China, 2013

Surveillance for pneumonia with an unknown cause and sentinel hospital-based surveillance in Beijing helped detect four cases of novel H7N9 avian flu, health officials from the city reported yesterday in Emerging Infectious Diseases. These cases were reported previously by Chinese officials, but the report offers new details. A news article on this story is available from CIDRAP.

17. Novel Avian Influenza A Virus has Potential for Both Virulence and Transmissibility in Humans

A new study has found that a novel avian-origin H7N9 influenza A virus, which has recently emerged in humans, attaches moderately or abundantly to the epithelium of both the upper and lower respiratory tracts. This pattern has not been observed before for avian influenza A viruses. The report, published in the October issue of The American Journal of Pathology, suggests that the emerging H7N9 virus has the potential to cause a pandemic, since it may transmit efficiently in humans and cause severe pneumonia.

18. IV Zanamivir Safe, Reduced Virus Load in Severe Influenza

Intravenous zanamivir was safe and reduced virus load among adults hospitalized with severe influenza, according to recent data. “Oseltamivir and zanamivir are approved for the treatment and prophylaxis of acute uncomplicated influenza,” the researchers wrote in the Journal of Infectious Diseases. An additional news story is available here.

19. Don’t Forget to Update and Submit to the New Adult Vaccine Locator!

The new Adult Vaccine Finder is now available! Please forward the following information to immunization providers with whom you work!

**Attention Immunization Providers:** If you are interested in letting the public know about vaccines offered at your practice or clinic, go to http://vaccine.healthmap.org. This site already includes more than 54,000 locations that provide flu shots and has provided this information to 500,000 users from the general public. On January 28, 2013, the site expanded to include 10 additional adult vaccines. If you want to register your location on this website, click on the “about” button on the top right hand side and follow the prompts to register, or go to https://flushot.healthmap.org/admin/signup.
20. **Summit Website Offers Wonderful Resources on Influenza Vaccination!**

   Remember to visit the Summit [website](#) for the latest on influenza immunization resources and to view archived copies of the weekly updates.