

# Off-Season (May – September) Influenza Surveillance and Novel/Variant Influenza Guidance for Michigan Local Health Departments, Healthcare Providers, and Laboratories

## Background

- While influenza activity is monitored regularly from October through April, it is important to continue surveillance for off-season, or summertime, activity from May-September.
- Michigan Department of Health and Human Services (MDHHS) recommends year-round surveillance activities for rapid detection of potential novel or variant strains.
- Cases of influenza that occur off-season may be atypical, severe, or novel strains. Additional information may be found here: [https://www.cdc.gov/flu/other\\_flu.htm](https://www.cdc.gov/flu/other_flu.htm)

## Clinical Description – Variant Influenza

Clinical characteristics of variant influenza infection are usually similar to symptoms of uncomplicated seasonal influenza, including fever, cough, pharyngitis, rhinorrhea, myalgia, and headache. Vomiting, diarrhea and conjunctivitis have also been reported in some pediatric cases. Milder illness is possible, including lack of fever. Duration of illness is typically up to a week but may be longer. As with seasonal flu, those at higher risk for flu-related complications may develop more serious illness.

## Laboratory Testing

- **Off-season testing:**
  - Due to low positive predictive values of rapid influenza diagnostic tests (i.e., false positives) during times of low influenza prevalence in the community (like in summer months), confirmatory testing necessary.
  - Healthcare providers (HCPs) are asked to submit rapid-test positive specimens (or negative specimens) from patients with a high clinical index of suspicion for influenza during the off-season to MDHHS Bureau of Laboratories (BOL).
  - LHDs should facilitate specimen submission to MDHHS BOL for confirmatory lab testing of all off-season influenza cases.
- **Novel or variant strain testing:**
  - ALL suspected novel or variant strain influenza cases (such as H3N2v) should be tested for influenza, with arrangements to include testing at MDHHS BOL. Commercially available rapid influenza diagnostic tests (RIDTs) **may not** detect H3N2v or other variant influenza viruses in respiratory specimens.
  - PCR testing available at private, clinical, and hospital labs will most likely detect the presence of influenza A virus infection, but may not differentiate a variant influenza infection.
  - Testing to confirm variant influenza virus infection must be performed at the MDHHS BOL.

Contact MDHHS to assist with coordination of influenza testing through BOL. Information on how to collect and submit specimens to BOL, including the required Test Requisition form, can be found at: [http://www.michigan.gov/mdhhs/0,5885,7-339-71551\\_2945\\_5103-213906--,00.html](http://www.michigan.gov/mdhhs/0,5885,7-339-71551_2945_5103-213906--,00.html)

## Case Reporting

During the off-season (May-September), cases should be reported using the **individual** influenza case report in MDSS. During the influenza season (October-April) the aggregate report form in MDSS should be used to report weekly counts of influenza. Individual cases may also be reported in MDSS during the influenza season.

When investigating off-season influenza cases, make sure to collect the following:

- Any travel history (including international travel) within the two weeks prior to onset.
- Exposure to swine (such as at county fairs or expos)
- Exposure to poultry and waterfowl

### **Recommended reporting for off-season (May-September) cases:**

- **Healthcare Providers and Laboratorians:**
  - Individually report all influenza cases identified and include the following information: hospital admission date, laboratories findings, symptoms, co-morbidities, pregnancy status, treatment, and outcome (discharged or death).
- **Local Health Departments:**
  - Individually report into MDSS and obtain additional epidemiologic information on all influenza cases identified. Collect the following information: hospital admission date, laboratories findings, symptoms, co-morbidities, pregnancy status, treatment, and outcome (discharged or death).

### **Required reporting for suspect cases of novel or variant influenza strains:**

- **Healthcare Providers and laboratories:**
  - For novel/variant strains (e.g. avian or swine influenza), immediately notify your local health department or MDHHS at 517-335-8165 or after hours at 517-335-9030.
  - Enter case on the “Novel Influenza” form in MDSS and fill out the case details form.
- **Local Health Departments:**
  - Notify MDHHS immediately for avian influenza cases or other novel/variant strains, call 517-335-8165 or after hours 517-335-9030.
  - Enter case on the “Novel Influenza” in MDSS and fill out the case details form.

## Outbreaks

Clusters of illness, including respiratory-like illness, are required to be reported under the Michigan Public Health Code. This includes cluster of illnesses in congregate settings like a day care, summer school, or dormitory, and institutional settings such as assisted living facility and skilled care facility.

- Use the MDSS Aggregate Form to collect information from the facility outbreak.
- If there is more than one case from a congregate setting, details of the individual cases can be inputted into the notes section of the MDSS Aggregate Form. However, if only one case is reported for the congregate setting with no further transmission, those cases should be reported individually.