

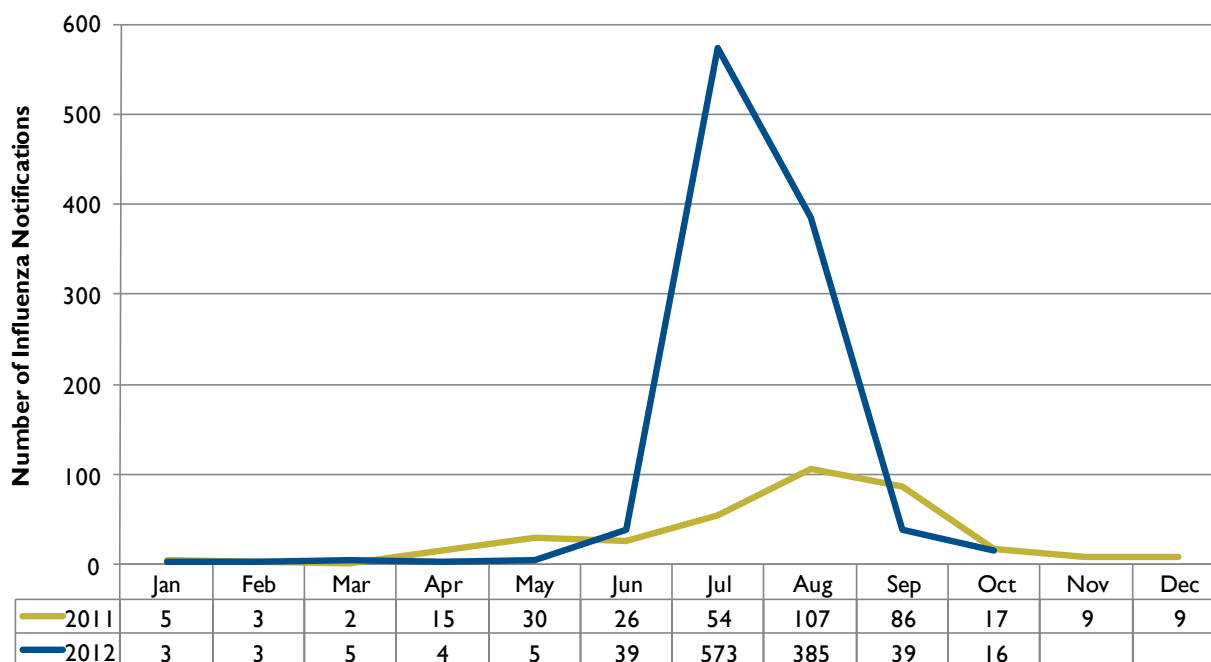
**Summary**

- Influenza was uncommon in Tasmania during October 2012, with Influenza A accounting for two-thirds of notifications.
- This is the final fortnightly report for 2012. A summary report for all of 2012 will be released in the coming weeks.

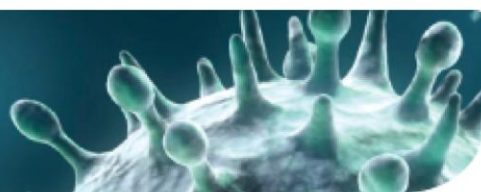
**Influenza notifications**

Tasmanian laboratories are required to notify evidence of influenza infection in specimens collected from patients. These specimens are usually nose or throat swabs but sometimes blood tests.

**Influenza notifications 2011–12 (at 28 October 2012)**



Fourteen influenza notifications were received during the 3 weeks from the last report to Sunday 28 October 2012. This low level of activity is typical outside of the peak season, when there is limited circulation of influenza in the community.



### Geographic distribution of Influenza

Differences in notifications for the year to date may not reflect the different level of influenza between regions. Apart from differences in regional populations, this is also affected by how many people seek medical care and get tested for influenza.

**Location of influenza notifications 2012 (at 28 October 2012)**

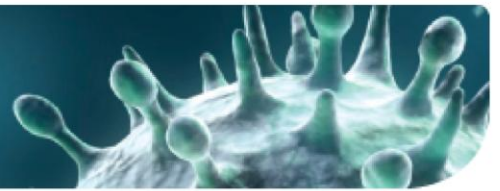
	SOUTH	NORTH	NORTH WEST	TOTAL
<b>Notifications</b>	<b>841</b>	<b>135</b>	<b>96</b>	<b>1072</b>

### Influenza types

During the 3 weeks to 28 October 2012, 9 influenza A notifications and 5 influenza B notification were received.

**Influenza type in confirmed cases 2012 (at 28 October 2012)**

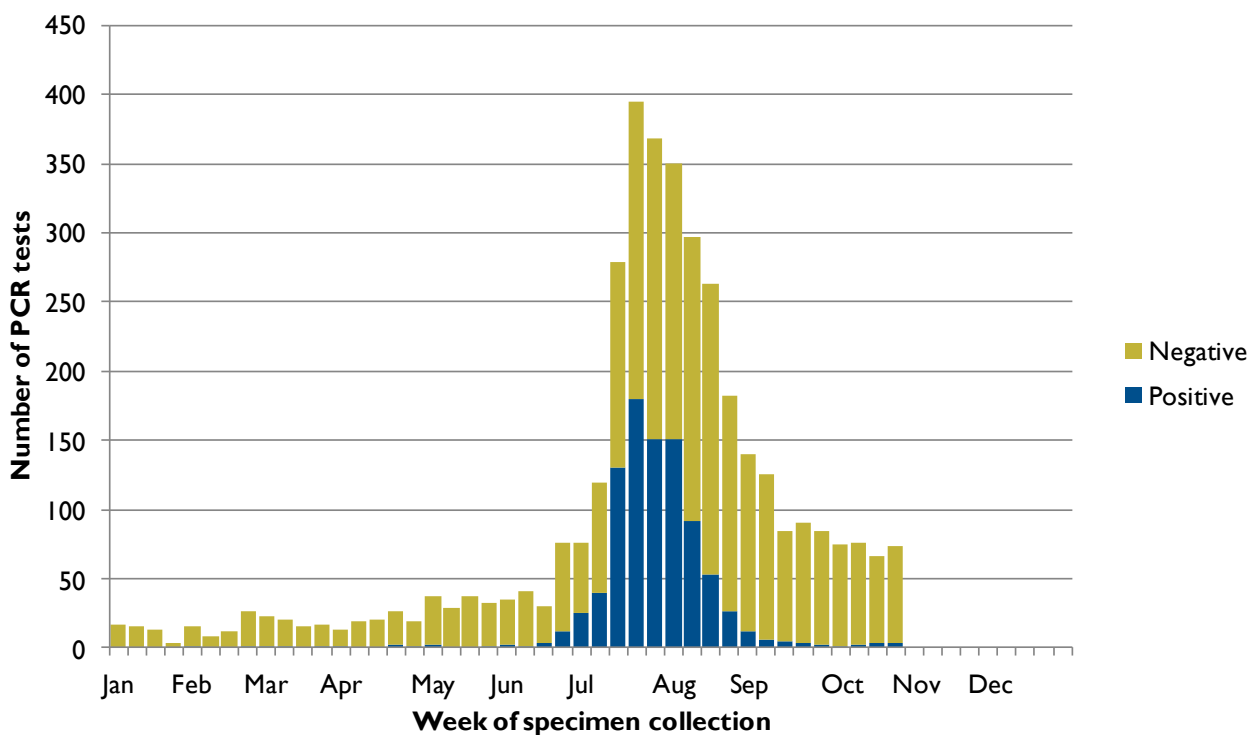
	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	TOTAL
<b>Influenza A</b>	<b>3</b>	<b>2</b>	<b>5</b>	<b>1</b>	<b>3</b>	<b>36</b>	<b>566</b>	<b>352</b>	<b>21</b>	<b>11</b>			<b>1000</b>
<b>Influenza B</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>3</b>	<b>2</b>	<b>3</b>	<b>7</b>	<b>33</b>	<b>18</b>	<b>5</b>			<b>72</b>



**Laboratory testing**

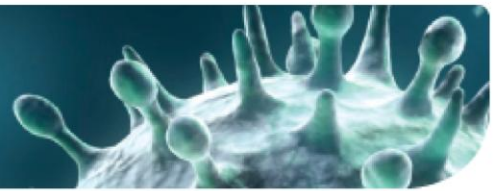
A wide range of infectious germs (mostly viruses) commonly cause winter coughs, colds and influenza-like illnesses. Some people with these symptoms will visit their doctor. The decision whether to test someone for influenza rests with their treating doctor, and depends on their symptoms. The best test for influenza is a PCR test, which detects influenza virus RNA in a nose or throat swab. The number of these tests being performed in Tasmanian laboratories is a useful indicator of the level of respiratory illness in the community.

**Influenza PCR testing effort and positivity 2012 (at 28 October 2012)**



The number of weekly influenza PCR tests remains stable. While the number of tests is greater than during the period before the peak flu season, the number and proportion now positive for influenza is very small.

Some laboratories perform additional PCR tests on nose and throat swabs to detect the other non-influenza respiratory pathogens which cause illness. Since September respiratory pathogens other than influenza have been detected more frequently than influenza A or B; these include rhinovirus, RSV, and metapneumovirus.



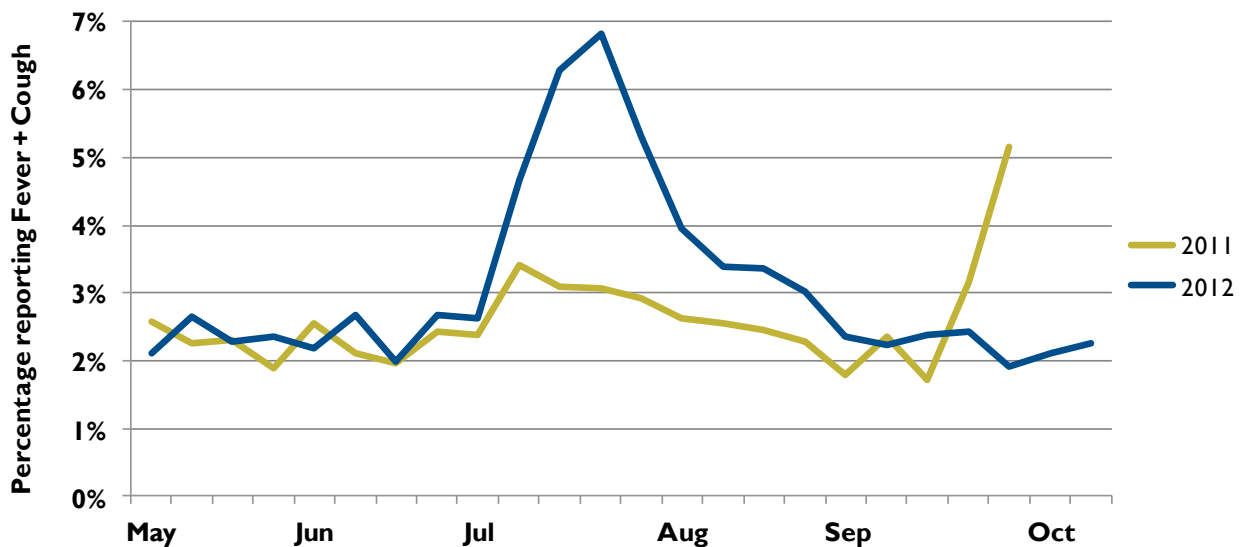
### Influenza-like illnesses (Syndromic Surveillance)

Influenza-like illness (ILI) is much more common than microbiologically confirmed influenza. For much of the year, common colds and other respiratory illnesses make up most of the ILI occurring in the community. However, during the annual influenza season, the proportion of the population experiencing symptoms of ILI usually increases. It is therefore useful to monitor the proportion of people reporting ILI, regardless of the cause.

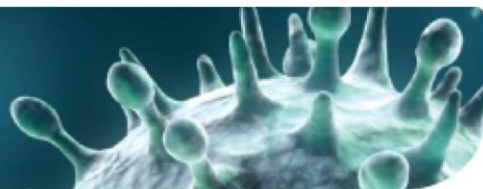
#### FluTracking

FluTracking is a weekly online survey that asks participants to report whether they have had fever and cough in the preceding week. It is a joint initiative of Newcastle University, Hunter New England Population Health and the Hunter Medical Research Institute. For more information, go to [www.flutracking.net](http://www.flutracking.net).

#### 2012 FluTracking – Tasmanians reporting symptoms “fever and cough” (up to 14 October 2012)



FluTracking 2012 concluded the week ending Sunday 14 October 2012.



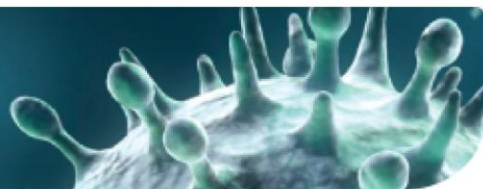
### General practice surveillance

ASPREN is a network of registered sentinel GPs throughout the state who report fortnightly on the number and proportion of presentations of patients with fever, cough and fatigue. ASPREN is a joint initiative of the Royal Australian College of General Practitioners and University of Adelaide: [www.dmac.adelaide.edu.au/aspren](http://www.dmac.adelaide.edu.au/aspren).

Tasmanian data from participating General Practices up to the fortnight ending 30 September indicated that the level of influenza-like illness presentations remained low. This trend is consistent with a return to low influenza activity evident through other surveillance mechanisms at that time.

### Interstate activity

Throughout Australia influenza continued to decrease or had returned to 'background' levels. The Australian Influenza Report compiles information from a wide range of sources. The final report for 2012 is available at <http://www.health.gov.au/internet/main/publishing.nsf/Content/cda-surveil-ozflu-flucurr.htm>.



## Annual Influenza Vaccine

The contents of the annual influenza vaccine are reviewed late each year, aiming to have vaccines produced for the following year that provide protection from the strains of influenza that are likely to be common during winter. The recommended formulation of the 2013 vaccine includes two significant changes from the vaccines used in 2011 and 2012. These are described at <http://www.tga.gov.au/about/committees-aivc.htm>.

Annual vaccination is recommended and is free\* for Tasmanians at risk of severe influenza, including:

- anyone aged 65 and over
- Indigenous people who are aged 15 years or over
- pregnant women
- any person six months of age and over with a chronic condition predisposing to severe influenza illness that requires regular medical follow-up or hospitalisation such as: cardiac disease, respiratory disease including severe asthmatics, kidney disease, diabetes, impaired immunity, neuromuscular disease.

\* The cost of the vaccine is covered for these groups; there may be a consultation fee for the medical provider to administer the vaccine.

## Help prevent the spread of flu and other respiratory viruses

Flu and other respiratory viruses are easily passed from person to person through the air when infected people cough or sneeze without covering their mouths or noses. As well as getting the seasonal flu vaccination, there are some basic things you can do to help prevent the spread of flu and other respiratory viruses.



Wash your hands regularly, especially before touching your face, food or utensils.



If you do get sick, please don't share it – cover your mouth when you cough or sneeze with the inside of your elbow. If you cover a cough or sneeze with your hands, remember to wash your hands afterwards.



Stay away from work or school if you are ill.



The **fluTAS Report** is a fortnightly flu season update produced by the Public and Environmental Health Service to inform healthcare organisations and the public about the current level of flu activity in Tasmania.

Alongside routine surveillance of diseases in Tasmania, the report combines multiple data sources to obtain a measure of flu activity in the community, which can be used by our health system to prepare and respond.

To provide feedback on the fluTAS Report, email the [Communicable Disease Prevention Unit](#) or call the Public Health Hotline on 1800 671 738.