The “Flu” season

The California Department of Public Health reports overall influenza activity as “sporadic” during the week ending December 3. During the first two months of the new “Flu” season that began October 2, the San Luis Obispo County Public Health Laboratory (SLO PHL) has detected exclusively Type A H3, by reverse transcription PCR. Of all tests for Influenza virus, 29% have been positive for Type A H3, while the pandemic strain Type A H1N1 has not been detected, nor has Influenza Type B.

This year SLO PHL has been able to expand surveillance for other respiratory viruses using the Respiratory Agents PCR Panel or RP. While the total number of specimens analyzed thus far is limited, 25% have been positive for Rhinovirus/Enterovirus. These two groups of viruses are so closely related, additional PCR testing would be necessary to discriminate between them.

At this time of year, colds are common so one can assume that Rhinovirus—one of the most common cold viruses is the causative agent. What is unusual is that more than half of the individuals infected with a rhinovirus were reported as a hospital admission. However, since nearly 90% of surveillance specimens are submitted by hospitals, the fact of patients being in a hospital inpatient setting for a mere ‘cold’ is likely more reflective of patients with the most severe symptoms seeking emergency room care, than a finding of a particularly virulent rhinovirus circulating in the community. We have also detected coronavirus and parainfluenza virus type 3, also referred to as ‘cold’ viruses.

Influenza virus remains the primary concern, and given that widespread transmission has not yet been seen, vaccination is remains the best defense and is widely available. Though influenza virus has the potential for genetic mutation during the flu season, significant variants have not been detected in the U.S. this year. Avian influenza Type A H7N9 has also been causing human cases of influenza infection, especially in China. This virus, discovered in 2013, does not appear to transmit easily from person-to-person, and seems to be associated with live bird markets.

Another respiratory virus to watch for is respiratory syncytial virus, or RSV, an important cause of infection in infants and children detectable by the RP panel. RSV often causes infection in winter and early spring in the U.S.

For viral surveillance, selected specimens from hospitalized patients who have tested negative for influenza virus are being tested with the Respiratory Pathogen PCR panel. The SLO PHL is soliciting the submission of specimens (naso-pharyngeal swab in M4 Viral transport medium; Influenza RT-PCR, Test # 50000) for seasonal influenza virus surveillance without charge. Note: These specimens can also by “reflexed” to a Respiratory PCR Panel (Test # 6310) in the event of a negative influenza test result.

Hospitals are being asked to submit specimens from patients who are hospitalized with influenza-like illness (ILI) and/or placed in an ICU — regardless of rapid test result.

Outpatient Health Care Providers are requested to submit specimens from patients with ILI and a positive rapid influenza test.

Questions on laboratory testing? Call (805) 781-5507
SAVE THE DATE - Laboratory Workshop on Agents of Bioterrorism

The San Luis Obispo County Public Health Laboratory will be hosting a “wet” workshop on agents of bioterrorism on March 25th, 2017 at Cal Poly in San Luis Obispo. You will learn, as sentinel lab personnel, proper rule-out and referral protocols through a series of lectures and a practical, hands-on section. Best yet, you can earn 7 CEUs offered through The California Association of Public Health Laboratory Directors. For more information, contact Kyllie Bouget at 805-781-5507 or kbouget@co.slo.ca.us

Happy holidays for the Staff at the San Luis Obispo County Public Health Laboratory!