INTRODUCTION
150 kids sick at St. Francis Preparatory School in Queens

BY CLARE TRAPASSO
DAILY NEWS STAFF WRITER

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A mysterious illness has gripped the nation’s largest Catholic high school.

About 150 students were sent home from St. Francis Preparatory School in Queens on Thursday and Friday after developing flu-like symptoms, officials said.

The Health Department was testing students to rule out whether it was a strain of swine flu that has killed 60 people in Mexico.

"Whatever it was moved quickly through the student body," Assistant Principal Patrick McLaughlin said.

Similar illnesses gripped large numbers of students at Edmund W. Miles Middle School, in Amityville, L.I., and Horace Greeley High School, in Chappaqua, N.Y., last week, school officials there confirmed. Students recovered quickly, they said.

The school will be sanitized over the weekend, McLaughlin said.
Preparatory school (Queens) 2698 students and 247 staff members.
April 23-24: 222 visits to the school nurse.
74% of students / 85% staff were surveyed:

- School closed over the weekend.
- 7 of 9 specimens collected confirmed as A H1N1
One in seven New Yorkers (6.9%) reported having symptoms consistent with flu-like illness during the first three weeks of May.

Prevalence of flu-like illness during May was highest among children (11.7%) and lowest among older adults (4.3%).
NYS and NYC: Virus circulating at very high levels for this time of year:

<table>
<thead>
<tr>
<th>NYS-DOH WADSWORTH CENTER</th>
<th>Novel Influenza A (H1N1)</th>
<th>Seasonal Influenza A (H3N2)</th>
<th>Seasonal Influenza A (H1N1)</th>
<th>Seasonal Influenza B</th>
</tr>
</thead>
<tbody>
<tr>
<td>n=272</td>
<td>89%</td>
<td>9%</td>
<td>2%</td>
<td>0.4%</td>
</tr>
<tr>
<td>MAY 17TH- JUN 6</td>
<td></td>
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</tr>
</tbody>
</table>

*Number of cases as of June 26th 2009*
Rate of Influenza-like Illness (ILI) Syndrome Visits (based on chief complaint) to NYC Emergency Departments by Age Group

April 01, 2009 - June 22, 2009

- ages 0-4
- ages 5-17
- ages 18-64
- ages 65+
Laboratory Confirmed H1N1 Hospital Admissions and Emergency Department (ED) Visits for Influenza-like Illness (ILI) in NYC
April 26 - June 22, 2009

H1N1 Admissions
ED ILI Visits

Date of ED Visits or Hospital Admission
CONFIRMED AND PROBABLE CASES NOVEL INFLUENZA A (H1N1), NYC THROUGH JUNE 26

<table>
<thead>
<tr>
<th><strong>As of June 26th 2009</strong></th>
<th>Total cases in U.S.A.</th>
<th>Total cases New York State</th>
<th>Total cases New York City</th>
</tr>
</thead>
<tbody>
<tr>
<td>Confirmed and probable influenza A (H1N1)</td>
<td>27,717</td>
<td>2,272</td>
<td>1,149</td>
</tr>
<tr>
<td>Deaths from Influenza A (H1N1)</td>
<td>127</td>
<td>35</td>
<td>32</td>
</tr>
</tbody>
</table>

CDC Website, Novel H1N1 Situation Update 6/29/09
## RISK FACTORS FOR SEVERE ILLNESS AMONG NEW YORKERS WHO DIED FROM A H1N1 INFLUENZA

<table>
<thead>
<tr>
<th>RISK FACTOR</th>
<th>Number of Deaths</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Asthma or other respiratory condition</td>
<td>8</td>
<td>25</td>
</tr>
<tr>
<td>Diabetes</td>
<td>7</td>
<td>22</td>
</tr>
<tr>
<td>Heart disease</td>
<td>6</td>
<td>19</td>
</tr>
<tr>
<td>Immune deficiency</td>
<td>9</td>
<td>28</td>
</tr>
</tbody>
</table>

*Patients with multiple risk factors may be included in more than 1 category.

*Does not include risk factors identified in fewer than 6 patients.
Memorial Sloan-Kettering Cancer Center

One of the 2 most important cancer centers in the USA.

Patient care, Education and Research.

Adult and Pediatric referral center.

22,000 admissions and 450,000 outpatient visits last year

450 beds
INFLUENZA A (H1N1): THE MSKCC EXPERIENCE

• 42 pts tested (+) for Novel Influenza A of 250 tested
• Age 35 (3-80)
• 12 (33%) required hospitalization
• No deaths from flu; disease usually was mild

Most common symptoms:
- Cough and fever: 95% of patients.
- Hypothermia in 2 patients.
- Nasal congestion, sore throat.

One patient required ICU.

6 patients diagnosed by PCR only.
## Diagnostic Testing

<table>
<thead>
<tr>
<th>Test</th>
<th>Turnaround time</th>
<th>Sensitivity</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rapid EIA</td>
<td>&lt; 2 hours</td>
<td>50%</td>
</tr>
<tr>
<td>DFA</td>
<td>4-6 hours</td>
<td>65%</td>
</tr>
<tr>
<td>Viral culture</td>
<td>3-5 days</td>
<td>80%</td>
</tr>
<tr>
<td>PCR</td>
<td>6-8 hours</td>
<td>100%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>EIA</th>
<th>DFA</th>
<th>Culture</th>
<th>PCR</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number</td>
<td>24</td>
<td>41</td>
<td>42</td>
</tr>
<tr>
<td>% (+)</td>
<td>62.5</td>
<td>65.1</td>
<td>83.3</td>
</tr>
</tbody>
</table>
67 y/o WF
History of Pituitary NE tumor
Temozolamide 3 months ago
3 days after VP-16/Carboplatin: cough, dyspnea, fever
First test for Influenza EIA/DFA/Culture Negative
Hospital day 7

2\textsuperscript{nd} Influenza test DFA (-), culture (+) for Influenza A H1N1
CONCLUSIONS: NYC AND MSKCC

• Population aged >65 years did not seem to be a major target of current pandemic.
• Preliminary tests (EIA, DFA) may be negative initially.
• Immunocompromised patients at MSKCC did not have substantial morbidity and had no mortality from Novel Influenza H1N1.
• Closing schools was not effective in containing spread of the virus in New York City. May be necessary again/in other more virulent epidemics.
ACKNOWLEDGEMENTS

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