



# PHILLY FLU FINDINGS

Philadelphia Department of Public Health  
 Seasonal Influenza Surveillance Report  
 Week 46: November 13-19 2016

## Philadelphia Influenza Activity

Please note these data are provisional and subject to change.

There were no hospitalized influenza cases that met the case definition (Philadelphia resident, hospitalized for ≥ 24 hours, positive by rapid test, PCR, or culture). Two laboratory-confirmed influenza illnesses were reported last week, an increase from the previous week. Influenza-like illnesses at emergency departments and pediatric ambulatory clinics increased last week. No influenza deaths have been reported this season. Respiratory Syncytial Virus (RSV) and rhinovirus detections increased in frequency during week 46, with rhinovirus predominating at participating clinical laboratories. Parainfluenza 2 and adenovirus were two non-influenza respiratory viruses detected in clinical specimens.

Surveillance type	Compared to week of 11/6–11/12	Compared to 3-yr seasonal mean
Hospital ED Fever/flu visits	↑	↓
Pediatric Clinics ILI	↑	—
Laboratory Influenza Surveillance	↑	↓

↑ = above 10 % of comparison group  
 — = equivalent to comparison group (-10% to +10%)  
 ↓ = below 10 % of comparison group

## What's New With Flu?

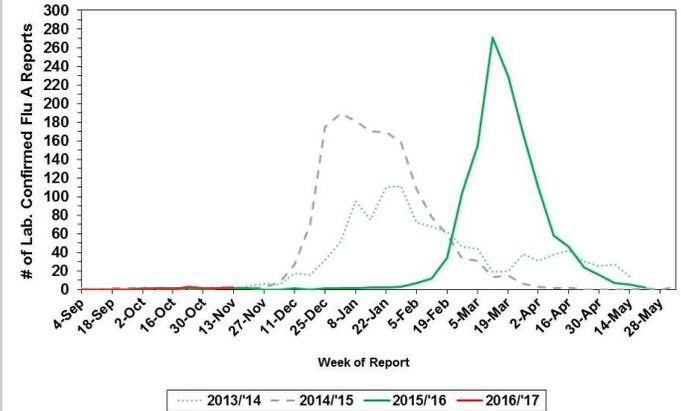
### What viruses do the 2016-2017 flu vaccines prevent?

This year, the flu vaccines have been updated to better match circulating viruses. For the 2016-2017 flu season (Northern Hemisphere winter), the flu vaccine protects against three viruses: A/California/7/2009 (h1N1) pdm09-like virus, A/Hong Kong/4801/2014 (H3N2)-like virus, and a B/Brisbane/60/2008-like virus (B/Victoria lineage). There is also a four-component vaccine that protects against the three viruses listed, as well as an additional B virus named B/Phuket/3073/2013-like virus (B/Yamagata lineage).

For more information please visit: <http://www.cdc.gov/flu/about/season/flu-season-2016-2017.htm>

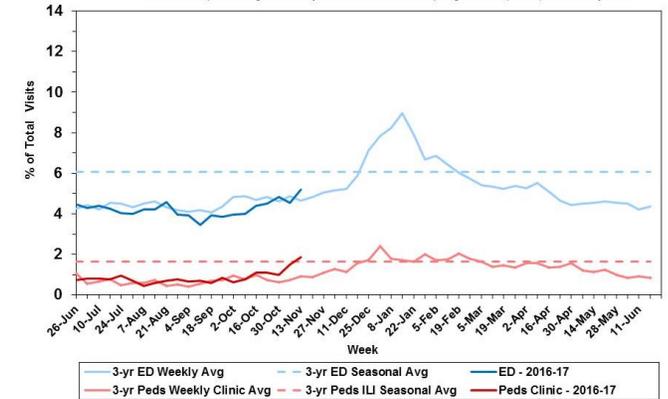
## Laboratory-Based Surveillance for Influenza A Philadelphia, 2013/2014 through 2016/2017 Seasons\*

\*Based on select hospital laboratories participating in surveillance across respiratory virus seasons



## Influenza-like Illness at Philadelphia Emergency Departments and Pediatric Ambulatory Clinics, 2016-17 Data Compared to 3-Year Historical Weekly\* and Seasonal\*\* Averages

\*Weekly average of values from 2011, 2013, and 2014 years  
 \*\*Overall sample average of weekly data from winters & springs of 2011, 2013, and 2014 years



## Pennsylvania

Pennsylvania's flu activity is low and sporadic. From 10/02/16 to 11/12/16, there were a total of 266 flu cases (positive by rapid test, PCR, or culture). Influenza A made up 184 (69.2%) of the total cases, and Influenza B made up 82 (30.8%) of the total cases. There were 64 cases of flu during week 46, an increase in 16 cases from week 45. Influenza A/H3 made up 76.9% of the season-to-date influenza subtyping results from state public health labs followed by Influenza A/pH1N1 at 15.4% and Influenza B/Victoria at 7.7%. There were no influenza related deaths or pediatric deaths from flu.

## United States

Flu activity increased slightly during week 46, but remains low across the U.S. The percentage of respiratory specimens that tested positive for influenza was low for clinical laboratories. A total of 14,030 specimens were tested at clinical laboratories, 385 specimens tested positive for influenza and 273 (70.9%) specimens tested positive for influenza A. Of the 75 positive specimens (out of 651) that tested positive in public health laboratories, 73 (97.3%) tested positive for Influenza A and 2 (2.7%) specimens tested positive for Influenza B. Influenza A/H3 was the most frequently identified influenza virus that was reported by public health labs with 57 (78.1%). One human infection with a novel Influenza A (H1N2) variant virus was reported by Iowa. The patient reported close contact with swine a week prior to contracting the illness. No human-to-human transmission has been reported. No viruses are resistant to oseltamivir, zanamivir, and peramivir. No influenza-associated pediatric deaths were reported. The proportion of people visiting their health care provider for influenza like illness (ILI) was 1.6%, which is below the national baseline of 2.2 %. DE, NJ, and PA experienced minimal ILI activity along with New York City and 45 other states. Guam, PR and the U.S. Virgin Islands reported regional influenza activity. Eleven states reported local influenza activities. Three states reported no activity. DE, NJ and PA also reported sporadic flu activity along with D.C. and 33 other states. There were 2 laboratory-confirmed case of influenza among DE residents. No specimens tested positive for influenza in NJ.

**All institutional outbreaks and hospitalized and fatal cases of influenza are to be reported to PDPH.**

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