

PHILLY FLU FINDINGS

Philadelphia Department of Public Health Seasonal Influenza Surveillance Report Week 47: November 20-26 2016

300

Philadelphia Influenza Activity

Please note these data are provisional and subject to change.

Flu & You People At High Risk of Flu Complications

There are certain health conditions that cause individuals to

complications, such as pneumonia. Flu can cause long term health conditions like asthma and congestive heart failure to

be at high risk for developing complications from the flu. Asthma, diabetes, and chronic heart disease are the most common illnesses that pose a threat for serious flu

worsen. Flu raises blood sugar levels, and can make it difficult for diabetic (Type 1 and 2) patients to fight the flu

since they are immunocompromised. People who are at

high risk for developing flu complications should receive a

flu vaccine since it is the most effective way to prevent the

(asthma, diabetes, chronic heart disease, etc.) who develop

the flu should take antiviral drugs to treat the flu. For more

flu. Individuals with high risk long term health conditions

information please visit: http://www.cdc.gov/flu/

freeresources/print-highrisk.htm#Messages

The Philadelphia Department of Public health received three confirmed reports of hospitalized influenza that occurred during week 47. Five laboratory-confirmed influenza illnesses were reported last week, an increase from the previous week. Influenza-like illnesses at emergency departments and pediatric ambulatory clinics changed very little for week 47. No influenza deaths have been reported this season. Detections of Respiratory Syncytial Virus (RSV) increased during week 47, and replaced Rhinovirus as the predominant circulating respiratory virus detected by participating clinical laboratories. Other non-influenza respiratory viruses detected in clinical specimens include Rhinovirus and Adenovirus.

Surveillance type	Compared to week of 11/13–11/19	Compared to 3-yr seasonal mean
Hospital ED Fever/flu visits	_	↓
Pediatric Clinics ILI		—
Laboratory Influenza Surveillance	ſ	Ļ

 \uparrow = above 10 % of comparison group

– = equivalent to comparison group (-10% to +10%)

 \downarrow = below 10 % of comparison group

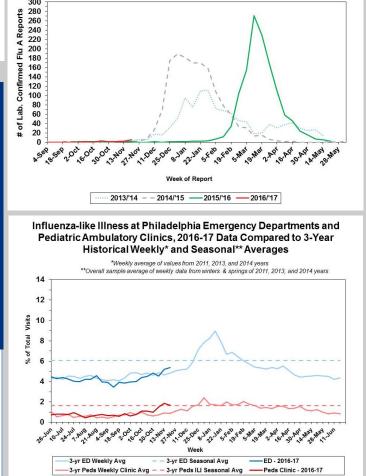
Pennsylvania

Pennsylvania's flu activity is low and sporadic. From 10/02/16 to 11/12/16, there were 341 flu cases (positive by rapid test, PCR, or culture), an increase from week 46. Influenza A made up the majority of the cases with 239 (70.1%). There were 102 (29.9%) cases of Influenza B. There were 68 cases of flu in week 47. Influenza A/H3 made up 81.3.% of the season-to-date influenza subtyping results from state public health labs followed by Influenza A/pH1N1 at 12.5% and Influenza B/Victoria at 6.3%. There were no influenza related deaths or pediatric influenza-associated deaths.

United States

Flu activity increased slightly during week 47, but remains low throughout the U.S. The percentage of respiratory specimens that tested positive for influenza increased slightly, but was low for clinical laboratories. A total of 14,787





specimens were tested at clinical laboratories, and 525 (3.6%) specimens tested positive for influenza. 372(70.9%) specimens tested positive for influenza A and 153 (29.1%) specimens tested positive for influenza B. 541 specimens were tested at public health laboratories and 62 specimens resulted in a positive test. Influenza A made up 54 (87.1%) of the positive specimens and there were 8 (12.9%) positive Influenza B specimens. Influenza A/H3 was the most frequently identified influenza virus that was reported by public health labs with 31 (57.4%). No viruses were 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 1.8%, which is below the national baseline of 2.2 %. Puerto Rico experienced high ILI activity. Georgia had moderate ILI activity. NYC and five states experienced low ILI activity. Delaware, New Jersey and Pennsylvania experienced minimal ILI activity along with 41 other states. Guam, Puerto Rico, the U.S. Virgin Islands, and North Carolina reported regional influenza activity. Rhode Island reported no activity. Delaware, New Jersey, and Pennsylvania reported local influenza activity along with D.C. and 33 other states.

All institutional outbreaks and hospitalized and fatal cases of influenza are to be reported to PDPH. Phone: (215) 685-6742 Fax: (215) 238-6947 Email: ACD@phila.gov Reporting requirements and forms are posted online at hip.phila.gov