

Philadelphia Department of Public Health Seasonal Influenza Surveillance Report

January 3, 2016— January 9, 2016 (Week 1)

Philadelphia Influenza Activity

Please note these data are provisional and subject to change.

For week 1, three hospitalized cases of influenza were reported. Influenza A has remained the dominant virus this season thus far, as few cases of influenza B have been identified. Influenza-like illness at emergency departments decreased last week relative the week previous. Reports of laboratory confirmed influenza at local clinical laboratories remain markedly lower compared to historical levels. To date, there have been two flu outbreaks in long term care facilities.

Surveillance type	Compared to week of 12/27–1/2	Compared to 3-yr seasonal* mean
Hospital ED Fever/flu visits	↓	—
Pediatric Clinics ILI	NA	NA
Laboratory Influenza Surveillance	—	↓

↑ = above 10% of comparison group
 — = equivalent to comparison group (-10% to +10%)
 ↓ = below 10% of comparison group
 * mean of 2010–11, 2012–13, and 2013–14 flu seasons epidemic flu activity time period (late December—early May)
 N/A— not available (data not reported)

The Dangers of Influenza in Children

Influenza is more dangerous than the common cold for children. Each year, many children get sick with seasonal influenza; some of those illnesses result in death.

Severe influenza complications are most common in children younger than 2 years old.

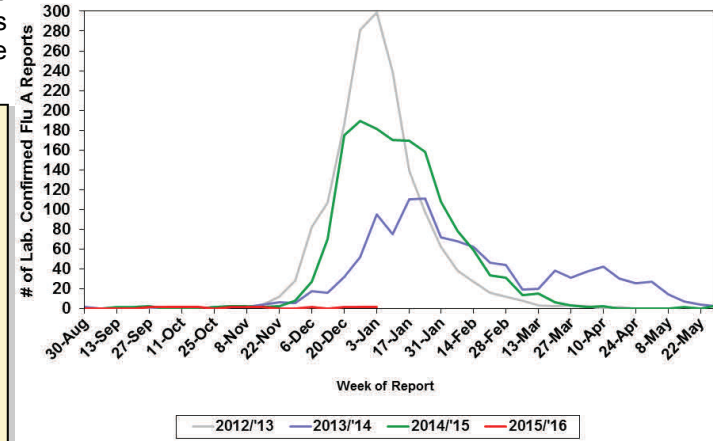
Children with chronic health problems like asthma, diabetes and disorders of the brain or nervous system are at high risk of developing serious flu complications.

Each year an average of 20,000 children under the age of 5 are hospitalized because of influenza complications. Last influenza season, more than 140 flu-related pediatric deaths were reported.

<http://www.cdc.gov/flu/protect/children.htm>

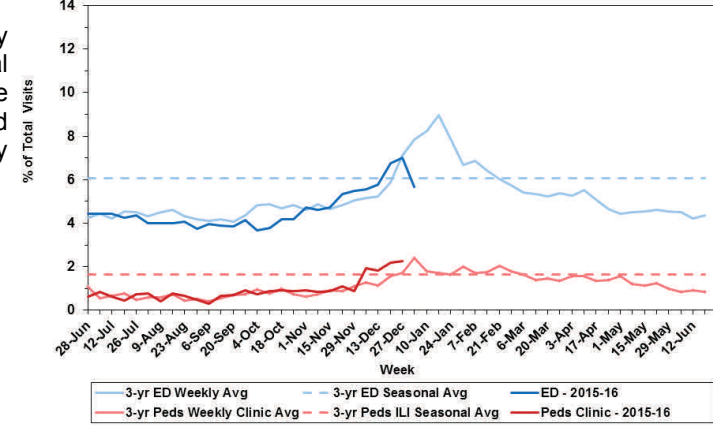
Laboratory-Based Surveillance for Influenza A Philadelphia, 2012/2013 through 2015/2016 Seasons*

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



Influenza-like Illness at Philadelphia Emergency Departments and Pediatric Ambulatory Clinics, 2015-16 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 Influenza Activity

There has been a noticeable increase in influenza activity throughout Pennsylvania for the week of January 3 — January 9, 2016. There were 124 new cases of influenza reported, compared to 83 new cases from the previous week 52. A total of 763 cases of influenza (positive by any test type) have been reported this season. The majority of cases (69.69%) have tested positive (via rapid test, PCR, or viral culture) for influenza A. To date, there have been three influenza-associated deaths in Pennsylvania (outside of Philadelphia), one between the ages 50-64, the other two 65+. Case activity throughout the state is classified as regional with activity being increased predominately in southeastern Pennsylvania.

United States Influenza Activity

Week 1, produced a slight increase of influenza activity across the United States. The most frequently identified influenza virus type reported by public health laboratories during week 1 was influenza A, with influenza A (H1N1)pdm09 viruses predominating. The percentage of respiratory specimens testing positive for influenza in clinical laboratories was low. The proportion of deaths attributed to pneumonia and influenza (P&I) was below their system-specific epidemic threshold in both the NCHS Mortality Surveillance System and the 122 Cities Mortality Reporting System. One influenza-associated pediatric death was reported. A cumulative rate for the season of 1.5 laboratory-confirmed influenza-associated hospitalizations per 100,000 population was reported. The proportion of outpatient visits for influenza-like illness (ILI) was 2.0%, which is below the national baseline of 2.1%. Four of 10 regions reported ILI at or above region-specific baseline levels. Puerto Rico and one state experienced high ILI activity; New York City and seven states experienced low ILI activity (Pennsylvania included); 42 states experienced minimal ILI activity (Delaware and New Jersey included); and the District of Columbia had insufficient data. The geographic spread of influenza in Guam, Puerto Rico, and nine states were reported as regional; 11 states reported local activity; the U.S. Virgin Islands and 28 states reported sporadic activity; and the District of Columbia and two states reported no influenza activity.

All institutional outbreaks, 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