

Philadelphia Department of Public Health

Seasonal Influenza Surveillance Report

January 17, 2016— January 23, 2016 (Week 3)

Philadelphia Influenza Activity

Please note these data are provisional and subject to change.

For week 3, four 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 and pediatric outpatient clinics remained largely unchanged 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 and week 3 did not yield any influenza-associated deaths.

Surveillance type	Compared to week of 1/10–1/16	Compared to 3-yr seasonal* mean
Hospital ED Fever/flu visits	—	—
Pediatric Clinics ILI	—	—
Laboratory Influenza Surveillance	—	↓

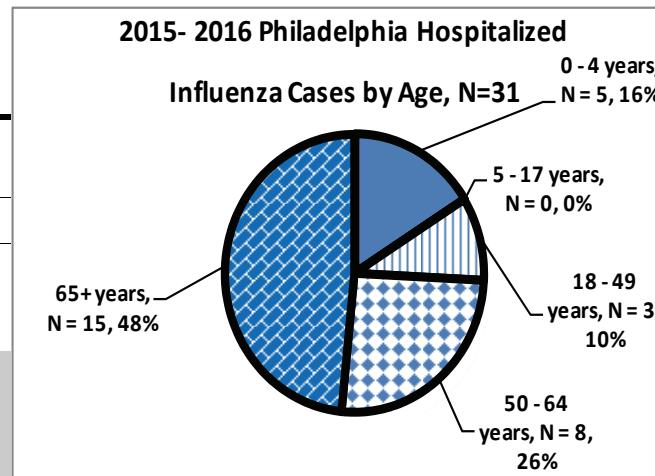
↑ = above 10% of comparison group

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

↓ = below 10% of comparison group

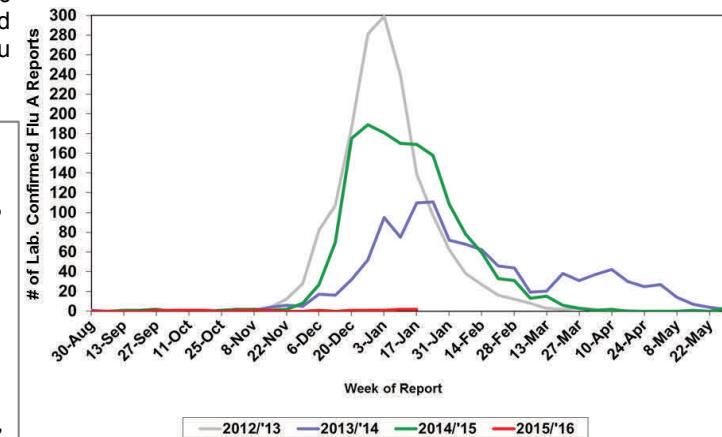
* mean of 2010-'11, 2012-'13, and 2013-'14 flu seasons epidemic flu activity time period (late December—early May)

N/A—not available (data not reported)



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

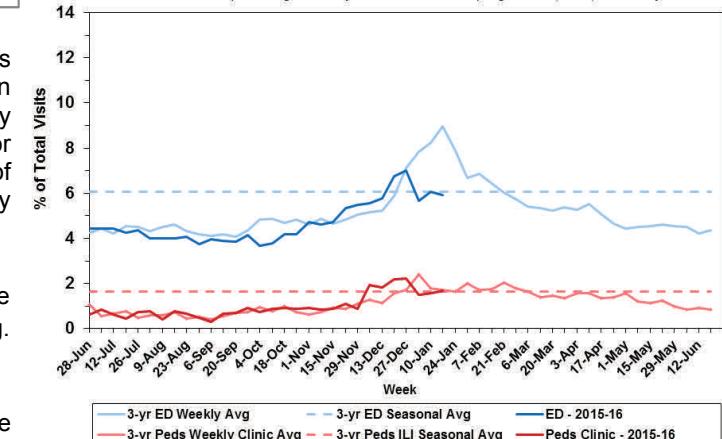
*Based on select hospital laboratories participating in surveillance across respiratory virus seasons



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

During week 3 (January 17 — January 23, 2016) new influenza cases reported by the state, surged from the previous week 2. Laboratory, hospital emergency department, and sentinel medical provider data all indicate a modest increase in influenza activity. There were 212 new cases of influenza reported. A total of 1099 cases of influenza (positive by any test type) have been reported this season. The majority of cases (74.51%) 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+. Influenza case activity throughout the state is currently being classified as local. Activity was highest in the northeastern part of the state for week 3.

United States Influenza Activity

Week 3, influenza case count slightly increased across the United States. The most frequently identified influenza virus type reported by public health laboratories during week 3 was influenza A, with influenza A (H1N1)pdm09 viruses predominating. The percentage of respiratory specimens testing positive for influenza in clinical laboratories increased. 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. No influenza-associated pediatric deaths were reported. Cumulative rate for the season of 2.1 laboratory-confirmed influenza-associated hospitalizations per 100,000 population was reported. The proportion of outpatient visits for influenza-like illness (ILI) was 2.2%, which is above the national baseline of 2.1%. Six of 10 regions reported ILI at or above region-specific baseline levels. Puerto Rico experienced high ILI activity; three states experienced moderate ILI activity; five states experienced low ILI activity (NJ included); New York City and 42 states experienced minimal ILI activity (DE and PA included). The geographic spread of influenza in four states was reported as widespread; Puerto Rico and 14 states reported regional activity; Guam and 12 states reported local activity; and the District of Columbia, the U.S. Virgin Islands and 20 states reported sporadic activity.

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

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