

# Philadelphia Department of Public Health Seasonal Influenza Surveillance Report

March 6, 2016 — March 12, 2016 (Week 10)

2015 - 2016 Philadephia Hospitalized

Influenza Cases by Age, N=297

0 - 4 years

13%

5 - 17 years 9%

## Philadelphia Influenza Activity

Please note these data are provisional and subject to change.

Influenza activity continues to rise, 113 hospitalized cases were reported during week 10. Approximately 239 detections of influenza A occurred at local hospital laboratories, an increase from the previous week. Influenza A has remained the dominant virus this season thus far, with influenza A/H1N1 predominating. Influenza-like illness (ILI) at emergency departments increased substantially for week 10. To date, there have been seven influenza outbreaks in long term care facilities. There have been five influenza-associated deaths reported this season, there were no deaths reported during week 10.

> 65+ years 26%

Surveillance type	Compared to week of 2/28–3/5	Compared to 3-yr seasonal* mean
Hospital ED Fever/flu visits	1	1
Pediatric Clinics ILI	NR	NR
Laboratory Influenza Surveillance	1	_

50 - 64 18 - 49 equivalent to comparison group (-10% to +10%) vears years mean of 2010-'11, 2012-'13, and 2013-'14 flu seasons epidemic flu activity time period (late 27% 25% December-early May); NR = data not received Pennsylvania Influenza Activity Week 10 (March 6, 2016 — March 12, 2016) new influenza cases reported by the state continue to rise. There were 3,744 new cases of influenza reported (2,676 cases were reported the previous week 9). A total of 10,965 cases of influenza (positive by any test type) have been reported this season. Laboratory, hospital emergency department, and sentinel # 10 medical provider data all indicate a increase in influenza activity. The majority of cases (61.01%) have tested positive (via rapid test. PCR, or viral culture) for influenza A. To date, there have been 13 influenza-associated deaths in Pennsylvania

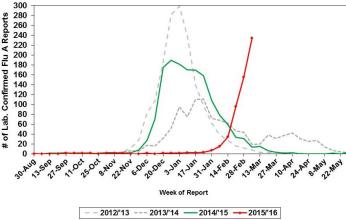
#### remained the highest in the southeastern part of the state.

**United States Influenza Activity** During week 10 (March 6-12, 2016), influenza activity increased in the United States. The most frequently identified influenza virus type reported by public health laboratories during week 10 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. Eight influenzaassociated pediatric deaths were reported. A cumulative rate for the season of 14.5 laboratory-confirmed influenzaassociated hospitalizations per 100,000 population was reported. The proportion of outpatient visits for influenza-like illness

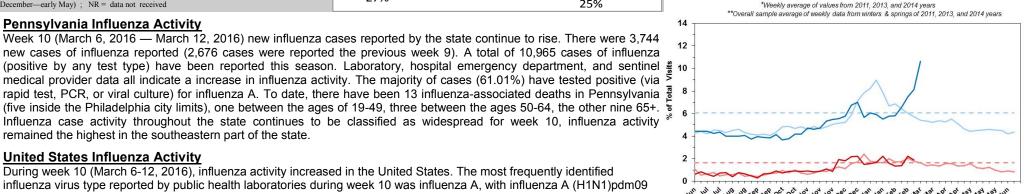
(ILI) was 3.7%, which is above the national baseline of 2.1%. All 10 regions reported ILI at or above region-specific baseline levels. New York City, Puerto Rico, and 14 states experienced high ILI activity; 13 states experienced moderate ILI activity; 11 states experienced low ILI activity; 12 states experienced minimal ILI activity; and the District of Columbia had insufficient data. The geographic spread of influenza in Puerto Rico and 40 states was reported as widespread (Delaware, New Jersey, and Pennsylvania); Guam and 10 states reported regional activity; the District of Columbia reported local activity; and the U.S. Virgin Islands did not report.

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





### Influenza-like Illness at Philadelphia Emergency Departments and Pediatric Ambulatory Clinics, 2015-16 Data Compared to 3-Year Historical Weekly\* and Seasonal\*\* Averages



3-vr ED Seasonal Avg