

## PHILLY FLU FINDINGS

**Philadelphia Department of Public Health** Seasonal Influenza Surveillance Report Week 5: January 29-February 4, 2017

## Philadelphia Influenza Activity

Please note these data are provisional and subject to change.

There were 77 cases of influenza (Philadelphia resident, positive by rapid test, PCR or culture, and hospitalized for  $\geq$  24 hrs.) in Philadelphia during week 5. Among select hospital laboratories, influenza A percent positivity increased compared with the previous week. Influenza-like illnesses at emergency departments and pediatric ambulatory clinics also increased for week 5. There were 3 influenza outbreaks (≥ 1 case of laboratory confirmed influenza) in long-term care facilities this week, resulting in a total of 15 for the 2016-2017 flu season. There was one influenza-associated death during week 4, bringing the count to 4 for the season. No pediatric influenza-associated deaths have been reported.

	Compared to 3-yr seasonal mean	Philadelphia Hospitalized Influenza Cases by Age Gro September 1, 2016- February 4, 2017	
ospital ED	0-4-years 7% 5 - 17 years 10%		
↑	<u>↑</u>	65+ years	
↑ (	<u>↑</u>	460	18 - 49 years 20%
		week of 3-yr seasonal	week of 1/22–1/28 3-yr seasonal mean   ↑ ↑



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

= below 10 % of comparison group

## **Pennsylvania**

Flu activity is widespread and continues to be high throughout Pennsylvania for week 5. The highest flu activity was reported in the southeast region of the state. From 10/02/16 to 2/4/17, there were 26,675 flu cases (positive by rapid test, PCR, or culture). There were 23,067 (86.5%) Influenza A cases, 3,497 (13.1%) Influenza B cases and 111 (0.4%) unknown cases. 342 cases made up the season-to-date influenza sub-typing results from state public health labs. Influenza A/H3 made up 87.4% of the positive cases followed by Influenza B/Victoria (7.3%) and other (5.3%). Five influenza-associated deaths were reported this week bringing the total count to 38 for the 2016-2017 flu season, including one pediatric influenza-associated death.

United States Flu activity increased in the U.S. during week 5. The percentage of respiratory specimens that tested positive for influenza in clinical laboratories increased, 27,409 specimens were tested at clinical laboratories and 5.722 (20.9%) specimens tested positive for influenza. 5.017 (87.7%) specimens tested positive for Influenza A and 705 (12.3%) specimens tested positive for Influenza B. 2.469 specimens were tested at public health

## 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



Historical Weekly\* and Seasonal\*\* Averages



labs and 1,397 specimens tested positive. There were 1,245 (89.1%) positive Influenza A specimens and 152 (10.9%) positive Influenza B specimens. Influenza A/H3 was the most frequently identified influenza virus that was reported by public health labs with 1,142 (91.7%) positive tests. No viruses were resistant to oseltamivir, zanamivir and peramivir. Five influenza-associated pediatric deaths were reported to CDC during week 5, bringing the total count to 20 for the 2016-2017 flu season. Three deaths were associated with Influenza A/H3, one death was associated with Influenza A/H1N1 and one death was associated with Influenza B. Between October 1, 2016 and February 4,2017, a rate of 24.3 laboratory-confirmed influenza-associated hospitalizations per 100,000 population was reported. The proportion of people visiting their health care provider for influenza-like illness (ILI) was 4.8%, which is above the national baseline of 2.2%. New York City, New Jersey, Pennsylvania and 21 states experienced high ILI activity. Ten states experienced moderate ILI activity. Eight states experienced low ILI activity. Delaware and 8 states experienced minimal ILI activity. Forty-three states, including Delaware, New Jersey and Pennsylvania reported widespread influenza activity. Six states reported regional influenza activity. Washington, DC and Hawaii reported local influenza activity. Delaware had 127 laboratory-confirmed cases of flu. New Jersey had 39 cases of Influenza A/H3N2 and 18 cases of Influenza B.

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