



PHILLY FLU FINDINGS

Philadelphia Department of Public Health
Seasonal Influenza Surveillance Report

Philadelphia Influenza Activity

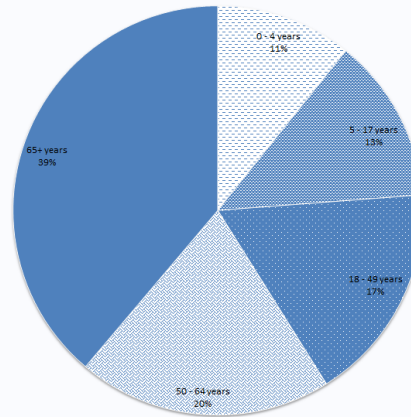
Please note these data are provisional and subject to change.

There were 34 cases of severe influenza (Philadelphia resident, positive by rapid test, PCR or culture, and hospitalized for ≥ 24 hrs.) in Philadelphia during week 14. Influenza A activity has nearly reached baseline (data not shown). However, Influenza B activity has increased in recent weeks. Influenza-like illnesses (ILI) at emergency departments and pediatric outpatient clinics declined slightly for week 14. There have been a total of 29 outbreaks (≥ 1 case of laboratory confirmed influenza) in long-term care facilities for the 2016-2017 season. Fourteen influenza-associated deaths have been reported for the season. No pediatric influenza-associated deaths have been reported.

Surveillance type	Compared to week of 3/26–4/1	Compared to 3-yr seasonal mean
Hospital ED Fever/flu visits	↓	—
Pediatric Clinics ILI	—	—
Laboratory Influenza Surveillance	↑	—

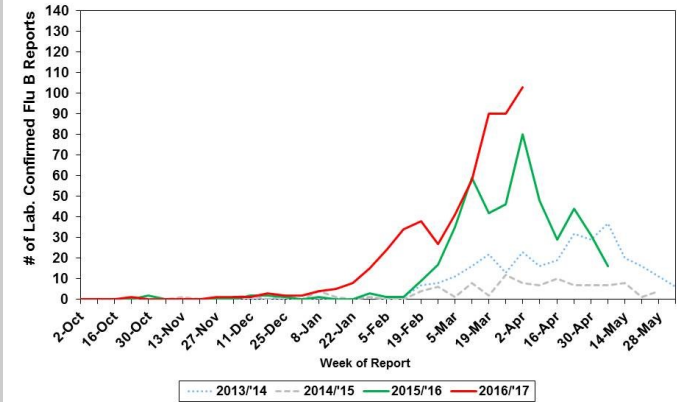
↑ = above 10 % of comparison group
 — = equivalent to comparison group (-10% to +10%)
 ↓ = below 10 % of comparison group

Philadelphia Hospitalized Influenza Cases by Age Group
October 1, 2016-April 8, 2017



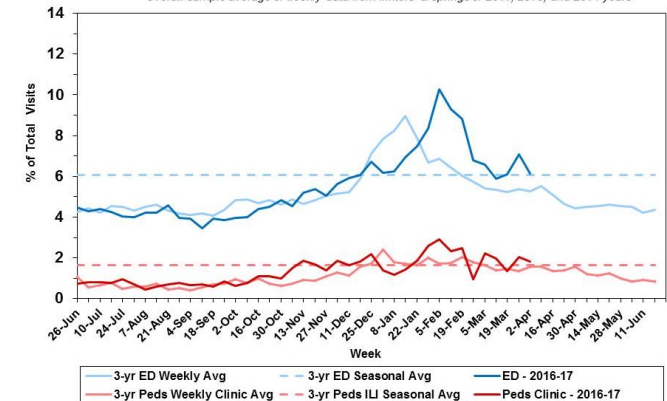
Laboratory-Based Surveillance for Influenza B Philadelphia, 2013/2014 through 2016/2017 Seasons*

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



Influenza-like Illness at Philadelphia Emergency Departments and Pediatric Ambulatory Clinics, 2016-17 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

Flu activity has peaked and continues to decline for week 14. Flu activity is currently regional. The highest flu activity was reported in the southeast region of the state. From 10/02/16 to 4/08/17, there were 66,455 flu cases (positive by rapid test, PCR, or culture). There were 49,399 (74.3%) Influenza A cases, 16,806 (25.3%) Influenza B cases and 240 (0.4%) unknown cases. 558 cases made up the season-to-date influenza sub-typing results from state public health labs. Influenza A/H3 made up 86.7% of the positive cases followed by Influenza B/Victoria (6.1%) and other (7.2%). Three influenza-associated deaths were reported this week bringing the total count to 134 for the 2016-2017 flu season, including three pediatric influenza-

United States

Flu activity decreased, but remained elevated in the U.S. during week 14. The percentage of respiratory specimens that tested positive for influenza in clinical laboratories decreased. 20,079 specimens were tested at clinical laboratories and 3,044 (15.2%) specimens tested positive for influenza. 981 (32.2%) specimens tested positive for Influenza A and 2,063 (67.8%) specimens tested positive for Influenza B. 922 specimens were tested at public health labs and 356 (38.6%) specimens tested positive. Influenza B was the most frequently identified influenza virus that was reported by public health labs with 218 (61.2%) positive specimens. The majority of recently circulating influenza viruses are susceptible to oseltamivir, zanamivir, and peramivir, although, rare sporadic instances of oseltamivir-resistant and peramivir-resistant influenza A (H1N1) pdm09 viruses and oseltamivir-resistant influenza A (H3N2) viruses have been detected worldwide. Five influenza-associated pediatric deaths were reported to CDC during week 14, bringing the total count to 124 for the 2016-2017 flu season. Between 10/01/16 and 4/08/17, a rate cumulative rate of 59.4 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 2.6%, which is above the national baseline of 2.2%. Two states experienced high ILI activity. Seven states experienced moderate ILI activity. New York City, New Jersey and 10 states experienced low ILI activity. Delaware, Pennsylvania and 28 other states experienced minimal ILI activity. Eighteen states, including Delaware and New Jersey, reported that the geographic spread of influenza was widespread. Pennsylvania and 17 other states reported regional influenza activity. Washington, DC and twelve states reported local influenza activity. Two states reported sporadic activity.

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

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