



PHILLY FLU FINDINGS

Philadelphia Department of Public Health
 Seasonal Influenza Surveillance Report
 MMWR Week 18: April 30-May 6, 2017

Philadelphia Influenza Activity

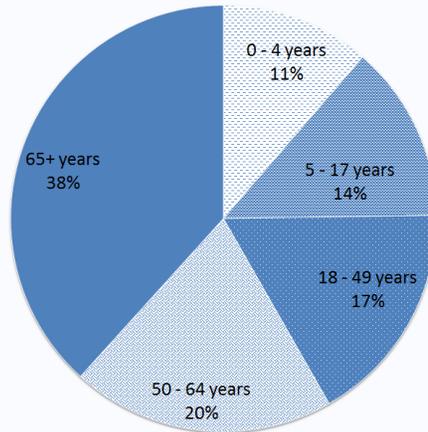
Please note these data are provisional and subject to change.

There were 9 cases of severe influenza (Philadelphia resident, positive by rapid test, PCR or culture, and hospitalized for ≥ 24 hrs.) in Philadelphia during week 18. Influenza A activity has reached baseline levels (data not shown). Influenza B activity declined again is approaching low, off season levels. Influenza-like illnesses (ILI) at emergency departments and pediatric ambulatory clinics declined for week 18. There have been a total of 30 outbreaks (≥ 1 case of laboratory confirmed influenza) in long-term care facilities for the 2016-2017 season. Twenty-two influenza-associated deaths have been reported for the season. No pediatric influenza-associated deaths have been reported.

Surveillance type	Compared to week of 4/23-4/29	Compared to 3-yr seasonal mean
Hospital ED Fever/flu visits	↓	↓
Pediatric Clinics ILI	↓	↓
Laboratory Influenza Surveillance	↓	↓

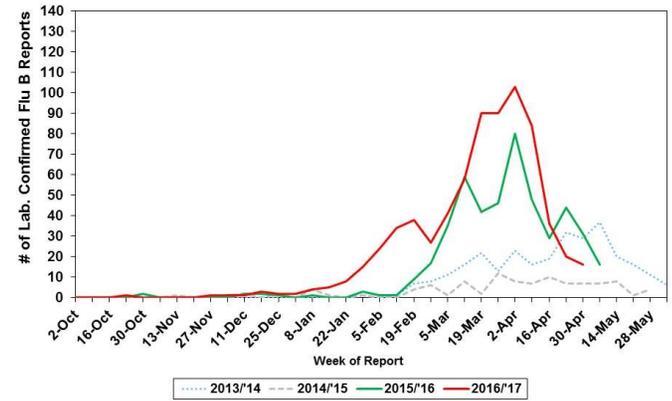
↑ = above 10 % of comparison group
 — = equivalent to comparison group (-10% to +10%)
 ↓ = below 10 % of comparison group

Philadelphia Hospitalized Influenza Cases by Age Group
 October 1, 2016-May 6, 2017



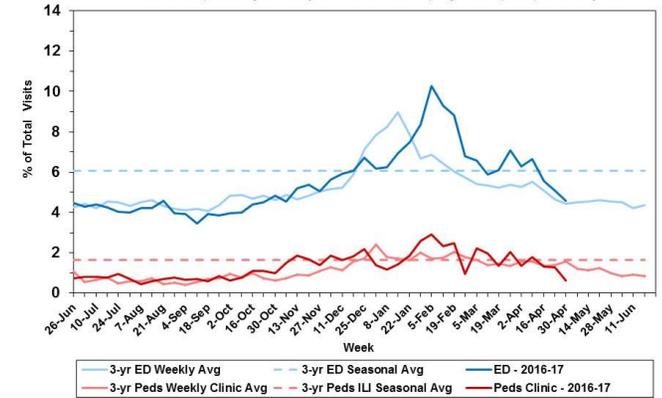
Laboratory-Based Surveillance for Influenza B Philadelphia, 2013/2014 through 2016/2017 Seasons*

*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 18. The flu activity code is "local." The highest flu activity was reported in the southeast region of the state. From 10/02/16 to 5/06/17, there were 70,259 flu cases (positive by rapid test, PCR, or culture). There were 50,459 (71.8%) Influenza A cases, 19,554 (27.8%) Influenza B cases and 246 (0.4%) unknown cases. 576 cases made up the season-to-date influenza sub-typing results from state public health labs. Influenza A/H3 made up 83.9% of the positive cases followed by Influenza B/Victoria (7.4%) and other (8.8%). One influenza-associated deaths were reported this week. The total influenza-associated death count is 144 for the 2016-2017 flu season, including four pediatric

United States

Flu activity decreased in the U.S. during week 18. The percentage of respiratory specimens that tested positive for influenza in clinical laboratories decreased. 10,645 specimens were tested at clinical laboratories and 713 (6.7%) specimens tested positive for influenza. 192 (26.9%) specimens tested positive for Influenza A and 521 (73.1%) specimens tested positive for Influenza B. 402 specimens were tested at public health labs and 114 (28.4%) specimens tested positive. Influenza B was the most frequently identified influenza virus that was reported by public health labs. 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. The proportion of deaths due to pneumonia and influenza was below the system-specific epidemic threshold for the National Center for Health Statistics Mortality Surveillance System. Two influenza-associated pediatric deaths were reported to the CDC during week 18, bringing the total count to 91 for the 2016-2017 flu season. Between 10/01/16 and 5/06/17, a cumulative rate of 64.3 laboratory-confirmed influenza-associated hospitalizations per 100,000 population was reported. The proportion of people visiting their health care provider for ILI was 1.6%, which is below the national baseline of 2.2%. Arizona experienced low ILI activity. Forty-nine states, including Delaware, New Jersey and Pennsylvania experienced minimal ILI activity. New York reported that the geographic spread of influenza was widespread. New Jersey and six other states reported regional influenza activity. Fourteen states, including Delaware and Pennsylvania, reported local influenza activity. Washington, DC and twenty-eight states reported sporadic influenza activity.

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

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