OF PHILADEL STILL OF

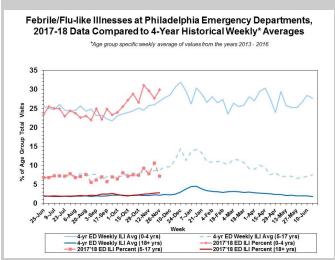
PHILLY FLU FINDINGS

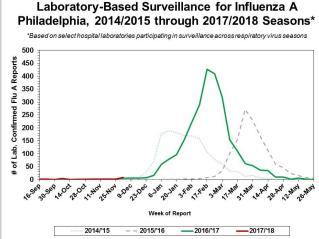
Philadelphia Department of Public Health Seasonal Influenza Surveillance Report MMWR Week 48: Nov 26—Dec 2, 2017

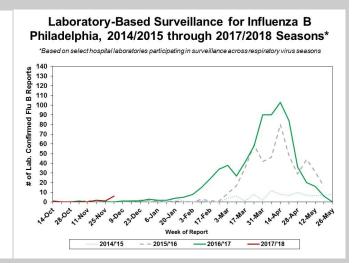
Philadelphia Influenza Activity

Please note these data are provisional and subject to change.

Febrile/flu-like illnesses at emergency departments increased for children ages 0-4 years and adults 18 years and older. Sentinel hospital laboratory surveillance for influenza A or B revealed increasing positivity for both virus types. There were 3 reports of severe influenza (Philadelphia resident, positive by rapid test, PCR or culture, and hospitalized for ≥ 24 hrs.) during this time frame, all hospitalizations were due to influenza A. No influenza-associated deaths or institutional outbreaks have been reported thus far this season.







Pennsylvania

The Pennsylvania Department of Health (PADOH) has reported "local" influenza activity, which is defined by CDC as influenza activity that is increasing in a single region in the state. According to PADOH, the southeast region is experiencing the greatest amount of influenza activity. From 10/01/17 to 12/2/17, there have been 1,057 reports of influenza (positive by rapid test, PCR, or culture). The majority of influenza throughout the state has been identified as influenza A (856 reports, 81%). One influenza related death has been reported this season.

United States

Influenza activity remained low throughout the U.S. during week 48 but has steadily increased over the last 4 weeks. Widespread transmission was reported in 7 states (Arkansas, Georgia, Louisiana, Massachusetts, Mississippi, Oklahoma, and Virginia) while 18 states and Puerto Rico have reported regional activity. Most states have reported local or sporadic activity.

The percentage of respiratory specimens that tested positive for influenza decreased slightly during week 48. Specifically, 20,143 specimens were tested at US clinical laboratories, and 1,354 (6.7%) specimens tested positive for influenza. Of those positive, 1,033 (76.3%) specimens tested positive for influenza A and 321 (23.7%) specimens tested positive for influenza B. Among the 425 positive influenza specimens received by public health laboratories for confirmatory testing and subtyping, 359 (84.5%) were influenza A and 66 (15.5%) were influenza B. Of the influenza A specimens, 314 (87.5%) were subtyped as H3N2.

During October 1-November 25, 2017, CDC has antigenically or genetically characterized 277 influenza viruses [38 influenza A(H1N1)pdm09, 187 influenza A(H3N2), and 52 influenza B viruses] collected by U.S. laboratories. Nearly all of the influenza A/H1N1 and A/H3 viruses matched the vaccine strain. Of the influenza B lineages, all of the Yamagata lineage viruses antigenically characterized matched the vaccine strain while only 50% of the Victoria lineage viruses matched the vaccine strain. No viruses were resistant to oseltamivir, and peramivir. Seven influenza-associated pediatric deaths have been identified nationally this season. One novel infection of influenza A H1N1v was identified this season in lowa in a person who reported direct contact with swine. No human to human transmission has been identified.

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