



PHILLY FLU FINDINGS

Philadelphia Department of Public Health
Seasonal Influenza Surveillance Report
MMWR Week 14: April 1—April 7, 2018

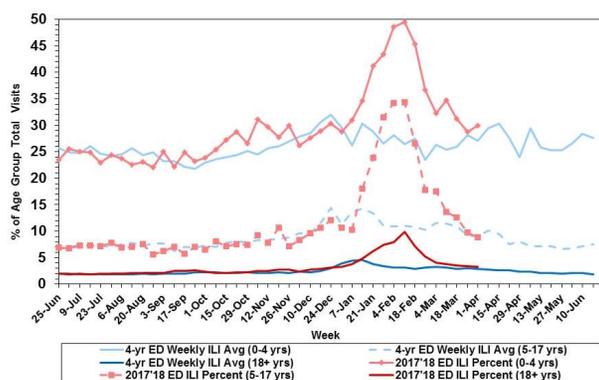
Philadelphia Influenza Activity

Please note these data are provisional and subject to change.

During week 14, febrile/flu-like illnesses at emergency departments increased slightly for children ages 0 to 4 years, while declines were noted in the older age groups. Sentinel hospital laboratory surveillance for influenza A and B demonstrated decreases in positivity for both virus types. There were 12 reports of severe influenza (Philadelphia resident, positive by rapid test, PCR or culture, and hospitalized for ≥ 24 hrs.) during this time frame, of which 7 (58.3%) hospitalizations were due to influenza B. Forty-four influenza-associated deaths, including one pediatric case, were reported so far this season, including one during week 14. There was one influenza outbreak (≥ 1 case of laboratory confirmed influenza case) reported in a long term care facility during week 14.

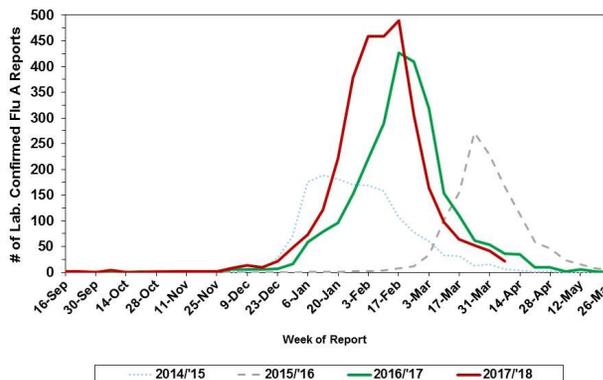
Febrile/Flu-like Illnesses at Philadelphia Emergency Departments, 2017-18 Data Compared to 4-Year Historical Weekly* Averages

*Age group specific weekly average of values from the years 2013 - 2016



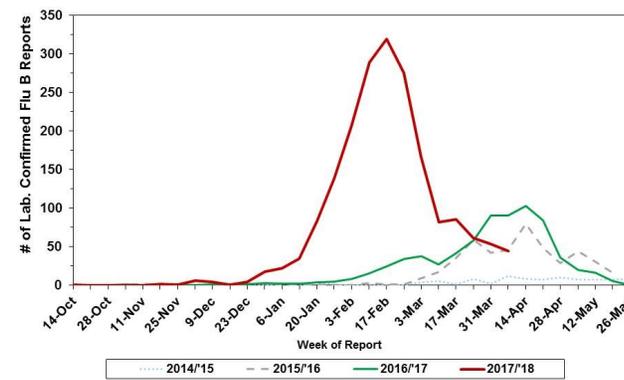
Laboratory-Based Surveillance for Influenza A Philadelphia, 2014/2015 through 2017/2018 Seasons*

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



Laboratory-Based Surveillance for Influenza B Philadelphia, 2014/2015 through 2017/2018 Seasons*

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



Pennsylvania

The Pennsylvania Department of Health (PADOH) has reported “regional” influenza activity, which is defined by CDC as outbreaks of influenza or increases in influenza like illness in at least two but less than half the regions of the state. Laboratory, hospital emergency department, and sentinel medical provider data indicate flu activity continues to decrease, however influenza B has been identified in up to 51% of confirmed cases during week 14. The overall influenza activity has peaked at week 6 (week ending 2/10/2018). From 10/1/17 to 4/7/18, there have been 113,276 reports of influenza (positive by rapid test, PCR, or culture). The majority of influenza throughout the state has been identified as influenza A (76,866 reports, 67.9%). There have been 227 influenza related deaths reported this season, including six pediatric deaths, with 12 deaths identified during week 14.

United States

Influenza activity continued to decrease in the U.S. during week 14. Widespread activity was reported in seven states, while 22 states, Puerto Rico and Guam reported regional activity. Local activity was reported by the District of Columbia and 16 states. Five states reported sporadic activity. The percentage of respiratory specimens that tested positive for influenza decreased during week 14. Specifically, 19,512 specimens were tested at US clinical laboratories, and 2,490 (12.8%) specimens tested positive for influenza. Of those positive, 850 (34.1%) specimens tested positive for influenza A and 1,640 (65.9%) specimens tested positive for influenza B. Among the 321 positive influenza specimens received by public health laboratories for confirmatory testing and subtyping, 120 (37.4%) were influenza A and 201 (62.6%) were influenza B. Of the influenza A specimens, 65 (54.2%) were subtyped as H3N2 and 42 (35%) were subtyped as A(H1N1)pdm09. During October 1, 2017-April 7, 2018, CDC has antigenically or genetically characterized 2,618 influenza viruses [643 influenza A(H1N1)pdm09, 1,100 influenza A(H3N2), and 865 influenza B viruses] collected by U.S. laboratories. The majority of influenza A viruses collected were antigenically similar to the cell-grown reference viruses representing the 2017-2018 Northern Hemisphere influenza vaccine viruses, although some genetic diversity exists for the H3N2 viruses. In a smaller sample tested, the majority of influenza B viruses were antigenically similar to the vaccine strain, although a majority (72.2%) of the influenza B Victoria viruses contained a 6-nucleotide deletion. Sporadic instances of oseltamivir resistant and peramivir resistant influenza A(H1N1)pdm09 has been identified. A total of 151 influenza-associated pediatric deaths have been identified nationally this season, nine during week 14. Two novel infections of influenza A (1 H3N2v and 1 H1N1v) were identified this season in persons 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.

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