



PHILLY FLU FINDINGS

Philadelphia Department of Public Health
Seasonal Influenza Surveillance Report
MMWR Week 16: April 15—April 21, 2018

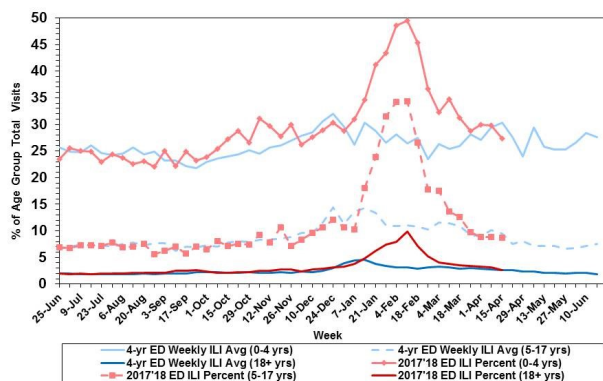
Philadelphia Influenza Activity

Please note these data are provisional and subject to change.

During week 16, febrile/flu-like illnesses at emergency departments declined among children 0-4 years of age, while the trend in illnesses remained unchanged for other age groups. Sentinel hospital laboratory surveillance for influenza A and B demonstrated decreases for both virus types. There were 11 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 (63.6%) hospitalizations were due to influenza A. No influenza associated deaths were reported during week 16 and the total number of influenza associated deaths so far this season is 46, including one pediatric case. There were two influenza outbreaks (≥ 1 case of laboratory confirmed influenza) reported in a long term care facility during week 16.

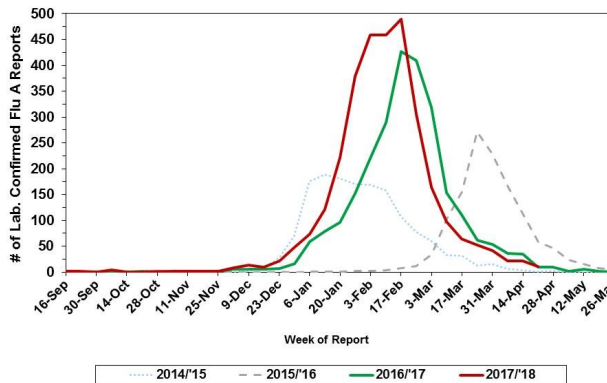
Febrile/Flu-like Illnesses at Philadelphia Emergency Departments, 2017-18 Data Compared to 4-Year Historical Weekly* Averages

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



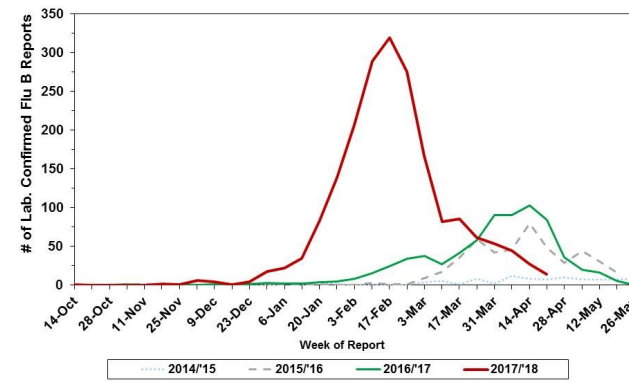
Laboratory-Based Surveillance for Influenza A Philadelphia, 2014/2015 through 2017/2018 Seasons*

*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 "local" influenza activity, which is defined by CDC as outbreaks of influenza or increases in influenza like illness and recent laboratory-confirmed influenza in a single region 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 67% of reported confirmed cases during week 16. The overall influenza activity has peaked at week 6 (week ending 2/10/2018). From 10/1/17 to 4/21/18, there have been 117,563 reports of influenza (positive by rapid test, PCR, or culture). The majority of influenza throughout the state has been identified as influenza A (77,741 reports, 66.6%). There have been 247 influenza related deaths reported this season, including six pediatric deaths, with 12 deaths identified during week 16.

United States

Influenza activity continued to decrease in the U.S. during week 16. Widespread activity was reported in four states, while nine states, Puerto Rico and Guam reported regional activity. Local activity was reported by 25 states and sporadic activity was reported by the District of Columbia and ten states. The percentage of respiratory specimens that tested positive for influenza decreased during week 16. Specifically, 15,801 specimens were tested at US clinical laboratories, and 1,403 (8.9%) specimens tested positive for influenza. Of those positive, 429 (30.6%) specimens tested positive for influenza A and 974 (69.4%) specimens tested positive for influenza B. Among the 216 positive influenza specimens received by public health laboratories for confirmatory testing and subtyping, 64 (29.6%) were influenza A and 152 (70.4%) were influenza B. Of the influenza A specimens, 43 (67.2%) were subtyped as H3N2 and 20 (31.3%) were subtyped as A(H1N1)pmd09. During October 1, 2017-April 21, 2018, CDC has antigenically or genetically characterized 2,777 influenza viruses [686 influenza A(H1N1)pdm09, 1,157 influenza A(H3N2), and 934 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 (75.6%) 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 160 influenza-associated pediatric deaths have been identified nationally this season, four during week 16. 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.

Phone: (215) 685-6742 Fax: (215) 238-6947 Email: ACD@phila.gov Reporting requirements and forms are posted online at hip.phila.gov