



PHILLY FLU FINDINGS

Philadelphia Department of Public Health
Seasonal Influenza Surveillance Report
MMWR Week 18: April 29—May 5, 2018

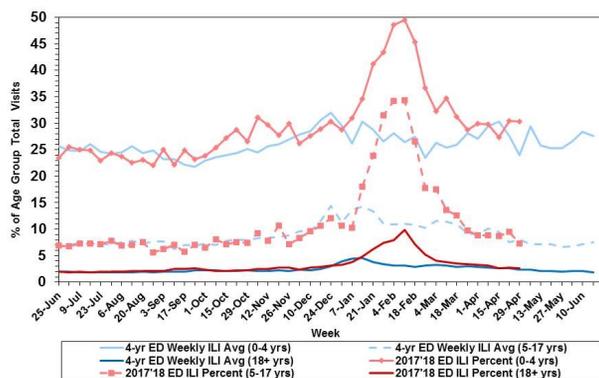
Philadelphia Influenza Activity

Please note these data are provisional and subject to change.

During week 18, febrile/flu-like illnesses at emergency departments remained unchanged for children 0-4 years of age, but declined for older ages. Overall activity has returned to baseline levels. Sentinel hospital laboratory surveillance for influenza A and B also demonstrated slight decreases for both virus types. There were 5 reports of severe influenza (Philadelphia resident, positive by rapid test, PCR or culture, and hospitalized for ≥ 24 hrs.) during this time frame, of which 3 (60%) hospitalizations were due to influenza B. There was one influenza associated death reported during week 18 and the total number of influenza associated deaths so far this season is 49, including one pediatric case. There were no influenza outbreaks (≥ 1 case of laboratory confirmed influenza) reported in a long term care facility during week 18.

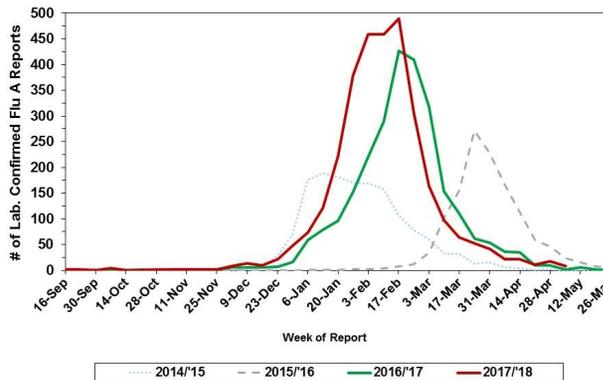
Febrile/Flu-like Illnesses at Philadelphia Emergency Departments, 2017-18 Data Compared to 4-Year Historical Weekly* Averages

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



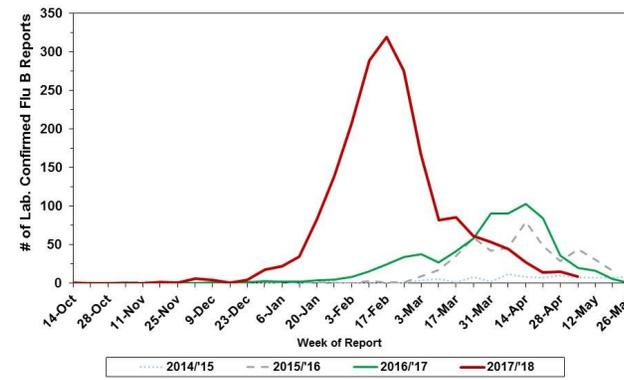
Laboratory-Based Surveillance for Influenza A Philadelphia, 2014/2015 through 2017/2018 Seasons*

*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 70% of the reported confirmed cases during week 18. The overall influenza activity has peaked at week 6 (week ending 2/10/2018). From 10/1/17 to 5/5/18, there have been 120,322 reports of influenza (positive by rapid test, PCR, or culture). The majority of influenza throughout the state has been identified as influenza A (79,348 reports, 65.9%). There have been 253 influenza related deaths reported this season, including seven pediatric deaths, with five deaths identified during week 18.

United States

Influenza activity decreased in the U.S. during week 18. Widespread activity was reported in three states (NY, MA, CT), while four states, Puerto Rico and Guam reported regional activity. Local activity was reported by 16 states and sporadic activity was reported by the District of Columbia and 25 states. Two states reported no influenza activity. The percentage of respiratory specimens that tested positive for influenza decreased during week 18. Specifically, 11,110 specimens were tested at US clinical laboratories, and 721 (6.5%) specimens tested positive for influenza. Of those positive, 252 (35%) specimens tested positive for influenza A and 469 (65%) specimens tested positive for influenza B. Among the 86 positive influenza specimens received by public health laboratories for confirmatory testing and subtyping, 28 (32.6%) were influenza A and 58 (67.4%) were influenza B. During October 1, 2017-May 5, 2018, CDC has antigenically or genetically characterized 3,108 influenza viruses [767 influenza A(H1N1)pdm09, 1,264 influenza A(H3N2), and 1,077 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 165 influenza-associated pediatric deaths have been identified nationally this season, two during week 18. 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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