



# PHILLY FLU FINDINGS

Philadelphia Department of Public Health  
Seasonal Influenza Surveillance Report  
MMWR Week 11: Mar 11—Mar 17, 2018

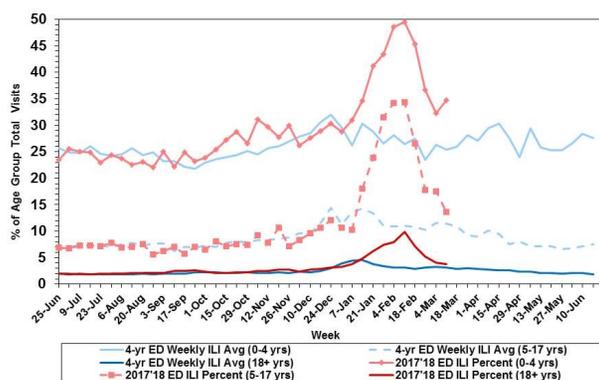
## Philadelphia Influenza Activity

Please note these data are provisional and subject to change.

During week 11, febrile/flu-like illnesses at emergency departments increased slightly for children 0-4 years while flu-like illnesses decreased across other age groups. Sentinel hospital laboratory surveillance for influenza A and B demonstrated a decrease in positivity for influenza A but an increase for influenza B. There were 36 reports of severe influenza (Philadelphia resident, positive by rapid test, PCR or culture, and hospitalized for ≥ 24 hrs.) during this time frame, of which 21 (58.3%) of hospitalizations were due to influenza A. Thirty-eight influenza-associated deaths, including one pediatric case, were reported so far this season, including one during week 11. There was one influenza outbreak (≥ 1 case of laboratory confirmed influenza case) reported in a long term care facility for week 11.

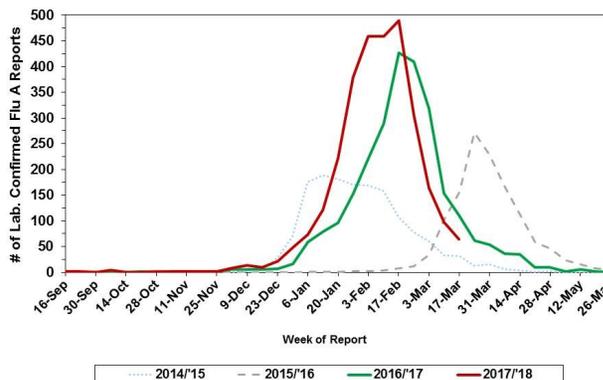
### Febrile/Flu-like Illnesses at Philadelphia Emergency Departments, 2017-18 Data Compared to 4-Year Historical Weekly\* Averages

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



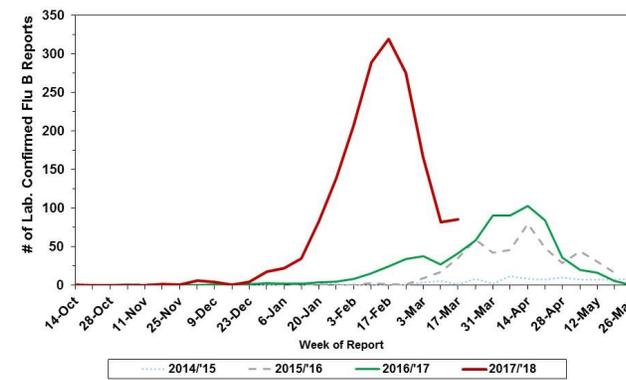
### Laboratory-Based Surveillance for Influenza A Philadelphia, 2014/2015 through 2017/2018 Seasons\*

\*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 decreased from past weeks and peaked at week 6 (week ending 2/10/2018). From 10/1/17 to 3/17/18, there have been 102,475 reports of influenza (positive by rapid test, PCR, or culture). The majority of influenza throughout the state has been identified as influenza A (72,582 reports, 70.8%). There have been 192 influenza related deaths reported this season, including six pediatric deaths, with four deaths identified during week 11.

## United States

Influenza activity continued to decrease in the U.S. during week 11. Widespread activity was reported in 17 states, while 26 states, Puerto Rico, and Guam reported regional activity. Local activity was reported by the District of Columbia and 5 states (Louisiana, Nevada, Oregon, Tennessee, and West Virginia). The percentage of respiratory specimens that tested positive for influenza remained the same during week 11. Specifically, 28,213 specimens were tested at US clinical laboratories, and 4,326 (15.3%) specimens tested positive for influenza. Of those positive, 1,828 (42.3%) specimens tested positive for influenza A and 2,498 (57.7%) specimens tested positive for influenza B. Among the 433 positive influenza specimens received by public health laboratories for confirmatory testing and subtyping, 184 (42.5%) were influenza A and 249 (57.5%) were influenza B. Of the influenza A specimens, 100 (54.3%) were subtyped as H3N2 and 67 (36.4%) were subtyped as A(H1N1)pdm09. During October 1, 2017-March 17, 2018, CDC has antigenically or genetically characterized 2,214 influenza viruses [535 influenza A(H1N1)pdm09, 989 influenza A(H3N2), and 690 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 (56.2%) 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 133 influenza-associated pediatric deaths have been identified nationally this season, five during week 11. 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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