



# PHILLY FLU FINDINGS

Philadelphia Department of Public Health  
Seasonal Influenza Surveillance Report  
MMWR Week 12: Mar 18—Mar 24, 2018

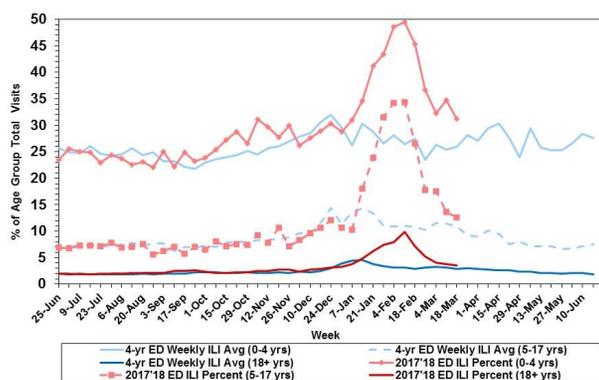
## Philadelphia Influenza Activity

Please note these data are provisional and subject to change.

During week 12, febrile/flu-like illnesses at emergency departments declined across all age groups. Sentinel hospital laboratory surveillance for influenza A and B demonstrated decreases in positivity for virus types. There were 27 reports of severe influenza (Philadelphia resident, positive by rapid test, PCR or culture, and hospitalized for  $\geq 24$  hrs.) during this time frame, of which 20 (74.1%) hospitalizations were due to influenza B. Thirty-nine influenza-associated deaths, including one pediatric case, were reported so far this season, including one during week 12. No influenza outbreaks ( $\geq 1$  case of laboratory confirmed influenza case) were reported in a long term care facility during week 12.

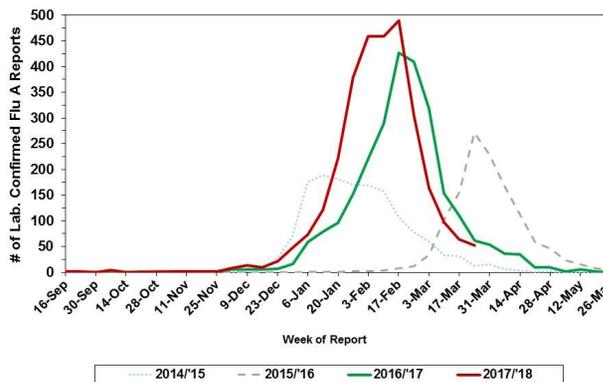
### Febrile/Flu-like Illnesses at Philadelphia Emergency Departments, 2017-18 Data Compared to 4-Year Historical Weekly\* Averages

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



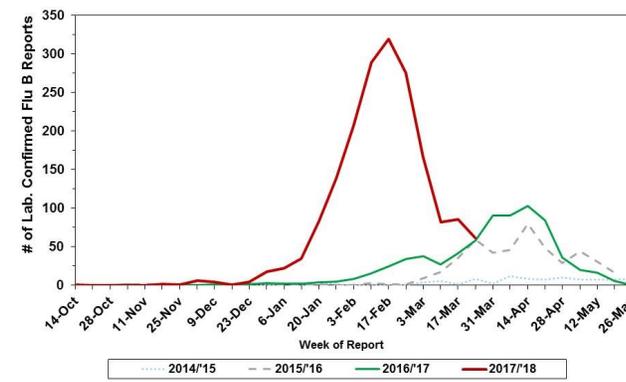
### Laboratory-Based Surveillance for Influenza A Philadelphia, 2014/2015 through 2017/2018 Seasons\*

\*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 increased slightly because of flu B activity. However, influenza activity peaked for the season at week 6 (week ending 2/10/2018). From 10/1/17 to 3/24/18, there have been 106,309 reports of influenza (positive by rapid test, PCR, or culture). The majority of influenza throughout the state has been identified as influenza A (74,238 reports, 69.8%). There have been 207 influenza related deaths reported this season, including six pediatric deaths, with 15 deaths identified during week 12.

## United States

Influenza activity continued to decrease in the U.S. during week 12. Widespread activity was reported in 16 states and Puerto Rico, while 22 states reported regional activity. Local activity was reported by the District of Columbia, Guam, and 8 states (Arkansas, Louisiana, Nevada, North Carolina, Oregon, Tennessee, Texas and West Virginia). The percentage of respiratory specimens that tested positive for influenza decreased slightly during week 12. Specifically, 24,329 specimens were tested at US clinical laboratories, and 3,574 (14.7%) specimens tested positive for influenza. Of those positive, 1,509 (42.2%) specimens tested positive for influenza A and 2,066 (57.8%) specimens tested positive for influenza B. Among the 368 positive influenza specimens received by public health laboratories for confirmatory testing and subtyping, 131 (35.6%) were influenza A and 237 (64.4%) were influenza B. Of the influenza A specimens, 90 (68.7%) were subtyped as H3N2 and 34 (26%) were subtyped as A(H1N1)pdm09. During October 1, 2017-March 24, 2018, CDC has antigenically or genetically characterized 2,384 influenza viruses [578 influenza A(H1N1)pdm09, 1,042 influenza A(H3N2), and 764 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 (71.4%) 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 137 influenza-associated pediatric deaths have been identified nationally this season, four during week 12. 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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