



PHILLY FLU FINDINGS

Philadelphia Department of Public Health
Seasonal Influenza Surveillance Report
MMWR Week 02: Jan 6, 2018—Jan 12, 2019

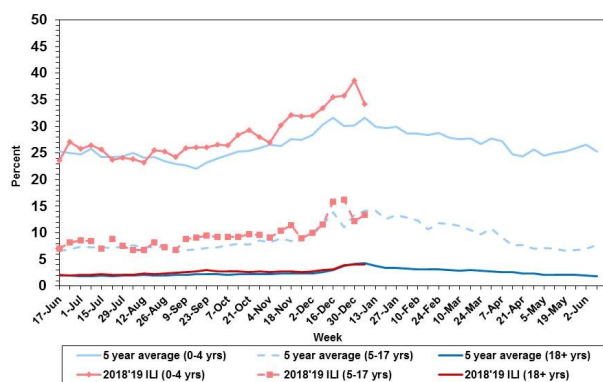
Philadelphia Influenza Activity

Please note these data are provisional and subject to change.

Febrile/flu-like illnesses decreased among children ages 0-4 years during week 02, but increased among children and adolescents 5-17 years old. The number of influenza positive specimens reported from our sentinel hospital laboratory surveillance network decreased slightly, though the percent positivity actually increased. The majority of positive specimens were influenza A. There were 26 reports of severe influenza (Philadelphia resident, positive by rapid test, PCR or culture, and hospitalized for ≥ 24 hrs.) during this time frame, of which 25 (96.2%) were due to influenza A. Two influenza-associated deaths have been reported so far this season. There were two influenza outbreaks (≥ 1 case of laboratory confirmed influenza) reported in a long term care facility during week 02.

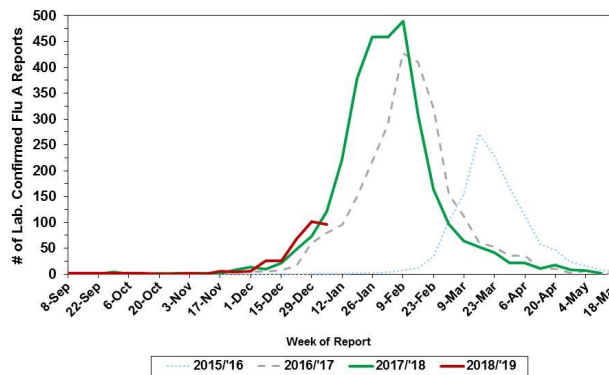
Febrile/Flu-like Illnesses at Philadelphia Emergency Departments, 2018-19 Data Compared to 5-Year Historical Weekly* Averages

*Age group weekly average from the years 2013 - 2017



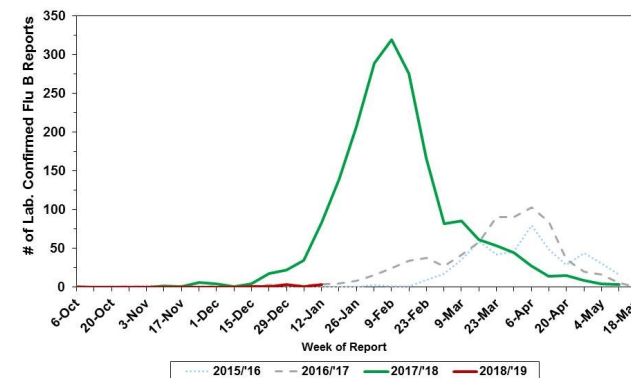
Laboratory-Based Surveillance for Influenza A Philadelphia, 2015/2016 through 2018/2019 Seasons*

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



Laboratory-Based Surveillance for Influenza B Philadelphia, 2015/2016 through 2018/2019 Seasons*

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



Pennsylvania

The Pennsylvania Department of Health (PADOH) has reported “widespread” influenza activity, which is defined by CDC as outbreaks of influenza or increases in influenza-like-illness and recent laboratory confirmed influenza in at least half the regions in the state. According to PADOH, influenza activity has decreased slightly over the past two weeks in all state regions but the activity is still higher than epidemic threshold. From 9/30/18 to 1/12/19, there have been 12,062 laboratory confirmed cases of influenza (positive by rapid test, PCR, or culture). The majority of influenza throughout the state has been identified as influenza A (11,574 reports, 96%). Fifteen influenza related deaths have been reported so far this season.

United States

Influenza activity remained elevated throughout the U.S. during week 02. Widespread activity was reported by 30 states and Guam, while regional influenza activity was reported by 16 states and Puerto Rico. Local activity was reported by three states and sporadic activity was reported by one state, DC, and the US Virgin Islands.

The percentage of respiratory specimens that tested positive for influenza decreased slightly for reporting U.S. clinical laboratories. Specifically, 31,051 specimens were tested at US clinical laboratories, and 3,856 (12.4%) specimens tested positive for influenza. Of those positive, 3,730 (96.7%) specimens tested positive for influenza A and 126 (3.3%) specimens tested positive for influenza B. Among the 752 positive influenza specimens received by public health laboratories for confirmatory testing and subtyping during this week, 743 (98.8%) were influenza A and 9 (1.2%) were influenza B. Of the 679 influenza A specimens subtyped, 605 (89.1%) were subtyped as A(H1N1)pdm09 and 74 (10.9%) were subtyped as A/H3N2. Since September 30, 2018, CDC has antigenically characterized 562 influenza viruses [341 influenza A(H1N1)pdm09, 163 influenza A(H3N2), and 58 influenza B viruses] collected by U.S. laboratories. Majority of influenza A viruses collected were antigenically similar to the cell-grown reference viruses representing the 2018-2019 Northern Hemisphere influenza vaccine viruses. Of the influenza B lineages, all of the Yamagata lineage viruses matched the vaccine strain however, antigenically distinct subclades have emerged for the Victoria lineage. No influenza viruses tested were resistant to oseltamivir, zanamivir, and peramivir. Nineteen influenza-associated pediatric deaths have been identified nationally this season, three during week 02.

All institutional outbreaks and hospitalized and fatal cases of influenza are to be reported to PDPH.

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