



PHILLY FLU FINDINGS

Philadelphia Department of Public Health
Seasonal Influenza Surveillance Report
MMWR Week 04: Jan 20, 2019—Jan 26, 2019

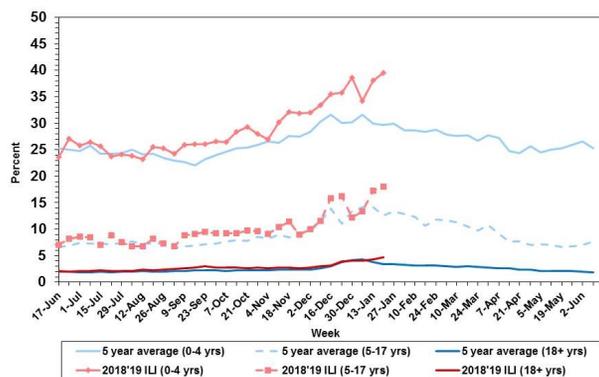
Philadelphia Influenza Activity

Please note these data are provisional and subject to change.

Febrile/flu-like illnesses increased among all age groups during week 04. The number of influenza positive specimens reported from our sentinel hospital laboratory surveillance network increased as well, with nearly 20% of all respiratory specimens being positive for influenza. The majority of positive specimens were influenza A. There were 45 reports of severe influenza (Philadelphia resident, positive by rapid test, PCR or culture, and hospitalized for ≥ 24 hrs.) during this time frame, of which all were due to influenza A. Eight influenza-associated deaths have been reported so far this season, one during week 04. There was one influenza outbreak (≥ 1 case of laboratory confirmed influenza) reported in a long term care facility during week 04.

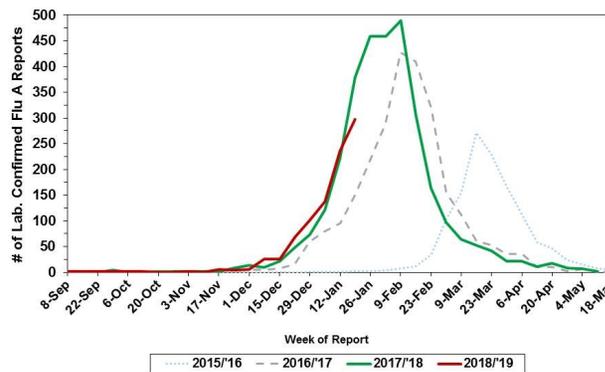
Febrile/Flu-like Illnesses at Philadelphia Emergency Departments, 2018-19 Data Compared to 5-Year Historical Weekly* Averages

*Age group weekly average from the years 2013 - 2017



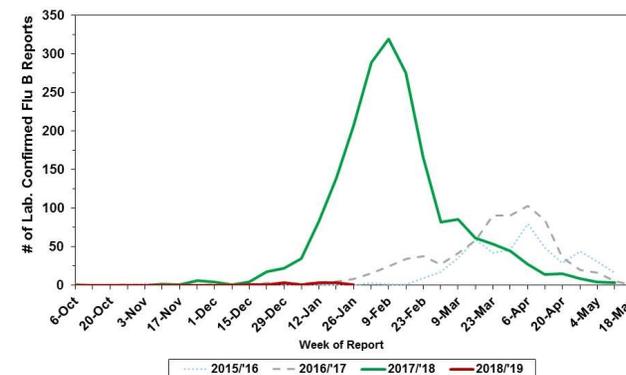
Laboratory-Based Surveillance for Influenza A Philadelphia, 2015/2016 through 2018/2019 Seasons*

*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 increased slightly during the past week in all state regions, with the highest activity reported in the northeast and southeast regions. From 9/30/18 to 1/26/19, there have been 19,757 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 (19,028 reports, 96.3%). Twenty-five influenza-associated deaths have been reported so far this season, including one pediatric death.

United States

Influenza activity increased throughout the U.S. during week 04. Widespread activity was reported by 45 states, while regional influenza activity was reported by three states and Puerto Rico. Local activity was reported by two states and sporadic activity was reported by DC and the US Virgin Islands.

The percentage of respiratory specimens that tested positive for influenza increased for reporting U.S. clinical laboratories. Specifically, 31,460 specimens were tested at US clinical laboratories, and 6,042 (19.2%) specimens tested positive for influenza. Of those positive, 5,922 (98%) specimens tested positive for influenza A and 120 (2%) specimens tested positive for influenza B. Among the 774 positive influenza specimens received by public health laboratories for confirmatory testing and subtyping during this week, 764 (98.7%) were influenza A and 10 (1.3%) were influenza B. Of the 722 influenza A specimens subtyped, 543 (75.2%) were subtyped as A(H1N1)pdm09 and 179 (24.8%) were subtyped as A/H3N2.

Since September 30, 2018, CDC has antigenically characterized 738 influenza viruses [435 influenza A(H1N1)pdm09, 223 influenza A(H3N2), and 80 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. Sporadic instances of oseltamivir resistant and peramivir resistant influenza A(H1N1)pdm09 has been identified. Twenty-four influenza-associated pediatric deaths have been identified nationally this season, two during week 04.

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

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