PHILLY FLU FINDINGS

Philadelphia Department of Public Health
Seasonal Influenza Surveillance Report
MMWR Week 13: Mar 24, 2019—Mar 30, 2019

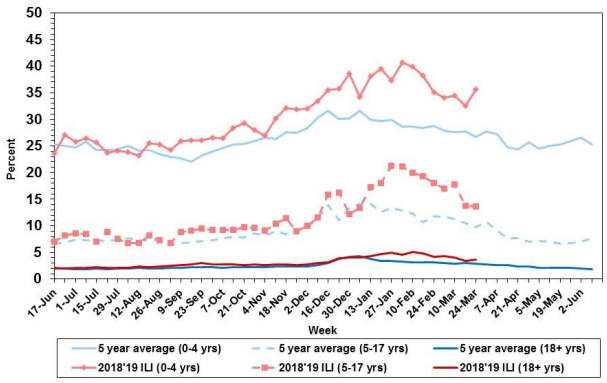
Philadelphia Influenza Activity

Please note these data are provisional and subject to change.

Febrile/flu-like illnesses increased among adults 18-64 years of age, while illnesses declined for children and older adults (65+ years). The number of influenza positive specimens reported from our sentinel hospital laboratory surveillance network decreased. Most of the positive specimens were influenza A. There were 30 reports of severe influenza (Philadelphia resident, positive by rapid test, PCR or culture, and hospitalized for ≥ 24 hrs.) during this time frame, of which 29 (96.7%) were due to influenza A. Twenty-three influenza-associated deaths have been reported so far this season. There was one influenza outbreak (≥ 1 case of laboratory confirmed influenza) reported in a long term care facility during week 13.

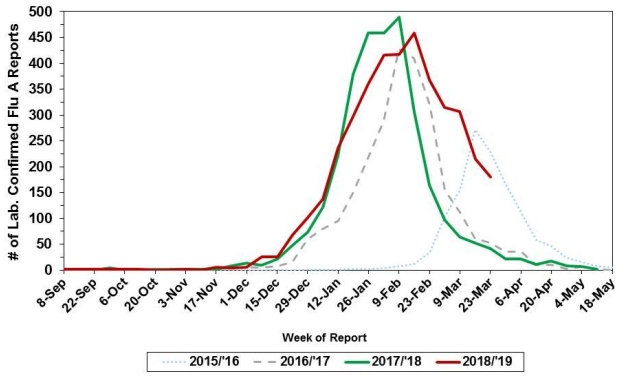
Febrile/Flu-like Illnesses at Philadelphia Emergency Departments, 2018-19 Data Compared to 5-Year Historical Weekly* Averages

**Age group weekly average from the years 2013 - 2017*



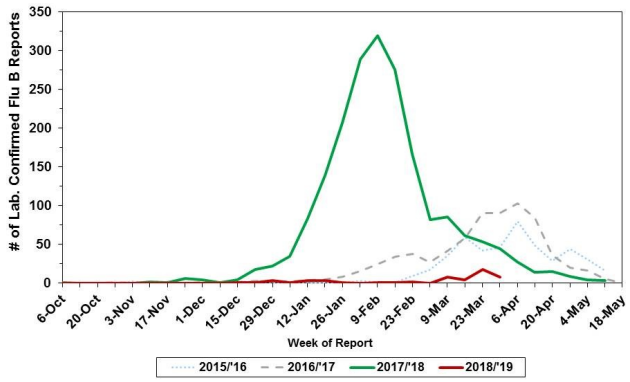
Laboratory-Based Surveillance for Influenza A Philadelphia, 2015/2016 through 2018/2019 Seasons*

**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 continued to decrease during the past week in all state regions, however activity is still higher than epidemic threshold. The highest influenza activity was reported in the northwest and southwest regions. From 9/30/18 to 3/30/19, there have been 85,815 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 (82,768 reports, 96.4%). One hundred seven influenza-associated deaths have been reported so far this season, including two pediatric deaths.

United States

Influenza activity decreased but remained elevated in the U.S. during week 13. Influenza A(H1N1)pdm09 viruses predominated from October to mid-February and Influenza A(H3N2) viruses have been more commonly identified since late February. There have been small numbers of influenza B viruses reported. Widespread influenza activity was reported by 33 states and Puerto Rico, while regional activity was reported by 15 states. Local activity was reported by one state and DC and sporadic activity was reported by one state.
The percentage of respiratory specimens that tested positive for influenza decreased for reporting U.S. clinical laboratories. Specifically, 29,407 specimens were tested at US clinical laboratories, and 5,324 (18.1%) specimens tested positive for influenza. Of those positive, 4,942 (92.8%) specimens tested positive for influenza A and 382 (7.2%) specimens tested positive for influenza B. Among the 720 positive influenza specimens received by public health laboratories for confirmatory testing and subtyping during this week, 690 (95.8%) were influenza A and 30 (4.2%) were influenza B. Of the 662 influenza A specimens subtyped, 175 (26.4%) were subtyped as A(H1N1)pmd09 and 487 (73.6%) were subtyped as A/H3N2.
Since September 30, 2018, CDC has antigenically characterized 1,769 influenza viruses [906 influenza A(H1N1)pdm09, 642 influenza A(H3N2), and 221 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 2018-2019 Northern Hemisphere influenza vaccine viruses, although some genetic diversity exists for the H3N2 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. The majority of influenza viruses tested show susceptibility to oseltamivir and peramivir. All influenza viruses showed susceptibility to zanamirvir. Eighty-two influenza-associated pediatric deaths have been identified nationally this season, six during week 13.

All institutional outbreaks and hospitalized and fatal cases of influenza are to be reported to PDPH.
Phone: (215) 685-6742 Fax: (215) 238-6947 Email: ACD@phila.gov Reporting requirements and forms are posted online at hip.phila.gov