



PHILLY FLU FINDINGS

Philadelphia Department of Public Health

Seasonal Influenza Surveillance Report

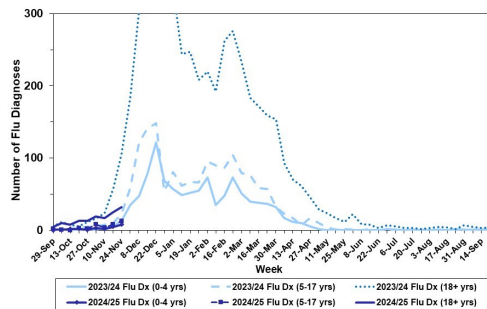
MMWR Week 48: November 24, 2024—November 30, 2024

Philadelphia Influenza Activity

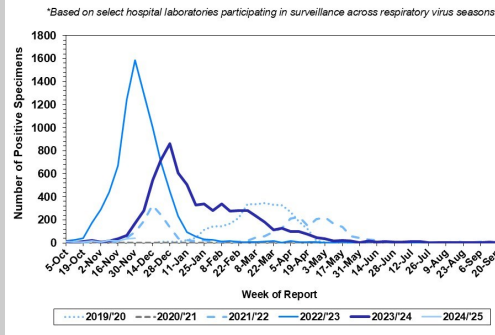
Please note these data are provisional and subject to change.

Influenza diagnoses at local emergency departments remained low for all ages during week 48. However, the trend for those 18+ years has been slowly increasing. Positive detections of influenza A and B at select local hospital laboratories both remain low. No influenza outbreaks have been reported or confirmed (≥ 1 case of laboratory confirmed flu reported in a long-term care facility) so far this season.

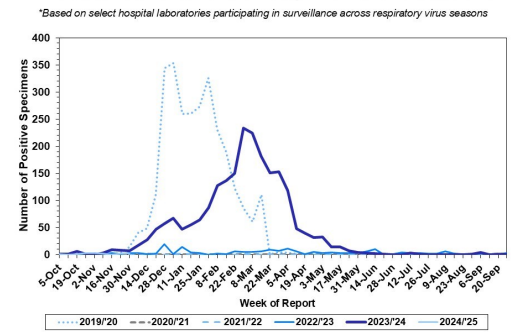
Influenza Diagnoses at Philadelphia Emergency Departments, Current Season Compared with Previous Season



Laboratory-Based Surveillance for Influenza A Philadelphia, 2019/2020 through 2024/2025 Seasons*



Laboratory-Based Surveillance for Influenza B Philadelphia, 2019/2020 through 2024/2025 Seasons*



Pennsylvania

As of November 30, 2024, the Pennsylvania Department of Health (PADOH) reported that influenza A and B activity is low. PADOH has resumed weekly summaries for trends related to Influenza, RSV, and COVID-19. For more information, please visit: <https://www.pa.gov/en/agencies/health/diseases-conditions/infectious-disease/respiratory-viruses/respiratory-virus-dashboard.html>

United States

As of November 30, 2024, the CDC reports that influenza activity is continuing to increase, but overall remains low nationally. In week 48, clinical laboratories reported 2,348 specimens (3.5%) of 66,386 specimens tested positive for influenza, 94.5% of which were influenza A. Of influenza A specimens subtyped at public health labs, 36.3% have been subtyped as H1N1, 61.7% as H3N2, and 2.0% as H5. In week 48, Washington D.C reported very high levels of activity, while 11 other jurisdictions reported high to moderate levels of activity. All other jurisdictions reported low to minimal activity. Of note, two human infections of influenza A (H3N2) variant viruses were recently reported by the Minnesota Department of Health. For more information, please visit: <https://www.cdc.gov/fluview/surveillance/2024-week-48.html>

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

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