

Influenza Surveillance Report

Division of Epidemiology - Disease Surveillance and Investigation
 District of Columbia Department of Health

2014-2015 Influenza Season Week 49 (November 30, 2014 – December 6, 2014)

(All data are preliminary and may change as more reports are received)

SUMMARY

- 10 cases of Influenza were reported by hospitals during this reporting period.
- Zero pediatric-deaths associated with Influenza were recorded during this reporting period.
- For the 2014-2015 Influenza Season to-date, 45 positive Influenza cases have been reported.

INFLUENZA SURVEILLANCE FROM HOSPITALS & AMBULATORY CARE FACILITIES

District of Columbia hospitals and laboratories report detailed information on cases of Influenza on a daily basis. However, in accordance with CDC guidelines, only Influenza-associated deaths in cases <18 years of age and Novel Influenza A infections are reportable.

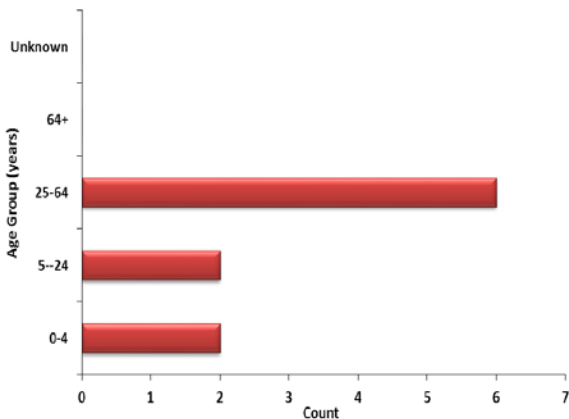
The table below summarizes weekly and cumulative cases of Influenza for the 2014-2015 Season. Data are also presented by age group and by number of cases reported weekly. During week 49 (November 30, 2014–December 6, 2014), there were 10 new cases of Influenza reported. To date, the District has received 45 positive Influenza cases reported by hospitals.

Surveillance of Influenza Cases Reported By Influenza Type

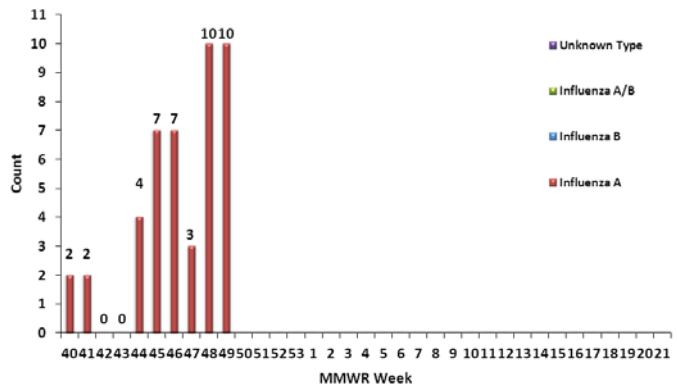
	Week 49 (November 30, 2014– December 6, 2014)		Cumulative Cases for Weeks 40 – 20 (September 28, 2014 – May 23, 2015)	
Influenza A	10	(100%)	45	(100%)
Influenza B	0	(0%)	0	(0%)
Influenza A/B	0	(0%)	0	(0%)
Influenza (not typed)	0	(0%)	0	(0%)
Total	10*	(100%)	45*	(100.0%)

**Includes results from Rapid Diagnostic Testing, Viral Culture, RT-PCR, Serology, and Immunofluorescence.*

Positive Influenza Tests, by Age Group
 Week 49 (30 Nov 2014 - 6 Dec 2014)



Positive Influenza Tests by Week
 September 28 2014 - May 23, 2015



RAPID DIAGNOSTIC TESTING

Rapid Diagnostic Tests are screening tests used to detect the Influenza virus in a short period of time. While initially less accurate than PCR and viral culture, rapid diagnostics are more accurate as the Influenza season progresses. During week 49, 83 out of a total of 114 tests were performed using rapid diagnostic testing in clinical laboratories. Of these, 10 (8.3%) positive Influenza specimens were identified during week 49 using rapid diagnostics.

Week: 49 (November 30, 2014– December 6, 2014)	
No. of specimens tested Rapid Diagnostics	83
No. of positive specimens (%)	10 (8.3%)
Positive specimens by type/subtype	
Influenza A	10 (100%)
Influenza B	0 (0%)
Influenza A/B	0 (0%)
Influenza – unknown type	0 (0%)

INFLUENZA-LIKE ILLNESS (ILI) SURVEILLANCE

Sentinel surveillance for ILI consists of three outpatient reporting sites for the District of Columbia. The sentinel surveillance sites report the total number of ILI cases encountered per week and the total number of patients seen at the clinic during that same week. For this system, ILI is defined as the existence of fever (temperature of 100°F [37.8°C] or greater) and a cough and/or a sore throat in the absence of a known cause other than Influenza.

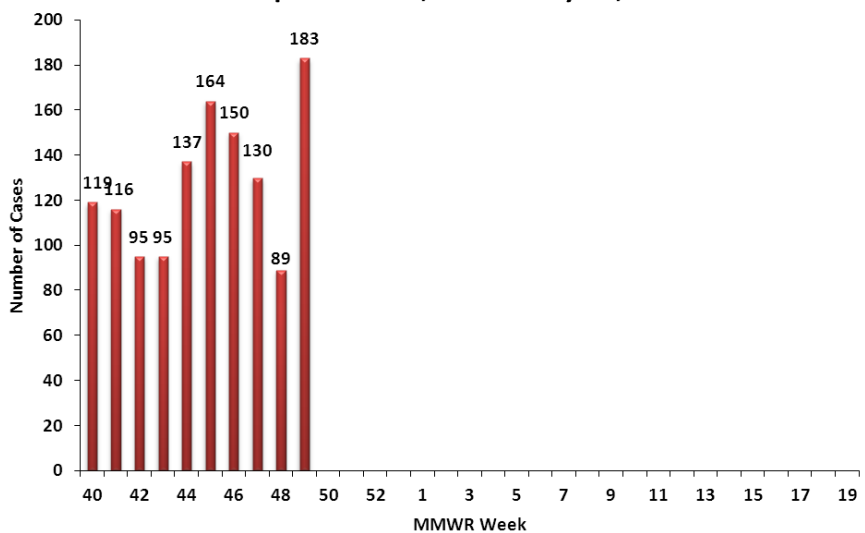
For week 49, sentinel providers reported that 183 out of 1085 (16.87%) visits met the criteria for ILI.

Sentinel Surveillance ILI Activity for Washington, DC

Week of	Activity *
Nov 30 – Dec 6	<i>Sporadic</i>

- *No Activity** – overall clinical activity remains low and there are no lab confirmed Influenza cases;
- Sporadic** – isolated lab confirmed Influenza cases reported and ILI activity is not increased;
- Local** – increased ILI activity and recent lab confirmed Influenza cases. As the District of Columbia is not a state, this is the highest level of ILI activity it can report.

**Influenza-Like Illness Reported by MMWR Weekly
September 28, 2014 - May 23, 2015**



INFLUENZA TESTING BY THE DISTRICT OF COLUMBIA PUBLIC HEALTH LABORATORY (DC PHL)

The DC PHL subtypes human isolates to monitor the circulating strains of Influenza. The isolates are submitted to the DC PHL by hospitals and commercial laboratories. No specimens were reported by the PHL for week 49, but additional samples were sent for weeks 40 to 44, with 11 specimens being tested and one testing positive for influenza A (H3).

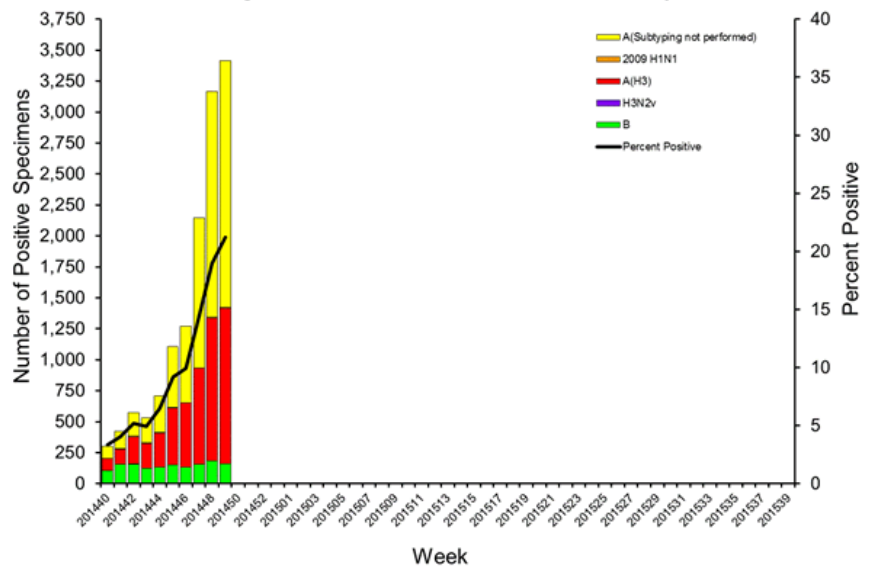
DC PHL Surveillance of Influenza Cases Reported By Influenza Subtype

DC PHL Influenza Testing	November 30, 2014 – December 6, 2014	Total Cases September 28, 2014 – May 23, 2015
Number of specimens tested	0	11
◆ Number of specimens positive for Influenza:	0 (0%)	1 (0.91%)
● Influenza A	0 (0%)	1 (100%)
▪ H1 2009 H1N1	0 (0%)	0 (0%)
▪ H1 seasonal	0 (0%)	0 (0%)
▪ H3	0 (0%)	1 (100%)
● Influenza B	0 (0%)	0 (0%)

NATIONAL INFLUENZA ASSESSMENT

The CDC's weekly seasonal Influenza surveillance report for week 49 noted that Influenza activity continued to increase in the United States. The proportion of deaths due to Influenza and pneumonia in the US was below the epidemic threshold. Two Influenza-associated pediatric deaths were reported to the CDC during week 49, one associated with an influenza A (H3) virus and another associated with an untyped A virus. For the 2014-2015 season, a total of 7 pediatric death associated with Influenza has been reported in the US. During week 49, 16,093 specimens were tested, of which 3,415 (21.2%) were positive. Of the 3,415 respiratory specimens that tested positive during week 49, 3,252 (95.2%) were Influenza A and 163 (4.8%) were Influenza B. Of the Influenza A samples, 7 (0.2%) were 2009 H1N1, 1,254 (38.6%) were H3, and 1,991 (61.2%) were not subtyped.

Influenza Positive Tests Reported to CDC by U.S. WHO/NREVSS Collaborating Laboratories, National Summary, 2014-15



Get Vaccinated!

To find an Influenza vaccine provider, visit the District of Columbia Immunization Resource Center at

<http://doh.dc.gov/node/190532>



For additional information about Influenza and Influenza activity in the United States, please visit: <http://www.cdc.gov/flu/index.htm>. Questions about Influenza in the District of Columbia or this report should be directed to the Division of Epidemiology - Disease Surveillance and Investigation at (202) 442-9150 or email keith.li@dc.gov.