Influenza Surveillance Report

Division of Epidemiology - Disease Surveillance and Investigation

District of Columbia Department of Health

2015-2016 Influenza Season Week 17 (April 24, 2016 – April 30, 2016)

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

SUMMARY

- 31 cases of Influenza were reported by hospitals during this reporting period
- Zero pediatric deaths were reported during this period
- For the 2015-2016 Influenza Season to-date, 1013 positive Influenza cases have been reported
- DC PHL did not report any specimens tested for week 17
- Flu activity dropped since last week, but remains elevated

INFLUENZA SURVEILLANCE FROM HOSPITALS & AMBULATORY CARE FACILITIES

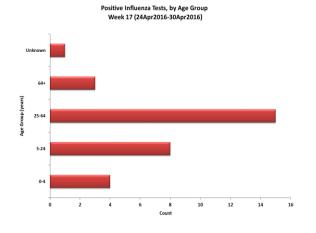
District of Columbia hospitals and laboratories report detailed information on cases of Influenza on a daily basis. However, in accordance with CDC guidelines, only Influenza-associated deaths in cases <18 years of age and Novel Influenza A infections are reportable. We also request that Influenza hospitalizations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

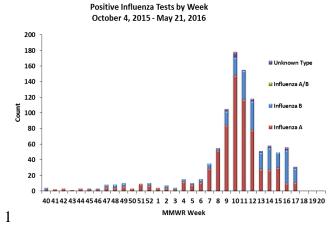
The table below summarizes weekly and cumulative cases of Influenza for the 2015-2016 Season. Data are also presented by age group and by number of cases reported weekly. During week 17 (April 24, 2016—April 30, 2016), there were 31 new cases of Influenza reported. To date, the District has received 1013 positive Influenza cases reported by hospitals.

Surveillance of Influenza Cases Reported By Influenza Type

	Week 17 (April 24, 2016– April 30, 2016)		Cumulative Cases for Weeks 40 – 20 (October 4, 2015 – May 21, 2016)	
Influenza A	11	(35.48 %)	704	(69.50%)
Influenza B	18	(58.07%)	284	(28.03%)
Influenza A/B	0	(0%)	0	(0%)
Influenza (not typed)	2	(6.45%)	25	(2.47%)
Total	31*	(100%)	1013*	(100.00%)

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





RAPID DIAGNOSTIC TESTING

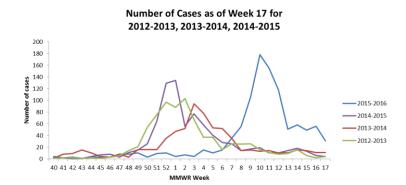
Rapid Diagnostic Tests are screening tests used to detect the Influenza virus in a short period of time. While initially less accurate than PCR and viral culture, rapid diagnostics are more accurate as the Influenza season progresses. During week 17, 128 out of a total of 282 tests were performed using rapid diagnostic testing in clinical laboratories. Of these, 15 (11.72%) positive Influenza specimens were identified during week 17 using rapid diagnostics.

Week: 17 (Apr 24, 2016 – Apr 30, 2016)				
No. of specimens tested Rapid Diagnostics	128			
No. of positive specimens (%)	15 (11.72%)			
Positive specimens by type/subtype				
Influenza A	5 (33.33%)			
Influenza B	8 (53.34%)			
Influenza A/B	0 (0%)			
Influenza – unknown type	2 (13.33%)			

WEEK 17 COMPARISON WITH PREVIOUS SEASONS

For week 17, there were 31 cases in the current 2015-2016 season, 4 cases in last year's 2014-2015 season, 11 cases in the 2013-2014 season, and 4 in the 2012-2013 season.

Cumulatively, there are a total of 1013 cases in the district up to week 17 for the current season, 815 during the 2014-2015 season, 682 in the 2013-2014 season, and 774 in the 2012-2013 season.



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 17, sentinel providers reported 61 of 1299 (4.70%) visits that met the criteria for ILI.

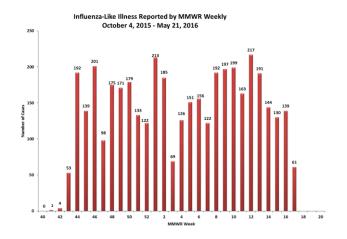
Sentinel Surveillance ILI Activity for Washington, DC

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Week of	Activity *
Apr 24 – Apr 30	Local

*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 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. DC PHL did not report any specimens tested for week 17.

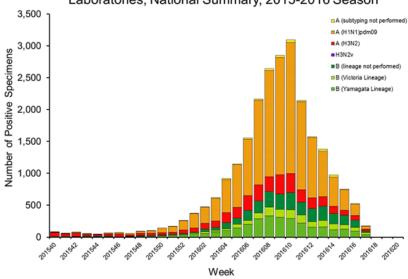
DC PHL Surveillance of Influenza Cases Reported By Influenza Subtype

DC PHL Influenza Testing	April 24, 2016 – April 30, 2016	Total Cases October 4, 2015 – May 21, 2016
Number of specimens tested	0	58
 Number of specimens positive for Influenza: 	0 (0%)	6 (10.35%)
Influenza A	0 (0%)	3 (50.0%)
■ H1 2009 H1N1	0 (0%)	2(66.7%)
H1 seasonal	0 (0%)	0 (0%)
■ H3	0 (0%)	1(33.3%)
Influenza B	0 (0%)	3 (50.0%)

NATIONAL INFLUENZA ASSESSMENT

The CDC's weekly seasonal Influenza surveillance report for week 17 noted that influenza activity decreased in the United States. The proportion of deaths due to Influenza and pneumonia in the US was below the epidemic threshold. Four pediatric deaths were reported to the CDC during week 17, two of which were associated with influenza A (H1N1)pdm09 viruses, one with an un-typed influenza A virus, and one with an influenza B virus. For the 2015-2016 season, a total of 64 pediatric deaths associated with Influenza have been reported in the US. During week 17, 547 specimens were tested by public health laboratories, of which 175 were positive. Of the 175 respiratory specimens that tested positive during week 17, 82 (46.9%) were Influenza A and 93 (53.1%) were Influenza B. Of the Influenza A samples, 48 (58.5%) were 2009 H1N1, 30 (36.6%) were H3, and 4 (4.9%) were not subtyped.





Get Vaccinated!

To find an Influenza vaccine provider, visit the District of Columbia Immunization Resource Center at $\underline{\text{http://doh.dc.gov/node/190532}}$



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.