

Influenza Surveillance Report

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

2015-2016 Influenza Season Week 42 (October 18, 2015 – October 24, 2015)

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

SUMMARY

- 3 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 2015-2016 Influenza Season to-date, 9 positive Influenza cases have been reported
- DC PHL tested 4 samples in week 42, with no positive results
- The current season has started similarly to previous seasons aside from the unusually severe start for 2013-2014

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.

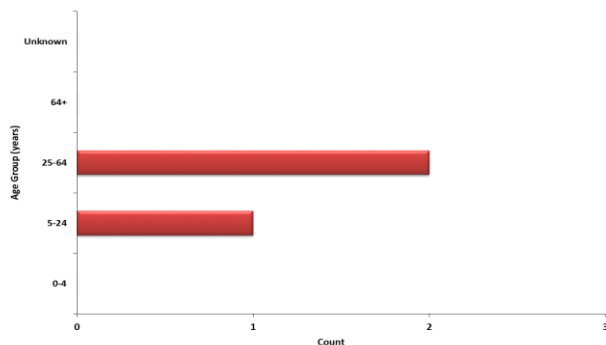
The table below summarizes weekly and cumulative cases of Influenza for the 2015-2016 Season. Data are also presented by age group and by number of cases reported weekly. During week 42 (October 18, 2015–October 24, 2015), there were 3 new cases of Influenza reported. To date, the District has received 9 positive Influenza cases reported by hospitals.

Surveillance of Influenza Cases Reported By Influenza Type

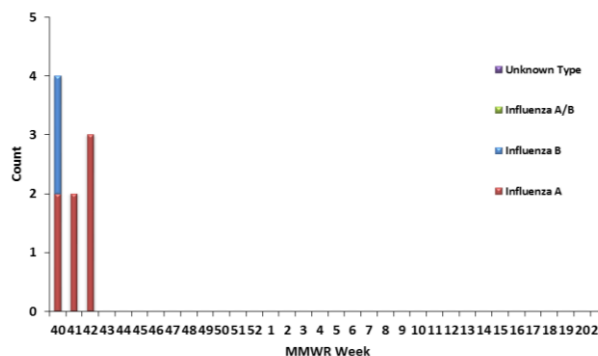
	Week 42 (October 18, 2015– October 24, 2015)		Cumulative Cases for Weeks 40 – 20 (October 4, 2015 – May 21, 2016)	
Influenza A	3	(100%)	7	(77.78%)
Influenza B	0	(0%)	2	(22.22%)
Influenza A/B	0	(0%)	0	(0%)
Influenza (not typed)	0	(0%)	0	(0%)
Total	3*	(100%)	9*	(100.00%)

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

Positive Influenza Tests, by Age Group
Week 42 (18Oct2015 - 24Oct2015)



Positive Influenza Tests by Week
October 4, 2015 - May 21, 2016



RAPID DIAGNOSTIC TESTING

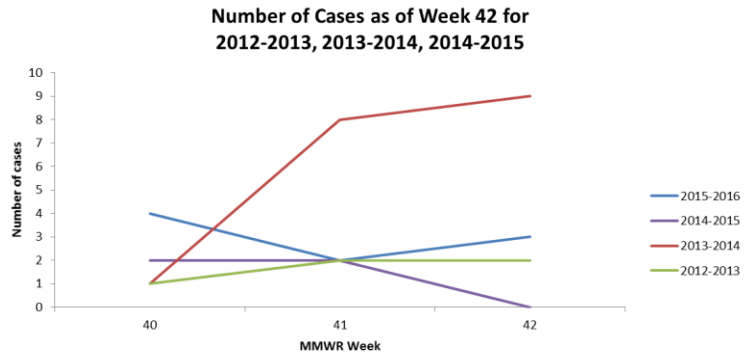
Rapid Diagnostic Tests are screening tests used to detect the Influenza virus in a short period of time. While initially less accurate than PCR and viral culture, rapid diagnostics are more accurate as the Influenza season progresses. During week 42, 124 out of a total of 198 tests were performed using rapid diagnostic testing in clinical laboratories. Of these, 3 positive Influenza specimen were identified during week 42 using rapid diagnostics.

Week: 42 (Oct 18, 2015 – Oct 24, 2015)	
No. of specimens tested Rapid Diagnostics	124
No. of positive specimens (%)	3 (2.42%)
Positive specimens by type/subtype	
Influenza A	3 (100%)
Influenza B	0 (0%)
Influenza A/B	0 (0%)
Influenza – unknown type	0 (0%)

WEEK 42 COMPARISON WITH PREVIOUS SEASONS

For week 42, there were 3 case in the current 2015-2016 season, 0 cases in last year’s week 42, 2014-2015 season, 9 cases during week 42 in the 2013-2014 season, and 2 in the 2012-2013 season.

Cumulatively, there are a total of 9 cases in the district up to week 42 for the current season, 4 during the 2014-2015 season, 18 in the 2013-2014 season, and 5 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 42, sentinel providers reported 4 of 918 (0.11%) visits that met the criteria for ILI.

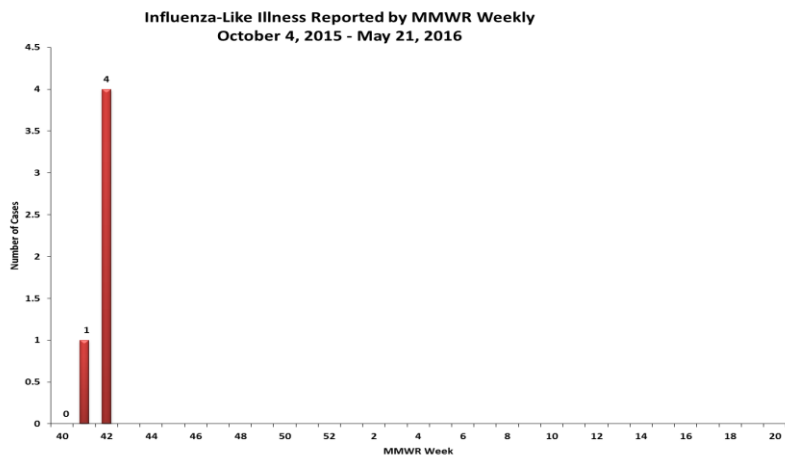
Sentinel Surveillance ILI Activity for Washington, DC

Week of	Activity *
Oct 18 – Oct 24	No Activity

***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 tested 4 samples in week 42, with no positive results.

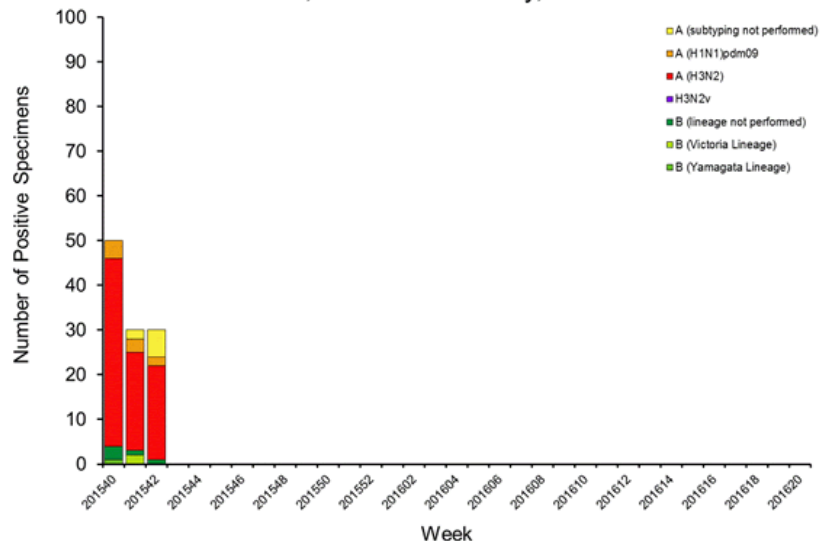
DC PHL Surveillance of Influenza Cases Reported By Influenza Subtype

DC PHL Influenza Testing	October 18, 2015 – October 24, 2015	Total Cases October 4, 2015 – May 21, 2016
Number of specimens tested	4	0
◆ Number of specimens positive for Influenza:	0 (0%)	0 (0%)
● Influenza A	0 (0%)	0 (0%)
▪ H1 2009 H1N1	0 (0%)	0 (0%)
▪ H1 seasonal	0 (0%)	0 (0%)
▪ H3	0 (0%)	0 (0%)
● Influenza B	0 (0%)	0 (0%)

NATIONAL INFLUENZA ASSESSMENT

The CDC's weekly seasonal Influenza surveillance report for week 42 noted that influenza activity was low in the United States. The proportion of deaths due to Influenza and pneumonia in the US was below the epidemic threshold. One pediatric death was reported to the CDC during week 42, associated with an influenza B virus. For the 2015-2016 season, a total of 1 pediatric death associated with Influenza has been reported in the US. During week 42, 638 specimens were tested, of which 34 were positive. Of the 34 respiratory specimens that tested positive during week 42, 33 (97.1%) were Influenza A and 1 (2.9%) was Influenza B. Of the Influenza A samples, 2 (6.1%) were 2009 H1N1, 24 (72.7%) were H3, and 7 (21.2%) were not subtyped.

Influenza Positive Tests Reported to CDC by U.S. Public Health Laboratories, National Summary, 2015-16 Season



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.