Influenza Surveillance Report

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

2015-2016 Influenza Season Week 47 (November 22, 2015 – November 28, 2015)

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

SUMMARY

- 8 cases of Influenza were reported by hospitals during this reporting period
- 4 additional cases were reported between weeks 45 and 46
- Zero pediatric-deaths associated with Influenza were recorded during this reporting period
- For the 2015-2016 Influenza Season to-date, 27 positive Influenza cases have been reported
- DC PHL did not report any specimens tested for week 47
- The week's flu activity has been the highest this season yet

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.

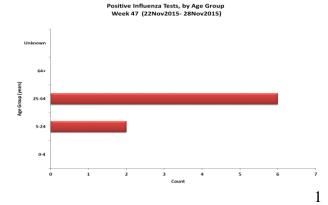
The table below summarizes weekly and cumulative cases of Influenza for the 2015-2016 Season. Data are also presented by age group and by number of cases reported weekly. During week 47 (November 22, 2015–November 28, 2015), there were 8 new cases of Influenza reported, in addition to 4 more cases reported between weeks 45 and 46. To date, the District has received 27 positive Influenza cases reported by hospitals.

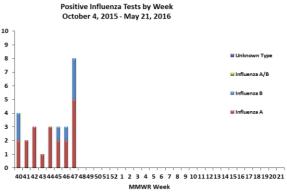
Week 47 Cumulative Cases for Weeks 40 – 20 (November 22, 2015– November (October 4, 2015 - May 21, 2016) 28, 2015) Influenza A 5 (62.5%)20 (74.1%)3 Influenza B (37.5%)7 (25.9%)Influenza A/B 0 0 (0%) (0%) 0 Influenza (not typed) (0%) 0 (0%) 27* 8* Total (100%)(100.00%)

Surveillance of Influenza Cases Reported By Influenza Type

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

Count





RAPID DIAGNOSTIC TESTING

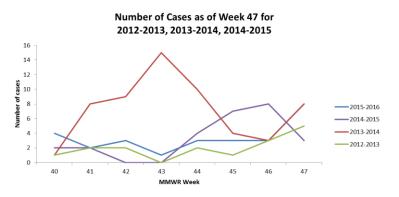
Rapid Diagnostic Tests are screening tests used to detect the Influenza virus in a short period of time. While initially less accurate than PCR and viral culture, rapid diagnostics are more accurate as the Influenza season progresses. During week 47, 146 out of a total of 209 tests were performed using rapid diagnostic testing in clinical laboratories. Of these, 8 positive Influenza specimen was identified during week 47 using rapid diagnostics.

| Week: 47 (Nov 22, 2015 – Nov 28, 2015) | | |
|---|-----------|--|
| No. of specimens tested Rapid Diagnostics | 146 | |
| No. of positive specimens (%) | 8 (5.5%) | |
| Positive specimens by type/subtype | | |
| Influenza A | 5 (62.5%) | |
| Influenza B | 3 (37.5%) | |
| Influenza A/B | 0 (0%) | |
| Influenza – unknown type | 0 (0%) | |

WEEK 47 COMPARISON WITH PREVIOUS SEASONS

For week 47, there were 8 cases in the current 2015-2016 season, 3 cases in last year's week 47, 2014-2015 season, 8 cases during week 47 in the 2013-2014 season, and 5 in the 2012-2013 season.

Cumulatively, there are a total of 27 cases in the district up to week 47 for the current season, 26 during the 2014-2015 season, 58 in the 2013-2014 season, and 16 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 47, sentinel providers reported 98 of 1109 (8.84%) visits that met the criteria for ILI.

Sentinel Surveillance ILI Activity for

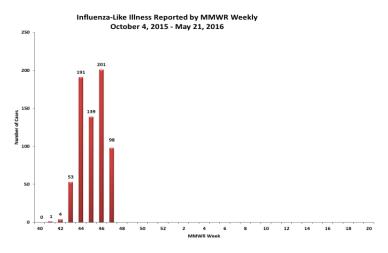
Washington, DC

| Week of | Activity * | |
|-----------------|------------|--|
| Nov 22 – Nov 28 | Sporadic | |

*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)

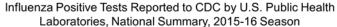
The DC PHL subtypes human isolates to monitor the circulating strains of Influenza. The isolates are submitted to the DC PHL by hospitals and commercial laboratories. DC PHL did not report any specimens tested for week 47.

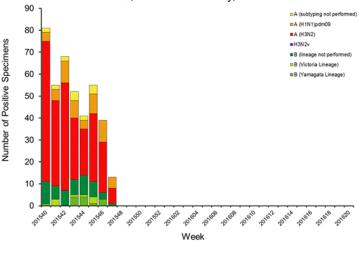
| DC PHL Influenza Testing | November 22, 2015 – November 28, 2015 | Total Cases October 4, 2015 – May 21, 2016 |
|---|--|---|
| Number of specimens tested | 0 | 22 |
| Number of specimens positive for Influenza: | 0 (0%) | 5 (22.7%) |
| Influenza A | 0 (0%) | 2 (40%) |
| H1 2009 H1N1 | 0 (0%) | 1(50%) |
| H1 seasonal | 0 (0%) | 0 (0%) |
| ■ H3 | 0 (0%) | 1(50%) |
| Influenza B | 0 (0%) | 3 (60%) |

DC PHL Surveillance of Influenza Cases Reported By Influenza Subtype

NATIONAL INFLUENZA ASSESSMENT

The CDC's weekly seasonal Influenza surveillance report for week 47 noted that influenza activity increased slightly in the United States. The proportion of deaths due to Influenza and pneumonia in the US was below the epidemic threshold. No pediatric deaths were reported to the CDC during week 47. For the 2015-2016 season, a total of 2 pediatric death associated with Influenza has been reported in the US. During week 47, 481 specimens were tested, of which 13 were positive. Of the 13 respiratory specimens that tested positive during week 47, 12 (92.3%) were Influenza A and 1 (7.7%) were Of the Influenza A Influenza B. samples, and 5 (41.7%) were 2009 H1N1, 7 (58.3%) were H3.





Get Vaccinated! To find an Influenza vaccine provider, visit the District of Columbia Immunization Resource Center at <u>http://doh.dc.gov/node/190532</u>

★ For additional information about Influenza and Influenza activity in the United States, please visit: <u>http://www.cdc.gov/flu/index.htm</u>. 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 <u>keith.li@dc.gov</u>.