

Influenza Surveillance Report

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

2013-2014 Influenza Season
Week 12 (March 16, 2014 – March 22, 2014)
(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.
- Zero pediatric-deaths associated with Influenza were recorded during this reporting period.
- For the 2013-2014 Influenza season to-date, 619 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. Please note that data from hospitals include all cases received by participating hospitals, regardless of residency.

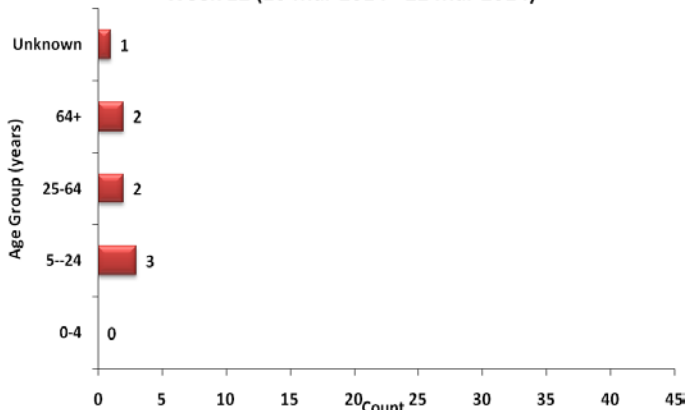
The table below summarizes weekly and cumulative cases of Influenza for the 2013-2014 Season. Data are also presented by age group and by number of cases reported weekly. During week 12 (March 16, 2014– March 22, 2014), there were 8 new cases of Influenza reported. To date, the District has received 619 positive cases reported by hospitals.

Surveillance of Influenza Cases Reported By Influenza Type

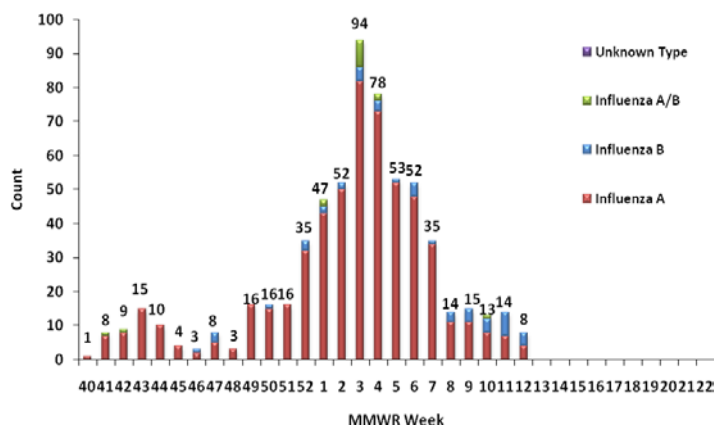
	Week 12 (March 16, 2014 – March 22, 2014)		Cumulative Cases for Weeks 40 – 20 (September 29, 2013 – May 17, 2014)	
Influenza A	4	(50%)	558	(90.14%)
Influenza B	4	(50%)	47	(7.60%)
Influenza A/B	0	(0%)	14	(2.26%)
Influenza (not typed)	0	(0%)	0	(0%)
Total	8*	(100%)	619*	(100.0%)

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

Positive Influenza Tests, by Age Group
Week 12 (16 Mar 2014 - 22 Mar 2014)



Positive Influenza Tests by Week
September 29 2013 - May 17, 2014



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 12, 78 out of a total of 125 tests were performed using rapid diagnostic testing in clinical laboratories. Of these, 7 of the 78 (8.94%) rapid tests tested positive for influenza during week 11. The two remaining tests were done with serology and RT-PCR.

Week: 12 (March 16, 2014– March 22, 2014)	
No. of specimens tested Rapid Diagnostics	78
No. of positive specimens (%)	7 (8.94%)
+Positive specimens by type/subtype	
Influenza A	4 (57.14%)
Influenza B	3 (42.86%)
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.

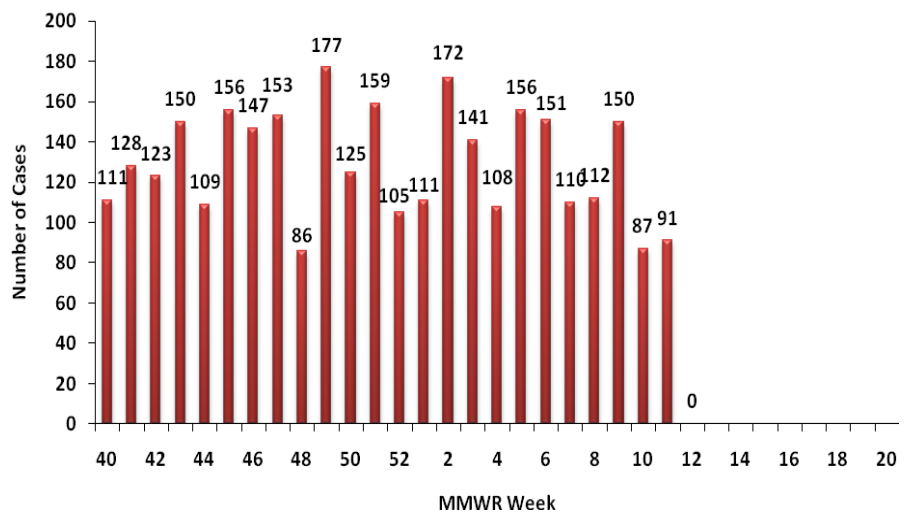
For week 12, sentinel providers reported did not report any visits meeting the criteria for ILI.

Sentinel Surveillance ILI Activity for Washington, DC

Week of	Activity *
Mar 16 – Mar 22	<i>Local</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 29, 2013 - May 17, 2014**



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. In week 12, 10 specimens were sent to the PHL lab for testing, in which one was positive (Influenza A 2009 H1N1). To date, 216 specimens have been tested, of which there have been 139 positive specimens. All but 14 of the isolates were subtyped as Influenza A/H1 2009 H1N1, with 11 being subtyped as Influenza A H3 and 3 being subtyped as Influenza B.

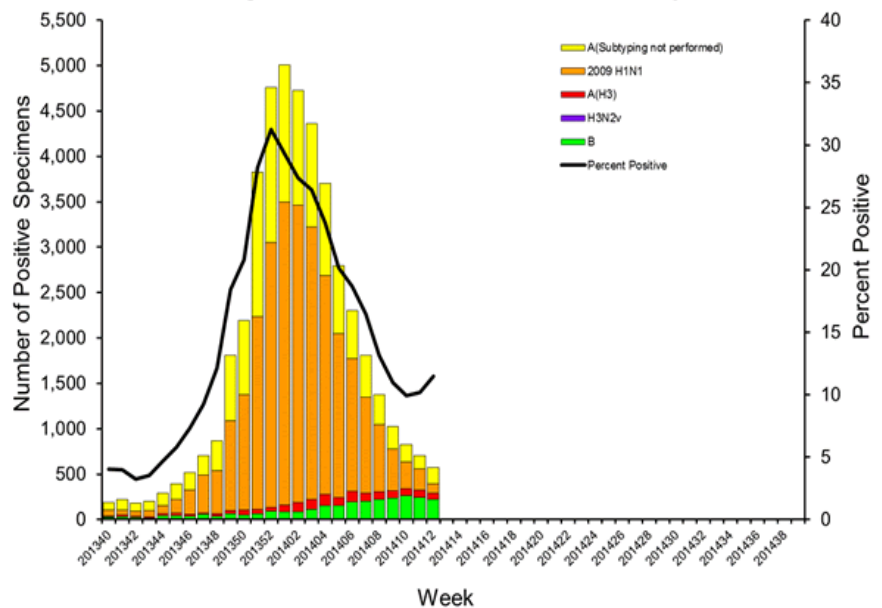
DC PHL Surveillance of Influenza Cases Reported By Influenza Subtype

DC PHL Influenza Testing	Week 12 March 16, 2014 – March 22, 2014	Cumulative Cases for Weeks 40 - 20 October 1, 2013 – May 17, 2014
Number of specimens tested	10	216
◆ Number of specimens positive for Influenza:	1 (10%)	139 (64.35%)
● Influenza A	1 (100%)	136 (97.84%)
▪ H1 2009 H1N1	1 (100%)	125 (91.91%)
▪ H1 seasonal	0 (0%)	0 (0%)
▪ H3	0 (0%)	11 (8.09%)
● Influenza B	0 (0%)	3 (2.16%)

NATIONAL INFLUENZA ASSESSMENT

The CDC's weekly seasonal Influenza surveillance report for week 12 noted that Influenza activity continued to decrease. The proportion of deaths due to Influenza and pneumonia in the US was below the epidemic threshold. Four Influenza-associated pediatric deaths were reported to the CDC during week 12, with one associated with a 2009 H1N1 virus, and two with un-typed Influenza A viruses. One death was associated with an Influenza B virus. For the 2013-2014 season, a total of 79 pediatric deaths associated with Influenza have been reported in the US. During week 12, 4,977 specimens were tested, of which 571 (11.5%) were positive. Of the 571 respiratory specimens that tested positive during week 12, 348 (60.9%) were Influenza A and 223 (39.1%) were Influenza B. Of the Influenza A samples, 101 (29%) were 2009 H1N1, 68 (19.5%) were H3, and 179 (51.4%) were not subtyped.

Influenza Positive Tests Reported to CDC by U.S. WHO/NREVSS Collaborating Laboratories, National Summary, 2013-14



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) 442-8141 or email gabrielle.ray@dc.gov.