

Influenza Surveillance Report

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

2014-2015 Influenza Season Week 17 (April 26, 2015 – May 2, 2015)

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

SUMMARY

- 1 case of Influenza was 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, 946 positive Influenza cases have been reported
- DC PHL reported 32 specimens tested for week 17 with 19 positive. This increase is not due to an increase in overall cases but due to increased specimen submission by hospitals. In addition, 5 tests were reported for week 16, all negative, for a total of 168 positive specimens of 247 tested (68.02%)
- This week's activity has decreased since last week and is below previous seasonal activity

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.

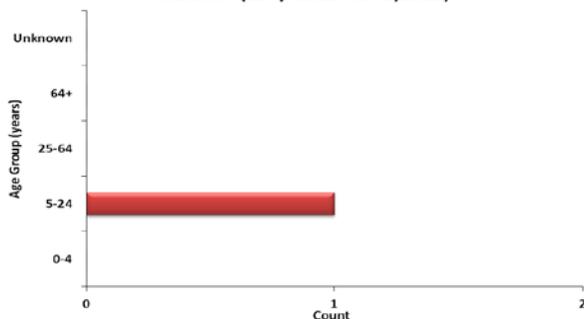
The table below summarizes weekly and cumulative cases of Influenza for the 2014-2015 Season. Data are also presented by age group and by number of cases reported weekly. During week 17 (April 26, 2015– May 2, 2015), there was 1 new case of Influenza reported. To date, the District has received 946 positive Influenza cases reported by hospitals.

Surveillance of Influenza Cases Reported By Influenza Type

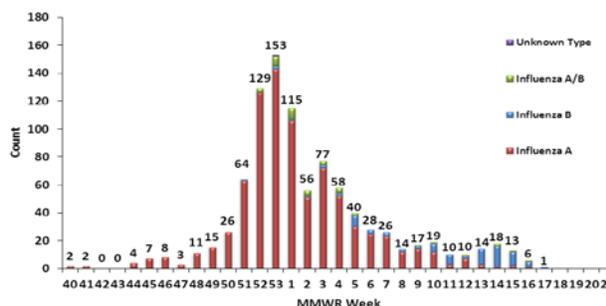
	Week 17 (April 26, 2015– May 2, 2015)		Cumulative Cases for Weeks 40 – 20 (September 28, 2014 – May 23, 2015)	
Influenza A	0	(0%)	824	(87.65%)
Influenza B	1	(100%)	83	(8.31%)
Influenza A/B	0	(0%)	38	(3.94%)
Influenza (not typed)	0	(0%)	1	(0.10%)
Total	1*	(100%)	946*	(100.00%)

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

Positive Influenza Tests, by Age Group
Week 17 (26Apr2015 - 2May2015)



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 17, 27 out of a total of 46 tests were performed using rapid diagnostic testing in clinical laboratories. Of these, no positive Influenza specimens were identified during week 17 using rapid diagnostics.

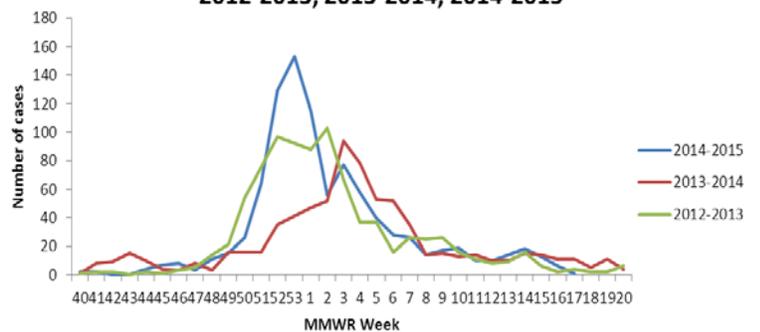
Week: 17 (April 26, 2015 – May 2, 2015)	
No. of specimens tested Rapid Diagnostics	27
No. of positive specimens (%)	0 (0%)
Positive specimens by type/subtype	
Influenza A	0 (0%)
Influenza B	0 (0%)
Influenza A/B	0 (0%)
Influenza – unknown type	0 (0%)

WEEK 17 COMPARISON WITH PREVIOUS SEASONS

For week 17, there was 1 cases in the current 2014-2015 season, 11 cases in last year’s week 17, 2013-2014 season, and 4 cases during week 17 in the 2012-2013 season.

As there are 53 weeks in the current season compared to other years, the counts for weeks 53 and 1 of this year have been averaged into week 1. Using this method, cumulatively, there are a total of 812 cases of influenza in the district up to week 17 for the current 2014-2015 season, 682 for last year’s 2013-2014 season, and 774 for 2012-2013.

Number of Cases as of Week 17 for 2012-2013, 2013-2014, 2014-2015



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 87 of 1506 (5.78%) visits that met the criteria for ILI.

Sentinel Surveillance ILI Activity for Washington, DC

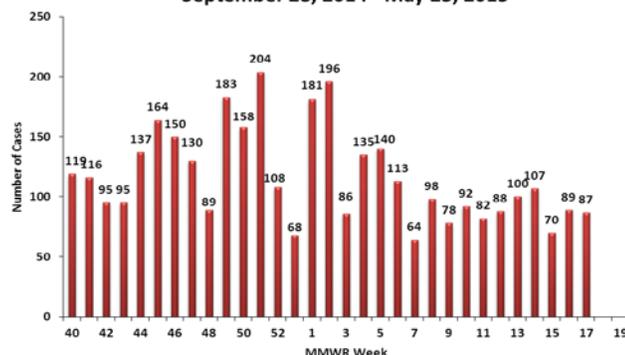
Week of	Activity *
Apr 26 – May 2	<i>Sporadic</i>

***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. DC PHL reported 32 specimens tested for week 17 with 19 positive; 9 influenza A(H3), 1 influenza A 2009, and 9 influenza B. This increase is not due to an outbreak but due to increased compliance with specimen submission by hospitals. In addition, 5 tests were reported for week 16, all negative, for a total of 168 positive specimens of 247 tested (68.02%), with 155 being influenza A H3, 1 influenza A 2009 H1N1, and 12 influenza B.

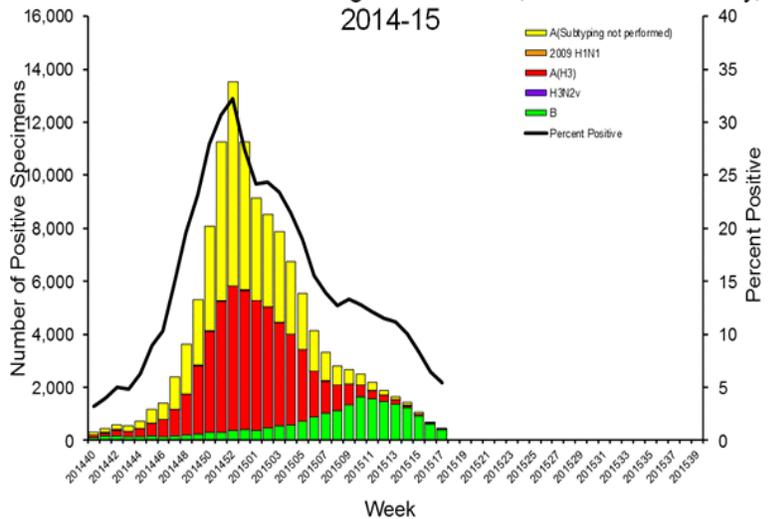
DC PHL Surveillance of Influenza Cases Reported By Influenza Subtype

DC PHL Influenza Testing	April 26, 2015 – May 2, 2015	Total Cases September 28, 2014 – May 23, 2015
Number of specimens tested	32	247
◆ Number of specimens positive for Influenza:	19 (59.38%)	168(68.02%)
● Influenza A	10 (52.63%)	156 (92.86%)
▪ H1 2009 H1N1	1 (10%)	1 (0.60%)
▪ H1 seasonal	0 (0%)	0 (0%)
▪ H3	9 (90%)	155 (9%)
● Influenza B	9 (47.37%)	12 (7.14%)

NATIONAL INFLUENZA ASSESSMENT

The CDC's weekly seasonal Influenza surveillance report for week 17 noted that influenza activity continued to decrease in the United States. The proportion of deaths due to Influenza and pneumonia in the US was below the epidemic threshold. Three Influenza-associated pediatric deaths were reported to the CDC during week 17, one associated with an influenza A (H3) viruse and two associated with influenza B viruses. For the 2014-2015 season, a total of 136 pediatric deaths associated with Influenza has been reported in the US. During week 17, 8,269 specimens were tested, of which 451 (5.5%) were positive. Of the 451 respiratory specimens that tested positive during week 17, 42 (9.3%) were Influenza A and 409 (90.7%) were Influenza B. Of the Influenza A samples, 1 (2.4%) were 2009 H1N1, 12 (28.6%) were H3, and 29 (69%) 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.