

# Influenza Surveillance Report

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

## 2017-2018 Influenza Season Week 10 (March 4<sup>th</sup>, 2018 – March 10<sup>th</sup>, 2018)

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

### SUMMARY

- 73 new cases of influenza were reported by hospitals during this reporting period
- Zero pediatric deaths were reported during this period
- For the 2017-2018 influenza season to-date, 2549 positive Influenza cases have been reported
- For the 2017-2018 influenza season, DC PHL has completed testing for 174 specimens
- Flu activity has decreased since previous week

### 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.

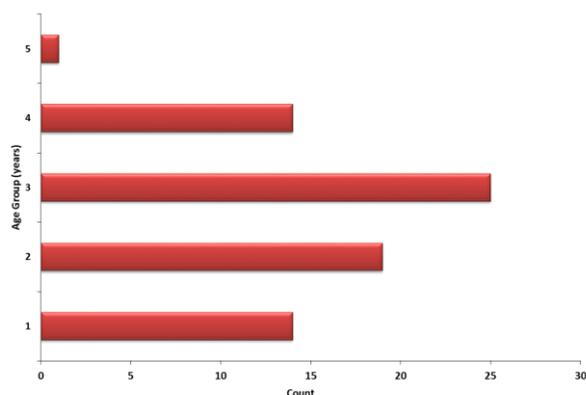
The table below summarizes weekly and cumulative cases of Influenza for the 2017-2018 Season. Data are also presented by age group and by number of cases reported weekly. During week 10 (March 3<sup>rd</sup>, 2018–March 10<sup>th</sup>, 2018), there were 73 new cases of influenza reported. A total of 536 tests were performed during week 10. To date, the District has received 2549 positive influenza cases reported by all nine hospitals.

### Surveillance of Influenza Cases Reported By Influenza Type

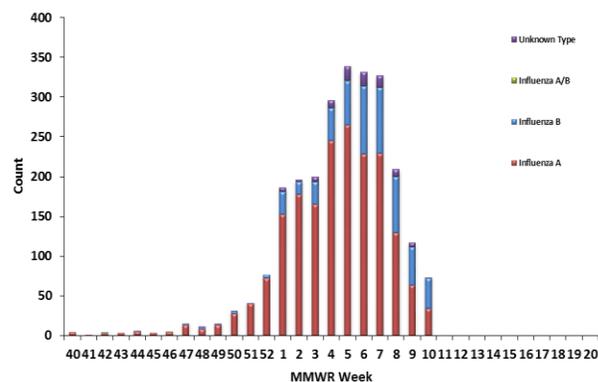
	Week 10 (March 04,2018-March 10,2018)		Cumulative Positive Cases for Weeks 40–20 (October 1, 2017–May 19, 2018)	
<b>Influenza A</b>	34	(46.57 %)	1938	(76.02%)
<b>Influenza B</b>	38	(52.05 %)	511	(20.00%)
<b>Influenza A/B</b>	0	(0.00 %)	3	(0.18%)
<b>Influenza (not typed)</b>	1	(1.38 %)	97	(3.80%)
<b>Total</b>	73*	(100.00%)	2549*	(100.00%)

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

Positive Influenza Tests, by Age Group  
Week 10 (4thMar18-10thMar18)



Positive Influenza Tests by Reporting Week  
October 1, 2017 - May 19, 2018



## RAPID DIAGNOSTIC TESTING

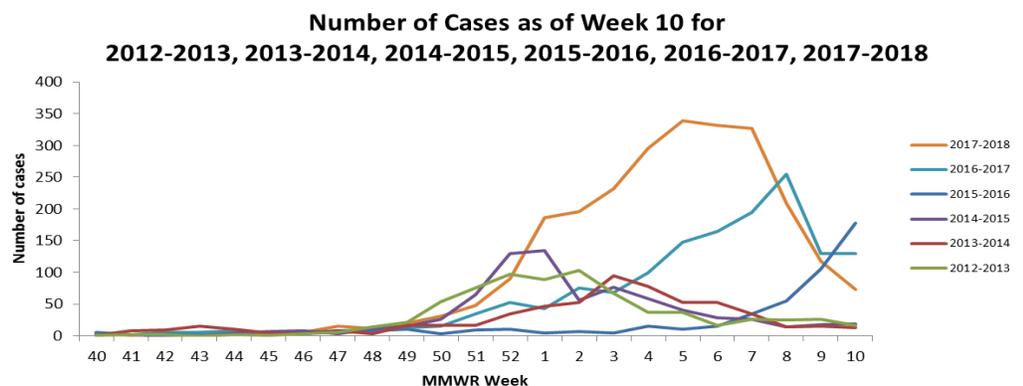
Rapid Diagnostic Tests are screening tests used to detect the Influenza virus in a short period of time. While initially less accurate than PCR and viral culture, rapid diagnostics are more accurate as the Influenza season progresses. During week 10, 286 out of a total of 536 tests were performed using rapid diagnostic testing in clinical laboratories. Of these, 32 (11.19 %) positive Influenza specimens were identified using rapid diagnostics.

Week: 10 (Mar 04, 2018 – Mar 10, 2018)	
No. of specimens tested Rapid Diagnostics	286
No. of positive specimens (%)	32 (11.18%)
<b>Positive specimens by type/subtype</b>	
Influenza A	18 (56.25 %)
Influenza B	13 (40.62 %)
Influenza A/B	0 (0.00%)
Influenza – unknown type	1 (3.13 %)

## WEEK 10 COMPARISON WITH PREVIOUS SEASONS

For week 10, there were 73 new cases reported in the current 2017-2018 season, 130 cases in last year's 2016-2017 season, 178 cases in the 2015-2016 season, 19 cases in the 2014-2015 season, 13 in the 2013-2014 season, and 16 in the 2012-2013 season.

Cumulatively, there are a total of 2549 cases in the District up to week 10 for the current season, 1476 during the 2016-2017 season, 495 during the 2015-2016 season, 740 in the 2014-2015 season, 597 in the 2013-2014 season, and 718 in the 2012-2013 season.



## INFLUENZA-LIKE ILLNESS (ILI) SURVEILLANCE

Sentinel surveillance for ILI consists of five 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 10, sentinel providers reported 349 out of 14487 visits (2.40 %) that met the criteria for ILI.

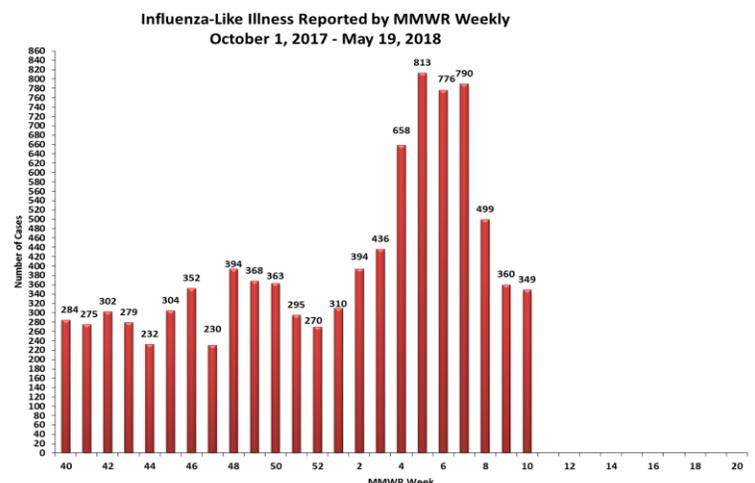
## Geographic Spread of Influenza for Washington, DC

Week of	Activity *
Mar 04- Mar 10	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 on a monthly basis. DC PHL has completed testing for 174 specimens submitted through March 6, 2018.

### DC PHL Surveillance of Influenza Cases Reported By Influenza Subtype\*

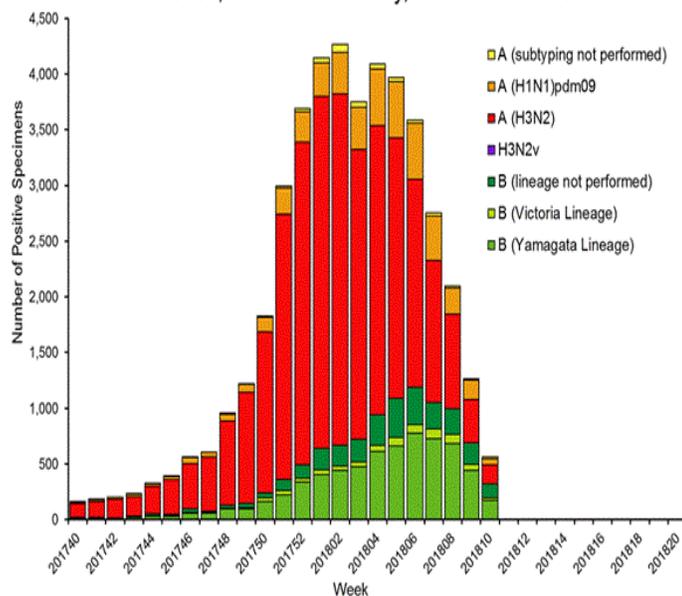
DC PHL Influenza Testing	Nov 22 , 2017-Mar 06, 2018
Number of specimens tested	174
Number of positive specimens	79
Influenza A	70 (88.60 %)
A(H1N1)pdm09	17
H3N2	53
Influenza B	9 (11.40%)
Yamagata lineage	9
Victoria lineage	0

\* Includes specimens submitted through Mar 6, 2018

### NATIONAL INFLUENZA ASSESSMENT

The CDC's weekly seasonal Influenza surveillance report for week 10 noted that influenza activity decreased in the United States. The proportion of deaths attributed to pneumonia and influenza (P&I) was above the system-specific epidemic threshold. Nine pediatric deaths were reported to CDC during week 10 for the current season. Two deaths were associated with an influenza A (H1N1) pdm09 virus and occurred during weeks 1 and 9. Two deaths were associated with an influenza A (H3) virus and occurred during weeks 6 and 9. Five deaths were associated with an influenza B virus and occurred during weeks 6 and 9. For the 2017-2018 season, 128 pediatric deaths associated with Influenza have been reported in the US for this season. During week 10, 1307 specimens were tested by public health laboratories, of which 561 were positive. Of the 561 respiratory specimens that tested positive during week 10, 242 (43.1%) were Influenza A and 319 (56.9%) were Influenza B. Of the Influenza A samples, 55 (22.7%) were 2009 H1N1, 14 (5.8 %) were H3, and 14 (5.8%) were untyped.

Influenza Positive Tests Reported to CDC by U.S. Public Health Laboratories, National Summary, 2017-2018 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) 442-8141 or email [flu.epi@dc.gov](mailto:flu.epi@dc.gov)