

Influenza Surveillance Report

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

2017-2018 Influenza Season Week 11 (March 11th, 2018 – March 17th, 2018) *(All data are preliminary and may change as more reports are received)*

SUMMARY

- 103 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, 2652 positive Influenza cases have been reported
- For the 2017-2018 influenza season, DC PHL has completed testing for 303 specimens
- Flu activity remains same as previous week

INFLUENZA SURVEILLANCE FROM HOSPITALS & AMBULATORY CARE FACILITIES

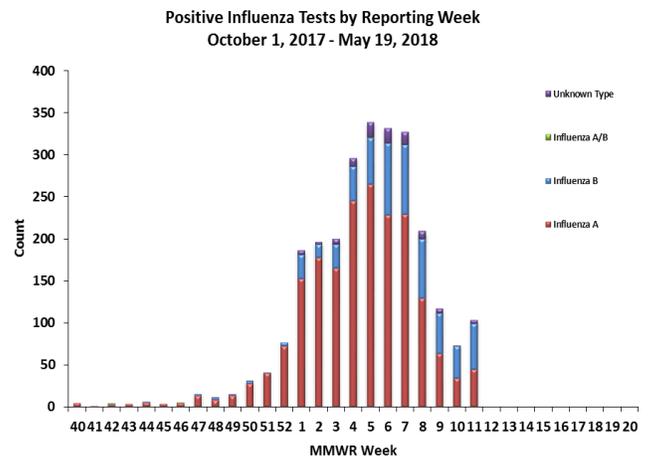
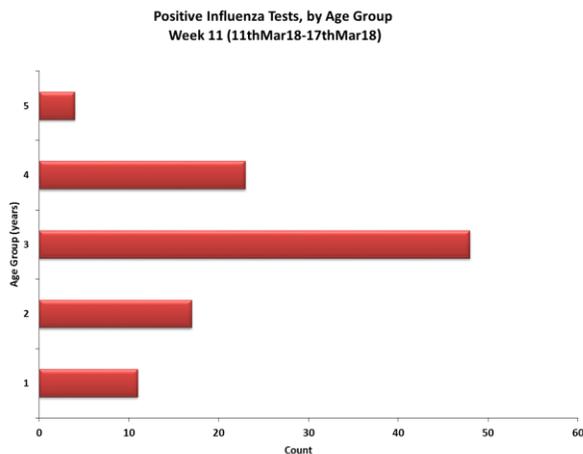
District of Columbia hospitals and laboratories report detailed information on cases of Influenza on a daily basis. However, in accordance with CDC guidelines, only Influenza-associated deaths in cases <18 years of age and Novel Influenza A infections are reportable. We also request that Influenza hospitalizations 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 11 (March 11, 2018–March 17th, 2018), there were 103 new cases of influenza reported. A total of 617 tests were performed during week 11. To date, the District has received 2652 positive influenza cases reported by all nine hospitals.

Surveillance of Influenza Cases Reported By Influenza Type

	Week 11 (March 11,2018-March 17,2018)		Cumulative Positive Cases for Weeks 40–20 (October 1, 2017–May 19, 2018)	
Influenza A	44	(42.72 %)	1982	(76.02%)
Influenza B	55	(53.40 %)	566	(20.00%)
Influenza A/B	0	(0.00 %)	3	(0.18%)
Influenza (not typed)	4	(3.88 %)	101	(3.80%)
Total	103*	(100.00%)	2652*	(100.00%)

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



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 11, 280 out of a total of 617 tests were performed using rapid diagnostic testing in clinical laboratories. Of these, 46 (16.42 %) positive Influenza specimens were identified using rapid diagnostics.

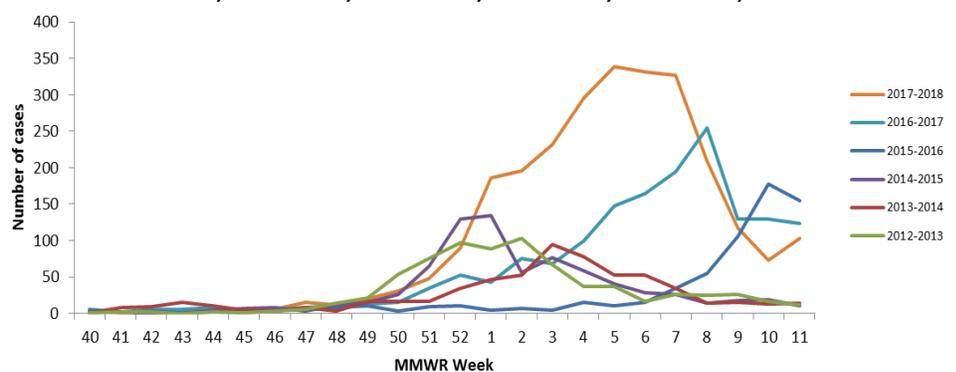
Week: 11 (Mar 11, 2018 – Mar 17, 2018)	
No. of specimens tested Rapid Diagnostics	280
No. of positive specimens (%)	46 (11.18%)
Positive specimens by type/subtype	
Influenza A	25 (54.34%)
Influenza B	17 (36.96 %)
Influenza A/B	0 (0.00%)
Influenza – unknown type	4 (8.70 %)

WEEK 11 COMPARISON WITH PREVIOUS SEASONS

For week 11, there were 103 new cases reported in the current 2017-2018 season, 123 cases in last year's 2016-2017 season, 155 cases in the 2015-2016 season, 10 cases in the 2014-2015 season, 14 in the 2013-2014 season, and 11 in the 2012-2013 season.

Cumulatively, there are a total of 2652 cases in the District up to week 11 for the current season, 1599 during the 2016-2017 season, 650 during the 2015-2016 season, 750 in the 2014-2015 season, 611 in the 2013-2014 season, and 729 in the 2012-2013 season.

Number of Cases as of Week 11 for 2012-2013, 2013-2014, 2014-2015, 2015-2016, 2016-2017, 2017-2018



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 11, sentinel providers reported 375 out of 13713 visits (2.73 %) that met the criteria for ILI.

Geographic Spread of Influenza for Washington, DC

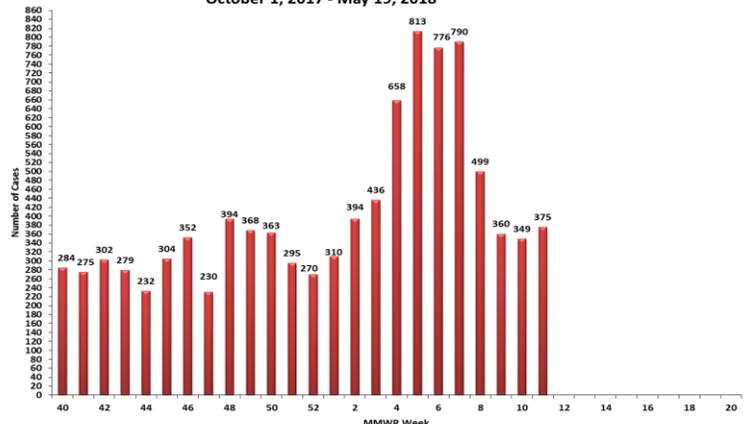
Week of	Activity *
Mar 11- Mar 17	Local

***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-Like Illness Reported by MMWR Weekly October 1, 2017 - May 19, 2018



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 303 specimens submitted through March 21, 2018.

DC PHL Surveillance of Influenza Cases Reported By Influenza Subtype*

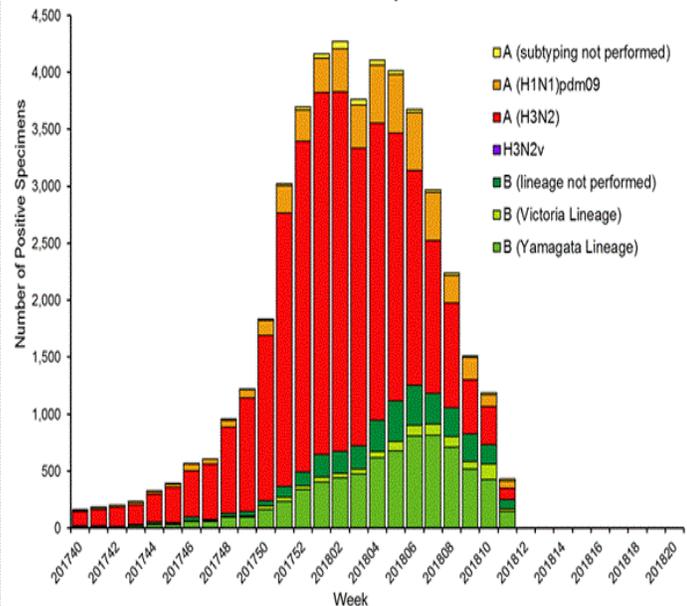
DC PHL Influenza Testing	Mar 7,2018 - Mar 21,2018	Nov 22 , 2017-Mar 21, 2018
Number of specimens tested	129	303
Number of positive specimens	107	186
Influenza A	77 (71.97 %)	147 (79.03 %)
A(H1N1)pdm09	16	33
H3N2	61	114
Influenza B	30 (28.03%)	39 (20.96%)
Yamagata lineage	28	37
Victoria lineage	2	2

* Includes specimens submitted through Mar 21, 2018

NATIONAL INFLUENZA ASSESSMENT

The CDC's weekly seasonal Influenza surveillance report for week 11 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. Five pediatric deaths were reported to CDC during week 11 for the current season. One death was associated with an influenza A virus for which subtyping was not performed and occurred during week 8. One death was associated with an influenza A (H3) virus and occurred during week 10. Two deaths were associated with an influenza B virus and occurred during weeks 10 and 11. One death was associated with an influenza virus co-infection and occurred during week 9. For the 2017-2018 season, 133 pediatric deaths associated with Influenza have been reported in the US for this season. During week 11, 896 specimens were tested by public health laboratories, of which 433 were positive. Of the 433 respiratory specimens that tested positive during week 11, 184 (42.5%) were Influenza A and 249 (57.5%) were Influenza B. Of the Influenza A samples, 67 (36.4%) were 2009 H1N1, 100 (54.3%) were H3N2, and 17 (9.2%) were un-typed.

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