

# Influenza Surveillance Report

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

## 2018-2019 Influenza Season Week 12 (March 17, 2019 – March 23, 2019)

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

### SUMMARY

- 145 new cases of influenza were reported by hospitals
- Zero pediatric deaths were reported
- To date, 1547 influenza cases have been reported for the 2018-2019 influenza season
- DC Public Health Laboratory has completed testing for 110 specimens during week 12
- Flu activity continues to remain elevated

### INFLUENZA SURVEILLANCE FROM DC HOSPITALS & AMBULATORY CARE FACILITIES

District of Columbia (DC) hospitals report detailed information on cases of influenza on a regular basis. In accordance with CDC guidelines, influenza-associated deaths in cases <18 years of age and novel influenza A infections are notifiable diseases. In addition to this, the DC Department of Health (DC Health) requests that influenza hospitalizations be reported whenever possible.

The table below summarizes weekly and cumulative cases of influenza for the 2018-2019 Season. Data are also presented by age group and by number of cases reported weekly. During week 12 (March 17<sup>th</sup>, 2019 – March 23<sup>rd</sup>, 2019), there were 145 new cases of influenza reported. A total of 829 tests were performed during week 12. To date, there are 1547 positive influenza cases reported by all nine hospitals in DC.

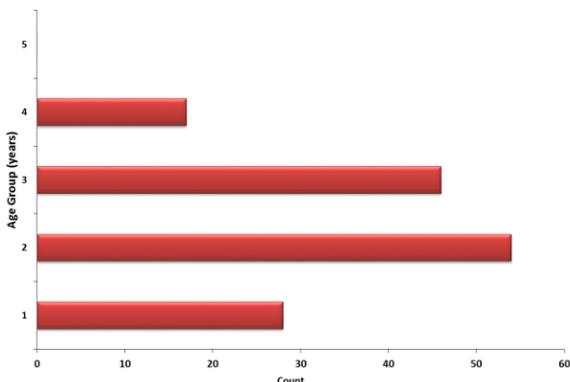
### Surveillance of Influenza Cases Reported By Influenza Type

	Week 12 (Mar 17, 2019- Mar 23,2019)		Cumulative Positive Cases for Weeks 40–20 (September 30, 2018–May 18, 2019)	
	Count	Percentage	Count	Percentage
<b>Influenza A</b>	129	(88.96%)	1444	(93.34%)
<b>Influenza B</b>	16	(11.04%)	61	(3.94%)
<b>Influenza A/B</b>	0	(0.00%)	10	(0.64%)
<b>Influenza (not typed)</b>	0	(0.00%)	32	(2.08%)
<b>Total</b>	145*	(100.00%)	1547*	(100.00%)

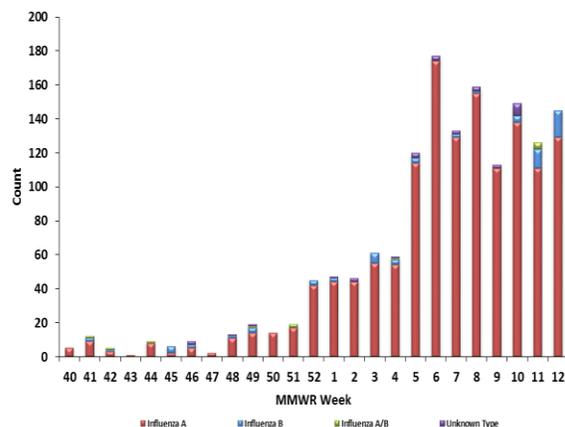
\*Includes results from Rapid Diagnostic Testing, Viral Culture, RT-PCR, Serology, and Immunofluorescence.

\*\*Age groups are classified as 1(0-4 years), 2 (5-24 years), 3(25-64 years), 4 (>64 years) & 5 (age not specified)

Positive Influenza Tests, by Age Group  
Week 12 (17thMar19-23rdMar19)



Positive Influenza Tests by Reporting Week  
September 30, 2018- March 23, 2019



## RAPID DIAGNOSTIC TESTING

Rapid Diagnostic Tests are point-of-care screening tests used to detect influenza virus. While initially less accurate than PCR and viral culture, rapid diagnostics are more accurate as the influenza season progresses. During week 12, 357 out of a total of 829 tests were performed using rapid diagnostic testing in clinical laboratories. Of these, 47(13.16%) were identified as positive using rapid diagnostics.

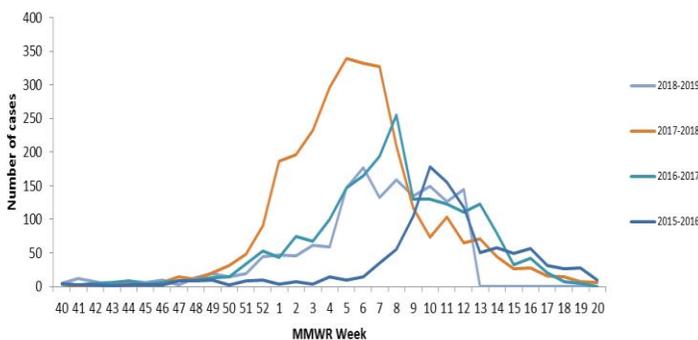
### DC Health Surveillance for Rapid Diagnostic Testing

Week: 12 (March 17, 2019 – March 23, 2019)	
No. of specimens tested Rapid Diagnostics	357
No. of positive specimens (%)	47(13.16%)
<b>Positive specimens by type/subtype</b>	
Influenza A	36 (76.60%)
Influenza B	11 (23.40%)
Influenza A/B	0 (0.00%)
Influenza – unknown type	0 (0.00%)

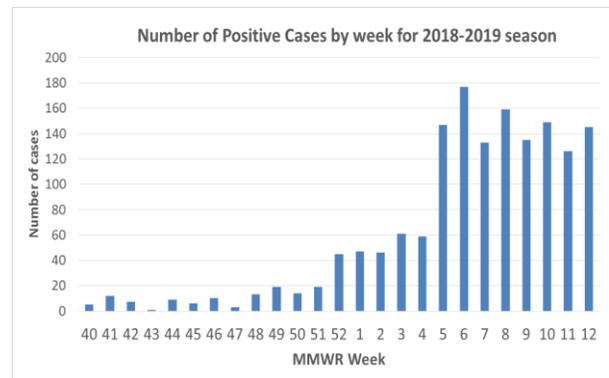
## WEEK 12 COMPARISON WITH PREVIOUS SEASONS

For week 12, there were 145 new influenza cases reported in the current season, 65 in the previous 2017-2018 season, 111 cases in the 2016-2017 season, 118 cases in the 2015-2016 season, 10 in the 2014-2015 season, 10 in 2013-2014 and 8 in the 2012-2013 season.

Number of Positive Cases as of Week 12 by year, 2015-2018



Number of Positive Cases by week for 2018-2019 season



Cumulatively, there are a total of 1547 cases reported up to week 12 for the current season. For the previous seasons, 2717 cases were reported during the 2017-2018 season, 1710 during the 2016-2017 season, 768 in the 2015-2016 season, 760 in the 2014-2015 season, 621 in 2013-2014 season and 737 in the 2012-2013 season.

## INFLUENZA-LIKE ILLNESS (ILI) SURVEILLANCE

Sentinel surveillance for ILI consists of six 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 427 out of 15695 visits (2.72%) that met the criteria for ILI.

## Geographic Spread of Influenza for Washington, DC

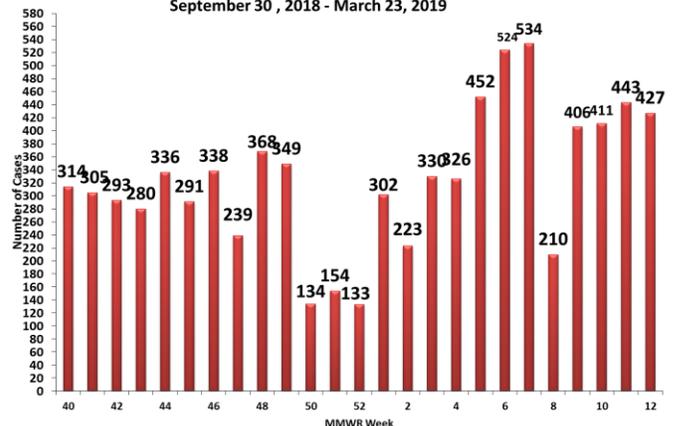
Week of	Activity *
Mar 17 – Mar 23	Local

**\*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 Week  
September 30, 2018 - March 23, 2019



## INFLUENZA TESTING BY THE DISTRICT OF COLUMBIA PUBLIC HEALTH LABORATORY (DC PHL)

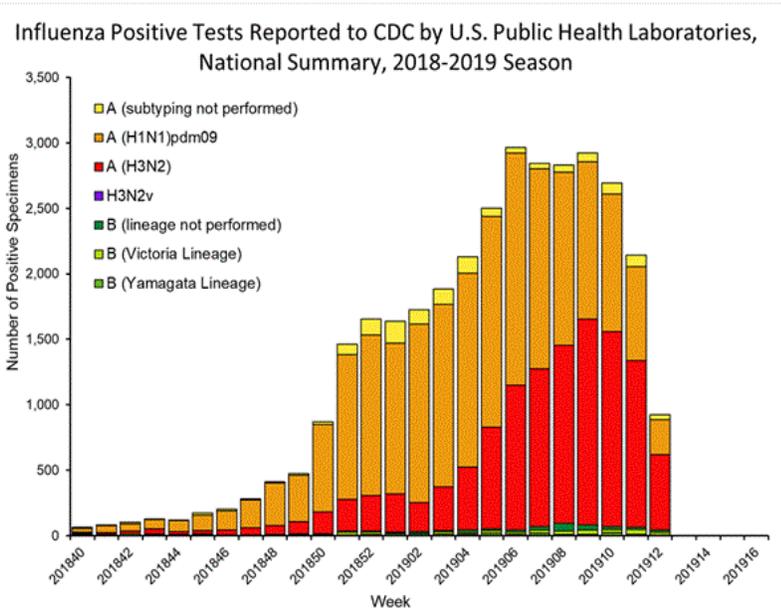
The DC PHL subtypes human isolates to monitor the circulating strains of Influenza. The isolates are submitted to DC PHL by hospitals and commercial laboratories on a regular basis. The DC PHL has completed testing for 110 specimens during week 12.

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

DC PHL Influenza Testing	Mar 17, 2019 – Mar 23, 2019	Sep 30, 2018 –Mar 23, 2019
<b>Number of specimens tested</b>	110	1000
<b>Number of positive specimens</b>	46	182
<b>Influenza A</b>	41(89.13%)	175 (96.15%)
<b>A(H1N1)pdm09</b>	28	116
<b>H3N2</b>	13	59
<b>Influenza B</b>	5(10.86%)	7 (3.85%)
<b>Yamagata lineage</b>	3	5
<b>Victoria lineage</b>	2	2

## NATIONAL INFLUENZA ASSESSMENT

Influenza activity remains elevated in the United States. Influenza A(H1N1)pdm09, Influenza A(H3N2) and Influenza B viruses continue to circulate. The proportion of deaths attributed to pneumonia and influenza (P&I) was below the system-specific epidemic threshold. One influenza-associated pediatric deaths were reported to CDC during week 12. This death was associated with influenza A (H1N1) pdm09 virus and occurred during week 12. A total of 77 influenza-associated pediatric deaths have been reported for the 2018-2019 season. During week 12, 1618 specimens were tested by public health laboratories, of which 923 were positive. Of the 923 respiratory specimens that tested positive during week 12, 877 (96.0%) were Influenza A and 46 (5.0%) were Influenza B. Of the Influenza A samples, 268 (31.9%) were 2009 H1N1, 573 (68.1%) were H3N2, and no subtyping was performed for 36 specimens.



Get Vaccinated!

To find an Influenza vaccine provider, visit the District of Columbia Immunization Resource Center at <https://dchealth.dc.gov/service/immunization>

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) 442-9370 or email [flu.epi@dc.gov](mailto:flu.epi@dc.gov)