

Influenza Surveillance Report

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

2017-2018 Influenza Season Week 13 (March 25th, 2018 – March 31st, 2018) *(All data are preliminary and may change as more reports are received)*

SUMMARY

- 71 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, 2788 positive Influenza cases have been reported
- For the 2017-2018 influenza season, DC PHL has completed testing for 421 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.

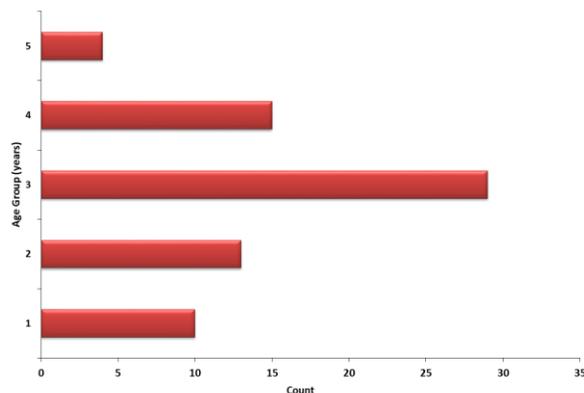
The table below summarizes weekly and cumulative cases of Influenza for the 2017-2018 Season. Data are also presented by age group and by number of cases reported weekly. During week 13 (March 25th, 2018–March 31st, 2018), there were 71 new cases of influenza reported. A total of 468 tests were performed during week 13. To date, the District has received 2788 positive influenza cases reported by all nine hospitals.

Surveillance of Influenza Cases Reported By Influenza Type

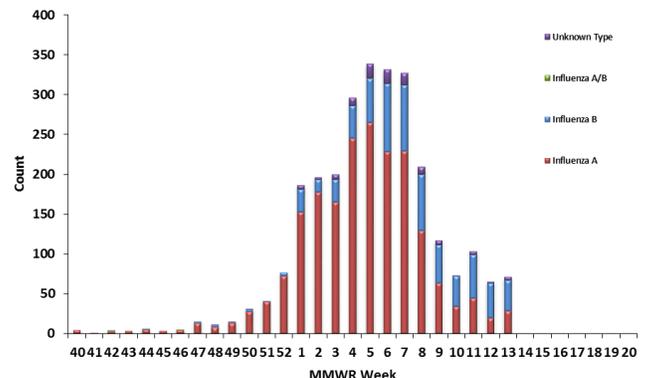
	Week 13 (March 25,2018-March 31,2018)		Cumulative Positive Cases for Weeks 40–20 (October 1, 2017–May 19, 2018)	
Influenza A	28	(39.43 %)	2029	(72.80%)
Influenza B	39	(54.92 %)	649	(23.27%)
Influenza A/B	0	(0.00 %)	3	(0.10%)
Influenza (not typed)	4	(5.65 %)	107	(3.83%)
Total	71*	(100.00%)	2788*	(100.00%)

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

Positive Influenza Tests, by Age Group
Week 13 (25thMar18-31stMar18)



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



RAPID DIAGNOSTIC TESTING

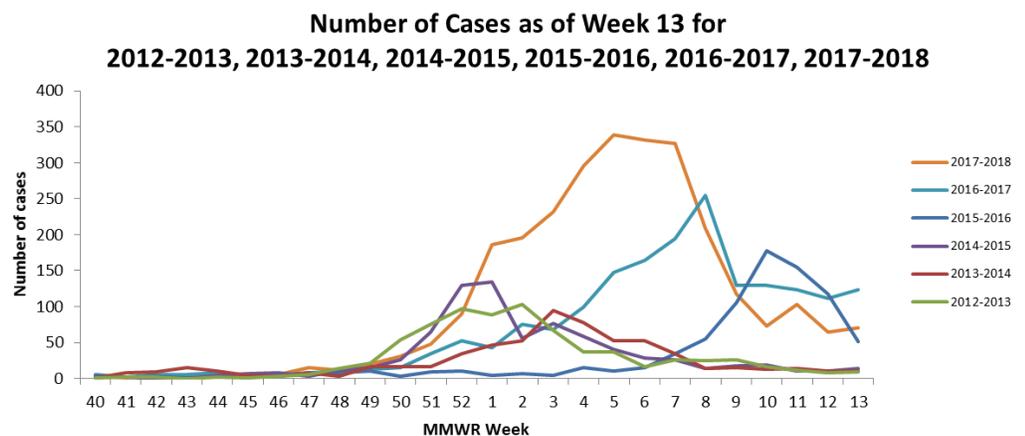
Rapid Diagnostic Tests are screening tests used to detect the Influenza virus in a short period of time. While initially less accurate than PCR and viral culture, rapid diagnostics are more accurate as the Influenza season progresses. During week 13, 231 out of a total of 468 tests were performed using rapid diagnostic testing in clinical laboratories. Of these, 30 (13.00 %) positive Influenza specimens were identified using rapid diagnostics.

Week: 13 (Mar 25, 2018 – Mar 31, 2018)	
No. of specimens tested Rapid Diagnostics	231
No. of positive specimens (%)	30 (13.00%)
Positive specimens by type/subtype	
Influenza A	12 (40.00%)
Influenza B	14 (46.66 %)
Influenza A/B	0 (0.00%)
Influenza – unknown type	4 (13.34%)

WEEK 13 COMPARISON WITH PREVIOUS SEASONS

For week 13, there were 71 new cases reported in the current 2017-2018 season, 123 cases in last year's 2016-2017 season, 51 cases in the 2015-2016 season, 14 cases in the 2014-2015 season, 10 in the 2013-2014 season, and 9 in the 2012-2013 season.

Cumulatively, there are a total of 2788 cases in the District up to week 13 for the current season, 1833 during the 2016-2017 season, 819 during the 2015-2016 season, 774 in the 2014-2015 season, 631 in the 2013-2014 season, and 746 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 13, sentinel providers reported 291 out of 13156 visits (2.21 %) that met the criteria for ILI.

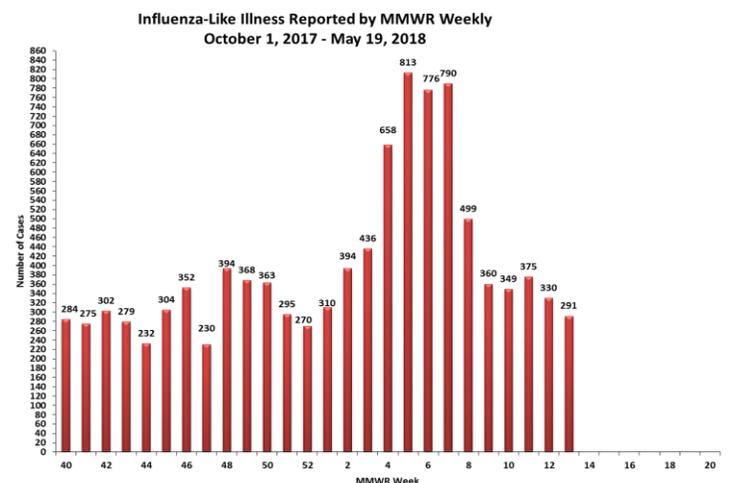
Geographic Spread of Influenza for Washington, DC

Week of	Activity *
Mar 25- Mar 31	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 421 specimens submitted through April 3, 2018.

DC PHL Surveillance of Influenza Cases Reported By Influenza Subtype*

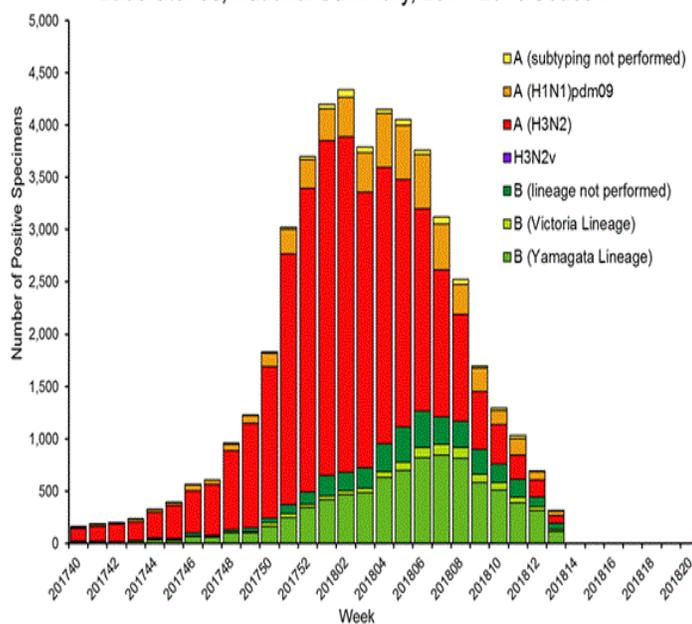
DC PHL Influenza Testing	Mar 22,2018 – Apr 03,2018	Nov 22 , 2017-Apr 03, 2018
Number of specimens tested	36	421
Number of positive specimens	26	258
Influenza A	10 (38.46 %)	186 (72.09%)
A(H1N1)pdm09	2	42
H3N2	8	144
Influenza B	16 (61.54%)	72 (27.91%)
Yamagata lineage	16	67
Victoria lineage	0	5

* Includes specimens submitted through Apr 3, 2018

NATIONAL INFLUENZA ASSESSMENT

The CDC's weekly seasonal Influenza surveillance report for week 13 noted that influenza activity decreased in the United States. The proportion of deaths attributed to pneumonia and influenza (P&I) was below the system-specific epidemic threshold. Five influenza-associated pediatric deaths were reported to CDC during week 13 for the current season. One death was associated with an influenza A (H3) virus and occurred during week 13. Two deaths were associated with an influenza A virus for which subtyping was not performed and occurred during weeks 9 and 12. Two deaths were associated with an influenza B virus and occurred during weeks 12 and 13. For the 2017-2018 season, 142 pediatric deaths associated with Influenza have been reported in the US for this season. During week 13, 775 specimens were tested by public health laboratories, of which 313 were positive. Of the 313 respiratory specimens that tested positive during week 13, 120 (38.3%) were Influenza A and 193 (61.7%) were Influenza B. Of the Influenza A samples, 41 (34.2%) were 2009 H1N1, 73 (60.8 %) were H3N2, and 6 (5.0%) 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