

Influenza Surveillance Report

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

2018-2019 Influenza Season Week 40 (September 30, 2018 – October 6, 2018)

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

SUMMARY

- 5 new cases of influenza were reported by hospitals during this reporting period
- Zero pediatric deaths were reported during this period
- For the 2018-2019 influenza season to-date, 5 positive influenza cases have been reported
- DC Public Health Laboratory did not report any specimens tested for week 40
- Flu activity at the start of the season remains low and steady coming in from the off season

INFLUENZA SURVEILLANCE FROM HOSPITALS & AMBULATORY CARE FACILITIES

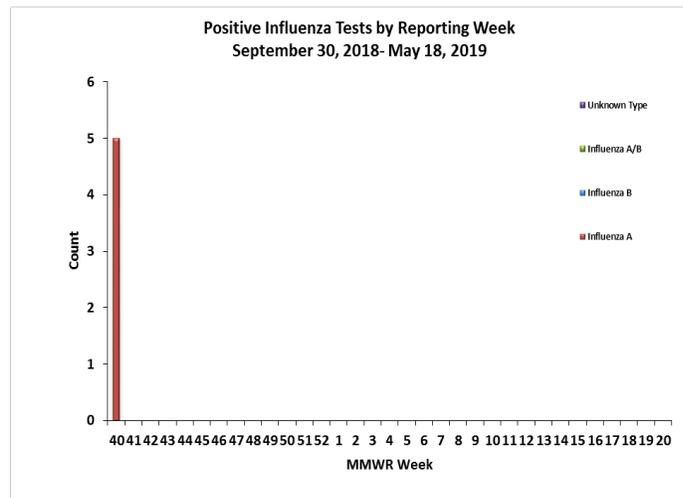
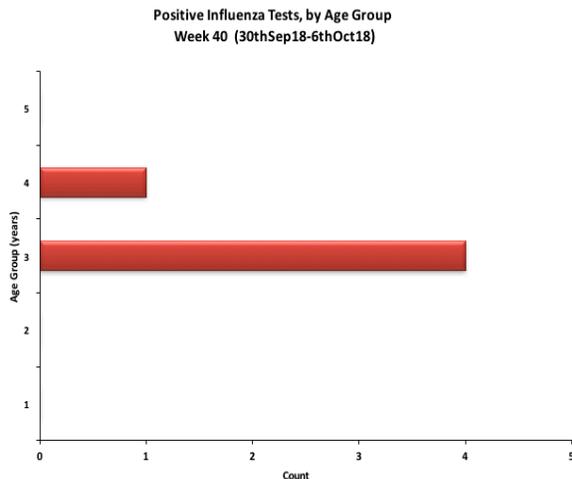
District of Columbia hospitals and laboratories report detailed information on cases of Influenza on a daily basis. However, in accordance with CDC guidelines, only Influenza-associated deaths in cases <18 years of age and Novel Influenza A infections are reportable. We also request that Influenza hospitalizations be reported if possible.

The table below summarizes weekly and cumulative cases of Influenza for the 2018-2019 Season. Data are also presented by age group and by number of cases reported weekly. During week 40 (September 30th, 2018 –October 6th, 2018), there were 5 new cases of influenza reported. A total of 242 tests were performed during week 40. To date, the District has received 5 positive influenza cases reported by all nine hospitals.

Surveillance of Influenza Cases Reported By Influenza Type

	Week 40 (September 30,2018- October 6,2018)		Cumulative Positive Cases for Weeks 40–20 (September 30, 2018–May 18, 2019)	
	Count	Percentage	Count	Percentage
Influenza A	5	(100.00 %)	5	(100.00%)
Influenza B	0	(0.00%)	0	(0.00%)
Influenza A/B	0	(0.00 %)	0	(0.00%)
Influenza (not typed)	0	(0.00%)	0	(0.00%)
Total	5*	(100.00%)	5*	(100.00%)

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



RAPID DIAGNOSTIC TESTING

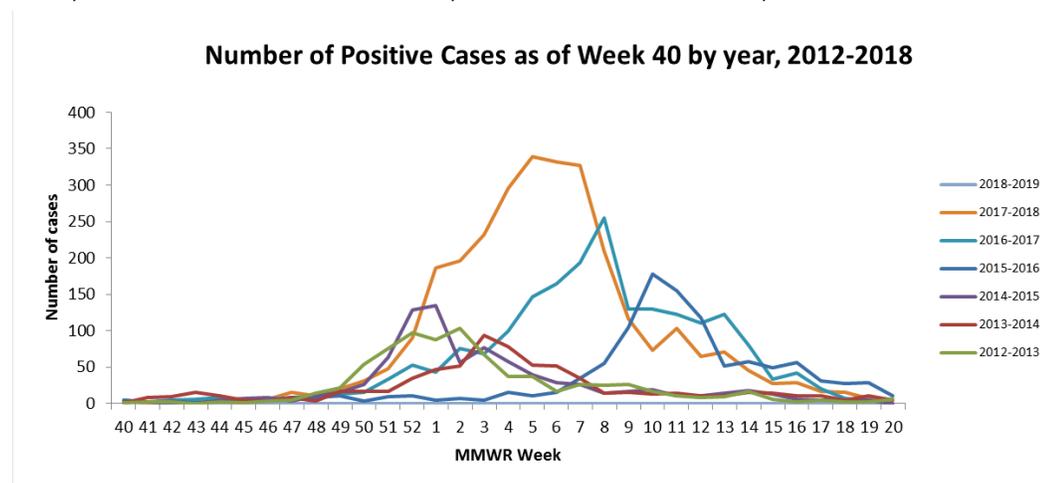
Rapid Diagnostic Tests are screening tests used to detect the Influenza virus in a short period of time. While initially less accurate than PCR and viral culture, rapid diagnostics are more accurate as the Influenza season progresses. During week 40, 65 out of a total of 242 tests were performed using rapid diagnostic testing in clinical laboratories. Of these, 5 (7.7%) positive Influenza specimens were identified using rapid diagnostics.

Week: 40 (September 30, 2018 – October 06, 2018)	
No. of specimens tested Rapid Diagnostics	65
No. of positive specimens (%)	5 (7.7%)
Positive specimens by type/subtype	
Influenza A	5 (100.00%)
Influenza B	0(0.00%)
Influenza A/B	0 (0.00%)
Influenza – unknown type	0 (0.00%)

WEEK 40 COMPARISON WITH PREVIOUS SEASONS

For week 40, there were 5 new cases reported in the current 2018-2019 season, 4 cases in last year’s 2017-2018 season, 5 cases in the 2016-2017 season, 4 cases in the 2015-2016 season, 2 in the 2014-2015 season, 1 in 2013-2014 and 1 in the 2012-2013 season.

Cumulatively, there are a total of 5 cases in the District up to week 40 for the current season, 4 during the 2017-2018 season, 5 during the 2016-2017 season, 4 in the 2015-2016 season, 2 in the 2014-2015 season, 1 in the 2013-2014 season and 1 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 40, sentinel providers reported 314 out of 14457 visits (2.18 %) that met the criteria for ILI.

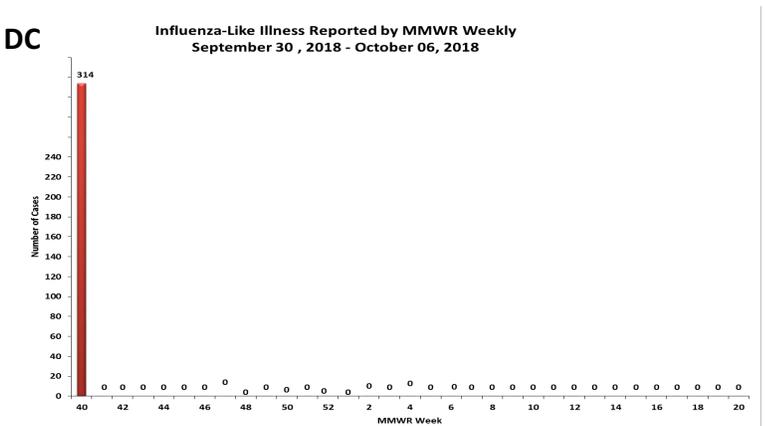
Geographic Spread of Influenza for Washington, DC

Week of	Activity *
Sep 30- Oct 06	<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



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 did not report any specimens tested for week 40.

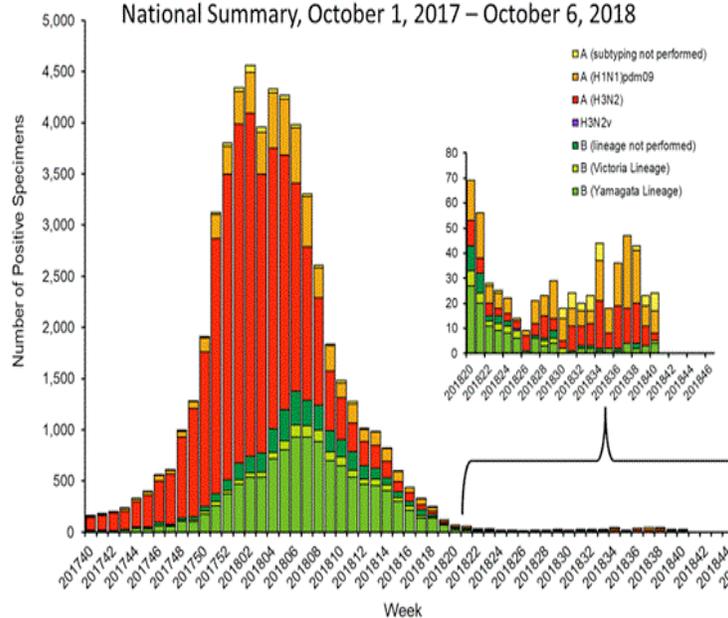
DC PHL Surveillance of Influenza Cases Reported By Influenza Subtype*

DC PHL Influenza Testing	Sep 30, 2018 – Oct 06 ,2018	Sep 30, 2018 -May 18, 2019
Number of specimens tested	0	0
Number of positive specimens	0	0
Influenza A	0(0.00%)	0 (0.00%)
A(H1N1)pdm09	0	0
H3N2	0	0
Influenza B	0 (0.00%)	0 (0.00%)
Yamagata lineage	0	0
Victoria lineage	0	0

NATIONAL INFLUENZA ASSESSMENT

Influenza activity in the United States remained low throughout the summer months and early October. While influenza B viruses were more commonly detected from May until June, influenza A viruses have predominated from the beginning of July onward. The proportion of deaths attributed to pneumonia and influenza (P&I) was below the system-specific epidemic threshold. Two influenza-associated pediatric deaths were reported that occurred during the 2017-2018 season. No influenza-associated pediatric deaths for the 2018-2019 season have been reported to CDC. During week 40, 340 specimens were tested by public health laboratories, of which 24 were positive. Of the 24 respiratory specimens that tested positive during week 40, 19 (79.2%) were Influenza A and 5 (20.8%) were Influenza B. Of the Influenza A samples, 9 (75.0%) were 2009 H1N1, 3 (25.0%) were H3N2, and 7 were un-typed. Of the Influenza B samples, 4 (80.0%) were Yamagata lineage and 1(20.0%) was Victoria in lineage.

Influenza Positive Tests Reported to CDC by U.S. Public Health Laboratories
National Summary, October 1, 2017 – October 6, 2018



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