

# Influenza Surveillance Report

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

## 2018-2019 Influenza Season Week 48 (November 25, 2018 – December 01, 2018)

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

### SUMMARY

- 13 new cases of influenza were reported by hospitals
- 1 additional case was reported for week 47
- Zero pediatric deaths were reported
- To date, 66 influenza cases have been reported for the 2018-2019 influenza season
- DC Public Health Laboratory has completed testing for 66 specimens during week 48
- Influenza activity continues to remain low in the District

### 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 48 (November 25th, 2018 –December 1st, 2018), there were 13 new cases of influenza reported. A total of 533 tests were performed during week 48. To date, there are 66 positive influenza cases reported by all nine hospitals in DC.

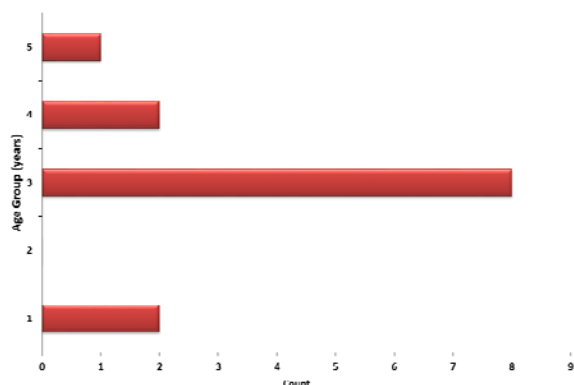
### Surveillance of Influenza Cases Reported By Influenza Type

	Week 48 (Nov 25, 2018- Dec 01,2018)		Cumulative Positive Cases for Weeks 40–20 (September 30, 2018–May 18, 2019)	
<b>Influenza A</b>	11	(100.00%)	50	(74.30%)
<b>Influenza B</b>	1	(0.00%)	10	(18.00%)
<b>Influenza A/B</b>	0	(0.00%)	3	(5.77%)
<b>Influenza (not typed)</b>	1	(0.00%)	3	(1.93%)
<b>Total</b>	13*	(100.00%)	66*	(100.00%)

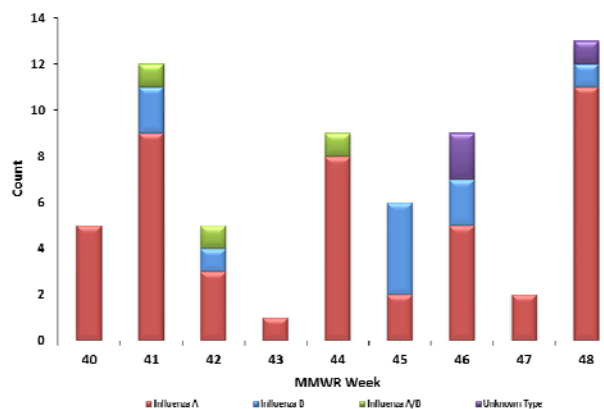
\*Includes results from Rapid Diagnostic Testing, Viral Culture, RT-PCR, Serology, and Immunofluorescence.

\*\*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 48 (25thNov18-1stDec18)



Positive Influenza Tests by Reporting Week  
September 30, 2018- December 01, 2018



## RAPID DIAGNOSTIC TESTING

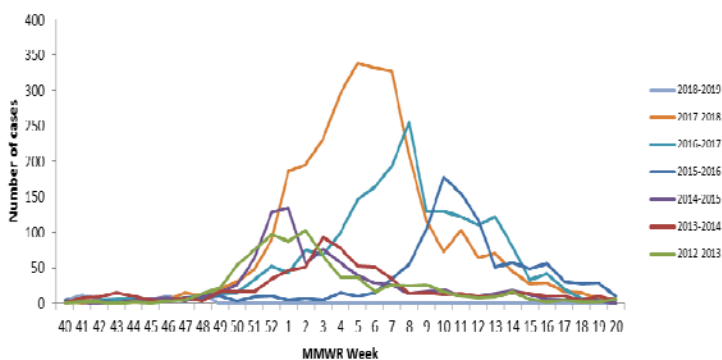
Rapid Diagnostic Tests are point-of-care screening tests used to detect influenza virus. While initially less accurate than PCR and viral culture, rapid diagnostics are more accurate as the influenza season progresses. During week 48, 239 out of a total of 533 tests were performed using rapid diagnostic testing in clinical laboratories. Of these, 10(4.18%) were identified as positive using rapid diagnostics.

Week: 48 (November 25, 2018 – December 01, 2018)	
No. of specimens tested Rapid Diagnostics	239
No. of positive specimens (%)	10 (4.18%)
Positive specimens by type/subtype	
Influenza A	8(80.00%)
Influenza B	1 (10.00%)
Influenza A/B	0 (0.00%)
Influenza – unknown type	1 (10.00%)

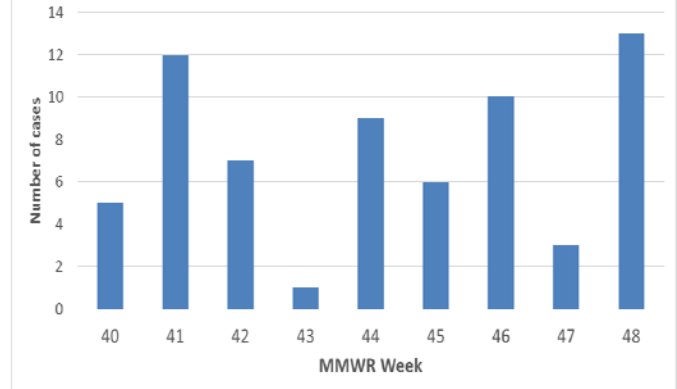
## WEEK 48 COMPARISON WITH PREVIOUS SEASONS

For week 48, there were 13 new influenza cases reported in the current season, 11 in the previous 2017-2018 season, 10 cases in the 2016-2017 season, 8 cases in the 2015-2016 season, 11 in the 2014-2015 season, 3 in 2013-2014 and 14 in the 2012-2013 season.

Number of Positive Cases as of Week 48 by year, 2012-2018



Number of Positive Cases by week for 2018-2019 season



Cumulatively, there are a total of 66 cases reported up to week 48 for the current season. For the previous seasons, 53 cases were reported during the 2017-2018 season, 54 during the 2016-2017 season, 35 in the 2015-2016 season, 37 in the 2014-2015 season, 61 in 2013-2014 season and 30 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.

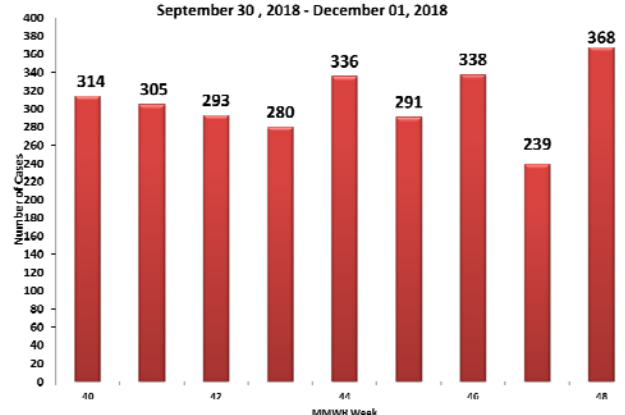
For week 48, sentinel providers reported 368 out of 16072 visits (2.28%) that met the criteria for ILI.

## Geographic Spread of Influenza for Washington, DC

Week of	Activity *
Nov 25- Dec 01	<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 ILI activity it can report.

Influenza-Like Illness Reported by MMWR Weekly  
September 30, 2018 - December 01, 2018



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

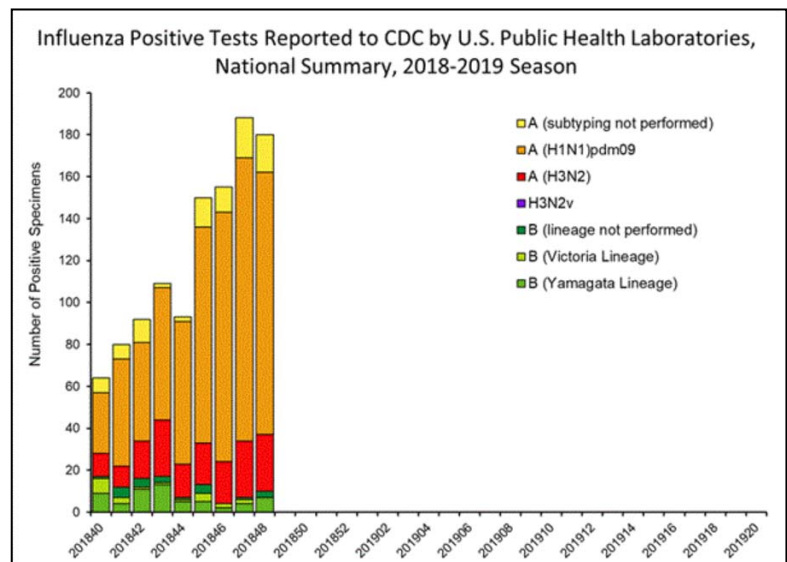
The DC PHL subtypes human isolates to monitor the circulating strains of Influenza. The isolates are submitted to DC PHL by hospitals and commercial laboratories on a regular basis. DC PHL has completed testing for 66 specimens during week 48. An additional 30 specimens were reported by DC PHL in week 48; testing for these specimens completed during weeks 40 to 47. For the 2018-2019 season, a total of 321 specimens have been tested by the Laboratory.

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

DC PHL Influenza Testing	Nov 25, 2018 – Dec 01, 2018	Sep 30, 2018 – Dec 01, 2018
Number of specimens tested	66	321
Number of positive specimens	2	5
Influenza A	2(100.0%)	5 (100.0%)
A(H1N1)pdm09	2	4
H3N2	0	1
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 increased slightly. Influenza A (H1N1) pdm09, Influenza A (H3N2), and influenza B viruses continue to co-circulate, with influenza A (H1N1) pdm09 viruses reported most commonly by public health laboratories since September 30, 2018. The proportion of deaths attributed to pneumonia and influenza (P&I) was below the system-specific epidemic threshold. No influenza-associated pediatric deaths were reported to CDC during week 48. A total of five influenza-associated pediatric deaths have been reported for the 2018-2019 season. During week 48, 670 specimens were tested by public health laboratories, of which 180 were positive. Of the 180 respiratory specimens that tested positive during week 48, 170 (94.4%) were Influenza A and 10(5.6%) were Influenza B. Of the Influenza A samples, 125(82.2%) were 2009 H1N1, 27(17.8%) were H3N2, and no subtyping was performed for 18 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) 442-8141 or email [flu.epi@dc.gov](mailto:flu.epi@dc.gov)