

Influenza Surveillance Report

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

2018-2019 Influenza Season Week 7 (February 10, 2019 – February 16, 2019)

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

SUMMARY

- 133 new cases of influenza were reported by hospitals
- Zero pediatric deaths were reported
- To date, 833 influenza cases have been reported for the 2018-2019 influenza season
- DC Public Health Laboratory has completed testing for 79 specimens during week 7
- Flu activity is similar to that of previous week

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.

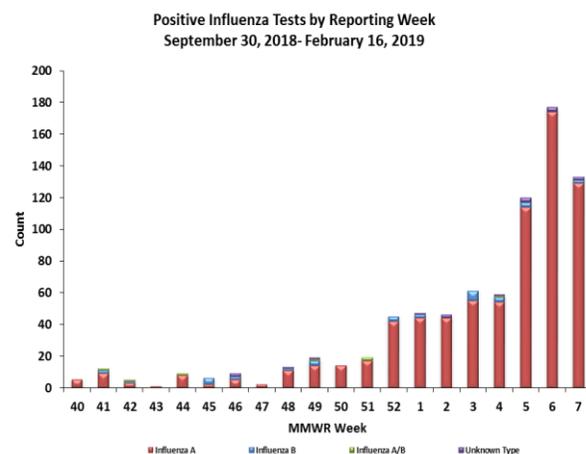
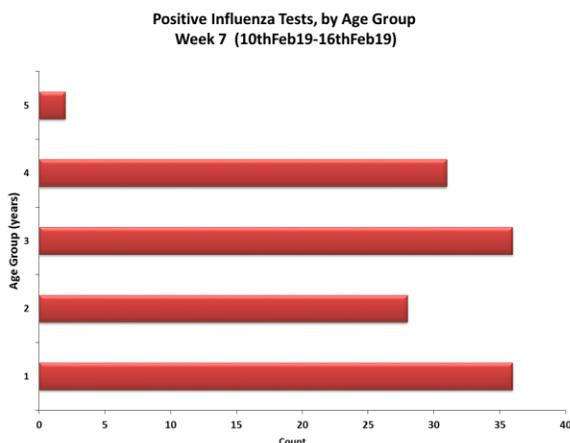
The table below summarizes weekly and cumulative cases of influenza for the 2018-2019 Season. Data are also presented by age group and by number of cases reported weekly. During week 7 (February 10th, 2019 – February 16th, 2019), there were 133 new cases of influenza reported. A total of 824 tests were performed during week 7. To date, there are 833 positive influenza cases reported by all nine hospitals in DC.

Surveillance of Influenza Cases Reported By Influenza Type

	Week 7 (Feb 10, 2019- Feb 16,2019)		Cumulative Positive Cases for Weeks 40–20 (September 30, 2018–May 18, 2019)	
	Count	Percentage	Count	Percentage
Influenza A	129	(97.00%)	778	(93.40%)
Influenza B	2	(1.50%)	29	(3.48%)
Influenza A/B	0	(0.00%)	10	(1.20%)
Influenza (not typed)	2	(1.50%)	16	(1.92%)
Total	133*	(100.00%)	833*	(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)



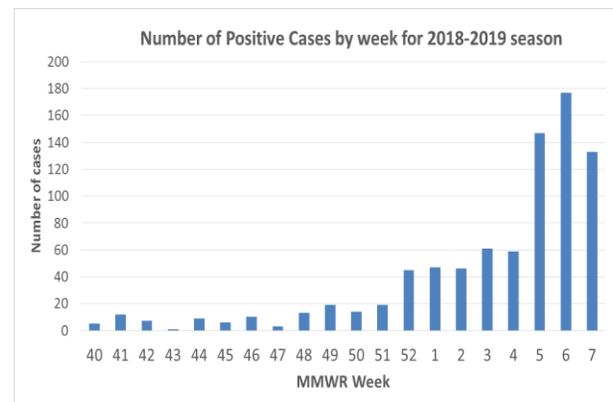
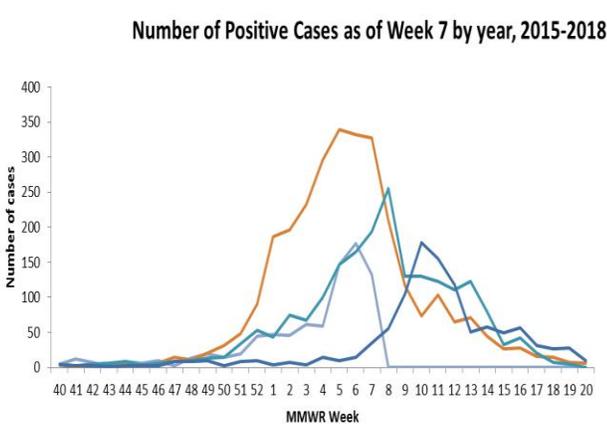
RAPID DIAGNOSTIC TESTING

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 7, 376 out of a total of 824 tests were performed using rapid diagnostic testing in clinical laboratories. Of these, 42 (11.18%) were identified as positive using rapid diagnostics.

Week: 7 (February 10, 2019 – February 16, 2019)	
No. of specimens tested Rapid Diagnostics	376
No. of positive specimens (%)	42(11.18%)
Positive specimens by type/subtype	
Influenza A	38 (90.48%)
Influenza B	2 (4.76%)
Influenza A/B	0 (0.00%)
Influenza – unknown type	2 (4.76%)

WEEK 7 COMPARISON WITH PREVIOUS SEASONS

For week 7, there were 133 new influenza cases reported in the current season, 327 in the previous 2017-2018 season, 194 cases in the 2016-2017 season, 35 cases in the 2015-2016 season, 26 in the 2014-2015 season, 35 in 2013-2014 and 26 in the 2012-2013 season.



Cumulatively, there are a total of 833 cases reported up to week 7 for the current season. For the previous seasons, 2150 cases were reported during the 2017-2018 season, 961 during the 2016-2017 season, 157 in the 2015-2016 season, 690 in the 2014-2015 season, 555 in 2013-2014 season and 651 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 7, sentinel providers reported 534 out of 15227 visits (3.50%) that met the criteria for ILI.

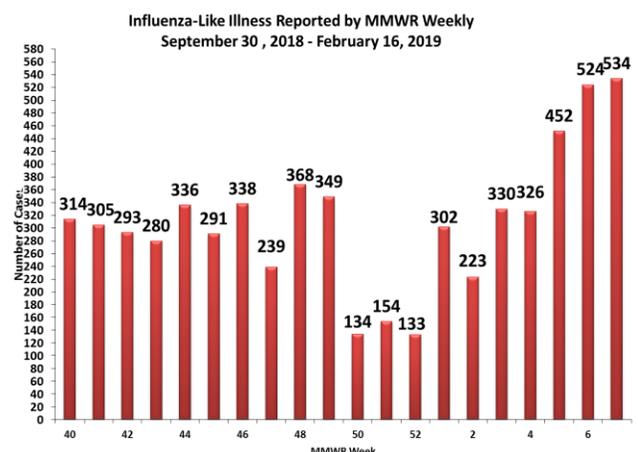
Geographic Spread of Influenza for Washington, DC

Week of	Activity *
Feb 10 – Feb 16	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 DC PHL by hospitals and commercial laboratories on a regular basis. The DC PHL has completed testing for 79 specimens during week 7 and total of 658 specimens this season.

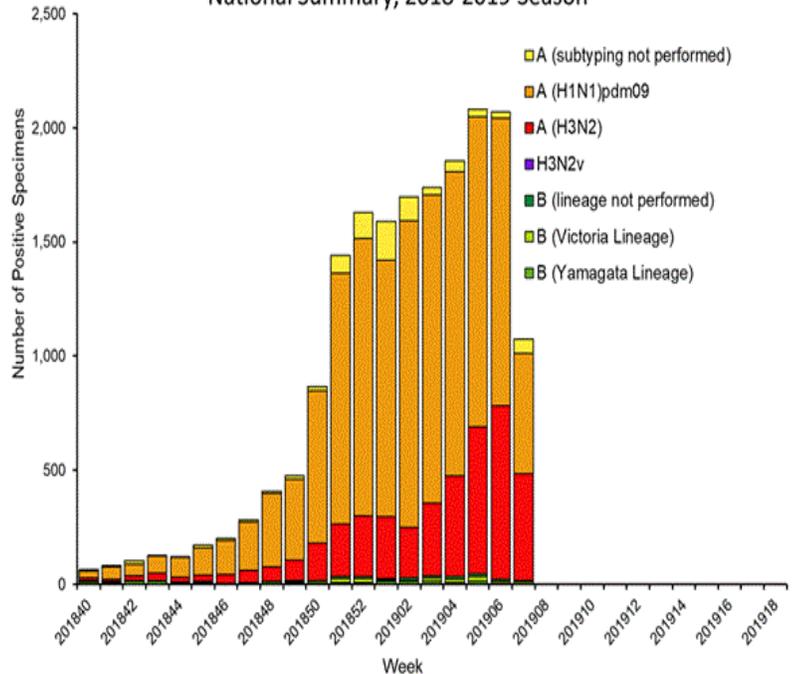
DC PHL Surveillance of Influenza Cases Reported By Influenza Subtype*

DC PHL Influenza Testing	Feb 10, 2019 – Feb 16, 2019	Sep 30, 2018 –Feb 16, 2019
Number of specimens tested	79	658
Number of positive specimens	4	36
Influenza A	3(75.00%)	35 (97.22%)
A(H1N1)pdm09	3	30
H3N2	0	5
Influenza B	1 (25.00%)	1 (2.78%)
Yamagata lineage	1	1
Victoria lineage	0	0

NATIONAL INFLUENZA ASSESSMENT

Influenza activity increased in the United States. Influenza A (H1N1) pdm09, Influenza A (H3N2), and influenza B viruses continue to co-circulate. The proportion of deaths attributed to pneumonia and influenza (P&I) was below the system-specific epidemic threshold. Seven influenza-associated pediatric deaths were reported to CDC during week 7. Four deaths were associated with influenza A(H1N1)pdm09 virus and occurred during weeks 2, 6, and 7. Two deaths were associated with an influenza A virus for which no subtyping was performed and occurred during weeks 5 and 6. One death was associated with influenza B virus and occurred during week 52. A total of 41 influenza-associated pediatric deaths have been reported for the 2018-2019 season. During week 7, 1792 specimens were tested by public health laboratories, of which 1075 were positive. Of the 1075 respiratory specimens that tested positive during week 7, 1058 (98.4%) were Influenza A and 17 (1.6%) were Influenza B. Of the Influenza A samples, 529 (64.5%) were 2009 H1N1, 467 (46.9%) were H3N2, and no subtyping was performed for 62 specimens.

Influenza Positive Tests Reported to CDC by U.S. Public Health Laboratories, National Summary, 2018-2019 Season



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