# Influenza Surveillance Report

Division of Epidemiology - Disease Surveillance and Investigation

District of Columbia Department of Health

# 2019-2020 Influenza Season Week 42 (October 13, 2019 – October 19, 2019)

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

### **SUMMARY**

- 4 new cases of influenza were reported by hospitals during this reporting period
- Zero pediatric deaths were reported during this period
- For the 2019-2020 influenza season to-date, 12 positive influenza cases have been reported
- DC Public Health Laboratory completed testing for 70 specimens during weeks 41 and 42
- Influenza activity continues to remain low in the District

#### 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.

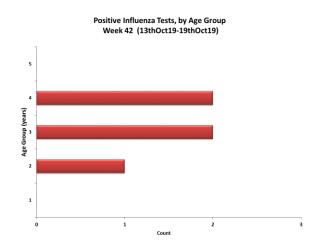
The table below summarizes weekly and cumulative cases of Influenza for the 2019-2020 Season. Data are also presented by age group and by number of cases reported weekly. During week 42 (October 13<sup>th</sup>, 2019 – October 19<sup>th</sup>, 2019), there were 4 new cases of influenza reported. A total of 360 tests were performed during week 42. To date, the District has received 12 positive influenza cases reported by all eight hospitals.

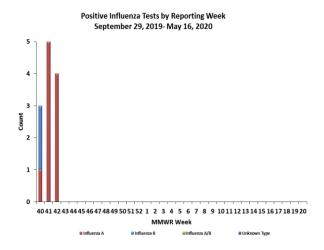
# Surveillance of Influenza Cases Reported By Influenza Type

	Week 42 (October 13,2019- October 19,2019)		Cumulative Positive Cases for Weeks 40–20 (September 29, 2019–May 16, 2019)	
Influenza A	4	(100.00 %)	10	(75.00%)
Influenza B	0	(0.00%)	2	(25.00%)
Influenza A/B	0	(0.00 %)	0	(0.00%)
Influenza (not typed)	0	(0.00%)	0	(0.00%)
Total	4*	(100.00%)	12*	(100.00%)

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

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





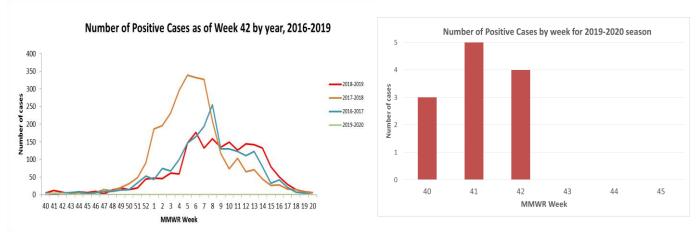
#### RAPID DIAGNOSTIC TESTING

Rapid Diagnostic Tests are 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 42, 99 out of a total of 360 tests were performed using rapid diagnostic testing in clinical laboratories. Of these, 1 (1%) positive Influenza specimen was identified using rapid diagnostics.

Week: 42 (October 13, 2019 – October 19 , 2019)				
No. of specimens tested Rapid Diagnostics	99			
No. of positive specimens (%)	1 (1.01%)			
Positive specimens by type/subtype				
Influenza A	1 (100.00%)			
Influenza B	0 (0.00%)			
Influenza A/B	0 (0.00%)			
Influenza – unknown type	0 (0.00%)			

#### **WEEK 42 COMPARISON WITH PREVIOUS SEASONS**

For week 42, there were 4 new cases reported in the current 2019-2020 season, 7 cases in last year's 2018-2019 season, 4 cases in the 2017-2018 season, 5 cases in the 2016-2017 season and 3 in the 2015-2016 season.



Cumulatively, there are a total of 12 cases in the District up to week 42 for the current season, 24 during the 2018-2019 season, 9 during the 2017-2018 season, 12 in the 2016-2017 season and 9 in the 2015-2016 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 42, sentinel providers reported 75 out of 113316 visits (0.66 %) that met the criteria for ILI.

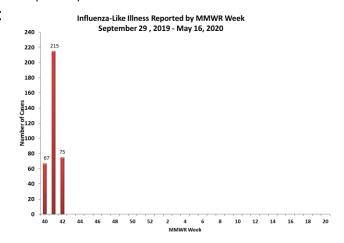
# Geographic Spread of Influenza for Washington, DC

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	Week of	Activity *
	Oct 13- Oct 19	Sporadic

\*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)

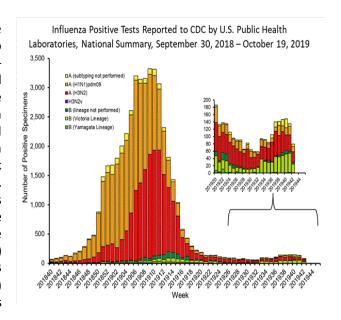
The DC PHL subtypes human isolates to monitor the circulating strains of Influenza. The isolates are submitted to the DC PHL by hospitals and commercial laboratories on a monthly basis. DC PHL completed testing for 70 specimens during weeks 41 and 42.

DC PHL Surveillance of Influenza Cases Reported By Influenza Subtype

DC PHL Influenza Testing	Oct 13,2019 – Oct 19 ,2019	Sep 29, 2019 -May 16, 2020
Number of specimens tested	70	103
Number of positive specimens	5	5
Influenza A	3(60.00%)	3 (60.00%)
A(H1N1)pdm09	2	0
H3N2	1	0
Influenza B	2 (40.00%)	2(40.00%)
Yamagata lineage	0	0
Victoria lineage	2	2

#### **NATIONAL INFLUENZA ASSESSMENT**

Influenza activity increased slightly, but remains low in the United States. The proportion of deaths attributed to pneumonia and influenza (P&I) was below the systemspecific epidemic threshold. Two influenza-associated pediatric deaths occurring during the 2019-2020 season have been reported to CDC. One death was associated with an influenza A virus for which no subtyping was performed and one death was associated with an influenza B/Victoria lineage. Both deaths occurred during week 41. During week 42, 521 specimens were tested by public health laboratories, of which 79 were positive. Of the 79 respiratory specimens that tested positive during week 42, 49 (62.0%) were Influenza A and 30 (38.0%) were Influenza B. Of the Influenza A samples, 14 (33.3%) were 2009 H1N1, 28 (66.7 %) were H3N2, and 7 were un-typed. Of the Influenza B samples, 1 (4.2%) was of the Yamagata lineage, 23 (95.8%) were of the Victoria lineage and 6 for which no lineage was performed.



Get Vaccinated!

To find an Influenza vaccine provider, visit the District of Columbia Immunization Resource Center at <a href="http://doh.dc.gov/node/190532">http://doh.dc.gov/node/190532</a>



For additional information about Influenza and Influenza activity in the United States, please visit: <a href="http://www.cdc.gov/flu/index.htm">http://www.cdc.gov/flu/index.htm</a>. 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 <a href="mailto:flu.epi@dc.gov">flu.epi@dc.gov</a>