

Influenza Surveillance Report

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

2014-2015 Influenza Season Week 13 (March 29, 2015 – April 4, 2015)

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

SUMMARY

- 12 cases of Influenza were reported by hospitals during this reporting period
- Zero pediatric-deaths associated with Influenza were recorded during this reporting period
- For the 2014-2015 Influenza Season to-date, 906 positive Influenza cases have been reported
- DC PHL tested two specimens for week 13, both negative, for a total of 146 out of 202 (72.28 %) specimens testing positive for influenza
- Week 13 of the current 2014-2015 season has increased slightly since last week but is on par with previous seasons.

INFLUENZA SURVEILLANCE FROM HOSPITALS & AMBULATORY CARE FACILITIES

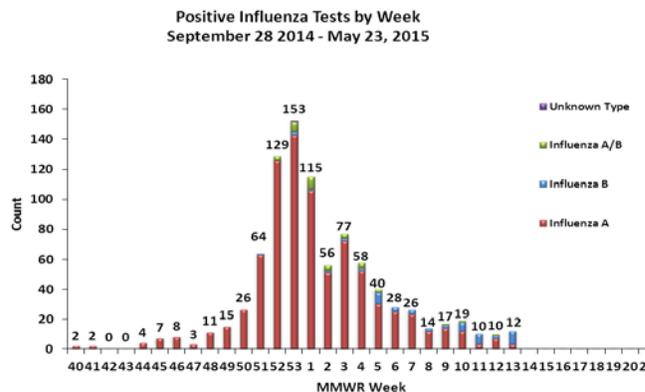
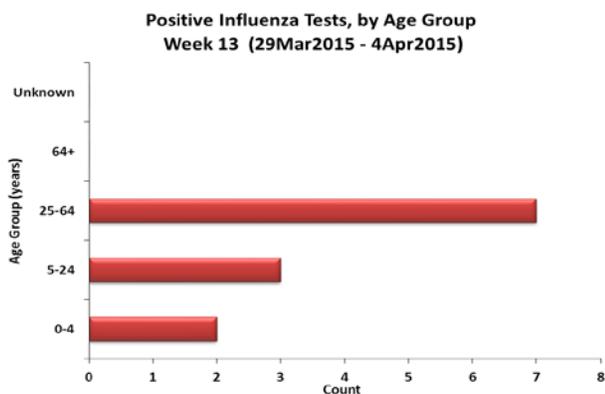
District of Columbia hospitals and laboratories report detailed information on cases of Influenza on a daily basis. However, in accordance with CDC guidelines, only Influenza-associated deaths in cases <18 years of age and Novel Influenza A infections are reportable.

The table below summarizes weekly and cumulative cases of Influenza for the 2014-2015 Season. Data are also presented by age group and by number of cases reported weekly. During week 13 (March 29, 2015– April 4, 2015), there were 12 new cases of Influenza reported. To date, the District has received 906 positive Influenza cases reported by hospitals.

Surveillance of Influenza Cases Reported By Influenza Type

	Week 13 (March 29, 2015– April 4, 2015)		Cumulative Cases for Weeks 40 – 20 (September 28, 2014 – May 23, 2015)	
Influenza A	3	(25%)	820	(90.51%)
Influenza B	9	(75%)	51	(5.63%)
Influenza A/B	0	(0%)	34	(3.75%)
Influenza (not typed)	0	(0%)	1	(0.11%)
Total	12*	(100%)	906*	(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 13, 115 out of a total of 132 tests were performed using rapid diagnostic testing in clinical laboratories. Of these, 10 (8.70%) positive Influenza specimens were identified during week 13 using rapid diagnostics.

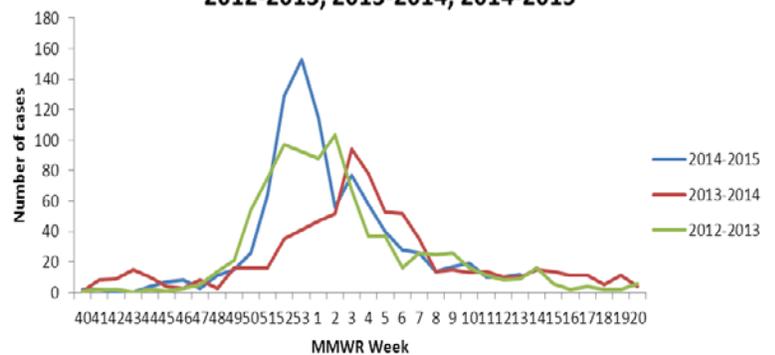
Week: 13 (March 29, 2015 – April 4, 2015)	
No. of specimens tested Rapid Diagnostics	115
No. of positive specimens (%)	10 (8.70%)
Positive specimens by type/subtype	
Influenza A	3 (30%)
Influenza B	7 (70%)
Influenza A/B	0 (0%)
Influenza – unknown type	0 (0%)

WEEK 13 COMPARISON WITH PREVIOUS SEASONS

For week 13, there were 12 cases in the current 2014-2015 season, 10 cases in last year’s week 13, 2013-2014 season, and 9 cases during week 13 in the 2012-2013 season.

As there are 53 weeks in the current season compared to other years, the counts for weeks 53 and 1 of this year have been averaged into week 1. Using this method, cumulatively, there are a total of 772 cases of influenza in the district up to week 13 for the current 2014-2015 season, 631 for last year’s 2013-2014 season, and 746 for the 2012-2013.

Number of Cases as of Week 13 for 2012-2013, 2013-2014, 2014-2015



INFLUENZA-LIKE ILLNESS (ILI) SURVEILLANCE

Sentinel surveillance for ILI consists of three 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 100 of 1519 (6.58%) visits that met the criteria for ILI.

Sentinel Surveillance ILI Activity for Washington, DC

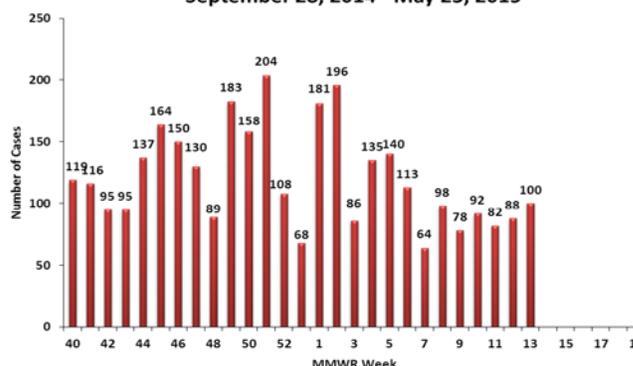
Week of	Activity *
Mar 29 – Apr 4	Local

***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-Like Illness Reported by MMWR Weekly September 28, 2014 - May 23, 2015



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. There were two specimens tested with no positives for week 13, for a total of 146 positive specimens of 202 tested (72.28%), all of which have been influenza A H3.

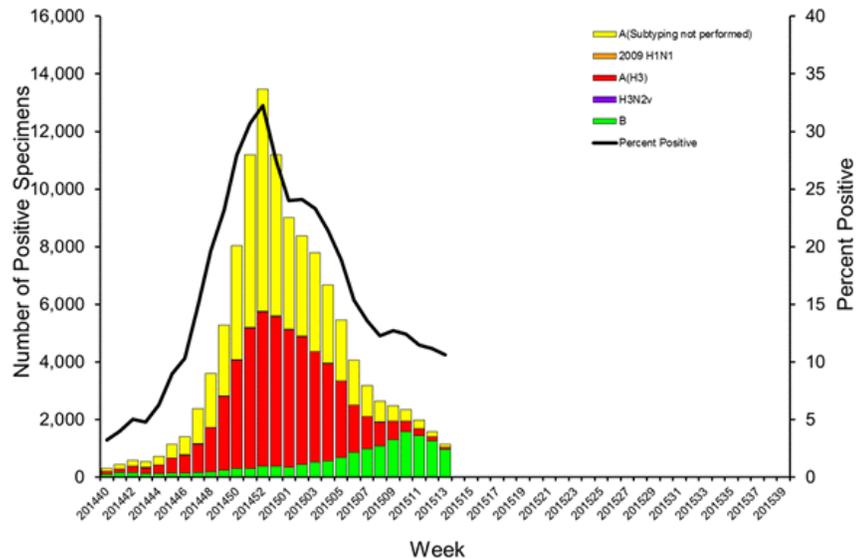
DC PHL Surveillance of Influenza Cases Reported By Influenza Subtype

DC PHL Influenza Testing	March 29, 2015 – April 4, 2015	Total Cases September 28, 2014 – May 23, 2015
Number of specimens tested	2	202
◆ Number of specimens positive for Influenza:	0 (0%)	146 (72.28%)
● Influenza A	0 (0%)	146 (100%)
▪ H1 2009 H1N1	0 (0%)	0 (0%)
▪ H1 seasonal	0 (0%)	0 (0%)
▪ H3	0 (0%)	146 (100%)
● Influenza B	0 (0%)	0 (0%)

NATIONAL INFLUENZA ASSESSMENT

The CDC's weekly seasonal Influenza surveillance report for week 13 noted that influenza activity continued to decrease in the United States. The proportion of deaths due to Influenza and pneumonia in the US was below the epidemic threshold. Two Influenza-associated pediatric deaths were reported to the CDC during week 13, of which both were associated with an influenza B virus. For the 2014-2015 season, a total of 125 pediatric deaths associated with Influenza has been reported in the US. During week 13, 10,684 specimens were tested, of which 1,138 (10.7%) were positive. Of the 1,138 respiratory specimens that tested positive during week 13, 162 (14.2%) were Influenza A and 976 (85.8%) were Influenza B. Of the Influenza A samples, 2 (1.2%) were 2009 H1N1, 66 (40.7%) were H3, and 94 (58.0%) were not subtyped.

Influenza Positive Tests Reported to CDC by U.S. WHO/NREVSS Collaborating Laboratories, National Summary, 2014-15



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) 442-9150 or email keith.li@dc.gov.