

INFLUENZA WATCH

Ending 3/10/2018

Week 10

The purpose of the weekly *Influenza Watch* is to summarize current influenza surveillance in San Diego County. *Please note that reported weekly data are preliminary and may change due to delayed submissions and additional laboratory results.*

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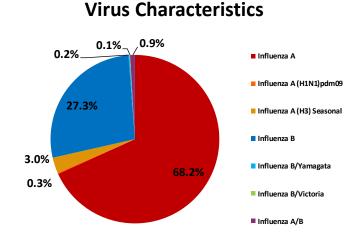
Current Week

Current Week 10 (ending 3/10/2018)

- 620 new influenza detections reported: Elevated level
- 4% influenza-like-illness (ILI) among emergency department visits: Expected level
- 13 new influenza-related deaths reported this week
- 7 new ICU cases reported this week
- 9% of deaths registered with pneumonia and/or influenza: Expected level

Current Season Summary





† Including 38 deaths less than 65 years of age, reportable to CDPH.

Table 1. Influenza Surveillance Indicators

						Prior 3	3-Year
	FY 2017-18*			FY 2016-17		Average**	
	Week	Week		Week		Week	
Indicator	10	9	FYTD [#]	10	FYTD#	10	FYTD#
All influenza detections reported (rapid or PCR)	620	722	18,779	278	4,751	303	5,353
Percent of emergency department visits for ILI	4%	3%		4%		5%	
Percent of deaths registered with pneumonia and/or influenza	9%	8%		8%		10%	
Number of influenza-related deaths reported^	13	7	302	7	68	9	62

FYTD=Fiscal Year To Date (FY is July 1- June 30, Weeks 27-26). Total deaths reported in prior years: 87 in 2016-17, 68 in 2015-16, and 97 in 2014-15.

[^] Current FY deaths are shown by week of report; by week of death for prior FYs.





^{*} At least one case of laboratory-confirmed influenza in a setting experiencing ≥2 cases of influenza like illness (ILI) within a 72-hour period.

^{*} Previous weeks case counts or percentages may change due to delayed processing or reporting.

^{**} Includes FYs 2014-15, 2015-16, and 2016-17.

County of San Diego

Influenza Watch

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Comparing Influenza A and B Virus Infections

As late-season influenza B viruses currently predominate in San Diego and across the United States, it is worth reviewing a <u>study</u> by the Centers for Disease Control and Prevention (CDC) published in 2014 that compared illness severity associated with influenza A versus influenza B virus infections. The study showed that among hospitalized adults, influenza B viruses caused equally severe disease outcomes and clinical characteristics as influenza A viruses, contradicting a common misconception that influenza B viruses are associated with milder disease than influenza A viruses.

The study investigators looked at disease characteristics – including severity of illness – associated with influenza viruses among hospitalized adults over eight seasons (2005-06 through 2012-13), identifying 21,186 influenza A and 3,579 influenza B-associated hospitalizations. Influenza A viruses dominated in circulation in all of the seasons studied, particularly during the 2009 H1N1 pandemic.

The study found no significant difference in the overall proportion of hospitalizations with an intensive care unit (ICU) admission by virus type for each season. Among hospitalized adults with influenza infection, length of hospital stay and the proportion of patients admitted into an ICU were comparable. Results also showed that influenza B virus infections caused a similar proportion of deaths as influenza A virus infections among hospitalized adults.

The authors concluded that clinicians should not regard influenza B infections as less severe than influenza A when considering treatment options, which support current CDC <u>antiviral treatment recommendations</u>. The type of influenza virus infection should not influence treatment decisions.

Of note, this year's seasonal influenza vaccine is <u>estimated</u> to be 42% effective against circulating influenza B viruses. Anyone over six months of age who has not received the influenza vaccination this season should do so.

The study may be reviewed here: <u>Comparing Clinical Characteristics Between Hospitalized Adults With Laboratory-Confirmed Influenza A and B Virus Infection</u>.

Table 2. Influenza Detections Reported, FY 2017-18*

		Total	
Positive Test Type/Subtype	Week 10	FY-To-Date	
Influenza A†	116	12,814	
Influenza A(H1N1) Pandemic 2009	0	52	
Influenza A (H3) Seasonal	1	554	
Influenza B†	493	5,131	
Influenza B/Victoria	1	19	
Influenza B/Yamagata	0	37	
Influenza A/B†	9	172	
Total	620	18,779	

^{*} FY is July 1- June 30.

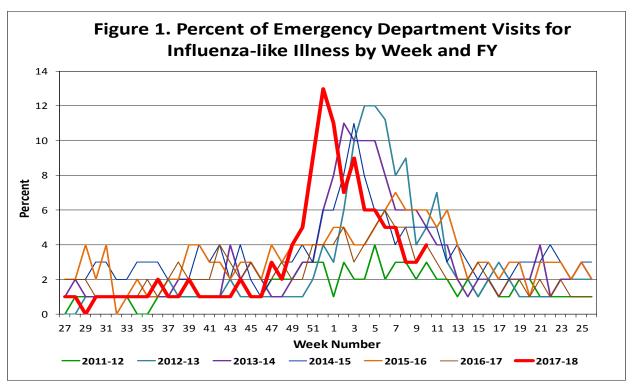
Note: Totals may change due to further laboratory findings.

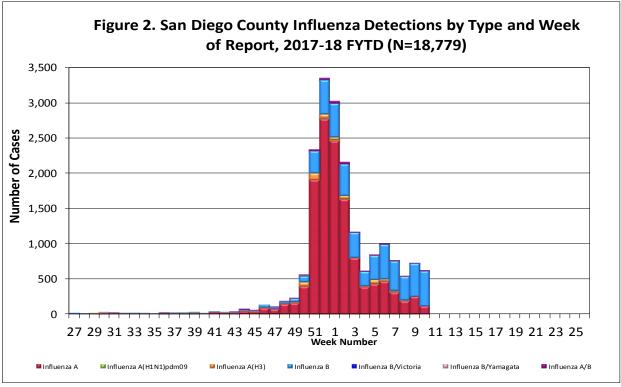




[†] No further characterization performed, or results were not yet available at time of publication.

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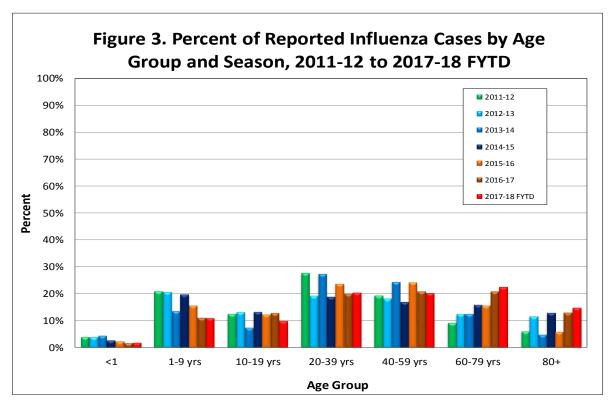


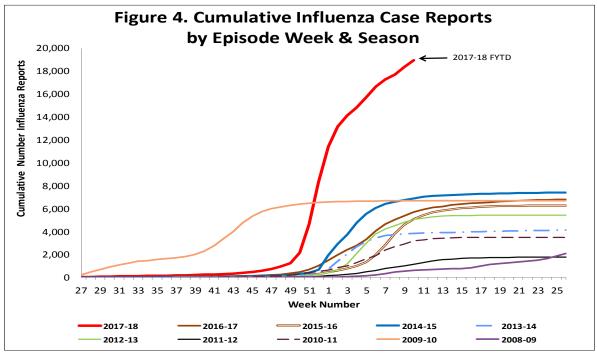






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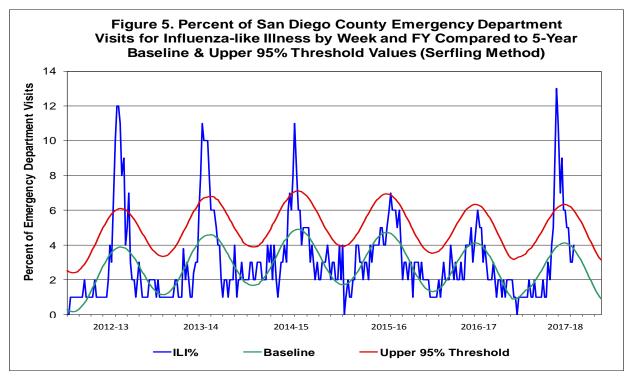


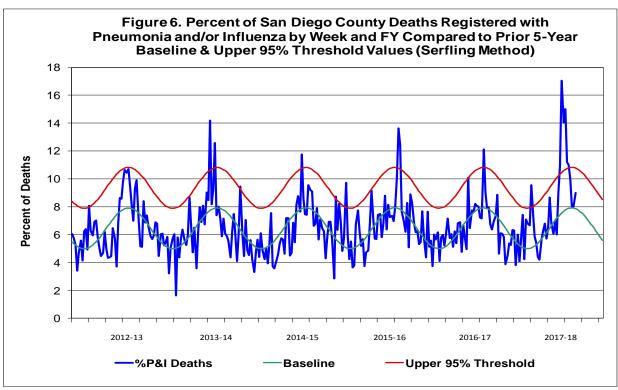






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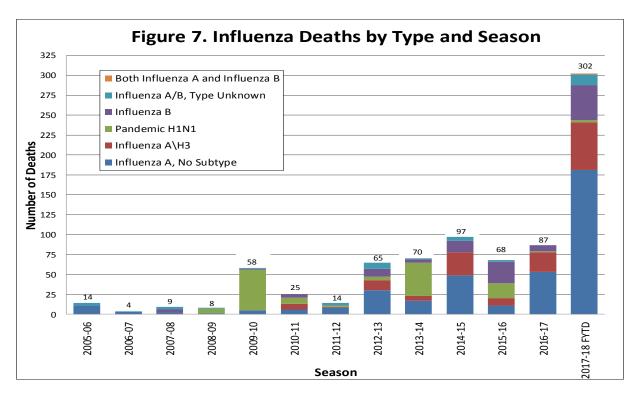


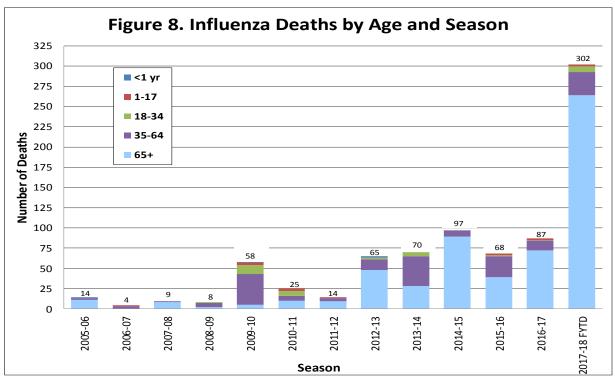






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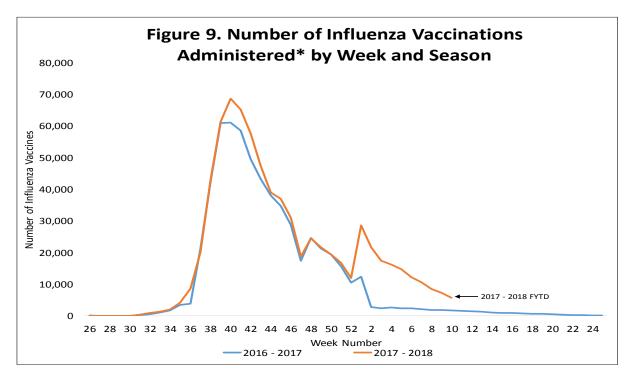


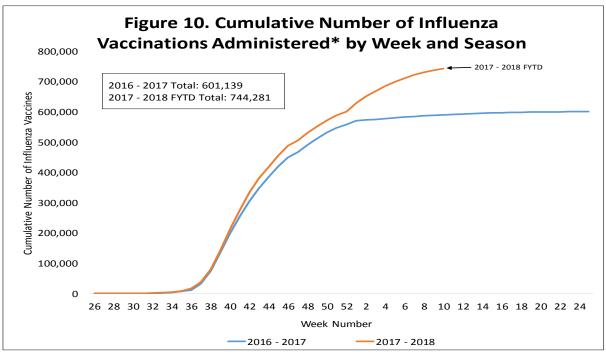






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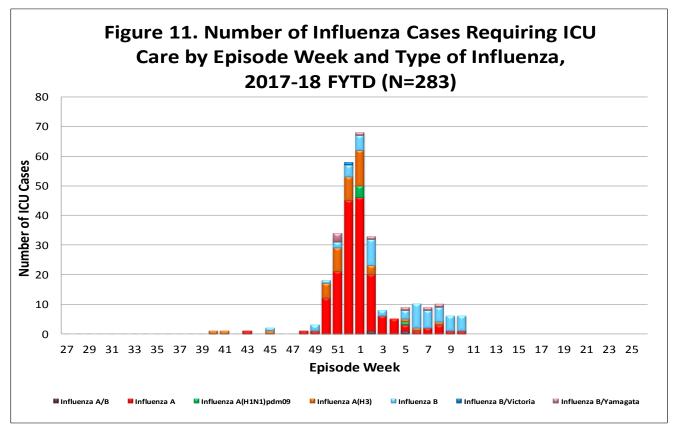
* Influenza vaccinations administered and entered into the San Diego Immunization Registry (SDIR)





County of San Diego Influenza Watch

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Episode week is the week of symptom onset, or earliest available date in which the case is identified.

Influenza Reporting in San Diego County

Local providers are encouraged to report laboratory positive influenza detections to the County Epidemiology Program by **FAX (858) 715-6458**. Please fax a <u>Case Report</u> Form and/or a printed laboratory result, and indicate if the patient was admitted to ICU or died, and/or is a resident of a congregate living facility.

For questions regarding sending specimens to Public Health Laboratory (PHL), call (619) 692-8500. Click here for the updated PHL PCR Test Request Form. Contact the Epidemiology Program with any questions at (619) 692-8499 or by email to: EpiDiv.HHSA@sdcounty.ca.gov.

Resources

San Diego County Influenza Surveillance Weekly <u>Slide Deck</u> - presentation version of this report County of San Diego Immunization Program <u>www.sdiz.org</u>
California Department of Public Health <u>Influenza</u>

Centers for Disease Control and Prevention Influenza Surveillance Weekly Report



