

# Delaware Weekly Influenza Report MMWR Week 41 (October 11 – 17, 2015) Delaware Division of Public Health

#### National Influenza Synopsis 2015-2016:

National data are updated Friday of each week. Please visit <a href="http://www.cdc.gov/flu/weekly/">http://www.cdc.gov/flu/weekly/</a> for the most current information. During MMWR Week 41 (October 11 – 17, 2015) influenza activity was low in the United States. The most frequently identified influenza virus type reported by public health laboratories in week 41 was influenza A viruses, with influenza A (H3) viruses predominating. The geographic spread of influenza in Guam was reported as widespread; four states reported local activity; Puerto Rico and 29 states reported sporadic activity; and the District of Columbia, the U.S. Virgin Islands and 17 states reported no influenza activity. Both national and state data are provisional and subject to change as additional reports are received.

## Delaware Influenza Surveillance 2015-2016:

During MMWR Week 41, there was one laboratory-confirmed cases of influenza reported among Delaware residents. Reports of influenza-like illness (ILI) received from participating providers, facilities and institutions in Delaware show ILI is 0.0% and Delaware's 2015-2016 baseline is 1.8%. Nationally, ILI is 1.4% and the 2015-2016 national baseline is 2.1%.

#### Level of Influenza Activity in Delaware, MMWR Week 41:

**Sporadic** 

Small numbers of laboratory-confirmed influenza cases or a single laboratory-confirmed influenza outbreak has been reported, but there is no increase in cases of ILI.

Influenza-like illness (ILI) is defined as patients presenting with fever of 100° F or greater, cough and/or sore throat in the absence of a known cause other than influenza.

No Activity: No laboratory-confirmed cases of influenza and no reported increase in the number of cases of ILI.

**Sporadic:** Small numbers of laboratory-confirmed influenza cases or a single laboratory-confirmed influenza outbreak has been reported, but there is no increase in cases of ILI.

**Local:** Outbreaks of influenza or increases in ILI cases and recent laboratory-confirmed influenza in a single region of the state.

Regional: Outbreaks of influenza or increases in ILI and recent laboratory-confirmed influenza in at least two but less than half the regions of the state with recent laboratory evidence of influenza in those regions.<sup>3</sup>

Widespread: Outbreaks of influenza or increases in ILI cases and recent laboratory-confirmed influenza in at least half the regions of the state with recent laboratory evidence of influenza in the state.

Region = population under surveillance in a defined geographical subdivision of a state. Regions typically include several counties. Regional doesn't apply to states with  $\leq$  four counties.

In this report:	page
Influenza positive cases reported statewide and county, by subtype, Delaware 2015-16	2
Influenza positive cases reported statewide and county by age group, Delaware 2015-16	2
Confirmed cases of influenza by type and subtype, Delaware 2015-16	3
Influenza-related hospitalizations, statewide and county, by age group, Delaware 2015-16	3
Influenza-related deaths, Delaware 2015-16	3
Annual number of influenza cases reported by flu season, Delaware 2004-2005 through 2015-16	4
Percentage of visits for influenza-like illness reported by sentinel providers participating in the ILINet, Delaware 2015-16	4
Influenza-like illness reported by ILI reporting partners, Delaware 2015-16	5
Percentage of Delaware emergency department visits related to influenza, Delaware 2015-16	5
Summary of International Influenza Activity	6

<sup>&</sup>lt;sup>1</sup> 2015-2016 Region 3 (DE, DC, MD, PA, VA and WV) baseline = 1.8%.

Laboratory-confirmed case = case confirmed by viral culture or PCR.

Table 1a. Influenza positive<sup>1</sup> cases reported<sup>2</sup> statewide and county by subtype (A) or lineage (B)<sup>3</sup>, Delaware 2015-16

	rmed Flu s by Subtype / ge	Week 40	Week 40	YTD	YTD Total	YTD County %
	A / 2009 H1N1	1	1	1		
ш	A / 2012 H3N2	0	0	0		
STATEWIDE	A / no subtype	0	0	0	2	
Į	B / Yamagata	0	0	0	2	
STA	B / Victoria	0	0	0		
	B / no lineage	0	0	0		
	A / 2009 H1N1	1	1	1		
a)	A / 2012 H3N2	0	0	0		50%
New Castle County	A / no subtype	0	0	0	1	
w Cast	B / Yamagata	0	0	0	'	
ž	B / Victoria	0	0	0		
	B / no lineage	0	0	0		
	A / 2009 H1N1	0	0	0	1	50%
_	A / 2012 H3N2	0	0	0		
Kent	A / no subtype	0	0	0		
~ 양	B / Yamagata	0	0	0		
	B / Victoria	0	0	0		
	B / no lineage	0	1	1		
	A / 2009 H1N1	0	0	0	0	
Sussex County	A / 2012 H3N2	0	0	0		0
	A / no subtype	0	0	0		
လ လ	B / Yamagata	0	0	0		
	B / Victoria	0	0	0		
	B / no lineage	0	0	0		

Table 1b. Influenza positive 1 cases reported 2 statewide and county by age group, Delaware 2015-16

	rmed Flu s by Age o	Week 40	Week 41	YTD	YTD Total	YTD County %
ш	0-4 years	0	0	0		
STATEWIDE	5-24 years	0	0	0		
TEV	25-49 years	1	1	2	2	
T.	50-64 years	0	0	0		
0)	65+ years	0	0	0		
	0-4 years	0	0	0		
y He	5-24 years	0	0	0		
New Castle County	25-49 years	1	1	1	1	50%
္င္တိ હ	50-64 years	0	0	0		
Z	65+ years	0	0	0		
	0-4 years	0	0	0		
	5-24 years	0	0	0		
Kent	25-49 years	0	1	1	1	50%
ㅈ g	50-64 years	0	0	0		
	65+ years	0	0	0		
Sussex County	0-4 years	0	0	0		
	5-24 years	0	0	0		
	25-49 years	0	0	0	0	0
	50-64 years	0	0	0		
	65+ years	0	0	0		

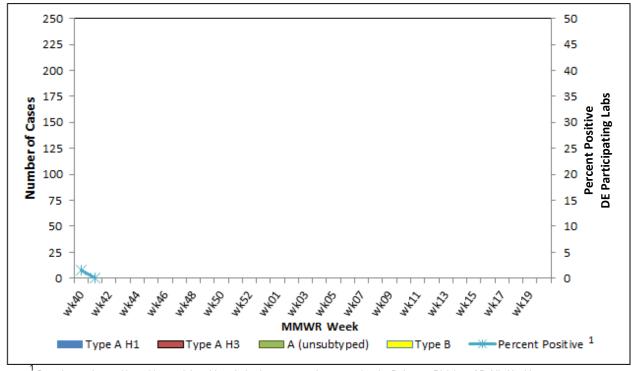
Based on patients with positive nucleic acid or viral culture test results reported to the Division of Public Health.

MMWR Week 41 = October 11-17, 2015

Reports are by the date the laboratory results are obtained. As a result, prior weeks' counts may be adjusted to reflect additional cases received.

The Division of Public Health Laboratory now has the capability to identify lineage for Influenza B. Since some laboratories in the state do not have this capability, those influenza cases will be categorized as Influenza B, no lineage identified.

Figure 1. Confirmed cases<sup>1</sup> of influenza by type and subtype/lineage, Delaware 2015-16\*



Based on patients with positive nucleic acid or viral culture test results reported to the Delaware Division of Public Health.

Table 2. Influenza-related hospitalizations statewide and county, by age group, Delaware 2015-16

	talized Flu s by Age	Week 40	Week 41	YTD	YTD Total	YTD County %
	0-4 years	0	0	0		
STATEWIDE	5-24 years	0	0	0		
巨	25-49 years	0	0	0	0	
.¥	50-64 years	0	0	0		
S	65+ years	0	0	0		
	0-4 years	0	0	0		
, te	5-24 years 0 0 0	0				
ew Cast County	25-49 years	0	0	0	0	0
New Castle County	50-64 years	0	0	0		
z	65+ years	0	0	0		
	0-4 years	0	0	0		
	5-24 years	0	0	0		
Kent County	25-49 years	0	0	0	0	0
S ک	50-64 years	0	0	0		
_	65+ years	0	0	0		
Sussex County	0-4 years	0	0	0		
	5-24 years	0	0	0		
	25-49 years	0	0	0	0	0
	50-64 years	0	0	0		
	65+ years	0	0	0		

Table 3. Influenza-related deaths, Delaware 2015-16

Influenza-	Week	Week	YTD
Related	40	41	
Deaths	0	0	0

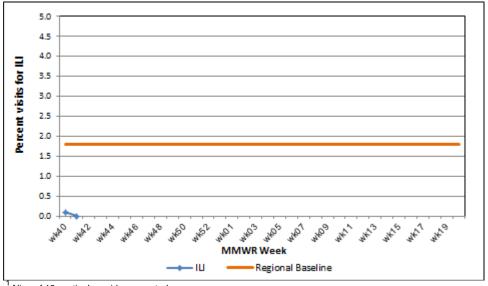
Table 4. Annual number of influenza cases reported by flu season, Delaware 2004-05 through 2015-16

Influenza Season	Total Annual Influenza Cases
2004 – 2005	995
2005 – 2006	541
2006 – 2007	508
2007 – 2008	1,401
2008 – 2009	738
2009 – 2010	2,247
2010 – 2011	1,479
2011 – 2012	267
2012 – 2013	1,781
2013 – 2014	1,842
2014 – 2015	2,390
2015 – 2016 (YTD)	2

### U.S. Outpatient Influenza-Like Illness Surveillance Network (ILINet) Sentinel Providers

An ILINet (sentinel) provider conducts surveillance for influenza-like illness (ILI) in collaboration with the Division of Public Health and the Centers for Disease Control and Prevention (CDC). Data reported by ILINet providers, in combination with other influenza surveillance data, provide a national and statewide picture of influenza activity in the U.S.

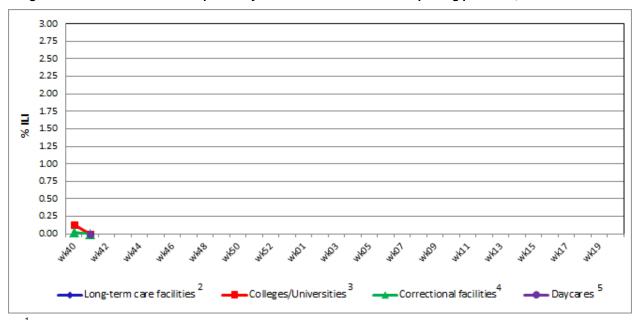
Figure 2. Percentage of visits for influenza-like illness reported by sentinel providers participating in the U.S. Outpatient ILI Surveillance Network (ILINet), Delaware 2015-16



Nine of 18 sentinel providers reported.

<sup>&</sup>lt;sup>2</sup> Regional baseline is calculated by CDC using non-influenza weeks from the previous three influenza seasons. Delaware is in Region 3 that includes DE, DC, MD, PA, VA and WV.

Figure 3. Influenza-like illness reported by influenza surveillance ILI reporting partners<sup>1</sup>, Delaware 2015-16

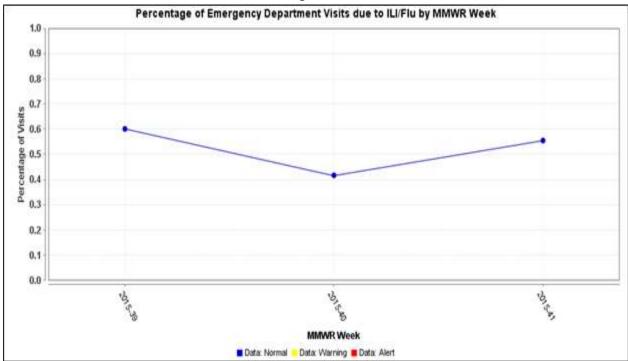


<sup>1</sup> ILINet reporting partners include long-term care facilities, colleges / universities, correctional facilities and daycare facilities. Federally qualified health centers are now CDC ILINet sentinel providers.

2 % ILI= percentage of residents with ILI symptoms. Seven long-term care facilities reported.

5 % ILI= percentage of children absent with ILI; One daycare provider reported.

Figure 4.



<sup>3 %</sup> ILI= percentage of student visits for ILI; Three universities reported.

<sup>%</sup> ILI= percentage of student visits for ILI, mass standard reported.

WILI= percentage of visits for ILI at the correctional facility; Ten correctional facilities reported.

#### **Summary of International Influenza Activity**

Globally, influenza activity generally decreased or remained low in both hemispheres. In the Northern Hemisphere, influenza activity continued at low, inter-seasonal levels with sporadic detections. Increased respiratory syncytial virus (RSV) activity was reported in the U.S. and iinfluenza A(H3N2) detections increased slightly in Canada. In the Caribbean, influenza and other respiratory virus activity remained low overall. Cuba continued with high levels of severe acute respiratory infection SARI cases associated with increased detections of Influenza A(H1N1)pdm09 and RSV. In Central America, influenza and other respiratory virus activity remained low overall. ARI/SARI activity continued within expected levels. Influenza A(H3N2) circulation increased slightly in Costa Rica and Panama.

In tropical Asia, countries in Southern and South East Asia reported low influenza activity overall except in India and Lao People's Democratic Republic where increased activity mainly due to A(H1N1)pdm09 virus in India and A(H3N2) virus in Lao PDR continued to be reported. Influenza activity declined in southern China.

Influenza activity in Europe is low, as is usual for this time of year. Few influenza detections were reported by countries in Africa. In countries with reported influenza activity in both Eastern and Western Africa, influenza type A viruses predominated. In South Africa, influenza activity remained at low levels with influenza type B viruses predominating in recent weeks. In Australia and New Zealand, influenza activity continued to decrease after peaks in mid-August. Recent influenza virus detections were predominantly influenza B viruses. In New Zealand, ILI activity was just above the seasonal threshold.

Reference: World Health Organization (WHO), 2015. Influenza Update Number 248 (10/19/15). Retrieved on October 23, 2015, from <a href="http://www.who.int/influenza/surveillance\_monitoring/updates/latest\_update\_GIP\_surveillance/en/">http://www.who.int/influenza/surveillance\_monitoring/updates/latest\_update\_GIP\_surveillance/en/</a> Reports are updated biweekly.

**NOTE:** The data provided do not reflect the total number of individuals who have been infected with the influenza virus in Delaware during the reporting period due to the following factors:

- Many people ill with influenza-like symptoms do not seek medical care.
- > Many who do seek medical care are not tested for influenza.
- > The Delaware Public Health Laboratory is limited by capacity to processing a maximum of three specimens per day from each reporting entity.

The Delaware Division of Public Health (DPH) is committed to serving you better by providing the most accurate, up-to-date influenza data available.

- > For general information on influenza, visit flu.delaware.gov or http://dhss.delaware.gov/dhss/dph/dpc/immunize-flu.html.
- For specific information on DPH flu clinics, visit <a href="http://dhss.delaware.gov/dhss/dph/fluclinics.html">http://dhss.delaware.gov/dhss/dph/fluclinics.html</a>.
- > For questions on Delaware's weekly flu report, call the DPH Office of Infectious Disease Epidemiology: 302-744-4990.
- ➤ For questions regarding influenza vaccination, please call 302-744-1060.