



Seasonal Influenza Report 2016-17

San Mateo County Health System, Public Health Policy and Planning

Weeks 5 & 6 (Jan 29 to Feb 11, 2017)

www.smchealth.org/flu · Provider Reporting: 650.573.2346 · 650.573.2919 (fax)

Volume 9, Issue 8

Catherine Sallenave MD, CD Controller · Moon Choi, Epidemiologist · Scott Morrow MD, MPH, Health Officer

Current Influenza Activity

San Mateo County

- During week 6 (ending 2/11/17), San Mateo County reported decreasing influenza activity.
- Week 6 of the current season had similar influenza detections as week 6 of the previous season (Figures 1 and 2).
- Within the County, based on laboratory reports from reporting county and hospital laboratories*, a total of 5,203 specimens have been tested for influenza since the beginning of influenza season, with 688 (13.2%) testing positive. A total of 863 specimens have been tested for RSV since the beginning of the influenza season, with 80 (9.3%) testing positive (Figures 1, 3, and 4).
- San Mateo County Public Health Laboratory (SMC PHL) has the ability to further subtype positive influenza specimens; there were 7 H3 specimens in week 5 and 8 H3 specimens in week 6. Additionally, there was an influenza B specimen in week 6 that did not have lineage performed.
- No influenza-related deaths for 0-64 years old were reported during weeks 5 & 6. There was one RSV-related death for < 5 years old reported during week 5.
- Influenza-like illness (ILI) surveillance of chief complaint data from San Mateo Medical Center ED shows similar activity during week 6 compared to the same period last season (Figure 5).
- There were two laboratory-confirmed outbreaks during week 5 and no laboratory-confirmed outbreaks during week 6.

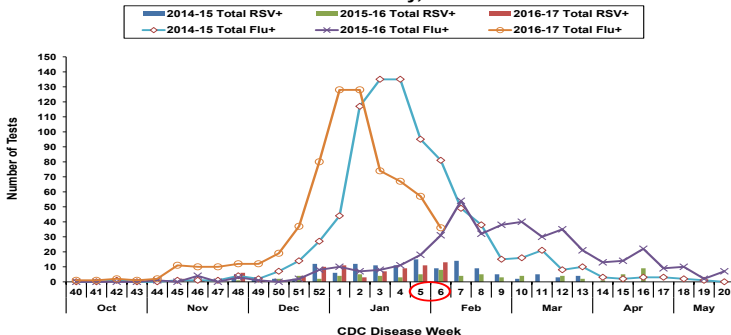
California

- Influenza activity in California remained "widespread[§]" during week 6.
- Of 5,429 specimens tested in week 6, 1,389 (25.6%) tested positive for influenza. Of these positive specimens, 1,322 (95.2%) tested positive for influenza A, of which 7 (0.5%) were H1, 236 (17.9%) were H3, and 1,079 (81.6%) were not subtyped. The 67 (4.8%) remaining positive specimens tested positive for influenza B.
- Outpatient visits for ILI were 2.5% of patient visits during week 6, which is within expected levels for this time of year.
- There were 20 laboratory-confirmed outbreaks during week 5 and 34 laboratory-confirmed outbreaks during week 6.
- Hospital visits for Pneumonia and Influenza (P&I) for week 6 were the same (6.1%) as week 5 (6.1%) and were above expected levels for this time of the year.[†]

United States

- During week 6, influenza activity increased in the United States.
- Of the 35,098 specimens tested by clinical laboratories, 8,498 (24.2%) were positive for influenza, of which 7,079 (83.3%) were influenza A and 1,419 (16.7%) were influenza B.
- Of the 2,918 specimens tested by public health laboratories, 1,732 (59.4%) were positive for influenza. Of the positive specimens, 1,528 (88.2%) were influenza A, of which 30 (2.0%) were 2009 H1N1, 1,430 (93.6%) were H3, and 68 (4.5%) were not subtyped. Of the remaining positive specimens, 204 (11.8%) were influenza B, of which 112 (54.9%) were of Yamagata lineage, 44 (21.6%) were of Victoria lineage, and 48 (23.5%) did not have lineage performed.
- During week 4, 7.8% of all deaths reported through the National Center for Health Statistics Mortality Surveillance System were due to Pneumonia and Influenza (P&I)[‡], which is above the epidemic threshold of 7.5% for week 4. Due to a backlog of records, this was the most recent data to date.
- Nine influenza-associated pediatric deaths were reported during week 6.
- During week 6, 5.2% of patient visits reported through the U.S. Outpatient Influenza-like Illness Surveillance Network (ILINet) were due to ILI. This is above the national baseline of 2.2%.
- 28 states (AL, AR, CT, GA, IL, IN, IA, KS, KY, LA, MD, MN, MS, MO, NJ, NM, NY, NC, ND, OK, PA, RI, SC, SD, TN, TX, VA, WI, WY) experienced high ILI activity; 7 states (AK, MA, MI, NE, OH, OR, WI) experienced moderate ILI activity; 6 states (AZ, CA[§], CO, FL, HI, NV) experienced low ILI activity; the remaining 9 states experienced minimal ILI activity.

Figure 1 Number of Positive Influenza & RSV Tests by Week San Mateo County, 2014-2017



*Our reported numbers do not represent all cases of influenza within SMC, but are intended to demonstrate trends in influenza activity. This issue does not represent data from Kaiser. Sources: SMC: San Mateo Medical Center, Sequoia Hospital, Mills-

Figure 2 Number of Positive Influenza Tests by Type and Week, San Mateo County, 2015-17

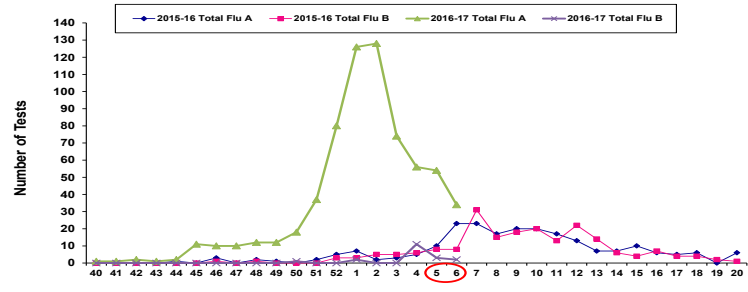


Figure 3 Percentage of Positive Respiratory Syncytial Virus (RSV) Specimens from Reporting Labs San Mateo County, 2015-17

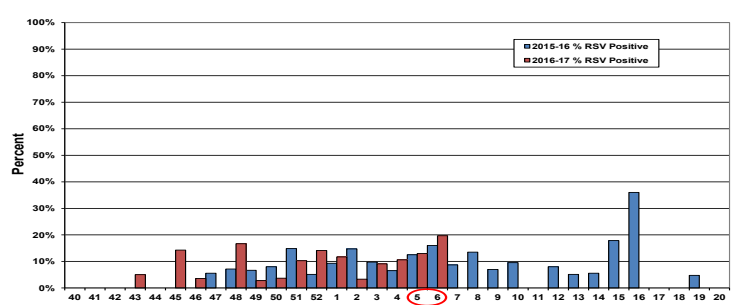


Figure 4 Percentage of Positive Influenza Specimens from Reporting Labs San Mateo County, 2015-17

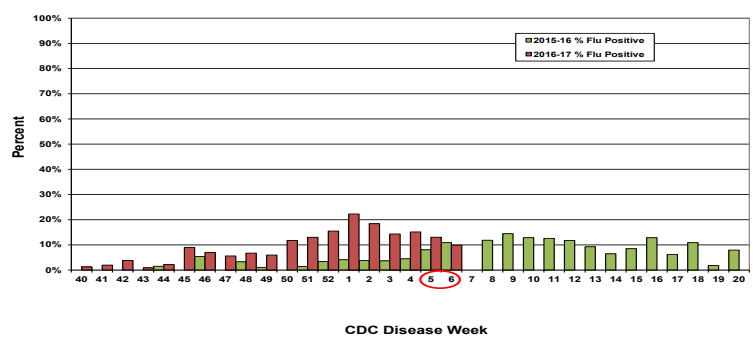
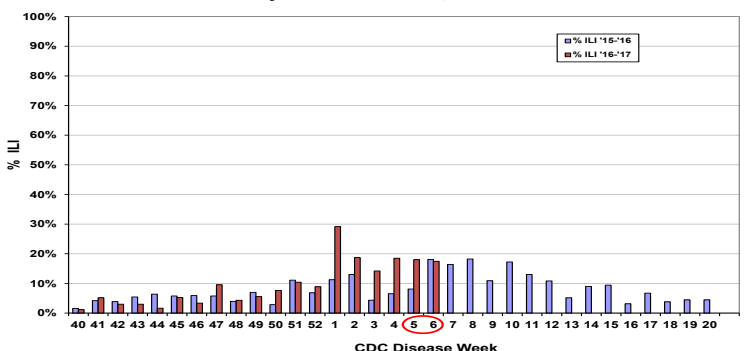


Figure 5 Proportion of Influenza-like Illness Visits (ILI): San Mateo County Medical Center ED, 2015-17 Influenza Seasons



Peninsula Hospital, San Mateo County Public Health Laboratory; CA: California Influenza Surveillance Project: <http://www.cdph.ca.gov/PROGRAMS/DCDC/Pages/CaliforniaInfluenzaSurveillanceProject.aspx>; US: CDC Influenza Activity and Surveillance: <http://www.cdc.gov/flu/weekly/fluactivitysurv.htm>

[†]This data reflects Kaiser hospitalizations only.
[‡]The CDC notes: "P&I percentages for recent weeks may be artificially low due to a backlog of records requiring manual processing. Percentages will likely increase to levels more similar to the baseline as more data becomes available."
[§]The California Department of Public Health measures influenza activity with data on outbreaks, ILI cases, and laboratory-confirmed cases; the Center for Disease Control and Prevention measures influenza activity by geography by looking at outpatient visits to healthcare providers only. The differing definitions may result in a seeming discrepancy in description of influenza activity.