

FLU EXPRESS



Flu Express is a weekly report produced by the Respiratory Disease Office of the Centre for Health Protection. It monitors and summarizes the latest local and global influenza activities.

Local Situation of Influenza Activity (as of Jan 7, 2015)

Reporting period: Dec 28, 2014 – Jan 3, 2015 (Week 1)

- The overall influenza activity continued to increase.
- The Centre for Health Protection has collaborated with the Hospital Authority and private hospitals to monitor influenza associated intensive care unit (ICU) admissions or deaths (aged 18 years or above) since Jan 2, 2015. As of Jan 7, there were 15 cases of influenza associated ICU admission or death, in which 2 of them were fatal.
- Influenza can cause serious illnesses in high-risk individuals and even healthy persons. Except for those with contraindications, influenza vaccination is suitable for all members of the public.
- Children (aged between six months and less than 6 years, or attending a kindergarten or child care centre in Hong Kong) and elderly (aged 65 years or above), who are eligible, can be subsidised for seasonal influenza vaccination from enrolled private doctors participating in the Government's vaccination subsidy schemes starting from Oct 6, 2014.

Influenza-like-illness surveillance among sentinel general outpatient clinics, 2013-15

In week 1, the average consultation rate for influenza-like illness (ILI) among sentinel general outpatient clinics (GOPCs) was 5.3 ILI cases per 1,000 consultations (Figure 1).

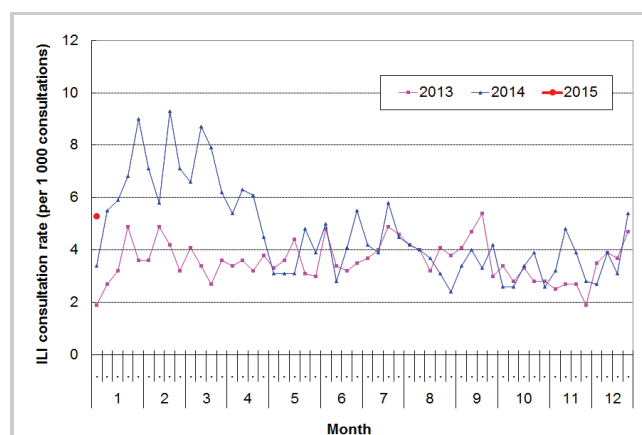


Figure 1 ILI consultation rate at sentinel GOPC, 2013-15

Influenza-like illness surveillance among sentinel private doctors, 2013-15

In week 1, the average consultation rate for ILI among sentinel private doctors was 39.5 ILI cases per 1,000 consultations (Figure 2).

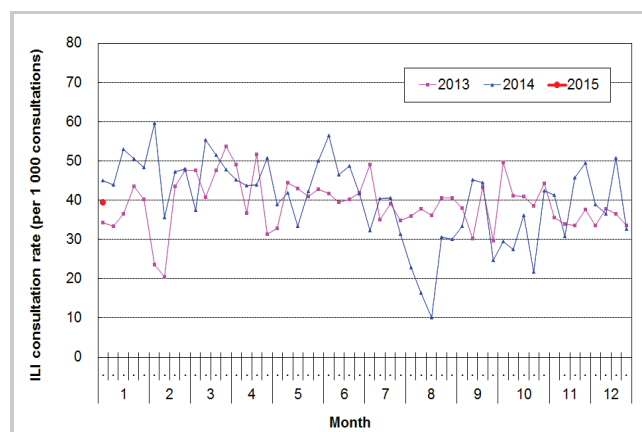


Figure 2 ILI consultation rate at sentinel GP, 2013-15

Influenza virus detections (Laboratory surveillance), 2014-15

Among the respiratory specimens received in week 1, 442 (14.40%) were tested positive for seasonal influenza viruses, including 418 influenza A(H3), 18 influenza B and 6 influenza C (Figure 3).

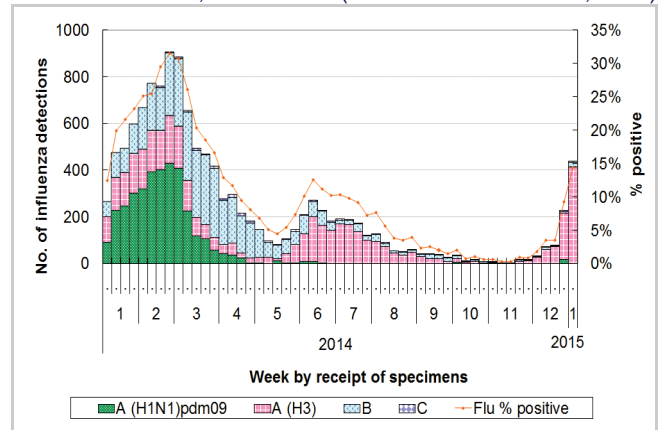


Figure 3 Influenza virus detections, 2014-15

Percentage positive for influenza viruses, 2014-15

Among the respiratory specimens received in week 1, 13.62% was influenza A(H3), 0.59% influenza B and 0.19% influenza C (Figure 4).

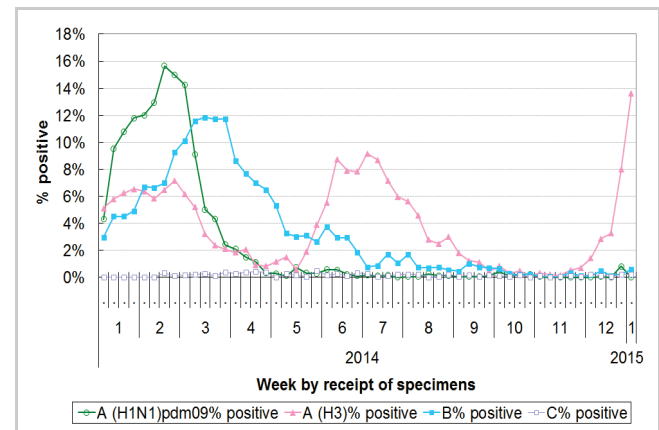


Figure 4 Percentage positive for influenza viruses, 2014-15

Influenza-like illness outbreak monitoring, 2014-15

In week 1, 8 ILI outbreaks occurring in schools/institutions were recorded. In the first 4 days of week 2 (Jan 4 to 7, 2015), 8 ILI outbreaks occurring in schools/institutions were recorded (Figure 5).

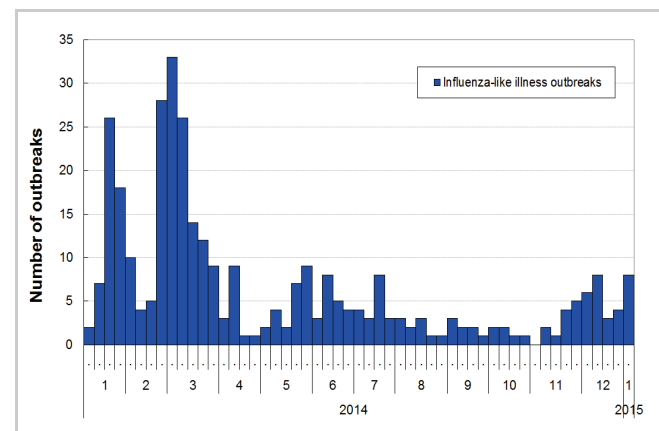


Figure 5 ILI outbreaks, 2014-15

Rate of influenza-like illness syndrome group in accident and emergency departments, 2013-15[#]

In week 1, the rate of the influenza-like illness syndrome group in the accident and emergency departments (AED) was 183.4 (per 1,000 coded cases) (Figure 6).

[#]Note: The influenza-like illness syndrome group includes codes such as influenza, upper respiratory tract infection, fever, cough, throat pain, and pneumonia.

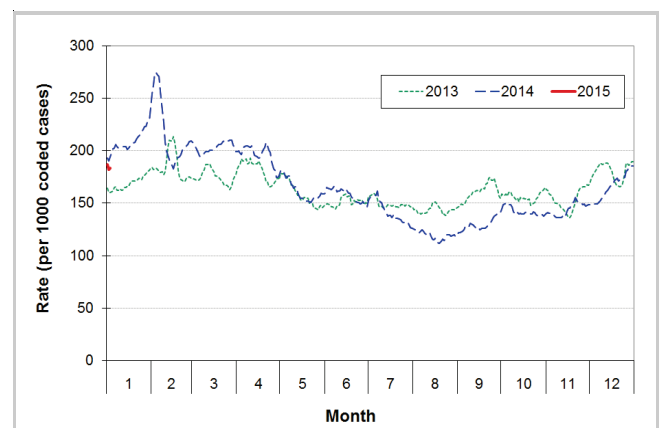


Figure 6 Rate of ILI syndrome group in AED, 2013-15

Influenza associated hospital admission rates and deaths based on discharge coding, 2013-15

In week 1, hospital admission rates with principal diagnosis of influenza for persons aged 0-4 years, 5-64 years and 65 years or above were 0.66, 0.08 and 0.90 cases (per 10,000 people in the age group) respectively (Figure 7). Weekly number of deaths with any diagnosis of influenza in public hospitals is also shown in the figure on the right hand side.

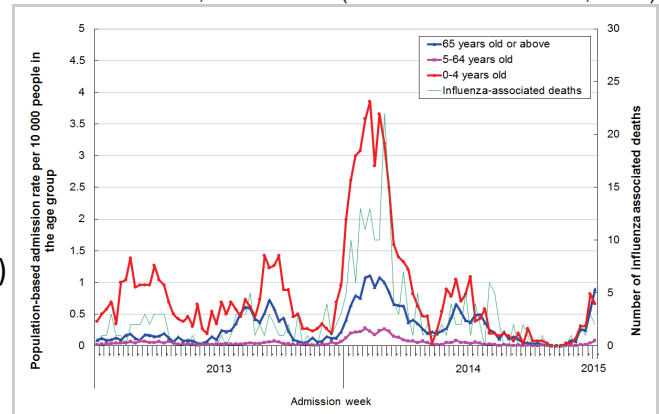


Figure 7 Influenza associated hospital admission rates and deaths, 2013-15

Fever surveillance at sentinel child care centres/ kindergartens, 2012-14

In week 51, 2014, 0.67% of children in the sentinel child care centres/ kindergartens (CCC/ KG) had fever (Figure 8). The surveillance in week 52, 2014 - week 1, 2015 was suspended due to Christmas and New Year holiday.

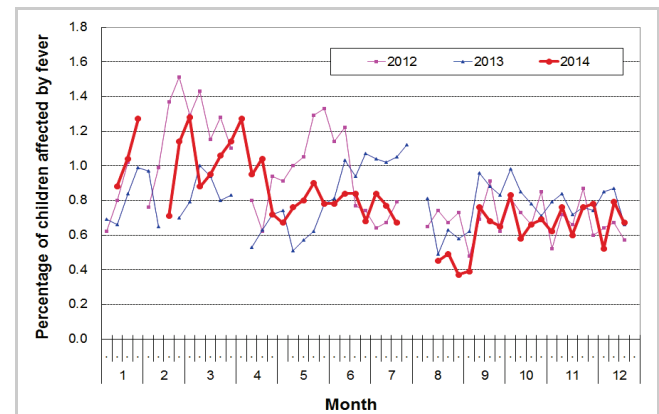


Figure 8 Percentage of children with fever at sentinel CCC/ KG, 2012-14

Fever surveillance at sentinel residential care homes for the elderly, 2013-15

In week 1, 0.13% of residents in the sentinel residential care homes for the elderly (RCHEs) had fever (Figure 9).

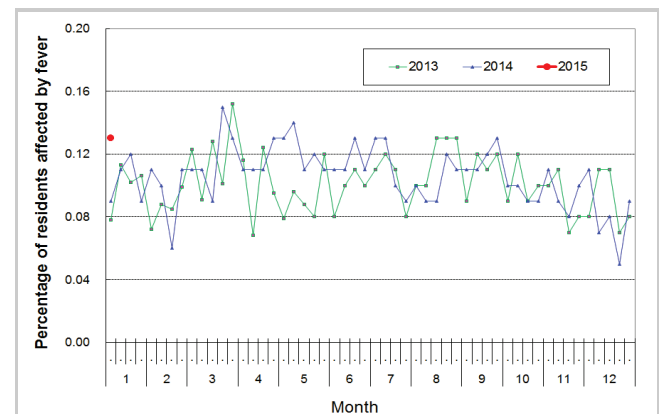


Figure 9 Percentage of residents with fever at sentinel RCHE, 2013-15

Influenza-like illness surveillance among sentinel Chinese medicine practitioners, 2013-15

In week 1, the average consultation rate for ILI among Chinese medicine practitioners (CMPs) was 2.60 ILI cases per 1,000 consultations (Figure 10).

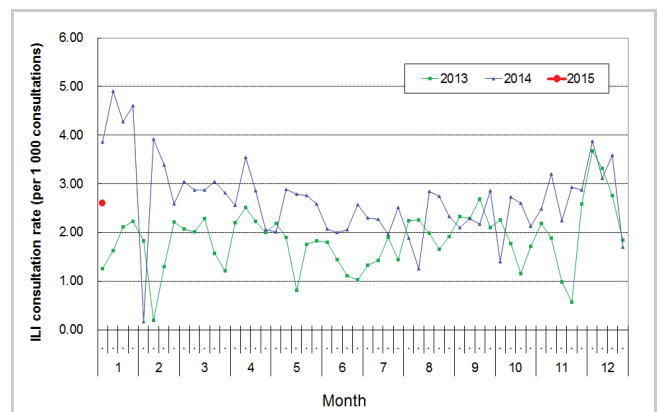


Figure 10 ILI consultation rate at sentinel CMP, 2013-15

Enhanced Surveillance for Severe Seasonal Influenza (Aged 18 years or above)

- From Jan 2, 2015, 12:00 noon, to Jan 7, 2015, 12:00 noon, 15 cases of influenza associated ICU admission/ death were recorded, in which 2 of them were fatal.

Note: The data reported are provisional figures and subject to further revision.

Surveillance of severe paediatric influenza-associated complication/death (Aged below 18 years)

- In week 1, one case of severe paediatric influenza-associated complication/ death involving a 2-year-old girl who had developed status epilepticus was reported. She is now in stable condition. Her respiratory specimen was tested positive for influenza A(H3). In the first 4 days of week 2 (Jan 4 to 7, 2015), there were no new cases of severe paediatric influenza-associated complication/death.

Note: The data reported are provisional figures and subject to further revision.

Surveillance of oseltamivir resistant influenza A(H1N1)pdm09 virus infection

- In week 1 and the first 4 days of week 2, 2015 (Jan 4 to 7, 2015), there were no new reports of oseltamivir (Tamiflu) resistant influenza A(H1N1)pdm09 virus infection. There are totally 47 reports of oseltamivir resistant influenza A(H1N1)pdm09 virus detected in Hong Kong since 2009.

Global Situation of Influenza Activity

- In the United States (week ending Dec 27, 2014), the influenza activity continued to increase, with influenza A(H3N2) being the most predominating virus.
- In Canada (week ending Dec 20, 2014), laboratory detection of influenza sharply increased in past five weeks. Influenza A(H3N2) continues to be the most common type of viruses.
- In the United Kingdom (week ending Dec 28, 2014), the weekly influenza consultation rates remained elevated in England and Wales, but remained low in Scotland and Northern Ireland.
- In Europe (week ending Dec 28, 2014), the proportion of influenza virus-positive sentinel specimens increased to over 10%. The influenza season in Europe appears to be starting.
- In Singapore (week ending Jan 3, 2015), the number of consultations for acute respiratory infections remained low.

Sources:

Information have been extracted from the following sources when updates are available: [United States Centers for Disease Control and Prevention](#), [Public Health Agency of Canada](#), [Public Health England](#), [Joint European Centre for Disease Control and Prevention-World Health Organization/Flu News Europe](#) and [Singapore Ministry of Health](#).