



INFLUENZA WATCH

Week 44
Ending 11/4/2017

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 44 (ending 11/4/2017)**

- 67 new influenza detections reported: *Elevated level*
- 2% influenza-like-illness (ILI) among emergency department visits: *Expected level*
- No new influenza-related deaths reported this week
- 7% of deaths registered with pneumonia and/or influenza: *Expected level*

**Current
Season Summary****384**

Total Cases

3

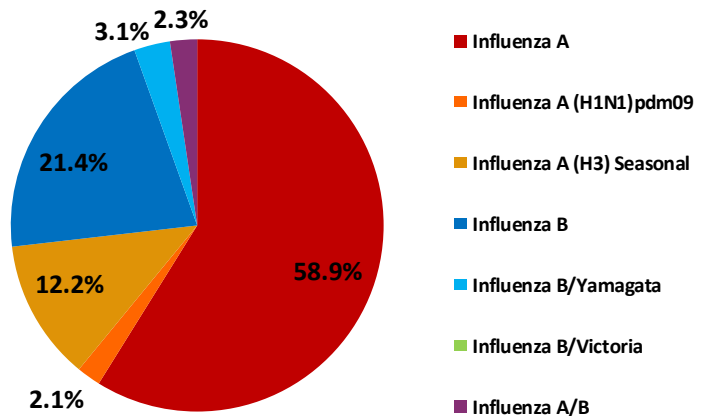
ICU Cases

2

Deaths

2

Outbreaks

Virus Characteristics**Table 1. Influenza Surveillance Indicators**

Indicator	FY 2017-18*			FY 2016-17		Prior 3-Year Average**	
	Week 44	Week 43	FYTD#	Week 44	FYTD#	Week 44	FYTD#
All influenza detections reported (rapid or PCR)	67	32	384	18	121	10	94
Percent of emergency department visits for ILI	2%	1%		2%		3%	
Percent of deaths registered with pneumonia and/or influenza	7%	6%		5%		5%	
Number of influenza-related deaths reported^	0	1	2	0	1	0	<1

* 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.

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

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

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

Variant influenza

Recent novel influenza cases reported by the Centers for Disease Control and Prevention (CDC) highlight the importance of providers obtaining travel and animal contact histories in all patients who present with influenza-like illness. In last week's [FluView](#) update on national influenza trends, CDC reported three new infections during 2017 involving novel influenza A viruses, two of them variant H3N2 (H3N2v) and one variant H1N2 (H1N2v), with possible human-to-human transmission in one of the cases.

The H3N2v cases were in Nebraska and Michigan, the first for Nebraska and the second in Michigan. The Michigan case involves a person who had close contact with the only other H3N2v case-patient this year. The newly reported patient also had swine exposure, but it was more than a week before symptoms began, so the contact was outside the typical incubation period. CDC concluded that this case may have been a human-to-human transmission.

The H3N2v patient in Nebraska reported no contact with swine the week before falling ill, but a member of the same household did report recent swine exposure. CDC has confirmed 61 H3N2v cases so far this year, which is higher than normal. The previous four years had from 3 to 19 cases per year, with 2012 being an elevated year for the strain, with 309 H3N2v cases confirmed.

The H1N2v case in Colorado is just the fourth infection involving that strain this year. The others were in Ohio patients. The Colorado patient reported being exposed to swine at an "agricultural event" the week preceding illness onset.

Providers should always obtain travel and animal contact histories in patients with influenza-like illness and are urged to immediately contact the [County Epidemiology Program](#) should a novel or variant influenza be suspected. CDC provides interim guidance on variant influenza viruses, which is available [here](#).

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

Positive Test Type/Subtype	Week 44	Total FY-To-Date
Influenza A†	44	226
Influenza A(H1N1) Pandemic 2009	0	8
Influenza A (H3) Seasonal	7	47
Influenza B†	13	82
Influenza B/Victoria	0	0
Influenza B/Yamagata	0	12
Influenza A/B†	3	9
Total	67	384

* FY is July 1- June 30.

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

Note: Totals may change due to further laboratory findings.

Figure 1. Percent of Emergency Department Visits for Influenza-like Illness by Week and FY

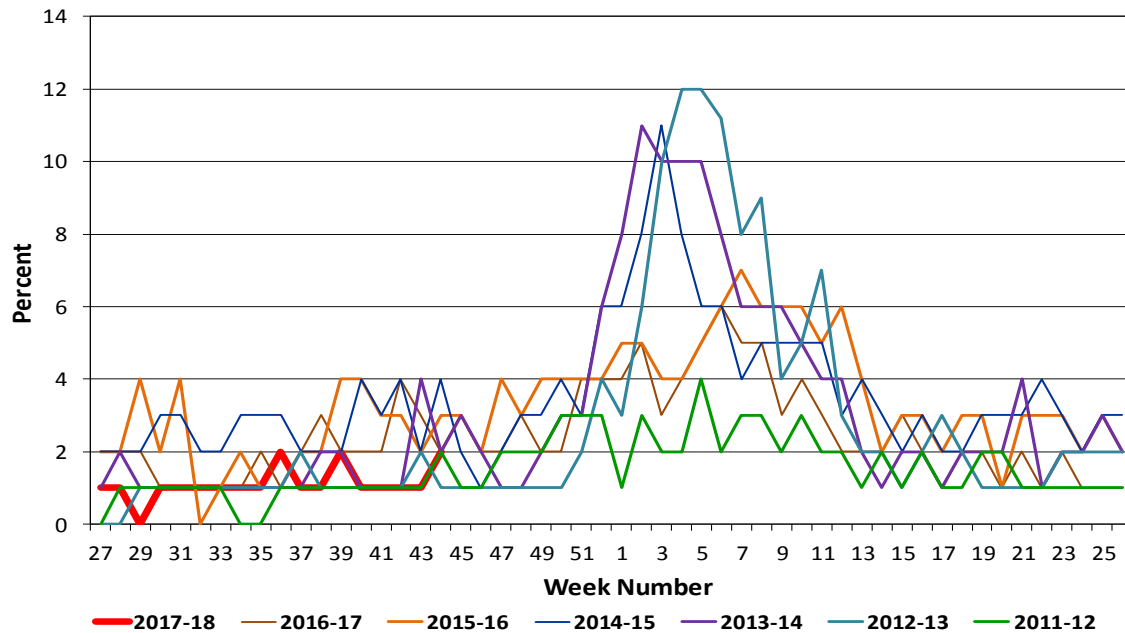


Figure 2. San Diego County Influenza Detections by Type and Week of Report, 2017-18 FYTD (N=384)

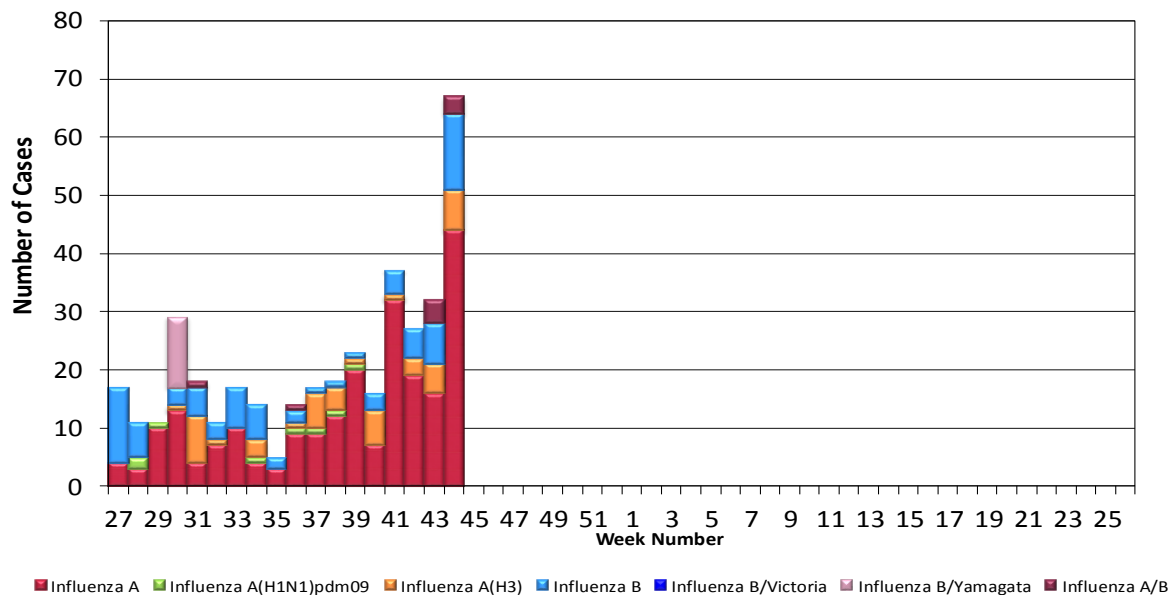


Figure 3. Percent of Reported Influenza Cases by Age Group and Season, 2011-12 to 2017-18 FYTD

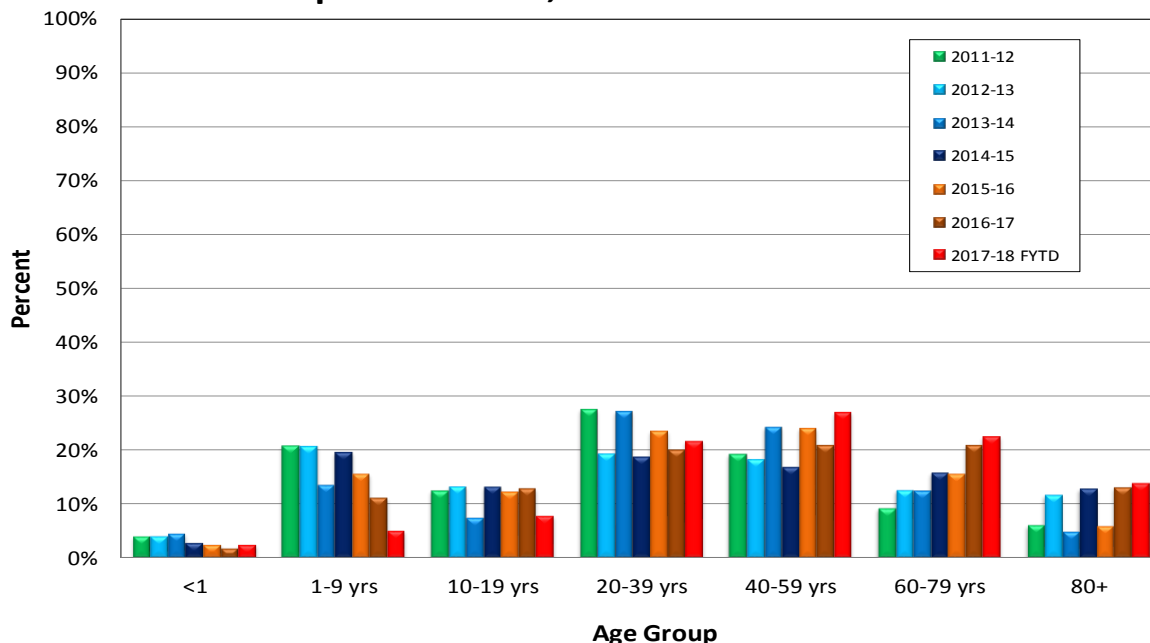


Figure 4. Cumulative Influenza Case Reports by Week & Season

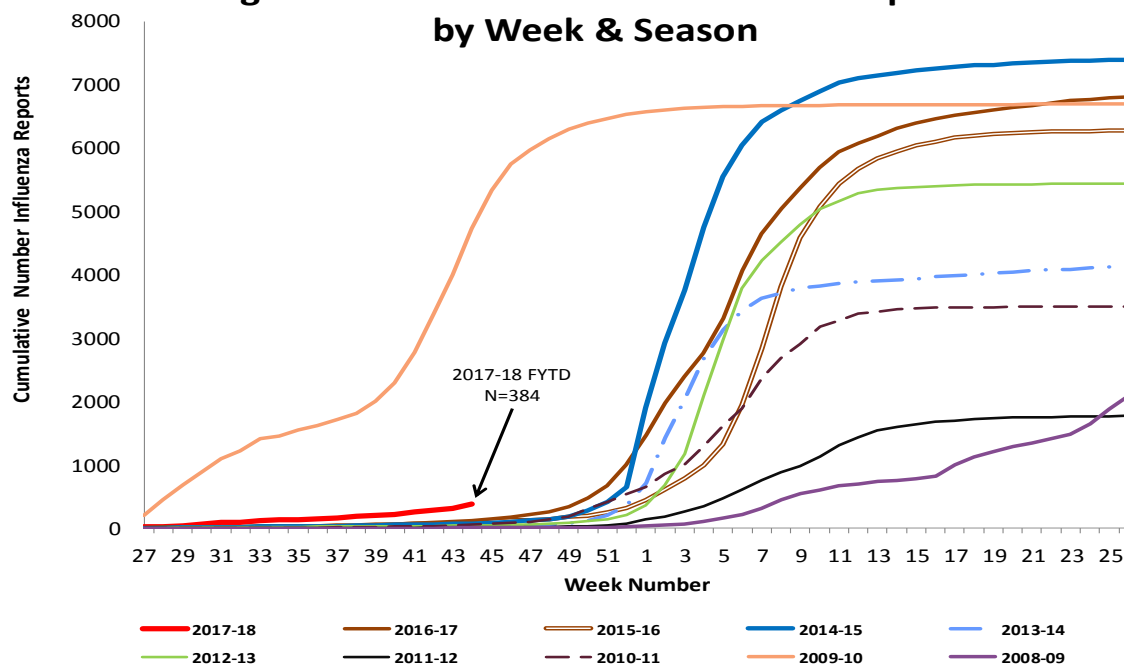


Figure 5. Percent of San Diego County Emergency Department Visits for Influenza-like Illness by Week and FY Compared to 5-Year Baseline & Upper 95% Threshold Values (Serfling Method)

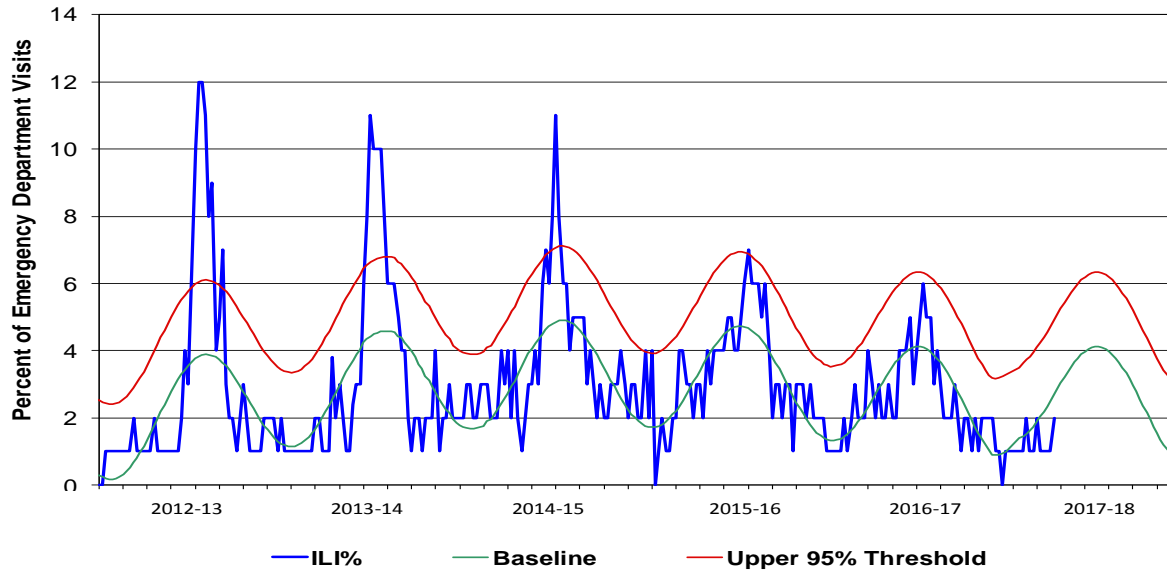


Figure 6. Percent of San Diego County Deaths Registered with Pneumonia and/or Influenza by Week and FY Compared to Prior 5-Year Baseline & Upper 95% Threshold Values (Serfling Method)

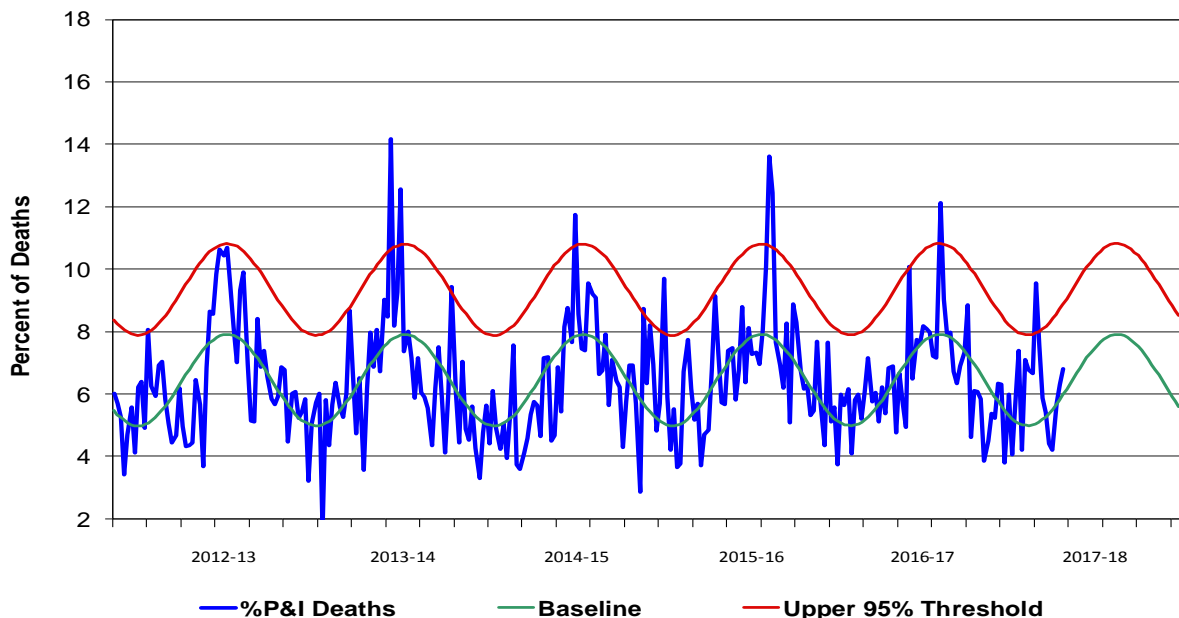


Figure 7. Influenza Deaths by Type, and Season

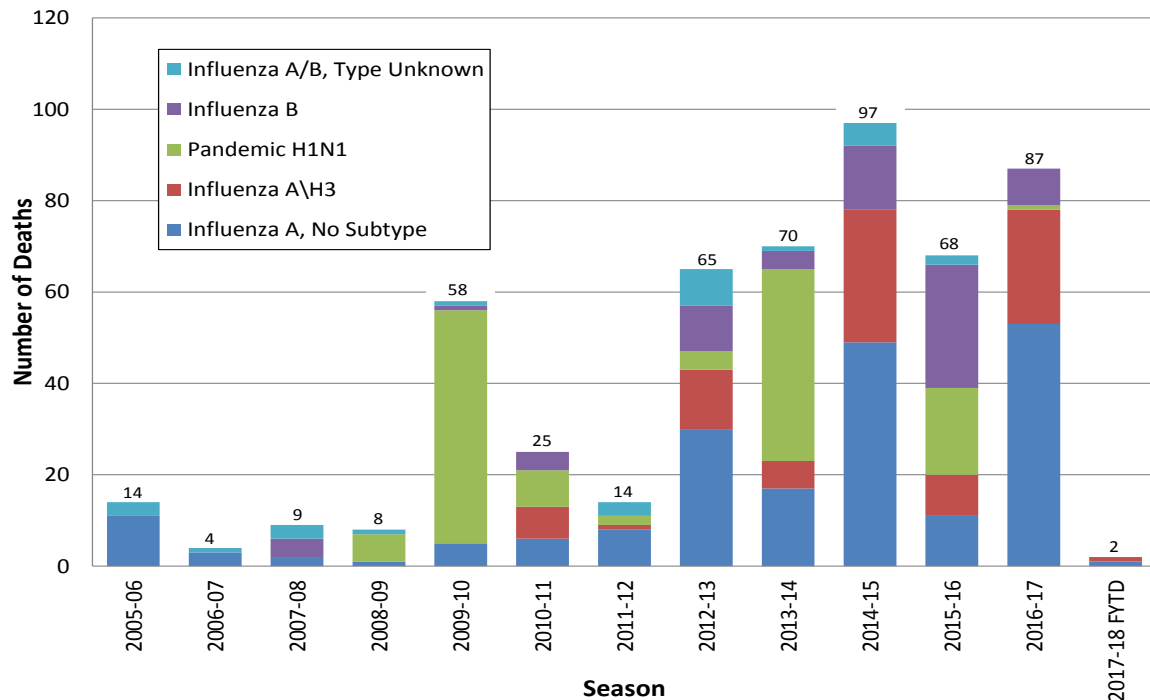


Figure 8. Influenza Deaths by Age and Season

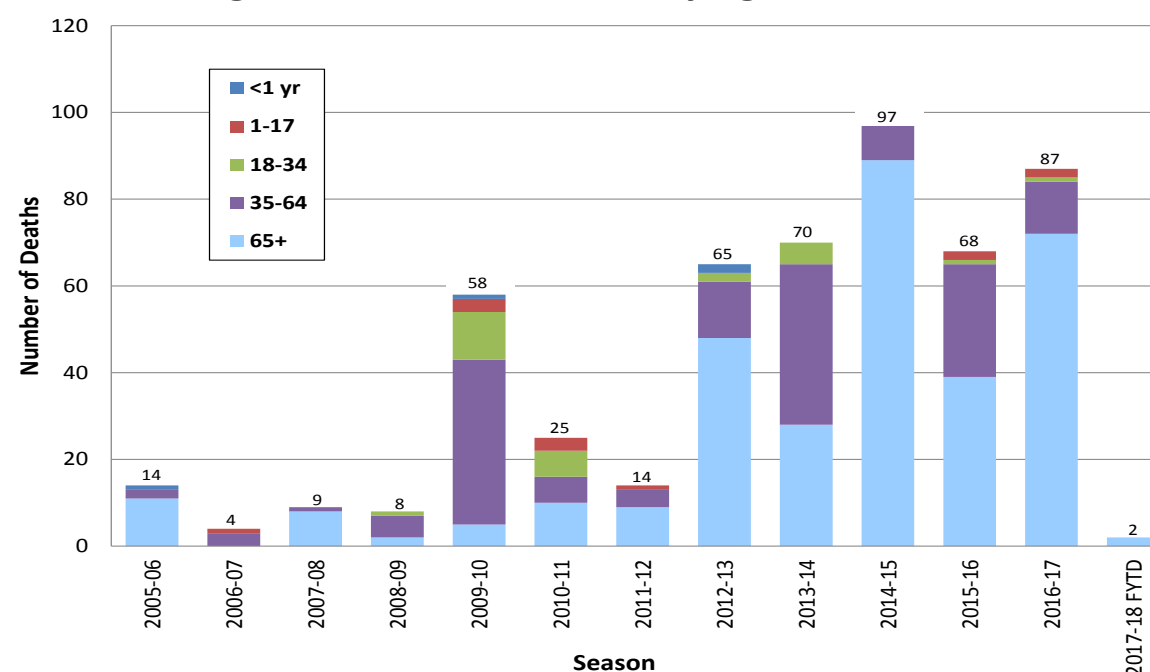
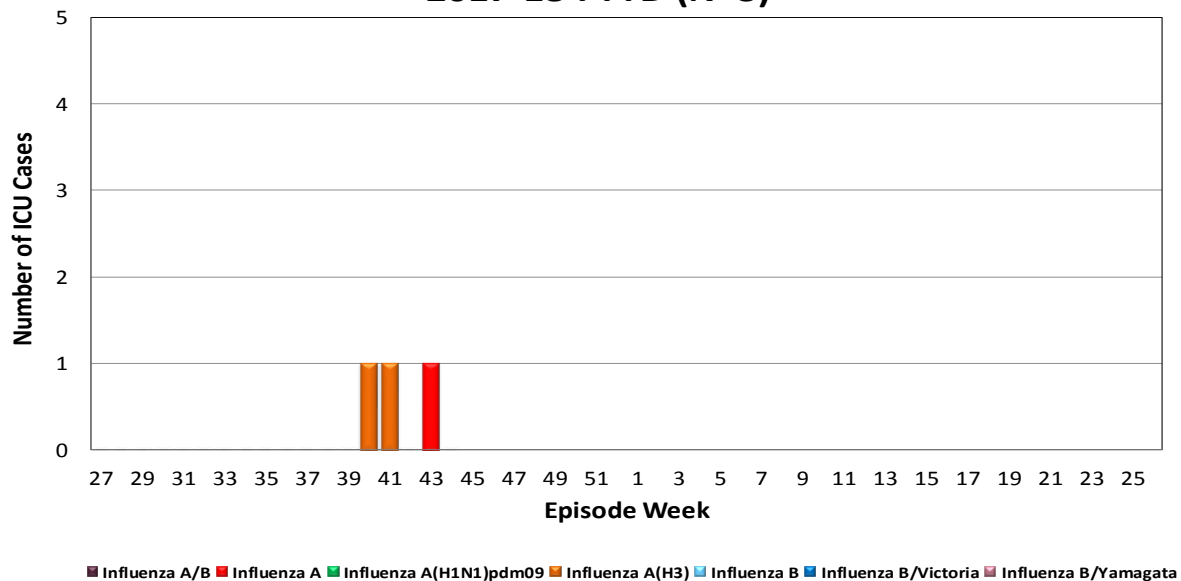


Figure 9. Number of Influenza Cases Requiring ICU Care by Episode Week and Type of Influenza, 2017-18 FYTD (N=3)

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 [Case Report](#) 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 [Slide Deck](#) - presentation version of this report

County of San Diego Immunization Program www.sdiz.org

California Department of Public Health [Influenza](#)

Centers for Disease Control and Prevention Influenza Surveillance [Weekly Report](#)