

Flu Summit Surveillance Summary – Week 1 ending January 9, 2016

During week 1 (January 3-9, 2016), laboratory data indicated that influenza activity increased slightly in the United States.

For week 1, of the viruses tested in clinical labs, 3.0% were positive for influenza. Of these, 68.2% were influenza A and 31.8% were positive for influenza B. In public health labs, there were 929 specimens tested during week 1, 112 of which were positive for influenza. Of these, 94 were influenza A viruses, and 18 were influenza B viruses.

For characterization data:

CDC has characterized 209 influenza viruses [49 A (H1N1) pdm09, 128 A (H3N2), and 32 influenza B virus] collected by U.S. laboratories since October 1, 2015.

All 49 H1N1 pdm09 viruses were antigenically characterized as A/California like. All 128 H3N2 viruses were genetically sequenced and were similar to genetic groups for which a majority of viruses antigenically characterized were similar to a/Switzerland; a subset of 78 H3N2 viruses were antigenically characterized with 77 of the 78 viruses being A-Switzerland like. 25 of the B viruses were of the Yamagata lineage, and were antigenically characterized as b/Phuket like, and there were 7 B viruses of the Victoria lineage that were all antigenically characterized as B/Brisbane like.

305 viruses including 75 influenza A H1N1 pdm09, 166 influenza A H3N2, and 64 influenza B viruses have been tested for antiviral resistance. There was one influenza A H1N1 pdm09 virus that was resistant to oseltamivir and peramivir. All of the other viruses tested were sensitive to all three inhibitors.

Based on the most up to date NCHS mortality surveillance data available on January 14, 5.8% of the deaths occurring during the week ending December 26, which is week 51, were due to P&I, which is below the NCHS specific epidemic threshold of 7.3% for week 51.

Based on the 122 cities mortality reporting system, during week 1, 6.4% of all deaths reported through this system were due to P&I, which is below the 122-cities specific epidemic threshold of 7.0% for week 1.

One influenza-associated pediatric death was reported to CDC during week 1. This death was associated with an influenza B virus and occurred during week 49 (the week ending December 12, 2015). A total of seven influenza-associated pediatric deaths have been reported during the 2015-2016 season. A total of seven influenza-associated pediatric deaths have been reported during the 2015-2016 season. Of the 7 deaths, 2 had no vaccination history, one was ineligible for vaccination due to age, and four were unvaccinated.

For week 1, the proportion of outpatient visits for ILI reported to ILINet was 2.0%, which is below the national baseline of 2.1%. The increase in the percentage of patient visits for ILI in previous weeks may be influenced in part by a reduction in routine healthcare visits during the holidays, as has occurred in previous seasons. On a regional level, the percentage of outpatient visits for ILI ranged from 0.5% to 4.3% during week 1. Four regions (Regions 1, 3, 4, and 6) reported a proportion of outpatient visits for ILI at or above their region-specific baseline levels.

The influenza activity reported by state and territorial epidemiologists indicates geographic spread of influenza viruses, although it does not measure the severity of influenza activity. For geographic spread during week 51:

- Regional influenza activity was reported by Guam, Puerto Rico, and nine states (Arizona, California, Connecticut, Iowa, Massachusetts, New Hampshire, North Carolina, Pennsylvania, and Virginia).
- Local influenza activity was reported by 11 states (Indiana, Kentucky, Maryland, Nevada, New Jersey, New Mexico, Oklahoma, Oregon, Texas, Utah, and Vermont).
- Sporadic influenza activity was reported by the U.S. Virgin Islands and 28 states (Alaska, Arkansas, Colorado, Delaware, Florida, Georgia, Hawaii, Idaho, Illinois, Kansas, Louisiana, Maine, Michigan, Minnesota, Mississippi, Missouri, Montana, Nebraska, New York, North Dakota, Ohio, Rhode Island, South Carolina, South Dakota, Washington, West Virginia, Wisconsin, and Wyoming).
- The District of Columbia and two states (Alabama and Tennessee) reported no influenza activity.