## Dallas County Health and Human Services 2017–2018 Influenza Surveillance Report

Week 2 ending January 13, 2018

## **Epidemiologic Summary**

- Influenza activity remains high in Dallas County with 28.4% of tests returning positive during week 2. Nationally, 25.6% of specimens reported to CDC were positive for influenza.
- During week 2, in Dallas County the most frequently identified influenza virus type was influenza A (77%). The predominant influenza A has been subtype A(H3N2) at 58%.
- Daily numbers of emergency department visits for influenza-like illness in Dallas County have increased and 357 influenza-associated hospitalizations were reported during week 2.
- 10 influenza-associated deaths of an adult were reported in week 2, and four were reported in week 3. One influenza-associated pediatric death has been reported during the 2017-2018 season in Dallas County.
- RSV activity remains high with 16.7% of tests from area surveillance sites testing positive.

Table 1. Summary of Influenza Surveillance from Dallas County Hospitals and Hospital Laboratories

Week Ending	12/09	12/16	12/23	12/30	01/06	01/13	9/10/17 –
CDC Week	49	50	51	52	1*	2*	Present
Total Influenza PCR Tests	807	1,042	1,400	1,532	1,743	1,901	14,871
Number of positive PCR tests	83	177	402	503	510	544	2,512
Percent of positive PCR tests	10.3	17.0	28.7	32.8	29.3	28.6	
Total Rapid Influenza Diagnostic Tests	1,387	2,069	3,259	3,694	3,514	4,336	25,403
Number of positive RIDTs	303	445	1,074	1,023	942	1,232	5,681
Percent of positive RIDTs	21.9	21.5	32.0	27.7	26.8	28.4	
Total Influenza Tests Performed	2,257	3,160	4,747	5,310	5,360	6,265	41,155
Total positive influenza tests <sup>1</sup>	386	622	1,476	1,526	1,453	1,782	8,200
Percent positive influenza tests	17.1	19.7	31.1	28.7	27.1	28.4	
Positive influenza A tests <sup>2</sup>	323	546	1,310	1,328	1,181	1,367	6,810
Positive influenza B tests	63	76	166	198	272	415	1,390
Non-differentiated influenza tests <sup>3</sup>	0	0	0	0	0	0	0

<sup>&</sup>lt;sup>1</sup> Includes positive rapid antigen, PCR, DFA, or culture results

**Table 2.** Summary of Influenza Hospitalizations and Deaths from Dallas County Hospitals, Vital Statistics and Medical Examiner's Office

Week Ending CDC Week	12/09 49	12/16 50	12/23 51	12/30 52	01/06 1*	01/13 2*	01/20 3*	9/10/17 – Present
CDC Week	49	50	21	52	1.	۷.	<b>5</b>	Tresent
Influenza hospitalizations <sup>4</sup>	49	88	241	278	320	357	N/A	1,525
Influenza ICU admissions <sup>4</sup>	5	21	49	52	61	65	N/A	280
Confirmed pediatric deaths <sup>5</sup>	0	0	0	0	0	0	1	1
Confirmed adult deaths <sup>6</sup>	1	3	3	2	14	10	4	39
Possible influenza-associated deaths <sup>7</sup>	0	0	0	1	0	1	0	2

<sup>&</sup>lt;sup>4</sup> Reflects all influenza-associated hospitalizations reported from hospitals located within Dallas County by week of any positive influenza tests; Data source:14 Hospitals in Dallas County

Table 3. Confirmed Influenza-associated Pediatric and Adult Deaths, Dallas County: 2011–2018 Seasons

	2012–2013	2013–2014	2014–2015	2015–2016	2016–2017	2017–2018
Pediatric	3	3	0	1	1	1
Adult	6	55	19	14	16	39

Data source: Reports of confirmed influenza-associated deaths, as defined in Table 2.

<sup>&</sup>lt;sup>2</sup> Further subtyping is performed only by select hospital laboratories for specimens referred to DCHHS by institutions for PCR-testing

<sup>&</sup>lt;sup>3</sup> Non-differentiated refers to rapid test results which did not differentiate between influenza A and B

<sup>&</sup>lt;sup>5</sup> Confirmed influenza-associated deaths of Dallas County residents <18 years of age

<sup>&</sup>lt;sup>6</sup> Confirmed influenza-associated deaths as defined by a positive laboratory test, compatible symptoms, and clear progression from illness to death, or determination by the County Medical Examiner's office (ME) of no alternate cause of death

<sup>&</sup>lt;sup>7</sup> Possible influenza-associated deaths are defined as cases with laboratory-confirmed influenza, but pending final autopsy results for determination of primary cause of death

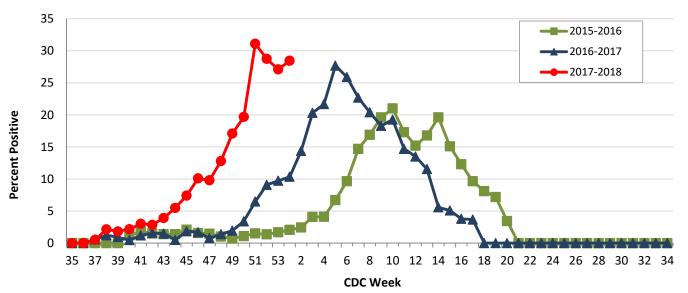
<sup>\*</sup>Indicates preliminary results which are subject to change with late-arriving data from surveillance sites designated for DCHHS' seasonal influenza program

35% Type A 1800 30% **Number of Positive Tests** Type B 1600 Percent Positive 25% 1400 Percent Positive 1200 20% 1000 15% 800 600 10% 400 5% 200 0 0% 38 39 49 51 52 2 43 1 September October November December January

Figure 1. Influenza Positive Tests Reported to DCHHS by Hospital Laboratories: 2017 - 2018 Seasons

**CDC Week - Month** 

Figure 2. Influenza Positive Tests Reported to DCHHS by Hospital Laboratories: 2015–2018 Seasons



Note: For Figure 2 and all subsequent trend overlays there is no week 53 for the 2015-2016, 2016-17, or 2017-2018 influenza seasons, therefore week 53 data point for those seasons is an average of week 52 and week 1.

**Table 4.** Influenza Typing and Subtyping from Cumulative Dallas County, Texas, and U.S. Laboratory Surveillance Data: 2017-2018 Season

	Dallas <sup>1</sup> (n=285)	Texas <sup>2</sup> (n= 637)	U.S. <sup>3</sup> (n= 16,036)
Influenza A	256 (89.8%)	553 (86.8%)	13,927 (86.8%)
H1N1 2009 subtype	107 (42.0%)	165 (30.0%)	1,219 (8.9%)
H3N2 subtype	148 (58.0%)	386 (70.5%)	12,489 (91.1%)
Not subtyped	1	2	219
Influenza B	31 (10.9%)	81 (12.7%)	2,109 (13.2%)
Yamagata strain	31 (100%)	70 (95.9%)	1,366 (64.8%)

<sup>&</sup>lt;sup>1</sup> DCHHS LRN laboratory PCR testing of designated Dallas County surveillance site isolates; counts may not sum to total as samples can test positive for multiple subtypes

<sup>3</sup> CDC FluView Weekly Influenza Surveillance Report available at <a href="http://www.cdc.gov/flu/weekly/">http://www.cdc.gov/flu/weekly/</a>

<sup>&</sup>lt;sup>2</sup> DSHS 2017–2018 Texas Influenza Surveillance Information Activity Report available at <a href="https://www.dshs.state.tx.us/idcu/disease/influenza/surveillance/">https://www.dshs.state.tx.us/idcu/disease/influenza/surveillance/</a>

40

50

18

35

45

2

12

22

400 350 300 **Number of Patients** 2016-2017 250 Season 2017-2018 2014-2015 2013-2014 200 Season Season Season 150 2015-2016 Season 100 50 0

Figure 3. Influenza Hospitalizations by Week of Admission, Dallas County: 2013-2018 Seasons

Figure 4. Intensive Care Unit Hospitalizations for influenza by Week of Admission, Dallas County: 2013-2018 Seasons

40

50

8

**CDC** Week

18

28

38

48

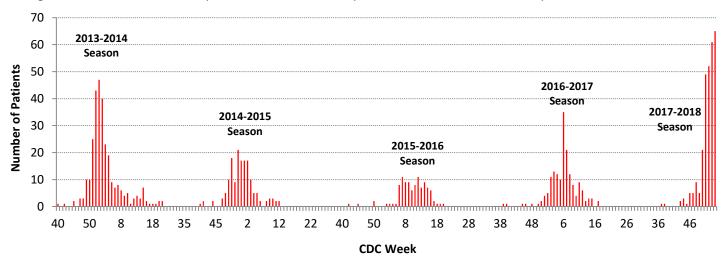
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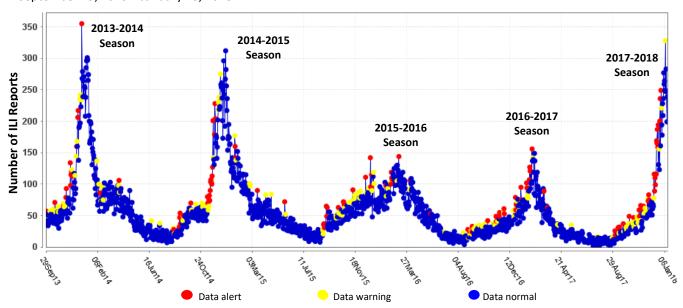
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**Figure 5.** Syndromic Surveillance of Emergency Department Visits for Influenza-like Illness (ILI), Dallas County: September 29, 2013 – January 13, 2018



Data source: 18 emergency departments in Dallas County hospitals participating in the Electronic Surveillance System for the Early Notification of Community-based Epidemics (ESSENCE) voluntarily reporting the numbers of persons presenting with self-reported chief complaints of ILI.

Table 5. Characteristics of Influenza in Dallas County ICU Hospitalizations, September 12, 2017 to Date

ICU Admi:	ssions	N=266
Influenza	A*	225 (84.6%)
Gender	Female	141 (53.0%)
Male	Male	125 (47.0%)
	Black	86 (32.8%)
Page	Hispanic	41 (15.7%)
Race	White	110 (42.0%)
	Other	25 (9.5%)
Median A	ge (Range)	64 (6 months - 99 years)
Presence condition	of ≥ 1 underlying high risk medical s	222 (83.5%)
Mechanical Ventilation		83 (31.2%)
ВіРАР		78 (29.3%)
ECMO		9 (3.4%)

Data Source(s): All Hospitalizations of Dallas County residents reported to DCHHS with any positive rapid antigen, PCR, DFA or culture result for influenza; \* includes five patients co-infected with influenza A and type B; <sup>1</sup> Available from the CDC website at https://www.cdc.gov/flu/about/disease/high\_risk.htm

Figure 6. Percentage of Student Absences by Week, Dallas County: 2016-2017 and 2017-2018

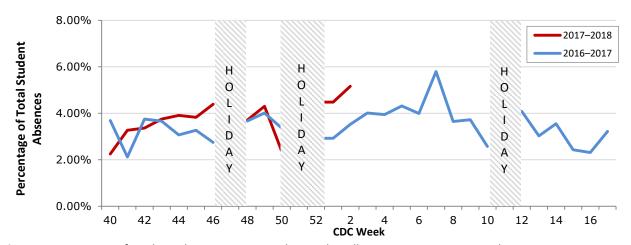
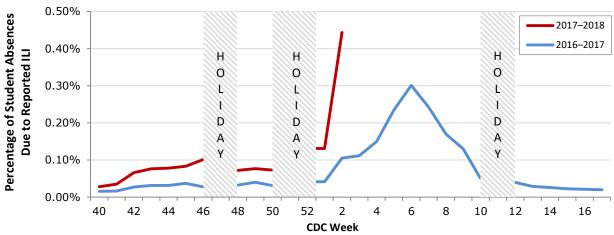


Figure 7. Percentage of Student Absences Due to ILI by Week, Dallas County: 2016-2017 and 2017-2018



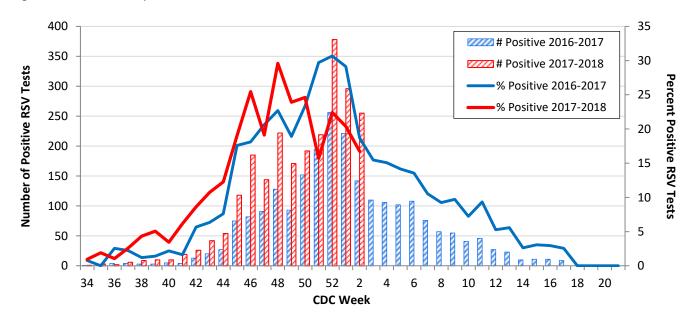
Data source: Voluntary reporting from Independent School Districts representing over 510 elementary, middle, and secondary schools and over 420,000 students in Dallas County

Table 6. Non-Influenza Respiratory Virus Testing by North Texas Laboratories Reported to NREVSS, Week 2

Virus	Number of Laboratories Reporting	Tests Performed	Total Positive Tests	Percentage of Tests Positive	
Adenovirus (respiratory)	5	590	13	2.2%	
HMPV	5	577	23	4.0%	
Parainfluenza virus	5	590	8	1.4%	
Rhinovirus/Enterovirus	5	577	28	4.9%	
RSV	5	1,523	255	16.7%	

Data source: National Respiratory and Enteric Virus Surveillance System (NREVSS) and hospitals reporting directly to DCHHS

**Figure 8.** Number and Percent Positive RSV Rapid Antigen and PCR Tests by Week, NREVSS Surveillance Data, North Texas: August 27, 2016 – January 13, 2017



Data source: National Respiratory and Enteric Virus Surveillance System (NREVSS) and hospitals reporting directly to DCHHS

**Table 7.** Number and Percent Positive RSV Rapid Antigen and PCR Tests by Week, NREVSS Surveillance Data, North Texas: August 26, 2017 – January 13, 2017

Week Ending	12/02	12/09	12/16	12/23	12/30	01/06	01/13	8/26/17-
CDC Week	48	49	50	51	52	1	2*	Present
RSV tests performed weekly	750	715	780	1,394	1,686	1,452	1,523	13,227
Total positive RSV tests	222	171	192	219	378	296	255	2,362
Percent positive RSV tests	29.6	23.9	24.6	15.7	22.4	20.4	16.7	

<sup>\*</sup>Indicates preliminary results which are subject to change as adjustments are made for late-arriving data Data source: National Respiratory and Enteric Virus Surveillance System (NREVSS)

## Please report any of the following patients to DCHHS within 1 working day:

- Hospitalized patients with influenza (any subtype). Confirmation can be by any laboratory test, rapid antigen, culture, PCR, DFA/IFA, or performed in an outpatient or inpatient laboratory.
- **Deaths of persons with confirmed influenza** (any subtype). We are requesting all pediatric influenza-associated deaths to be reported *immediately* to facilitate specimen procurement and testing.
- Suspected influenza infections involving institutional outbreaks or a resident of any **Long Term Care facility** (please report *immediately*).

Phone: (214) 819-2004 Email: influenza@dallascounty.org