

## Week 46 ending November 18, 2017

## **Epidemiologic Summary**

- Influenza activity is increasing in Dallas County with 10.0% of tests returning positive during week 46. Nationally, 5.3% of specimens reported to CDC were positive for influenza.
- As of week 46, the most frequently identified influenza, in Dallas County, has been influenza type A (90%). The predominant influenza A subtype has been H3N2 (67.4%).
- Daily numbers of emergency department visits for influenza-like illness in Dallas County were slightly above baseline levels and 64 influenza-associated hospitalizations were reported during week 46.
- RSV activity increased with 25.5% of tests from area surveillance sites testing positive.

Table 1. Summary of Inneciza Surveinance from Danas county hospitals and hospital caboratories								
Week Ending	10/14	10/21	10/28	11/04	11/11	11/18	9/10/17 –	
CDC Week	41	42	43	44	45*	46*	Present	
Total Influenza PCR Tests	450	511	531	650	706	746	4,963	
Number of positive PCR tests	6	9	17	25	41	60	174	
Percent of positive PCR tests	1.3	1.8	3.2	3.9	5.8	8.0		
Total Rapid Influenza Diagnostic Tests	438	537	606	703	744	821	4,682	
Number of positive RIDTs	22	22	29	52	71	101	323	
Percent of positive RIDTs	5.0	4.1	4.8	7.4	9.5	12.3		
Total Influenza Tests Performed	926	1,087	1,175	1,401	1,493	1,618	10,023	
Total positive influenza tests <sup>1</sup>	28	31	46	77	112	161	497	
Percent positive influenza tests	3.0	2.9	3.9	5.5	7.5	10.0		
Positive influenza A tests <sup>2</sup>	19	28	30	60	85	132	379	
Positive influenza B tests	9	3	16	17	27	29	118	
Non-differentiated influenza tests <sup>3</sup>	0	0	0	0	0	0	0	

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

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

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

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

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

Week Ending	10/14	10/21	10/28	11/04	11/11	11/18	9/10/17 –
CDC Week	41	42	43	44	45*	46*	Present
Influenza hospitalizations <sup>4</sup>	9	7	12	20	26	64	152
Confirmed pediatric deaths <sup>5</sup>	0	0	0	0	0	0	0
Confirmed adult deaths <sup>6</sup>	0	0	0	0	0	0	0
Possible influenza-associated deaths <sup>7</sup>	0	0	0	0	0	0	0

<sup>4</sup> Reflects all influenza-associated hospitalizations reported from hospitals located within Dallas County by week of any positive influenza tests

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

<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>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

Data source(s): 15 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	0
Adult	6	55	19	14	16	0

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

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

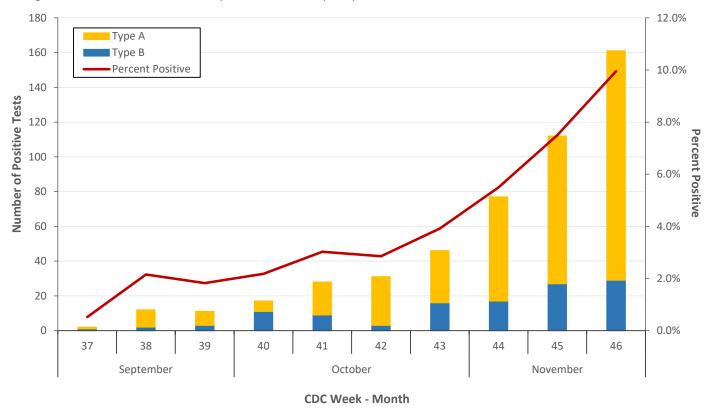
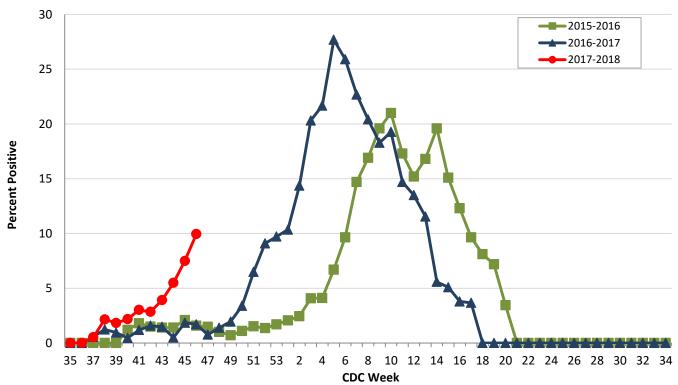


Figure 1. Influenza Positive Tests Reported to DCHHS by Hospital Laboratories: 2017 - 2018 Seasons

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 or 2016-17 influenza seasons, therefore week 53 data point for those seasons is an average of week 52 and week1.

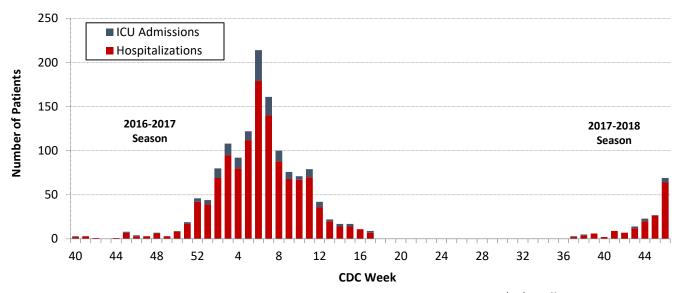
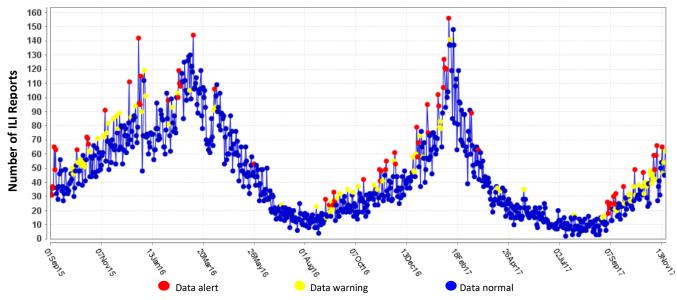


Figure 3. Hospitalized Influenza Patients by Week of Admission, Dallas County: 2015-2017 Seasons

**Figure 4.** Syndromic Surveillance of Emergency Department Visits for Influenza-like Illness (ILI), Dallas County: September 1, 2015 – November 18, 2017



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.

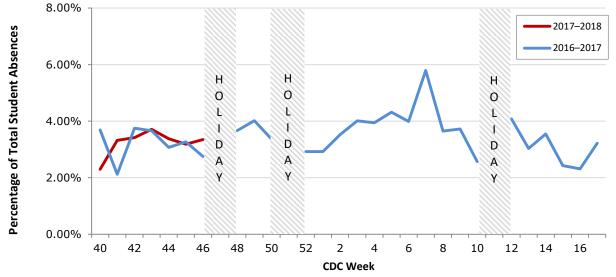
Table 4. Influenza Typing and Subtyping from Cumulative Dallas County, Texas, and U.S. Laboratory Surveillance D	)ata:
2017-2018 Season	

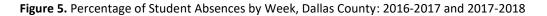
	Dallas <sup>1</sup> (n=48)	Texas <sup>2</sup> (n=382)	U.S. <sup>3</sup> (n=1,554)
Influenza A	43 (89.6%)	289 (75.6%)	1,358 (87.4%)
H1N1 2009 subtype	14 (32.6%)	33 (25.0%)	136 (10.2%)
H3N2 subtype	29 (67.4%)	66 (75.0%)	1,193 (89.8%)
Not subtyped	0	190	28
Influenza B	5 (10.4%)	93 (23.4%)	196 (12.6%)

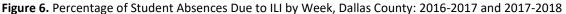
<sup>1</sup> DCHHS LRN laboratory PCR testing of designated Dallas County surveillance site isolates

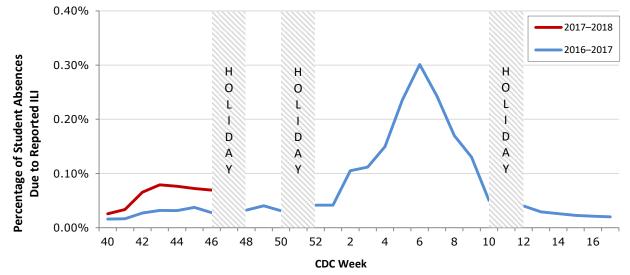
<sup>2</sup> DSHS 2017–2018 Texas Influenza Surveillance Information Activity Report available at <u>https://www.dshs.state.tx.us/idcu/disease/influenza/surveillance/</u>

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









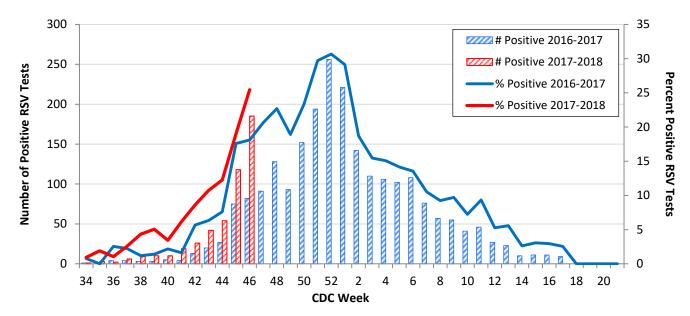
Data source: Voluntary reporting from Independent School Districts representing over 510 elementary, middle, and secondary schools and over 420,000 students in Dallas County

Table 5. Non-Influenza Respiratory Virus Testing by North Texas Laboratories Reported to NREVSS, Week 46

Virus	Number of Laboratories Reporting	Tests Performed	Total Positive Tests	Percentage of Tests Positive	
Adenovirus (respiratory)	4	454	13	2.9%	
HMPV	4	443	16	3.6%	
Parainfluenza virus	4	454	25	5.5%	
Rhinovirus/Enterovirus	4	557	252	45.2%	
RSV	4	727	185	25.5%	

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

**Figure 7.** Number and Percent Positive RSV Rapid Antigen and PCR Tests by Week, NREVSS Surveillance Data, North Texas: August 27, 2016 – November 18, 2017



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

**Table 6.** Number and Percent Positive RSV Rapid Antigen and PCR Tests by Week, NREVSS Surveillance Data, North Texas:August 26, 2017 – November 18, 2017

Week Ending	10/07	10/14	10/21	10/28	11/04	11/11	11/18	8/26/17-
CDC Week	40	41	42	43	44	45*	46*	Present
RSV tests performed weekly	290	309	302	391	440	620	727	4,168
Total positive RSV tests	10	19	26	42	54	118	185	485
Percent positive RSV tests	3.5	6.2	8.6	10.7	12.3	19.0	25.5	

\*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