Influenza Situation Report
2013-2014 Seasonal Influenza Week 52
(Dec 22-28, 2013)

Marion County Public Health Department, IN 2014-01-06, DR2166

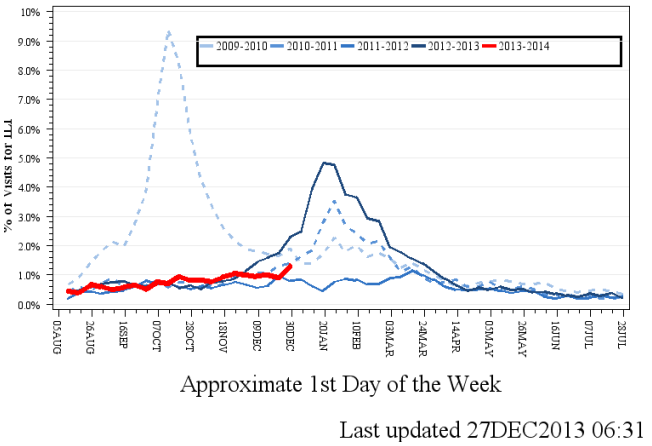
Please send comments or suggestions about content to epidemiology@hhcorp.org.

Current Local Trends

- The percent of ED visits with a chief complaint of influenza-like illness (ILI) has increased to 1.6% of all ED visits (172 visits for week ending Dec 28, 2013) and is continuing to increase to date.
- Children under the age of 5 have the highest percentage of age-specific ILI ED visits (3.06%).
- ISDH is reporting statewide 3.06% ILI ED visits for week 52. One death associated with influenza has been reported by ISDH.
- All positive influenza lab specimens antigenically tested by CDC correspond to the four components in the quadrivalent seasonal influenza vaccine:
    - 398 A/California/7/2009-like (tri- and quadrivalent)
    - 46 A/Texas/50/2012-like (tri- and quadrivalent)
    - 3 B/ Massachusetts/2/1012-like (tri- and quadrivalent)
    - 5 B/Brisbane/60/2008-like (quadrivalent only)

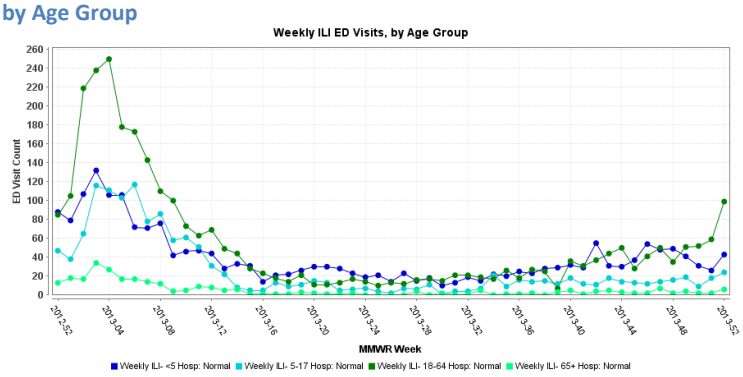
Emergency Department Visits for Influenza-Like Illness

Figure 1. Percent Influenza-like Illness of all Marion County Hospital ED Visits, Current Year and Previous Seasons



Data Source: ISDH Public Health Surveillance System, MCHD Epidemiology DR1202

Figure 2. Weekly Count of ILI ED Visits for Marion County Hospitals, by Age Group



Data Source: ISDH Public Health Surveillance System, MCHD Epidemiology

Table 1. Count and Percent of ILI ED Visits at Marion County Hospitals, by Age Group

Age Group (years)	Current Week Count of ILI	Current Week % ILI	Previous 4 Week Average Count of ILI (Avg)	Previous 4 Week Average % ILI (Avg)
<5	43	3.6%	37	3.3%
5-17	24	2.5%	16	1.5%
18-64	99	1.4%	49	0.7%
65+	6	0.4%	3	0.2%
Unknown	0	0.0%	0	0.0%
Total	**172**	**1.59%**		

Figure 1 represents the percent of all ED visits that were categorized as influenza-like illness. As described in the graph, the percent of ILI is below what was seen at this time last year., but increasing. Current trends are more in line with the 2010-11 season.

Patients between the ages of 18 and 64 represent the greatest number of visits for ILI in Week 52. However, children under the age of 5 have the highest age-specific percentage of ILI ED visits.

ILI visit means that the patient reported fever with cough or sore throat, or used the word "flu" to describe either their symptoms or their reason for the ED visit.

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Indiana

http://www.in.gov/isdh/files/Weekly_Influenza_Report_Week_52_2013_2014(1).pdf

- Indiana is experiencing widespread and high influenza activity. For Week 52, ISDH reports 3.06% ILI in ED surveillance and 6.12% from sentinel provider sites.
- The first state-wide influenza death this season was reported during Week 52 (age 50-64).
- All influenza positive laboratory samples at the state lab have tested positive for the 2009 A/H1N1 pandemic variant.

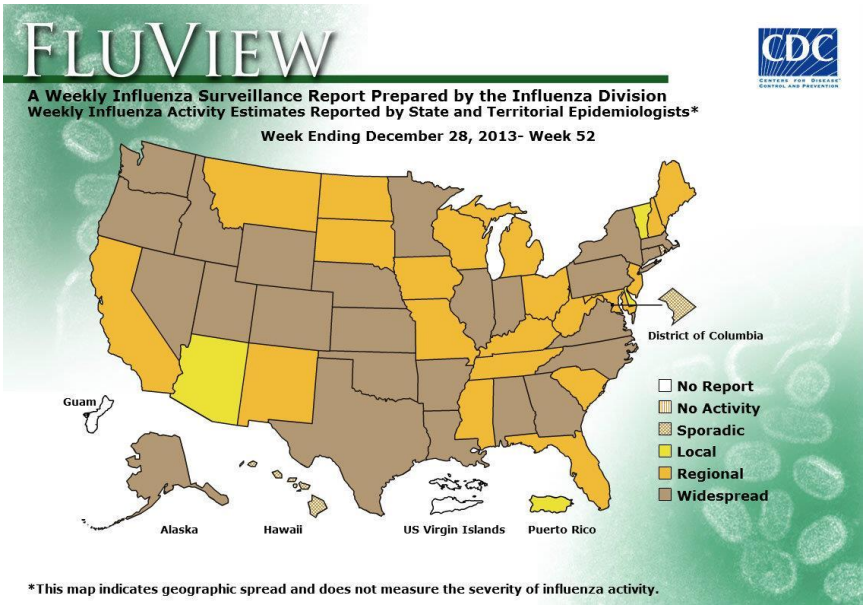
National

http://www.cdc.gov/flu/weekly/

- During Week 52, 25 states (including Indiana) are reporting widespread influenza activity by state and territorial epidemiologists. In addition, during week 52, 4.3% of patient visits reported through the U.S. Outpatient Influenza-like Illness Surveillance Network (ILINet) were due to influenza-like illness (ILI). The average annual national rate is 2.0%.

- The seasonal vaccine remains to be a good match to circulating virus. With 100% of positive influenza samples matching the vaccine component.

- CDC reports 6 confirmed influenza pediatric deaths. CDC does not report adult influenza deaths, however, the percent of all mortality associated with pneumonia and influenza has increased to 6.5%; this is still below the epidemic threshold of 7.0% for week 52.



- **From CDC HAN dated Dec 24, 2013:**
  From November through December 2013, CDC has received a number of reports of severe respiratory illness among young and middle-aged adults, many of whom were infected with influenza A (H1N1) pdm09 (pH1N1) virus. For the 2013-14 season, if pH1N1 virus continues to circulate widely, illness that disproportionately affects young and middle-aged adults may occur. Antiviral treatment is recommended as early as possible for any patient with confirmed or suspected influenza who is hospitalized; has severe, complicated, or progressive illness; or is at higher risk for influenza complications.