

MASSACHUSETTS DEPARTMENT OF PUBLIC HEALTH (MDPH) WEEKLY INFLUENZA UPDATE November 22, 2019

Estimated Weekly Severity of Influenza (11/10/19 – 11/16/19)

Low Moderate	High	Very High
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Weekly severity is determined by combining three key markers of influenza activity and distribution: influenza-like illness, hospitalizations, and influenza positive test results reported to the Massachusetts Department of Public Health. MDPH analyzes data on these markers weekly and classifies the severity using historical data collected during past influenza seasons. For more information about how the severity indicator is calculated, please visit <u>https://www.cdc.gov/flu/about/classifies-flu-severity.htm</u>.

All data in this report are preliminary and subject to change as more information is received. Data collected through November 16, 2019 are included in this report.

Highlights from this week's report:

- Influenza severity and Influenza-like illness activity for Massachusetts are low this week.
- The percent of influenza-associated hospitalizations in Massachusetts is comparable to the last two flu seasons in the same week.
- At this point in the 2019-2020 flu season, both influenza A and influenza B have been identified in Massachusetts.
- Nationally, influenza-like illness activity is low but increasing, consistent with typical levels of activity at this time of year.
- Additional statewide and national data including geographic spread, ILI activity, and pneumonia and influenza mortality are available at CDC's FluView Weekly Report at www.cdc.gov/flu/weekly and FluView Interactive https://www.cdc.gov/flu/weekly and FluView Interactive https://www.cdc.gov/flu/weekly and FluView Interactive.

Flu season has begun and the best time to get your flu shot is now!

Influenza-like illness activity

Influenza-like illness (ILI) is defined as fever a bove 100F in addition to either cough and/or sore throat. Many more people are infected with influenza than are tested for influenza. ILI is used throughout the regular influenza season as a way to help track influenza activity in individuals who are not tested, as trends in ILI have been shown to mirror influenza trends. Seventy-nine healthcare facilities called 'sentinel sites' report the number of patients they see with ILI each week during regular fluseason. Sentinel sites include provider offices, school health services, community health centers, urgent care centers, and emergency departments across Massachusetts.

Figure 1 shows that the percentage of ILI visits is comparable to the last two seasons. For more information, see CDC's influenza surveillance website at www.cdc.gov/flu/weekly/fluactivitysurv.htm.

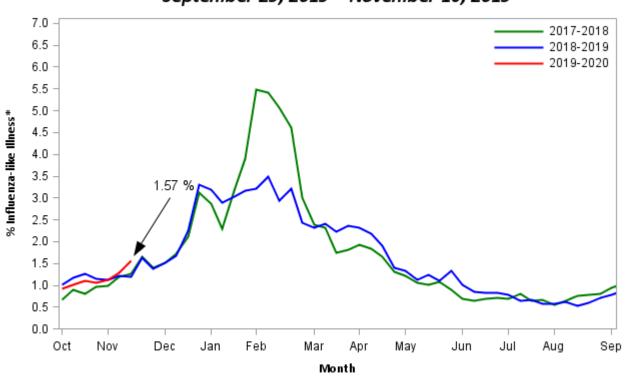


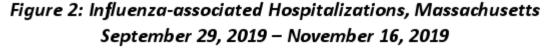
Figure 1: Percentage of ILI visits reported by sentinel provider sites September 29, 2019 – November 16, 2019

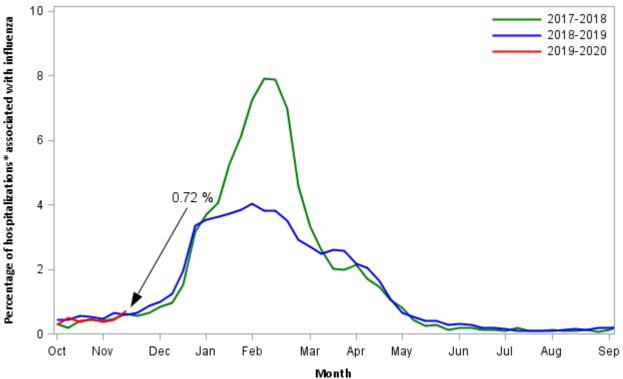
*Influenza-like illness (ILI, defined by fever >100F and cough and/or sore throat),as reported by Massachusetts sentinel surveillance sites

Influenza-associated hospitalizations

As part of the National Syndromic Surveillance Program, MDPH receives data from Emergency Departments (EDs) covering more than 90% of ED visits statewide. These data are used to track patient visits related to influenza by monitoring the reason patients are seeking care (chief complaint) and the diagnoses the patients receive (ICD-10 code). These data are available to MDPH in near real-time.

Figure 2 shows the percent of all ED visits which result in a patient hospitalized because of illness associated with influenza infection. The percentage of influenza-associated hospitalizations is comparable to the last two seasons.





*All patients admitted through hospital emergency departments as captured by syndromic surveillance

ILI Activity in Massachusetts

Figure 3 shows the current season's weekly ILI activity compared to the last five flu seasons in Massachusetts. ILI activity for each week is categorized as minimal, low, moderate, or high, with a shade of blue corresponding to the category of ILI activity for that week. Darker shades of blue indicate more intense ILI activity. Figure 3 shows that ILI activity in Massachusetts is minimal this week, which is comparable to the last five seasons for the same week.

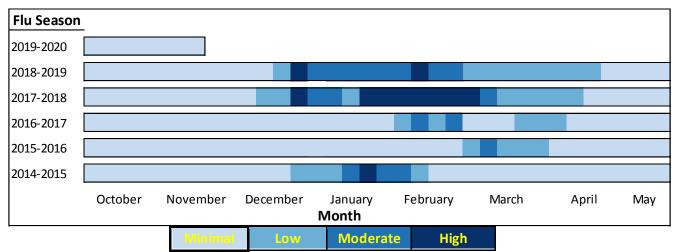
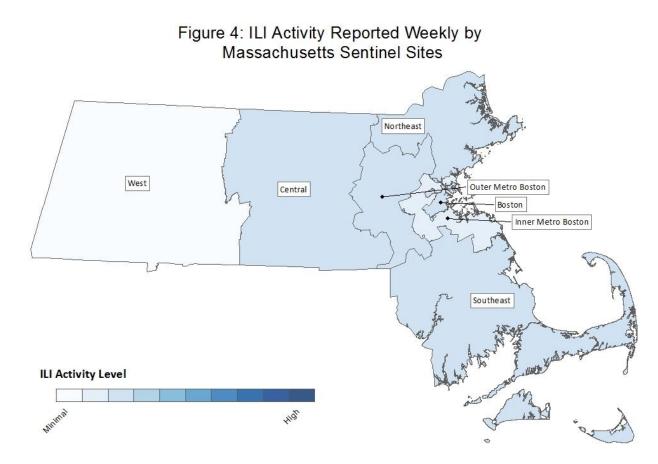


Figure 3: ILI Activity in Massachusetts Reported Weekly by Sentinel Sites

ILI Activity in Massachusetts by Region

Figure 4 shows the relative intensity of reported ILI activity in Massachusetts by region. Although regions may not all experience the same intensity of ILI at similar times, infections due to influenza can be found throughout Massachusetts during flu season. Figure 4 shows that all regions of Massachusetts are reporting minimal ILI activity.



Laboratory testing for influenza

Laboratories in Massachusetts report all positive influenza test results to MDPH. The majority of individuals with influenza-like illness are not tested; therefore the number of positive test results does not reflect the total number of influenza cases in Massachusetts. However, laboratory data do provide information about the types of influenza virus circulating in Massachusetts and help indicate the presence and define the distribution of influenza in the state. Figure 5 illustrates the number of positive laboratory confirmed influenza cases in Massachusetts by week.

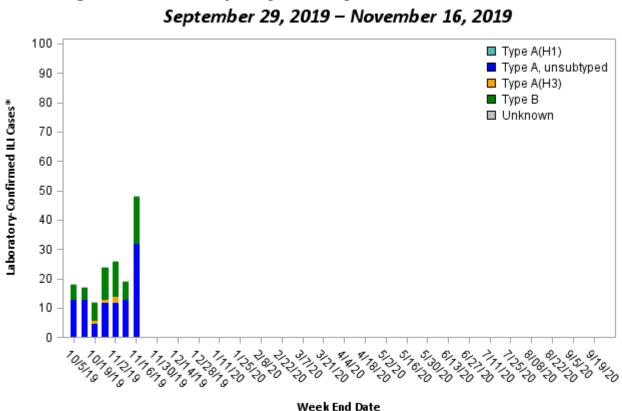


Figure 5: Laboratory-confirmed Influenza Cases in Massachusetts,

*Influenza cases confirmed via viral culture or PCR test by specimen collection date.

Testing at the State Public Health Laboratory

The Massachusetts State Public Health Laboratory (MA SPHL) performs influenza surveillance testing year round to confirm circulating influenza virus types. Samples are submitted by outpatient healthcare providers (ILINet) and hospital diagnostic laboratories in Massachusetts. For the 2019-2020 season, Table 1 summarizes the influenza surveillance testing conducted by MA SPHL beginning September 29, 2019. For the 2019-2020 season so far, three cases of A/H3N2 influenza, one case of B/Ya magata influenza, and three cases of B/Victoria have been confirmed in 44 samples tested.

Test Results										
2019-2020 Season: Influenza Surveillance										
MA Department of Public Health's Bureau of Laboratory Sciences (MDPH-BLS)										
MMWR Week: (Specimen Collected)	2009 H1N1	seasonal A/H3N2	H3N2v B Yam B Vic		No. Flu Pos (%)	Unsat	Total Tested	Total Rec'd		
43 (10/20 – 10/26/19)	0	1	0	0	1	2(33%)	0	6	6	
44 (10/27 – 11/02/19)	0	1	0	0	1	2(33%)	0	6	6	
45 (11/03 – 11/09/19)	0	0	0	0	0	0(0%)	0	13	13	
46 (11/10 – 11/16/19)	0	0	0	0	0	0(0%)	0	4	4	
Prior 4 wk Total	0	2	0	0	2	4(14%)	0	29	29	
Cumulative Season total	0	3	0	1	3	7(16%)	0	44	44	

Table 1: Weekly Summary of Massachusetts State Public Health Laboratory Influenza SurveillanceTest Results

All data are subject to change as test results become finalized. The 2019 -2020 influenza season began the week of 09/29- 10/05/2019.

All specimens which test negative for influenza at MASPHL are also tested for non-influenza respiratory diseases. Table 2 shows that two respiratory syncytial virus (RSV) cases, nine rhinovirus (RHV)/enterovirus (ENT) cases, one parainfluenza virus (PIV) case and one a denovirus case have been confirmed this fluseason. This contributes to ILI trends in Massachusetts.

 Table 2: Weekly Summary of Massachusetts State Public Health Laboratory non-Influenza

 Respiratory Surveillance Test Results

2019-2020 Season: Influenza Like Illness Surveillance											
MA Department of Public Health's Bureau of Laboratory Sciences (MDPH-BLS)											
MMWR Week: (Specimen Collected)	RSV	RHV/ ENT	PIV	HMPV	HCV	ADE NO	Co- Infection	No. Pos (%)	Unsat	Total Tested	Total Rec'd
43 (10/20 – 10/26/19)	1	2	0	0	0	1	0	4(80%)	0	5	5
44 (10/27 – 11/02/19)	1	0	0	0	0	0	0	1(25%)	0	4	4
45 (11/03 – 11/09/19)	0	2	1	0	0	0	0	3(30%)	0	10	10
46 (11/10 – 11/16/19)	0	0	0	0	0	0	0	0(0%)	0	4	4
Prior 4 wk Total	2	4	1	0	0	1	0	8(35%)	0	23	23
Cumulative Season total	2	9	1	0	0	1	0	13(36%)	0	36	36

All data are subject to change as test results become finalized. The 2019 -2020 influenza season began the week of 9/29-10/05/2019.

MA SPHLs ubmits a subset of influenza samples to CDC for further genetic analysis (antigenic characterization). No influenza strains from Massachusetts have been analyzed as of yet this season.

Every two weeks MASPHLs creens influenza specimens to detect mutations within influenza A/H3N2 and A/2009 H1N1 viruses to look for antiviral resistance. No specimens have been analyzed for antiviral resistance in the 2019-2020 season.

Additional information on national antiviral resistance testing including recommendations for antiviral treatment and chemoprophylaxis of influenza virus infection can be found at <u>http://www.cdc.gov/flu/weeklv/</u>.