

# MASSACHUSETTS DEPARTMENT OF PUBLIC HEALTH (MDPH) WEEKLY INFLUENZA UPDATE Week Ending March 2, 2019

## **Geographic Distribution:**

No Ad	tivity	Spo	radic	Lo	cal	Regi	ional	Widespread		
ILI Intensity:										
Minimal				w	Mod	erate		High		
1	2	3	4	5	6	7	8	9	10	

All data in this report are preliminary and subject to change as more information is received.

## Highlights from this week's report:

- There is still time to get a flu shot to ensure you are protected as flu activity continues.
- Influenza-like illness activity in Massachusetts remains elevated this week and is consistent with activity levels normally seen at this time of year.
- Geographic spread is wides pread: ILI activity and influenza laboratory confirmations have declined but still remain elevated in all regions of the state.
- Influenza-associated hospitalizations in Massachusetts are declining but remain elevated this week and are consistent with activity levels normally seen at this time of year.
- The number of influenza positive laboratory tests reported to MDPH decreased this week by 29.2% compared to last week.
- For the 2018-2019 season to date, the predominant influenza strain is A/2009 H1N1; this may fluctuate as the season continues.
- All influenza strains that have been characterized in Massachusetts this season to date are covered by the current influenza vaccine.
- No resistance to antiviral medications has been detected this season.
- Nationally, flu activity remains high, consistent with normal levels of activity at this time of year.
- Additional data are available upon request and at <u>www.cdc.gov/flu/weekly</u>.

## Influenza-like illness activity

sentinel surveillance sites

Influenza-like illness (ILI) is defined as fever above 100F in addition to either cough 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. Sixty healthcare facilities called 'sentinel sites', including provider offices, school health services, community health centers, and emergency departments a cross Massachusetts report the number of patients they see with ILI each week during regular fluseason.

Figure 1 shows that ILI activity is moderate and is consistent with activity levels normally seen at this time of year. For more information, see CDC's influenza surveillance website at  $\frac{www.cdc.gov/flu/weekly/fluactivitysurv.htm}{}$ .

Figure 1: Percentage of ILI visits reported by sentinel provider sites September 30, 2018 - March 2, 2019 7.0 -2016-2017 6.5 2017-2018 2018-2019 6.0 5.5 5.0 % Influenza-like Illness\* 4.5 2.53 % 4.0 3.5 3.0 2.5 2.0 1.5 1.0 0.5 0.0 Oct Nov Dec Jan Feb Mar Apr May Jun Jul Aug Sep Month

\*influenza-like illness (ILI, defined by fever >100 F and cough and/or sore throat),as reported by Massachusetts

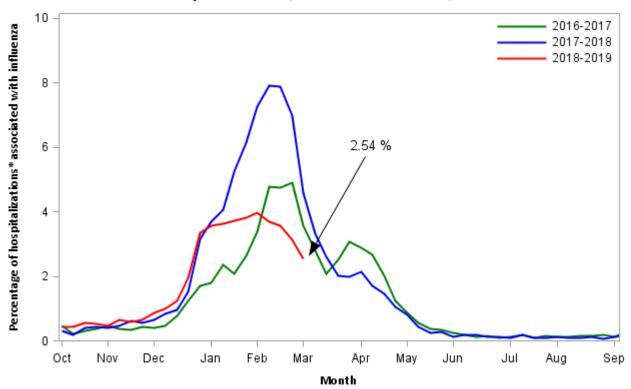
<sup>2</sup> 

## **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 the patient being hospitalized that are associated with influenza infection.

Figure 2: Influenza-associated Hospitalizations, Massachusetts September 30, 2018 – March 2, 2019



<sup>\*</sup>All patients admitted through hospital emergency departments as captured by syndromic surveillance

## **Regional ILI activity**

Figure 3 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 3 shows that all seven regions of the state are reporting decreased ILI activity compared to last week; however, ILI activity remains elevated and consistent with what is normally seen at this time of year.

West

Central

Outer Metro Boston

Boston

Inner Metro Boston

Inner Metro Boston

Inner Metro Boston

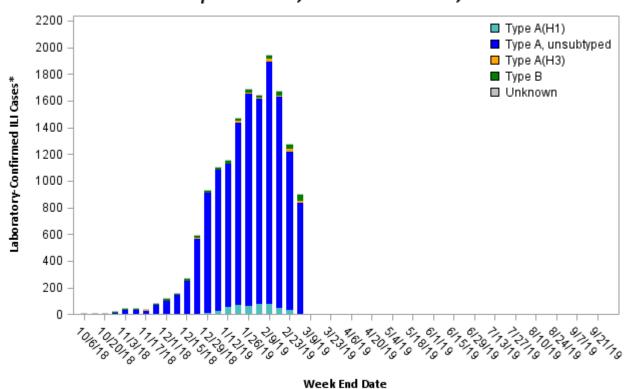
Northeast

Figure 3: ILI Intensity Reported Weekly by Massachusetts Sentinel Sites

## 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 <u>not</u> 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 4 illustrates the number of positive laboratory confirmed influenza cases in Massachusetts by week.

Figure 4: Laboratory-confirmed Influenza Cases in Massachusetts, September 30, 2018 – March 2, 2019



<sup>\*</sup>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 2018-2019 season, Table 1 summarizes the influenza surveillance testing conducted by MA SPHL beginning September 30, 2018. For the 2018-2019 season so far, the predominant influenza strain is A/2009 H1N1; this may fluctuate as the season continues.

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

2018-2019 Season: Influenza Surveillance										
Week	2009 H1N1	seasonal A/H3N2 H3N2v		B Yam	B Vic	No. Flu Pos (%)	Unsat	Total Tested	Total Rec'd	
06 (02/03 – 02/09/19)	60	8	0	1	0	69(84%)	0	82	82	
07 (02/10 – 02/16/19)	37	6	0	0	0	43(73%)	0	59	59	
08 (02/17 – 02/23/19)	24	10	0	0	0	34(65%)	1	52	53	
09 (02/24 – 03/02/19)	6	6	0	0	1	13(59%)	0	22	22	
Prior 4 wk Total	127	30	0	1	1	159(74%)	1	215	216	
Cumulative Season total	365	42	0	4	1	412(73%)	14	568	582	

All data are subject to change as test results become finalized. The 2018 -2019 influenza season began the week of 09/30-10/06/2018.

All specimens which test negative for influenza at MASPHL are also tested for non-influenza respiratory diseases. Table 2 shows that viruses from rhinovirus (RHV)/enterovirus (ENT) and coronavirus (HCoV) groups have circulated in Massachusetts this season. This contributes to ILI trends in Massachusetts.

Table 2: Weekly Summary of Massachusetts State Public Health Laboratory non-Influenza Respiratory
Surveillance Test Results

2018-2019 Season: Influenza Like Illness Surveillance											
Week:	RSV	RHV/ ENT	PIV	HMPV	HCoV	ADV	# Co- Infection	No. Pos (%)	Unsat	Total Tested	Total Rec'd
06 (02/03 – 02/09/19)	0	1	0	1	4	0	0	6(55%)	0	11	11
07 (02/10 – 02/16/19)	1	0	1	2	3	1	1	7(41%)	0	17	17
08 (02/17 – 02/23/19)	1	1	0	0	4	0	0	6(33%)	0	18	18
09 (02/24 – 03/02/19)	0	0	0	0	2	0	0	2(29%)	0	7	7
Prior 4 wk Total	2	2	1	3	13	1	1	21(40%)	0	53	53
Cumulative Season total	6	11	4	3	28	3	1	54(36%)	0	149	149

All data are subject to change as test results become finalized. The 2018 -2019 influenza season began the week of 9/30-10/06/2018.

MA SPHL submits a subset of influenza samples to CDC for further genetic analysis (antigenic characterization). All strains that have been analyzed from Massachusetts this season are covered by the current influenza vaccine.

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 mutations have been identified in the 2018-2019 season.

 $Additional information on national antiviral resistance testing including recommendations for antiviral treatment and chemoprophylaxis of influenza virus infection can be found at <math display="block">\frac{\text{http://www.cdc.gov/flu/weekly/}}{\text{http://www.cdc.gov/flu/weekly/}}.$