

Toledo-Lucas County Health Department Seasonal Influenza Activity Summary

MMWR Week 01 December 30, 2018-January 5, 2019

Local Surveillance:

Current Influenza Activity Levels:

Lucas County had **22** confirmed Influenza-associated Hospitalizations (IAH) reported in week 01, bringing the total to **50** cases as of January 5, 2019. 96% of cases are flu type A (23% of the subtyped flu A were H1N1, 11% were H3)

--There were no deaths* reported

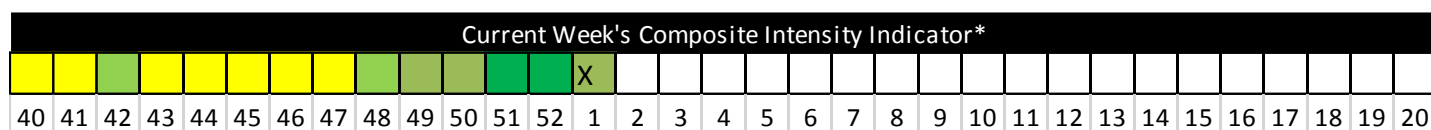
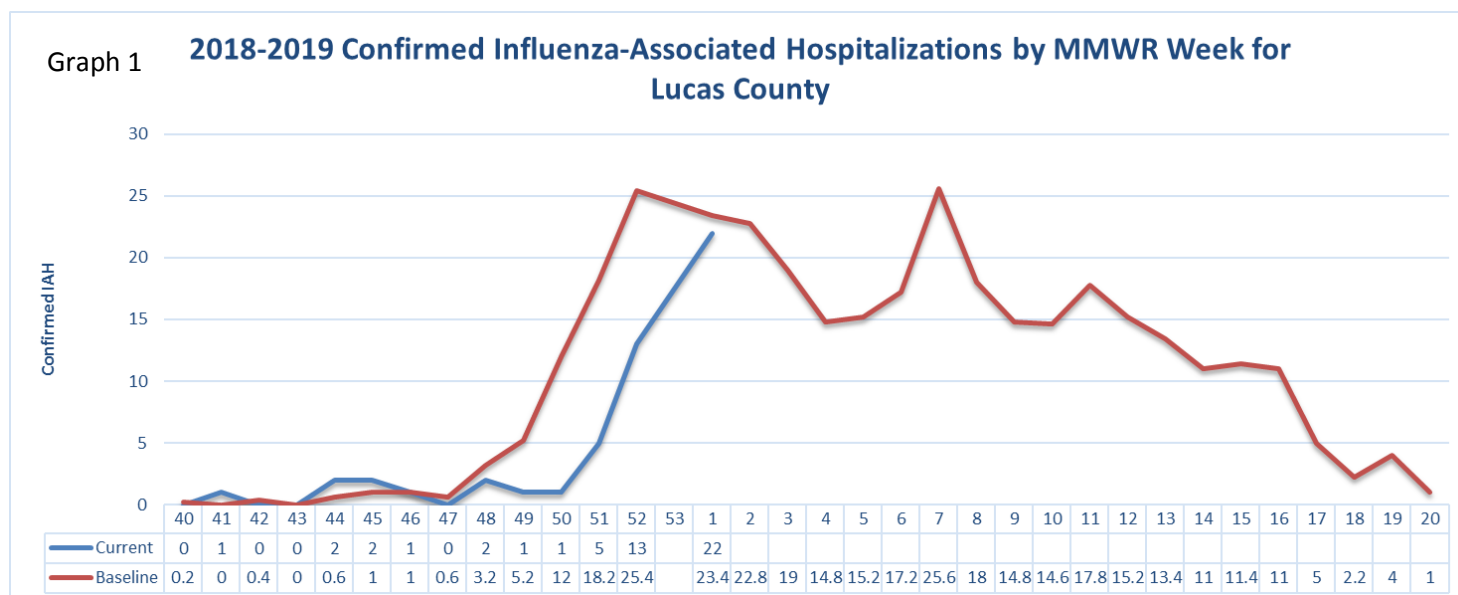
Gender Distribution of Cases: 57% female, 43% male

Lucas County accounts for 4.5% of the IAH reported in Ohio. Rate per 100,000 population**: 9.05

*Stating Influenza as the cause of death OR as 'a consequence of' on the certificate of death. Please note that some individuals may have underlying health conditions and influenza may not be the sole cause of their death.

**Disease rates were calculated by number of cases per 100,000 residents using 2010 census data

Graph 1 illustrates the current confirmed IAH compared to baseline, which is a five year average.



High	Mod	Low	Minimal
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* Combination of ED visit data and Influenza-associated Hospitalizations.



ED Visits are comprised of Influenza-like illness and respiratory syndrome as compared to the baseline average

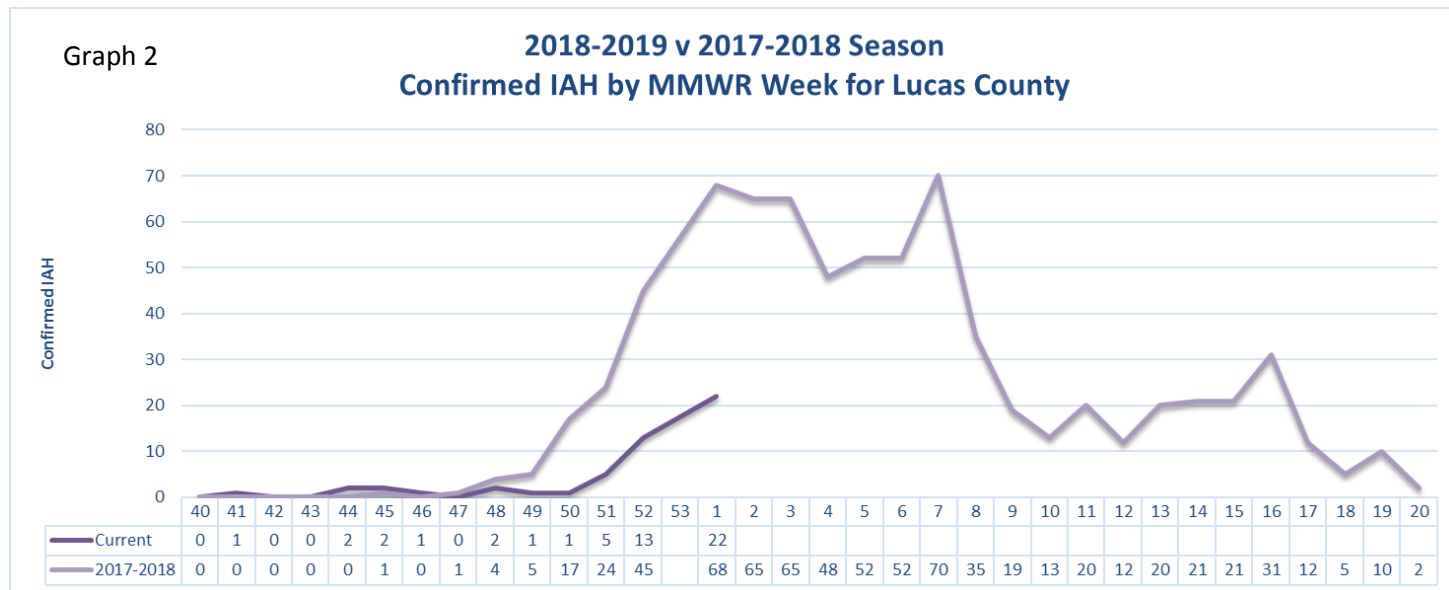
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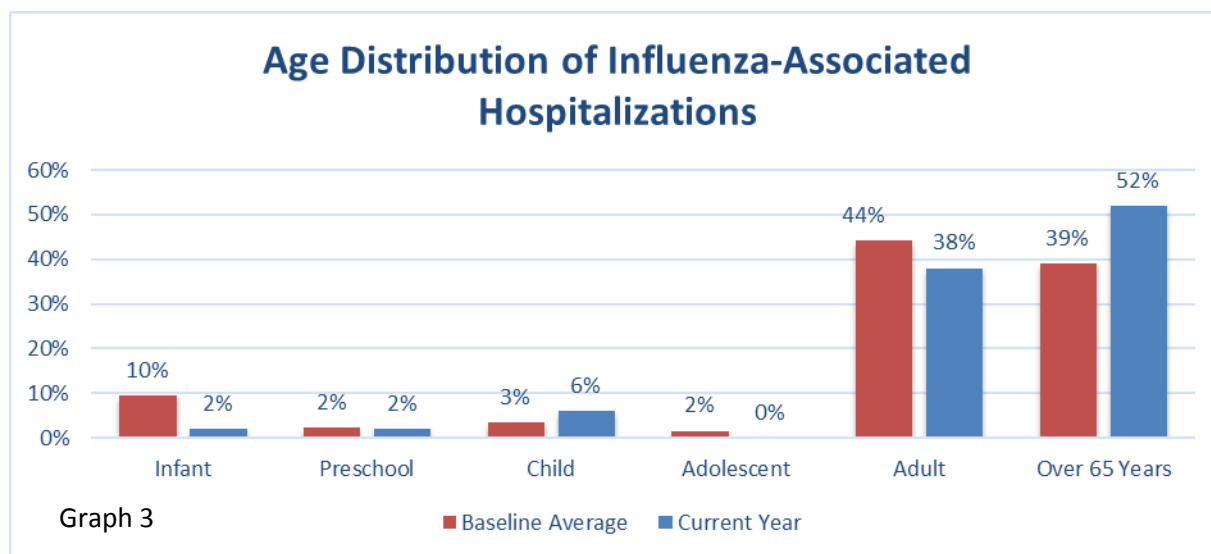
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Graph 2 illustrates a comparison between this year's influenza-associated hospitalizations (2019-2019) and last year's season (2017-2018).



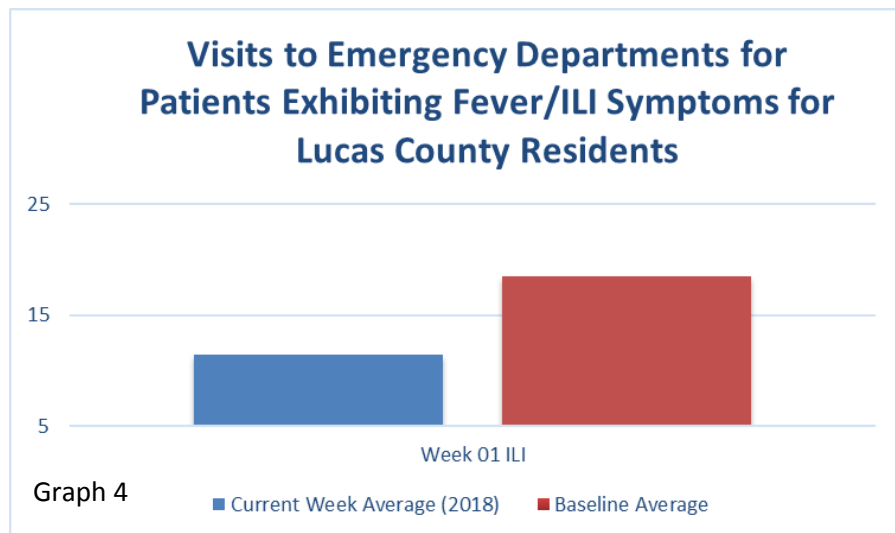
Graph 3 illustrates the current flu season's hospitalizations by age compared to the five year baseline average.



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The number of emergency department visits with patients exhibiting fever/ILI symptoms was well under baseline for MMWR 01. ILI (Influenza-Like Illness) is defined as a fever greater than or equal to 100 degrees F AND a cough or sore throat. (Graph 4)



Summary of State Data: Current Ohio Activity Level (Geographic Spread) – Widespread

Definition: Increased ILI in at least half of the regions AND recent (within the past 3 weeks) lab confirmed influenza in the state.

During MMWR Week 1, public health surveillance data sources indicate low intensity for influenza-like illness (ILI) in outpatient settings reported by Ohio's sentinel providers. The percentage of emergency department visits with patients exhibiting constitutional symptoms and fever and ILI specified ED visits are below baseline levels. Reported cases of influenza-associated hospitalizations are above the seasonal threshold*. There were 338 influenza-associated hospitalizations reported during MMWR Week 1.

State Surveillance:

- ODH lab has reported 101 positive influenza tests from specimens sent from various submitters. 2018-2019 influenza season positive results: (78) A/pdmH1N1; (22) A/H3N2; (1) Influenza B; (through 01/05/2019).
- The National Respiratory and Enteric Virus Surveillance System (NREVSS) has reported 26,973 influenza tests performed at participating facilities. 2018-2019 influenza season positive results: (54) A/pdmH1N1, (31) A/H3N2, (1437) Flu A Not Subtyped, and (33) Flu B (through 01/05/2019).
- 0 pediatric influenza-associated mortalities have been reported during the 2018-2019 season (through 01/05/2019).
- No novel influenza A virus infections have been reported during the 2018-2019 season (through 01/05/2019).
- Incidence of confirmed influenza-associated hospitalizations in 2018-2019 season = 893 (through 01/05/2019).

Regional Surveillance*: During week 52 (December 23rd - December 29th, 2018), the proportion of outpatient visits for ILI in Region 5 (Ohio is in Region 5) was 3.70%, which is above the regional baseline of 1.8%. West Virginia, Michigan, and Ohio reported Regional Activity (Ohio reported Widespread for Week 1); Pennsylvania, Indiana, and Kentucky reported Widespread Activity.

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National Surveillance*: During week 52 (December 23rd - December 29th, 2018), the majority of U.S. states reported Moderate or High influenza activity; several states still reported Low or Minimal activity. The proportion of outpatient visits for ILI was 4.1%, which is above the national baseline of 2.2%. All 10 regions reported ILI at or above their region-specific baseline level. Influenza A(H1N1)pdm09 viruses have predominated in most areas of the country, however influenza A(H3) viruses predominated in the southeastern United States (HHS Region 4).

**Regional and National surveillance data are reported one week later than Ohio state and local data*

Flu News:

[Study links 'presenteeism' to flu outbreak in cancer patients](#)

A nosocomial outbreak of influenza in an oncology ward likely occurred because sick healthcare workers (HCWs) came to work when feeling ill, according to a study detailing the outbreak in the American Journal of Infection Control.

The outbreak of influenza A H3N2 took place over 8 days in November 2017 and affected 7 of 10 inpatients on the oncology ward, 16 HCWs (14 confirmed, 2 probable), and 2 visitors.

An anonymous survey was given to all HCWs and staff who had confirmed or probable influenza to characterize symptoms, timeline of illness, and reasons for attending work during illness.

Sixty-four percent of surveyed HCWs said they reported to work even when experiencing influenza-like illness symptoms; 56% said they did so because of a sense of duty as an HCW. Others said they felt their symptoms were minor and insignificant.

"It is possible that the nosocomial spread of influenza could have been prevented if the ill HCW either did not come to work or wore a mask," the authors concluded. "It is important for health care facilities to re-educate all employees annually about the importance of avoiding work during peak respiratory symptoms and strict adherence to respiratory etiquette and hand hygiene."

State, Regional and National data is provided by the Ohio Department of Health

[ODH Influenza Activity Summary MMWR 01](#)