

San Diego has had earlier flu activity this season compared to

most previous seasons. It is too early to know which influenza

viruses will circulate in the county later this fall and winter or

how severe the season might be. Regardless of which viruses

may be circulating, the best protection against influenza is an

October 16, 2019 Volume 19, Issue 3

> Week 41 Ending 10/12/19

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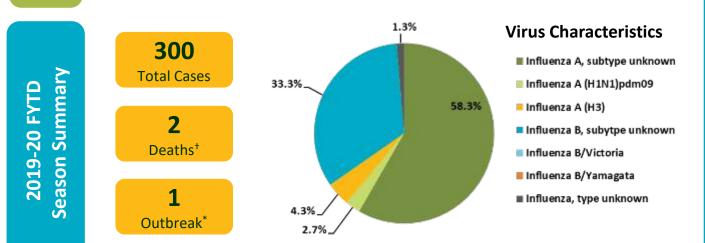
Key oints

#### Current Week 41 (ending 10/12/2019)

• 33 new influenza detections reported

influenza vaccination.

- No new influenza-related deaths reported this week
- 3% influenza-like illness (ILI) among emergency department visits
- 6% of death certificates registered with pneumonia and/or influenza



<sup>+</sup> Flu deaths less than 18 years of age are reportable to CDPH.

\* In a congregate living setting, outbreaks are defined as at least one laboratory-confirmed influenza in the setting of a cluster (≥2 cases) of influenza-like illness (ILI) within a 72-hour period.

#### Table 1. Influenza Surveillance Indicators.

|  | 2019-20 Season |      |          | 2018-19 Season |          |        | Prior 3-Year Average* |          |        |
|--|----------------|------|----------|----------------|----------|--------|-----------------------|----------|--------|
|  | Week           | Week | Total To | Week           | Total To | Season | Week                  | Total To | Season |
| Indicator  | 41             | 40   | Date     | 41             | Date     | Total  | 41                    | Date     | Total  |
| All influenza detections reported (rapid or PCR test)        | 33             | 32   | 300      | 13             | 88       | 9,655  | 21                    | 146      | 12,110 |
| Percent of emergency department visits for ILI               | 3%             | 2%   |          | 2%             |          |        | 2%                    |          |        |
| Percent of deaths registered with pneumonia and/or influenza | 6%             | 3%   |          | 6%             |          |        | 5%                    |          |        |
| Number of influenza-related outbreaks $^{\circ\circ}$        | 0              | 0    | 1        | 0              | 0        | 25     | 0                     | 1        | 59     |
| Number of influenza-related deaths reported^                 | 0              | 0    | 2        | 0              | 0        | 77     | 0                     | 1        | 169    |

Influenza season is July 1 - June 30, Weeks 27-26. Previous weeks case counts or percentages may change due to delayed processing or reporting.

\* Includes FYs 2016-17, 2017-18, and 2018-19.

<sup>∞</sup> At least one case of laboratory-confirmed influenza in a setting experiencing two or more cases of influenza like illness (ILI) within a 72-hour period.

Total confirmed influenza outbreaks in prior seasons: 25 in 2018-19, 119 in 2017-18, and 34 in 2016-17.

^ Current FY deaths are shown by week of report; by week of death for prior FYs. Total deaths reported in prior seasons: 77 in 2018-19, 343 in 2017-18, and 87 in 2016-17.



#### Epidemiology and Immunization Services Branch





#### CDC Study Shows Many Pregnant Women Not Getting Flu Vaccine

The Centers for Disease Control and Prevention (CDC) reported last week that not enough pregnant women are getting vaccinated against influenza and pertussis (whooping cough), two diseases known to put mothers and their babies at high risk for complications.

CDC researchers surveyed nearly 2,100 pregnant women ages 18 to 49 during last year's flu season and found that only 53.7% of pregnant women reported they were vaccinated against flu before or during pregnancy. In addition, only 54.9% reported receiving the tetanus, diphtheria, and pertussis (Tdap) vaccine during pregnancy.

The survey also found that women who received vaccination referrals from their health providers had the highest vaccination rates, and black non-Hispanic women had lower vaccination levels than other racial groups and were less likely to get a referral from their health providers.

CDC recommends that **all** pregnant women be vaccinated against influenza during any trimester of each pregnancy and that women receive the tetanus, diphtheria, and pertussis (Tdap) vaccine at the start of the third trimester of each pregnancy. Both vaccines have excellent safety records in pregnant women.

A fact sheet based on the CDC study may be found <u>here</u>. Additional useful resources include:

- <u>CDC Vital Signs Website: Maternal Immunizations October 2019</u>
- CDC Morbidity and Mortality Report: <u>Vital Signs: Burden and Prevention of Influenza and</u> <u>Pertussis Among Pregnant Women and Infants — United States</u>

|                              |         |         | Total To | Percent To |
|------------------------------|---------|---------|----------|------------|
| Positive Test Type/Subtype   | Week 41 | Week 40 | Date     | Date       |
| Influenza A, subtype unknown | 20      | 16      | 175      | 58.3%      |
| Influenza A (H1N1)pdm09      | 0       | 0       | 8        | 2.7%       |
| Influenza A (H3)             | 0       | 1       | 13       | 4.3%       |
| Influenza B, subytpe unknown | 11      | 15      | 100      | 33.3%      |
| Influenza B/Victoria         | 0       | 0       | 0        | 0.0%       |
| Influenza B/Yamagata         | 0       | 0       | 0        | 0.0%       |
| Influenza, type unknown      | 2       | 0       | 4        | 1.3%       |
| Total                        | 33      | 32      | 300      | 100.0%     |

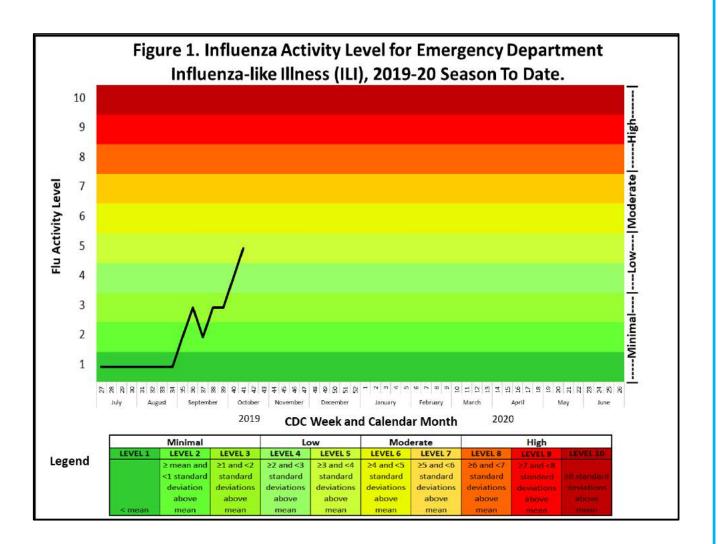
### Table 2. Influenza Cases Reported, 2019-20 Season\*

\* Season is July 1 - June 30, Weeks 27-26.









#### Influenza Activity Indicator:

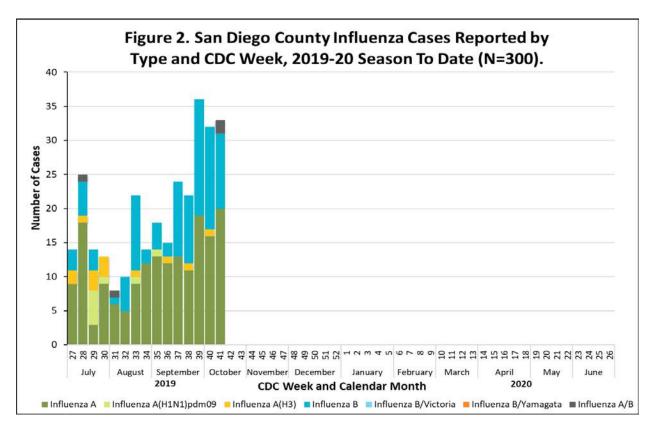
The activity levels show how the current week's ED ILI% (emergency department influenza-like illness, percent of all visits) compares to the mean, and number of standard deviations above of the mean, of the non-influenza season weeks (CDC disease weeks 27-39) of the current season.

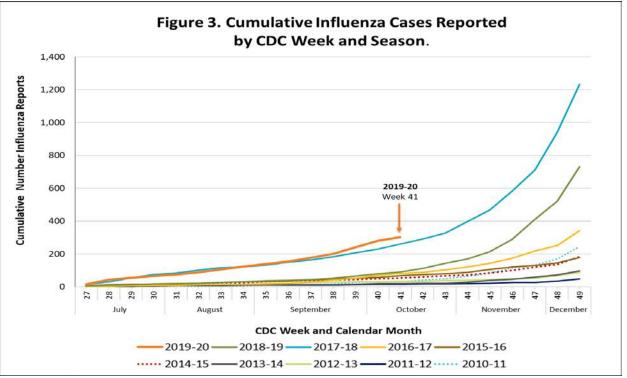
There are 10 activity levels, classified as: Minimal (levels 1-3), Low (levels 4-5), Moderate (levels 6-7), and High (levels 8-10). An activity level of 1 corresponds to when the ED ILI% is below the mean; level 2 corresponds to when the ED ILI% is less than 1 standard deviation above the mean; level 3 corresponds to when the ED ILI% is more than 1 but less than 2 standard deviations above the mean, and so on, with an activity level of 10 corresponding to when the ED ILI% is at 8 or more standard deviations above the mean.







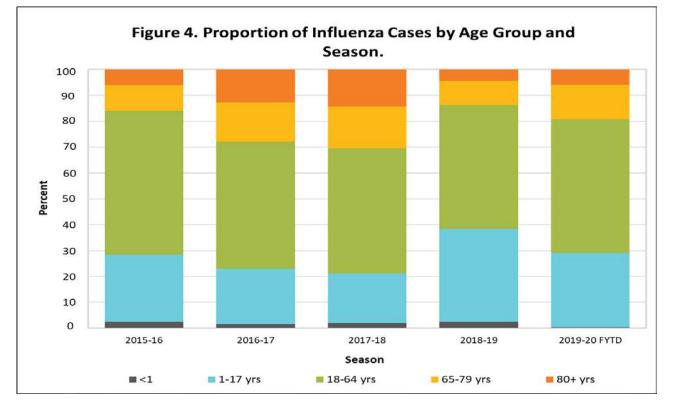


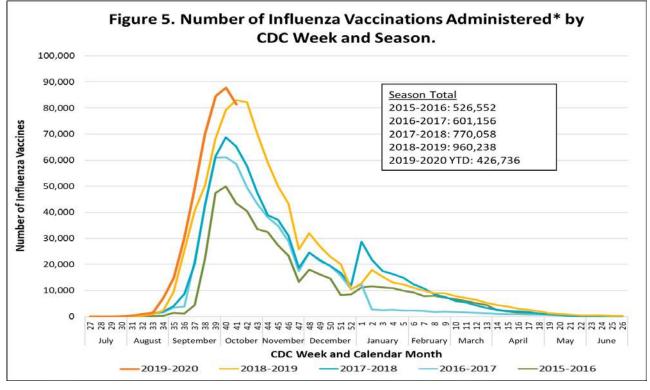




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\* Influenza vaccinations administered and entered into the San Diego Immunization Registry (SDIR)



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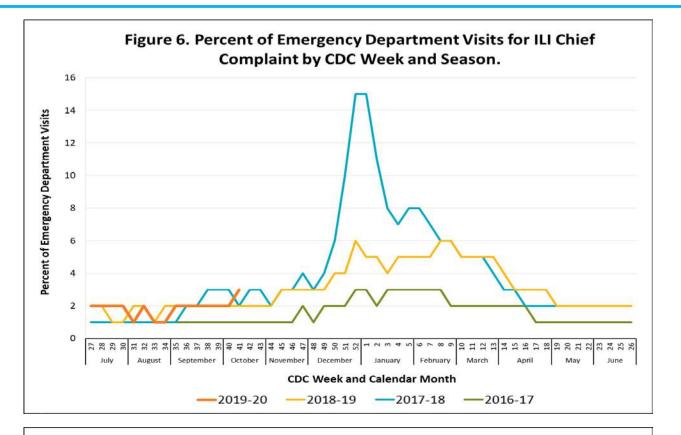
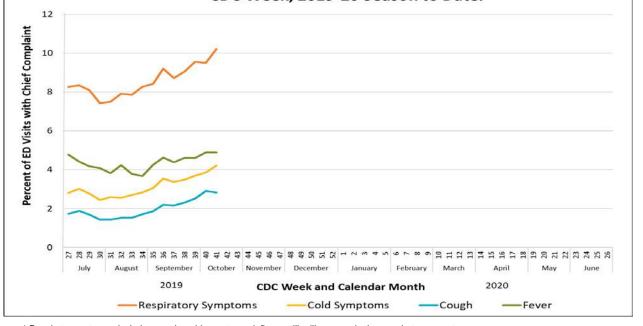


Figure 7. Percent of Emergency Department Visit Chief Complaints for Cough, Cold, Fever, or Respiratory Symptoms\* by CDC Week, 2019-20 Season to Date.



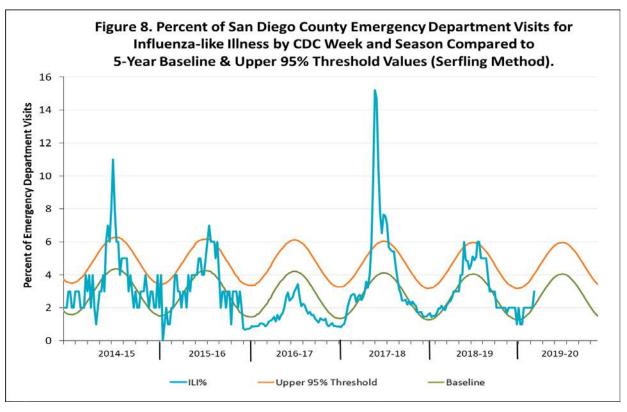
\* Respiratory category includes cough, cold symptoms, influenza-like-illness, and other respiratory symptoms.

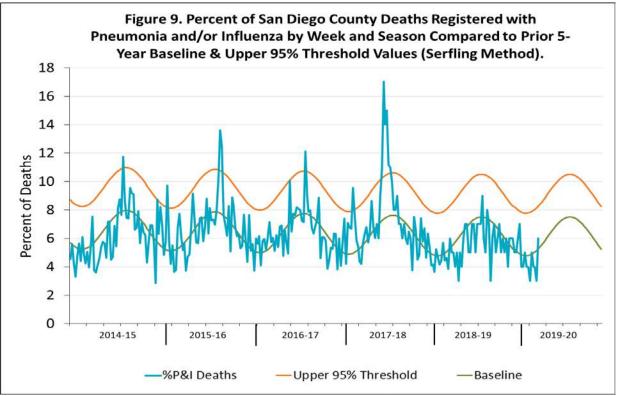


#### Epidemiology and Immunization Services Branch



### **County of San Diego INFLUENZA WATCH**







#### **Epidemiology and Immunization Services Branch**

www.sdepi.org (619) 692-8499 EpiDiv.HHSA@sdcounty.ca.gov



HEALTH

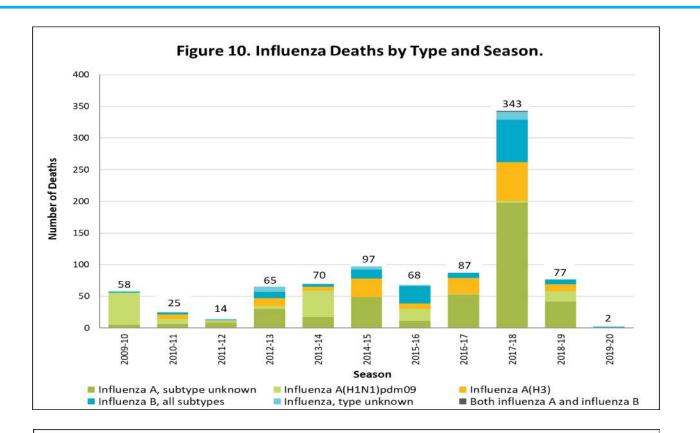
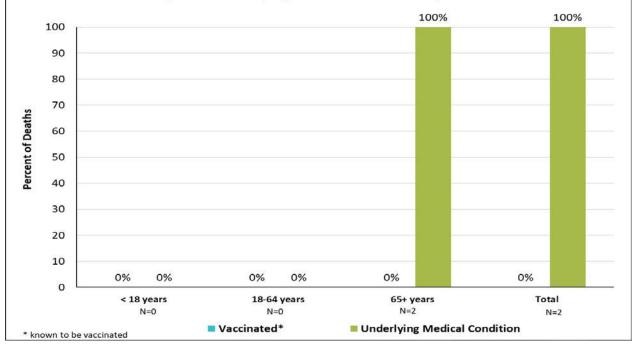


Figure 11. Percent of Influenza Deaths by Age Group, Vaccination Status, and Underlying Medical Condition, 2019-20 Season.





#### Epidemiology and Immunization Services Branch





#### Influenza Reporting in San Diego County

Individual influenza cases are now reportable to Public Health as of October 1, 2019. Please report laboratory-positive influenza results to the County Epidemiology Program by **FAX (858) 715-6458** using a <u>Confidential Morbidity Report Form</u>, or an <u>Influenza Case Report Form</u>, and/or a copy of the positive laboratory results. Also, please indicate if the patient died and/or is a resident of a congregate living facility (if known).

Influenza specimens should be sent to <u>Public Health Laboratory</u> (PHL) for confirmation and subtyping, until further notice. Please contact PHL at **(619) 692-8500** for questions and use the current PHL Test Request Form found at <u>https://www.sandiegocounty.gov/hhsa/programs/phs/phs\_laboratory/.</u> Contact the Epidemiology Program by telephone **(619) 692-8499** or email (<u>EpiDiv.HHSA@sdcounty.ca.gov</u>) with questions about influenza data. Influenza outbreaks should be reported by telephone to **(619) 692-8499**.

#### **Resource Links**

- County of San Diego Epidemiology Program <u>www.sdepi.org</u>
- County of San Diego 2018-19 Influenza Season Summary
- Influenza Watch <u>Slide Deck</u> A slide version of this report for presentations
- County of San Diego Public Health Laboratory (PHL)
- County of San Diego Immunization Program (SDIZ) <u>www.sdiz.org</u>
- San Diego Regional Immunization Registry (SDIR) <u>http://www.sdiz.org/CAIR-SDIR/index.html</u>
- California Department of Public Health (CDPH) Influenza Update
- Centers for Disease Control and Prevention (CDC) Influenza Surveillance

#### Influenza Watch Data Sources

The following sources of data are used to produce this report:

- Influenza case reports: Medical providers and laboratories report individual cases of confirmed influenza via fax or electronic laboratory reporting (ELR) to Public Health Services Epidemiology Program (Epidemiology).
- Influenza deaths: Hospital infection control professionals report influenza-related deaths. Pediatric flu deaths (under 18 years of age) are legally reportable in California; however, San Diego County requests that all influenza-related deaths be reported for surveillance purposes. Influenza-related deaths are also identified through death certificate registration. The County Office of Vital Records notifies Epidemiology when a new death is registered with influenza listed as a cause of death or underlying condition. In addition, influenza case reports are compared to death data for San Diego County, and matches are evaluated to determine if influenza infection was related to the cause of death.
- Percent pneumonia and influenza deaths: The percentage of all deaths registered that had either pneumonia and/or influenza listed as a cause of death is obtained directly from the Vital Records VRIS data system on a weekly basis.
- Influenza-like illness (ILI): Electronic emergency department (ED) visit data are submitted to Epidemiology daily, and the number of all ILI chief complaints and total visits are used to calculate the ED ILI percentage for each week. ILI is defined as fever (>100°F or 37.8°C) and cough and/or sore throat, in the absence of a known cause.
- Influenza outbreaks: In a congregate living setting, outbreaks are defined as at least one laboratory-confirmed influenza in the setting of a cluster (≥2 cases) of influenza-like illness (ILI) within a 72-hour period. Influenza outbreaks are reportable in California. Epidemiology identifies outbreaks when facilities call to report. Other potential outbreaks are identified when multiple cases share an address or have a residential address that matches a skilled nursing or long-term care facility.
- Number of vaccines: The San Diego Immunization Registry (SDIR) provides weekly updates on the number of flu vaccinations given based on number of flu vaccinations registered by participating providers.

The purpose of the weekly *Influenza Watch* is to summarize current influenza surveillance in San Diego County. Please note that reported weekly data are preliminary and may change due to delayed submissions and additional laboratory results.





