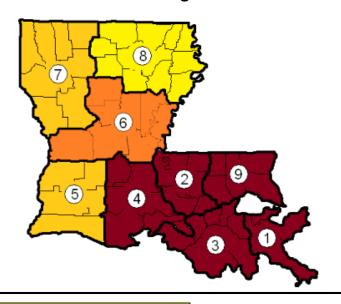
# Influenza & Other Respiratory Viruses Surveillance Report 2019-2020 Season Week 47, Ending November 23, 2019

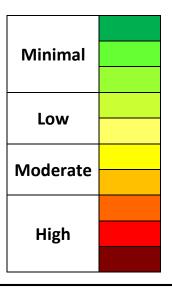


# **Statewide Geographic Spread**

No Activity	Sporadic	Local	Regional	(Widespread)

# Regional Influenza-Like Illness (ILI) Activity





**Current Week Overall Severity\*** 

# **Moderate**

ILI – High Laboratory – Moderate Mortality - Low Current Week
Predominant Subtype

B/Vic

Current Month
Predominant Subtype

B/Vic

\*For the 2019-2020 influenza season, Infectious Disease Epidemiology began using a new methodology to determine influenza season severity – the Moving Epidemic Method (MEM). Based on data from past seasons, key indicators are used to develop intensity thresholds (ITs) to classify the severity of the season from low to very high. Activity of influenza and severity are separate measures. For example, ILI activity in 2018-2019 was similar to levels seen in 2017-2018 but last season was not as severe as 2017-2018 when we saw record numbers of hospitalizations and mortality. The indicators chosen to assess severity in Louisiana are: 1) ILI activity, 2) Laboratory Activity, and 3) Mortality Data. Severity is estimated based on data for all three indicators. Previous season rankings and further on MEM methodology can be found on page 10.

For more information, contact: Julie Hand at 504-568-8298 or julie.hand@la.gov

**Note:** This report includes data from numerous sources and should be viewed as preliminary each surveillance week. The information may be updated in future reports as additional data are received.

## **ILI Activity:**

In Louisiana, during week 47, 11.75% of patient visits reported through the U.S. Outpatient Influenza-like illness Surveillance Network (ILINet) were due to influenza-like illness (ILI). This percentage is above the regional baseline of 3.8%. ILI is defined as fever >100°F and cough and/or sore throat in the absence of another diagnosis.

A total of 97 sites reported ILI data for week 47.

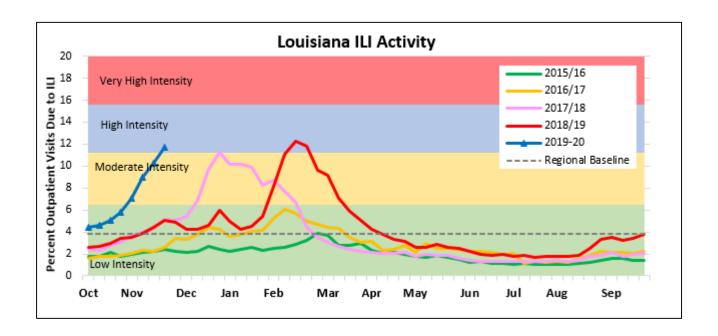
Note: Regional baselines are calculated by CDC at the beginning of the influenza season. Louisiana is in Region 6 which also includes: Arkansas, Texas, New Mexico, and Oklahoma. The Region 6 baseline for the 2019-2020 season is 3.8%. The regional baselines are developed by calculating the mean percentage of ILI visits during non-influenza weeks for the previous three seasons and adding two standard deviations. A non-influenza week is defined as periods of two or more consecutive weeks in which each week accounted for less than 2% of the season's total number of specimens that tested positive for influenza in public health laboratories.

Week 1947: Louisiana ILI: 11.75% High Intensity

for more information on the Louisiana ILI intensity assessment refer to page 1 or 10 of report

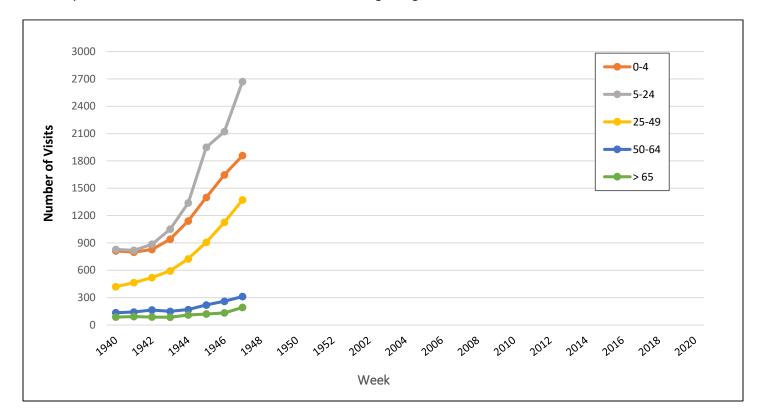
U.S. ILI: 2.9% **Above** the national baseline

for more information on the U.S. ILI Activity assessment: https://qis.cdc.gov/qrasp/fluview/fluportaldashboard.html



# **Louisiana ILI Activity by Age Group:**

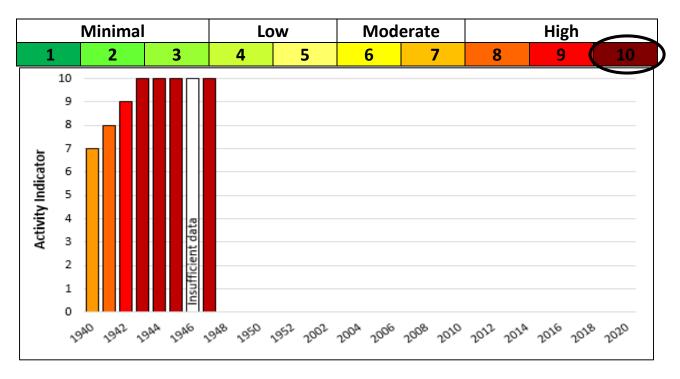
ILINet activity is reported by age group: 0-4 years, 5-24 years, 25-49 years, 50-64 years, and  $\geq$ 65 years. Below is the summary for the current week and cumulative since the beginning of the 2019-20 influenza Season.



Age Group in Years	Week 47	Cumulative data 2019/20 Season
0-4	1,858	9,425
5-24	2,669	11,665
25-49	1,372	6,130
50-64	312	1,554
<u>&gt;</u> 65	193	910
Total	6,404	29,684

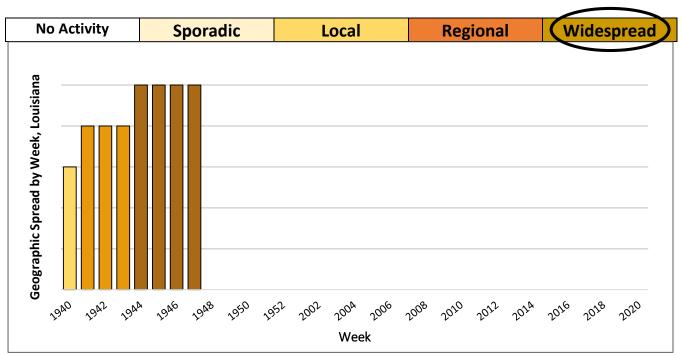
## **CDC ILINet Activity Indicator:**

ILI Activity Levels compare the mean reported percent of visits due to ILI for the current week to the mean reported percent of visits due to ILI for non-influenza weeks. The 10 activity levels correspond to the number of standard deviations below, at, or above the mean for the current week compared with the mean of the non-influenza weeks. For more information, refer to page 10 of report. Insufficient data week 1946 due to system outages.



# **Geographic Spread of Influenza:**

States report estimated level of geographic spread of influenza activity weekly to CDC. This level does not measure the intensity of influenza activity. For more information, refer to page 10 of report.



## **Virologic Surveillance:**

Louisiana virologic surveillance for respiratory viruses consists of data reported by clinical laboratories throughout the state and testing done at the State Public Health Laboratory. Data on influenza testing is presented below, data for other respiratory viruses is on page 9 of report.

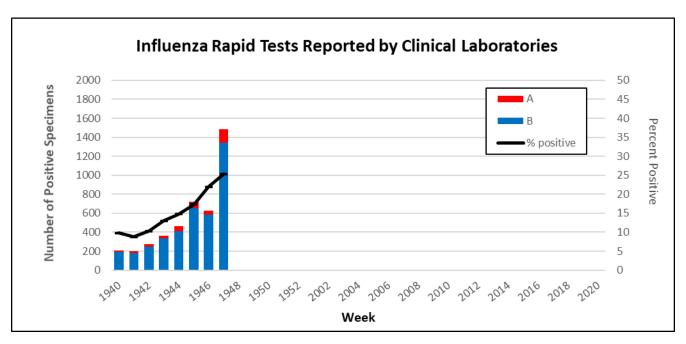
Week 1947: Louisiana % influenza positive tests: 25.31% Moderate Intensity

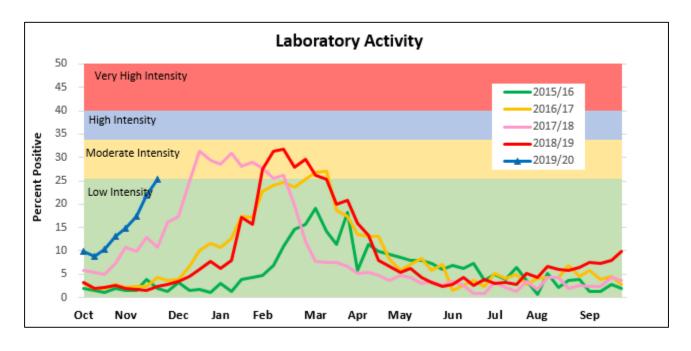
for more information on the Louisiana laboratory intensity

assessment refer to page 1 or 10 of report

U.S. % influenza positive tests: 8.0% Higher than previous week

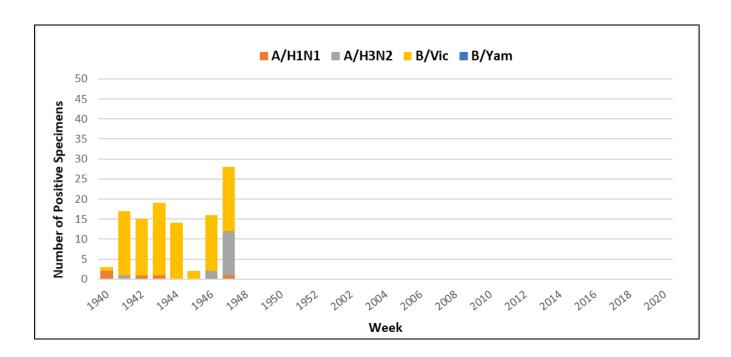
for more information on the U.S. laboratory surveillance: <a href="https://gis.cdc.gov/grasp/fluview/fluportaldashboard.html">https://gis.cdc.gov/grasp/fluview/fluportaldashboard.html</a>





# **Summary of Influenza Testing, Louisiana State Public Health Laboratory**

	Week 47	Cumulative data 2019/20 Season
Number of specimens tested	56	426
Number of positive specimens	28	114
Influenza A/H1N1	1	5
Influenza A/H3	11	13
Influenza B/Victoria	16	95
Influenza B/Yamagata	0	0



# **Summary of Influenza Viruses Antigenically Characterized by CDC that Match Vaccine Strains**

Influenza Subtype/Lineage	Vaccine Strain	Louisiana Characterized/Matched	U.S. Characterized/Matched
Influenza A/H1N1	A/Brisbane/02/2018	0/0	2/2
Influenza A/H3	A/Kansas/14/2017	1/1	7/8
Influenza B/Victoria	B/Colorado/06/2017	0/0	7/11
Influenza B/Yamagata	B/Phuket/3073/2013	0/0	Pending

# **Summary of Influenza Viruses Genetically Characterized by CDC**

# U.S.

\/:	Genetic Characterization					
Virus Subtype or Lineage	Total # of Subtype/Lineage Tested	Clade	Number (% of subtype/lineage tested)	Subclade	Number (% of subtype/lineage tested)	
A/H1	44					
		6B.1A	44 (100%)			
A/H3	92					
		3C.2a	92 (100%)	2a1	92 (100%)	
				2a2	0	
				2a3	0	
				2a4	0	
		3C.3a	0	3a	0	
B/Victoria	72					
		V1A	72 (100%)	V1A	0	
				V1A.1	10 (17.2%)	
		•		V1A.3	62 (82.8%)	
B/Yamagata	8					
		Y3	8 (100%)			

# Louisiana

Visus	Genetic Characterization				
Virus Subtype or	Total # of		Number (% of		Number (% of
Lineage	Subtype/Lineage	Clade	subtype/lineage	Subclade	subtype/lineage
Lilleage	Tested		tested)		tested)
A/H1	2				
		6B.1A	2 (100%)		
A/H3	1				
		3C.2a	1 (100%)	2a1	1 (100%)
				2a2	0
				2a3	0
				2a4	0
		3C.3a		<b>3</b> a	0
B/Victoria					
		V1A	1 (100%)	V1A	0
				V1A.1	0
		·		V1A.3	1 (100%)

## **Mortality Surveillance:**

The National Center for Health Statistics (NCHS) collects death certificate data from state vital statistics offices for all deaths occurring in the U.S. Pneumonia and influenza (P&I) deaths are identified based on ICD-10 multiple cause of death codes. NCHS surveillance data are aggregated by the week of death occurrence. To allow for collection of enough data to produce a stable P&I percentage, NCHS surveillance data are released one week after the week of death. The NCHS surveillance data based on P&I percentage for earlier weeks are continually revised and may increase or decrease as new and updated death certificate data are received from the states by NCHS.

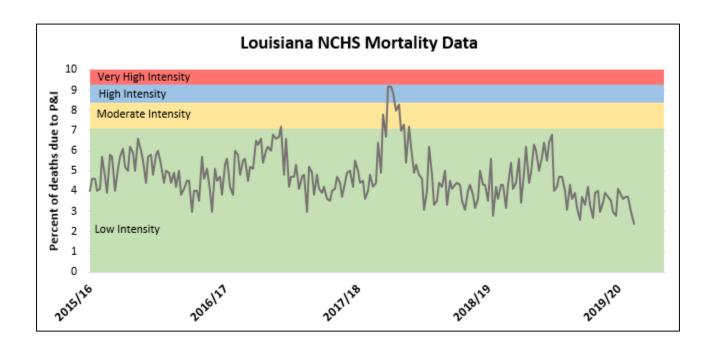
Week 1947: Louisiana Mortality: Low Intensity

for more information on the Louisiana mortality intensity assessment refer to

page 1 or 10 of report

U.S. Mortality: **Below** the weekly epidemic threshold

for more information on the U.S. mortality assessment: https://qis.cdc.gov/qrasp/fluview/mortality.html



# Weekly U.S. Influenza Surveillance Summary:

Full report: CDC FluView: https://www.cdc.gov/flu/weekly/



# **Key Updates:**

Seasonal influenza activity in the United States continues to increase.

## **ILI Activity**

2.9% of visits to a healthcare provider were for ILI. ILI has been at or above the national baseline of 2.4% for three weeks.

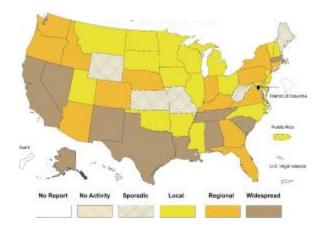
### **Virologic Surveillance**

- 8.0% of respiratory specimens tested at clinical laboratories were positive for influenza viruses. This is higher than the previous week.
- Nationally, B/Victoria viruses are predominant followed by A(H1N1)pdm09 and A(H3N2). The predominant virus varies by region and age group.

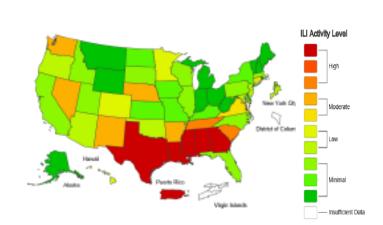
#### **Severe Disease**

- The overall hospitalization rate for the season is 2.0 per 100,000. This is similar to what has been seen at this time in previous seasons.
- 5.1% of deaths were attributed to pneumonia and influenza (P&I). This is below the epidemic threshold of 6.0%.
- One new influenza-associated pediatric death occurring during the 2019-20 season was reported to CDC this week. The total reported for the season is 5.

#### **Geographic Spread of Influenza**

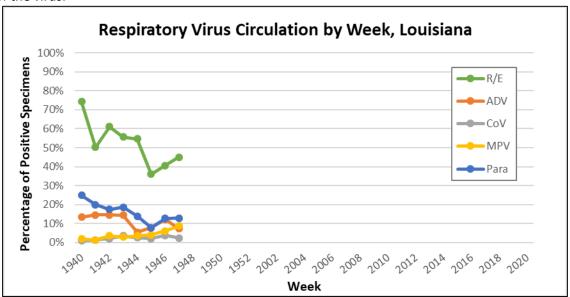


#### **ILI Activity Level Indicator**



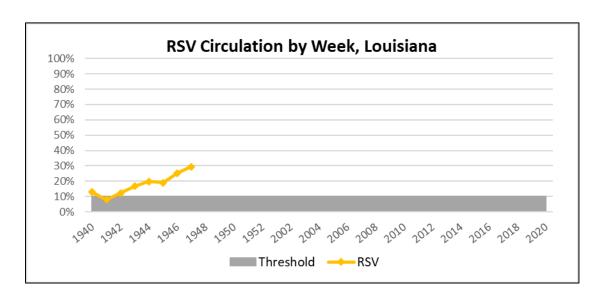
## **Non-Influenza Respiratory Viruses Update:**

Surveillance for non-influenza respiratory virus surveillance is based on data from clinical laboratories statewide and testing done at the state public health laboratory. Data is collected on the following viruses: Rhino/Enterovirus (R/E), Adenovirus (ADV), Coronavirus (CoV), Human Metapneumovirus (MPV), Parainfluenza 1-4 (Para), and Respiratory Syncytial virus (RSV). RSV data is analyzed apart from other respiratory viruses due to the high prevalence of testing and seasonality of the virus.



RSV usually circulates during fall, winter, and spring, but the timing and severity of RSV season can vary from year to year. RSV season onset is defined as the first week of two consecutive weeks when the percent positive of ALL laboratory confirmed tests are greater than or equal to 10%. The end of RSV season is defined as the first of two consecutive weeks when the percent positive of ALL laboratory confirmed tests are less than 10%. Information on National RSV surveillance can be found at: <a href="https://www.cdc.gov/surveillance/nrevss/rsv/index.html">https://www.cdc.gov/surveillance/nrevss/rsv/index.html</a>

#### RSV Season Status: ON



# **Indicator Methodologies:**

• Intensity/Severity Measurements: Intensity thresholds are calculated for activity measures to assess influenza season severity; for Louisiana these measurements are 1) ILI Activity, 2) Laboratory Activity, and 3) Mortality Data. Establishing these thresholds based on historical data allow epidemiologists to assign severity levels (low, moderate, high, very high) to weekly data points and overall seasons. This methodology was published in the <a href="American Journal">American Journal</a> of Epidemiology, October 2017.

Season	Severity Ranking
2015-2016	Low
2016-2017	Low
2017-2018	High
2018-2019	Moderate

- ILI Activity Level Indicator: Collected ILI data is used to produce a measure of ILI activity by state. Activity levels are based on the percent of outpatient visits in a state due to ILI and are compared to the average percent of ILI visits that occur during weeks with little or no influenza virus circulation. Activity levels range from minimal, which would correspond to ILI activity from outpatient clinics being below, or only slightly above, the average, to high, which would correspond to ILI activity from outpatient clinics being much higher than average. Intensity does not measure geographic spread within the state. For example, outbreaks occurring in a single city could cause the state to display high activity levels.
- Geographic Spread Levels:

<u>No Activity</u>: No laboratory-confirmed cases of influenza and no reported increase in the number of cases of ILI. <u>Sporadic</u>: Small numbers of laboratory-confirmed influenza cases or a single laboratory-confirmed influenza outbreak has been reported, but there is no increase in cases of ILI.

<u>Local</u>: Outbreaks of influenza or increases in ILI cases and recent laboratory-confirmed influenza in a single region of the state.

<u>Regional</u>: Outbreaks of influenza or increases in ILI and recent laboratory confirmed influenza in at least two but less than half the regions of the state with recent laboratory evidence of those regions.

<u>Widespread</u>: Outbreaks of influenza or increases in ILI cases and recent laboratory-confirmed influenza in at least half of the regions of the state with recent laboratory evidence of influenza in the state.