

Chicago Flu Update



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News & Updates

Influenza viruses are detected throughout the year at low levels and can cause disease. Vaccination is the best way to protect against influenza infection and all Chicagoans aged six months and older are encouraged to get vaccinated annually. Influenza vaccinations are offered every season by healthcare providers and at retail pharmacies. For those Chicagoans without a healthcare provider or whose healthcare providers do not have the influenza vaccine, a list of City of Chicago Immunization Clinics¹ is available on the city website and by calling 311; the City's interactive map² is updated every season to locate the closest City of Chicago clinic or retail pharmacy to get a flu shot.

What is the risk?

Currently, the risk of influenza infection has decreased.

Are severe cases of influenza occurring?

For the week of May 6-12, 2018, three influenzaassociated ICU hospitalizations were reported (**Figure 1**).

Since October 1, 2017, 581 influenza-associated ICU hospitalizations have been reported; 437 (75%) were positive for influenza A (135 H3N2, 20 H1N1, and 282 unknown subtype [subtyping not attempted or not all subtypes tested]) and 144 (25%) were positive for influenza B. The median age of reported cases is 63 years (range of 5 days-102 years); 62 (11%) cases were admitted from long-term care facilities (LTCF) and 22 outbreaks have been reported in LTCFs; three pediatric deaths were reported including one ICU hospitalization; selected attributes are summarized in **Table 1**.

There were 38 reported deaths[‡] among influenza-associated ICU hospitalizations; twenty-six (68%) were positive for influenza A, 21 (55%) were 65 years of age and older, and seven (18%) had a reported influenza vaccination. The median number of days from influenza test performed to death was two and a half days (range of 1-6 days).

Table 1. Selected attributes of influenza-associated intensive care unit hospitalizations reported for Chicago residents during the 2017-2018 season, October-May.

| Age Group | # | % [*] | Sex | # | % |
|----------------|-----|----------------|--------------------------------------|-----|----|
| 0-4 | 43 | 7 | Male | 266 | 46 |
| 5-17 | 42 | 7 | Female | 314 | 54 |
| 18-24 | 17 | 3 | Med. Cond./Complication [†] | | |
| 25-49 | 68 | 12 | Lung Disease | 166 | 29 |
| 50-64 | 145 | 25 | Cardiac Disease | 164 | 28 |
| ≥65 | 266 | 46 | Diabetes | 141 | 24 |
| Race/Ethnicity | | | Ventilator Support | 147 | 25 |
| NH-White | 143 | 25 | Reported Deaths [‡] | 38 | 7 |
| NH-Black | 304 | 52 | Treatment/Vaccination [†] | | |
| Hispanic | 116 | 20 | Reported Antiviral Tx | 430 | 74 |
| Asian/Other | 18 | 3 | Reported Flu Shot | 171 | 29 |

^{*} Percentages may not add up to 100 due to rounding; † As reported in INEDSS (Illinois National Electronic Disease Surveillance System); ‡ Date of death occurring within one week of positive influenza test among reported influenza-associated ICU hospitalizations.

Figure 1. Number of influenza-associated ICU hospitalizations reported for Chicago residents, for the current season (2017-2018) by influenza type and subtype, October-May.

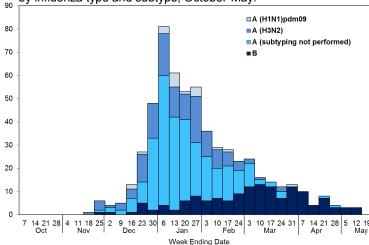
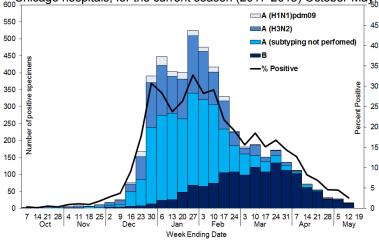


Figure 2. Percent of specimens testing positive (by RT-PCR) for influenza by subtype as reported by local laboratories serving Chicago hospitals, for the current season (2017-2018) October-May 600 Chicago hospitals, for the current season (2017-2018)



Which influenza strains are circulating?

Data on influenza virus test results are reported by Chicago laboratories performing influenza RT-PCR. For the week of May 6-12, 2018, with 6 laboratories reporting, 16 of the 613 (2.6%) specimens tested for influenza were positive [1 A (H3N2), 1 A (H1N1)pdm09, 0 A unknown subtype and 14

influenza B] (**Figure 2**). Since October 1, 2017, 5,076 of 30,360 (16.7%) specimens tested for influenza have been positive; 3,679 typed as influenza A (1,266 H3N2, 174 (H1N1)pdm09, 2,239 unknown subtype [subtyping not performed or not all subtypes tested]) and 1,397 typed as influenza B. The 2017-2018 season has seen the highest number of positive influenza B specimens recorded since laboratory surveillance first began in 2009. This is nearly a 70% increase from last season, which was the second highest recorded at 824 positive influenza B specimens for the entire season.

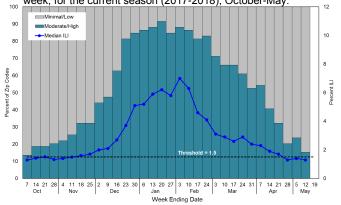
How much influenza-like illness is occurring?

ESSENCE is an electronic syndromic surveillance system used to monitor influenza-like illness by utilizing the chief complaints of patients visiting emergency departments. Currently, all Chicago hospitals submit data to ESSENCE on a daily basis, covering every emergency department visit in the city. For the week of May 6-12, 2018, 385 of the 25,459 (1.7%) total emergency department visits were due to influenza-like illness (ILI) (**Figure 3**).

In addition to emergency departments, several outpatient clinics throughout Chicago participate in CDC's Influenza-like Illness Surveillance Network (**ILINet**) by also reporting on a weekly basis the total number of outpatient clinic visits, and of those visits, the number with influenza-like illness (ILI). For the week of May 6-12, 2018, with 21 facilities reporting, 1.6% of outpatient clinic visits were due to influenza-like illness (**Figure 4**).

Figure 5 represents the percentage of emergency department visits due to influenza-like illness aggregated by patient zip code. For the week of May 6-12, 2018, 9 of 59 (15%) zip codes had ILI activity levels in the moderate to high categories and 50 (85%) had ILI activity levels in the minimal to low categories; the median percent ILI was 1.3% (range of <1%-17%) (**Figure 6**).

Figure 6. Percent of zip codes with minimal/low and moderate/ high ILI activity levels and overall median ILI, Chicago, by week, for the current season (2017-2018), October-May.



Where can I get more information?

The Centers for Disease Control and Prevention's FluView³ report provides national updates and trends related to the intensity of influenza activity across the United States, as well as detailed information on antiviral resistance, severity of illness, and other topics. Updates specific to Illinois⁴ and Suburban Cook County⁵ are also available online. Current and archived issues of the *Chicago Flu Update* can be found on the CDPH website section Current Flu Situation in Chicago⁶.

Reporting Information

The Illinois Department of Public Health (IDPH) has issued influenza testing and reporting recommendations⁷ healthcare facilities can report cases to the Chicago Department of Public Health via the Illinois National Electronic Disease Surveillance System (INEDSS)⁸

All data are preliminary and may change as more reports are received.

Figure 3. Percent of **emergency department** visits attributed to influenza-like illness for Chicago zip codes based on chief complaint data submitted to **ESSENCE**, Chicago, by week, for the current season (2017-2018) and previous season, October-May.

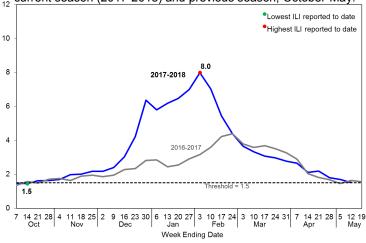


Figure 4. Percent of medically-attended **outpatient** visits attributed to influenza-like illness as reported by **ILINet** facilities, Chicago, by week, for the current season (2017-2018) and previous three seasons, October-May.

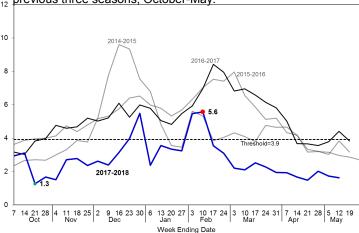
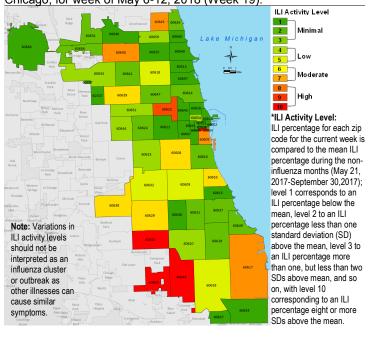


Figure 5. Influenza-like Illness (ILI) activity level by patient zip code determined by chief complaint data submitted to **ESSENCE**, Chicago, for week of May 6-12, 2018 (Week 19).



³ http://www.cdc.gov/flu/weekly/index.htm;⁴ http://dph.illinois.gov/topics-services/diseases-and-conditions/influenza/surveillance;⁵ http://cookcountypublichealth.org/data-reports/communicable-diseases;⁶ https://www.cityofchicago.org/city/en/depts/cdph/supp_info/health-protection/current_flu_situationinchicago2011.html; Page 2 of 2

7 http://dph.illinois.gov/sites/default/files/publications/publications-ohp-annual-flu-testing-guidance-10132017.pdf; 8 https://dph.partner.illinois.gov/