

Toledo-Lucas County Health Department Seasonal Influenza Activity Summary

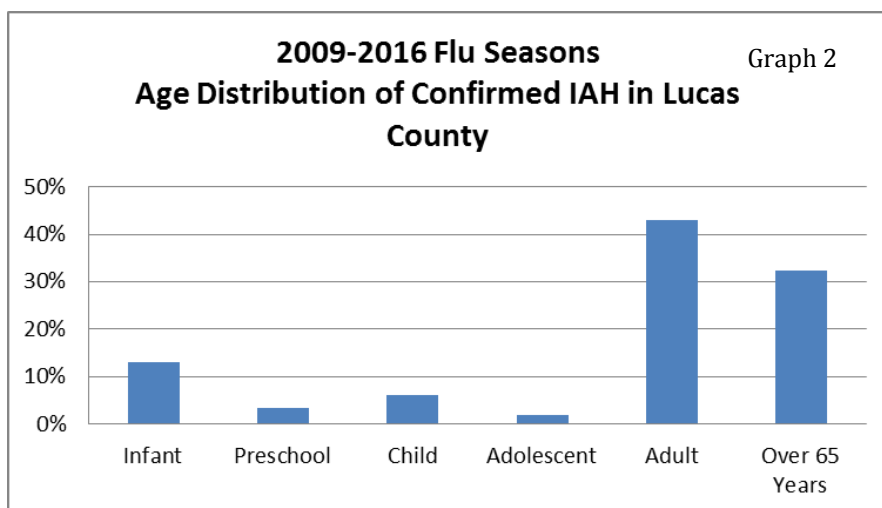
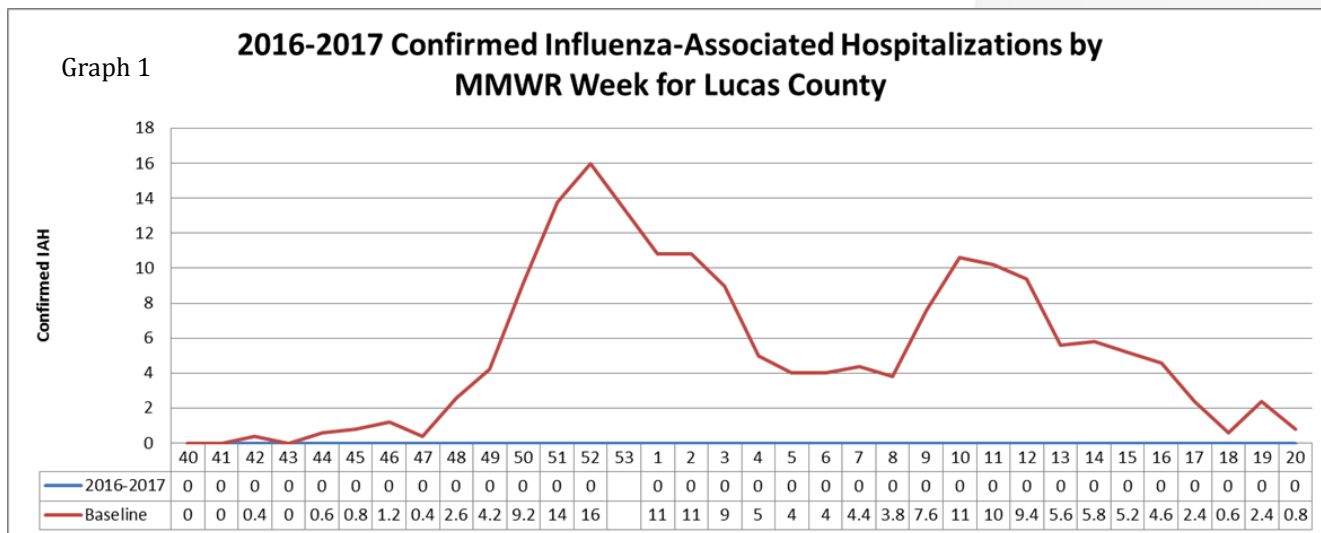
MMWR Week 43 October 23-29, 2016

Local Surveillance:

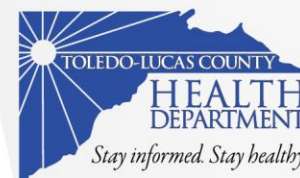
Current Influenza Activity Levels:

- Lucas County had **no** confirmed Influenza-associated Hospitalizations reported, allowing the total to remain at **zero** as of October 29, 2016.
- Gender Distribution of Cases:* currently N/A

Graph 1 illustrates the current confirmed Influenza-Associated Hospitalizations compared to baseline, which is a five year average.



Infant: 0-2 years
 Preschool: 3-5 years
 Child: 6-12 years
 Adolescent: 13-17 years
 Adult: 18-64 years
 Over 65 years



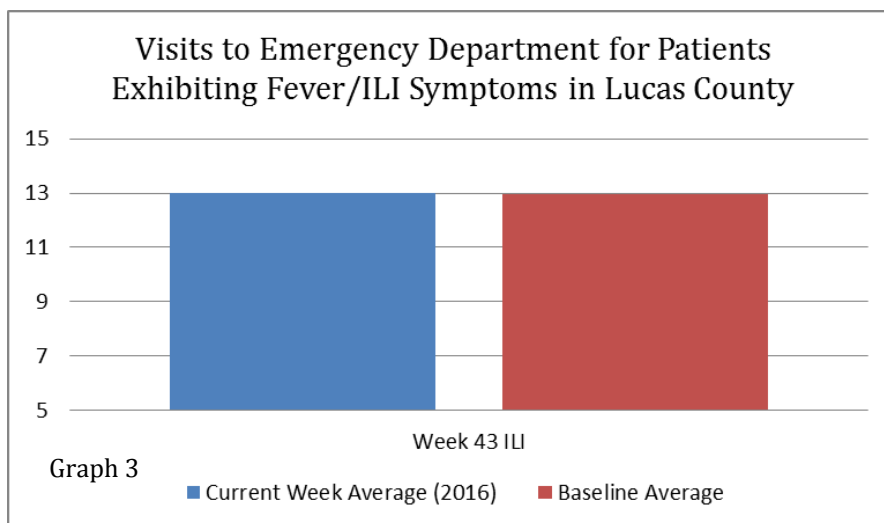
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The number of emergency department visits with patients exhibiting fever/ILI symptoms was at baseline in Lucas County for MMWR week 43. ILI (Influenza-Like Illness) is defined as a fever greater than or equal to 100 degrees F AND a cough or sore throat. (Graph 3)



Summary of State Data: *Current Ohio Activity Level (Geographic Spread) – Sporadic Definition:* 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.

During MMWR Week 43, Ohio public health surveillance data sources indicate minimal 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 are below baseline levels statewide; fever and ILI specified ED visits are also below baseline levels. There were 12 influenza-associated hospitalizations reported.

State Surveillance:

- ODH lab has reported 41 influenza tests from specimens sent from various submitters. 2016-2017 influenza season results: (0) A/pdmH1N1; (1) A/H3N2; (0) Influenza B; (40) Negative (through 10/29/16).
- The National Respiratory and Enteric Virus Surveillance System (NREVSS) has reported 3603 influenza tests performed at participating facilities. 2016-2017 influenza season positive results: (0) H1N1, (2) A/H3N2, (10) Flu A Not Subtyped, and (15) Flu B (through 10/29/16).
- 0 pediatric influenza-associated mortalities have been reported during the 2016-2017 season (through 10/29/16).
- No novel influenza A virus infections have been reported during the 2016-2017 season (through 10/29/16).
- Incidence of confirmed influenza-associated hospitalizations in 2016-2017 season = 32 (through 10/29/16).



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Regional Surveillance*: During week 42 (October 16- October 22, 2016), the proportion of outpatient visits for ILI in Region 5 (Ohio is in Region 5) was 1.2%, which is below the regional baseline of 1.8%. Ohio, Indiana, Pennsylvania, Michigan and Kentucky reported Sporadic Activity. West Virginia reports No Activity.

National Surveillance*: During week 42 (October 16- October 22, 2016), all U.S. states reported Minimal influenza activity. The proportion of outpatient visits for ILI was 1.3%, which is below the national baseline of 2.2%. All 10 HHS regions reported ILI levels below their region-specific baseline levels. The most frequently identified influenza virus type reported by public health laboratories was influenza A (H3N2).

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

Flu Information: Influenza Virus Characterization: During May 22 – October 22, 2016, CDC has antigenically characterized 150 influenza viruses [10 influenza A (H1N1)pdm09, 77 influenza A (H3N2), and 63 influenza B viruses] collected by U.S. laboratories. All of the Influenza B viruses that have been antigenically characterized by CDC were similar to viruses included in either the trivalent or quadrivalent 2016-17 influenza vaccine. All of the influenza A (H1N1)pdm09 and 84% of the influenza A (H3N2) viruses characterized matched the viruses included in the 2016-17 influenza vaccine.

[Abstract: Inhaled Laninamivir Octanoate as Prophylaxis for Influenza in Children](#)

Study finds long-expired Tamiflu still potent-CIDRAP

A study assessing the shelf life of oseltamivir for possible pandemic flu applications found that batches of the drugs that were as much as 4 years past their expiration date still contained sufficient levels of the active ingredient. The study, from University of Michigan scientists, was published yesterday in the American Journal of Infection Control.

The researchers in July 2014 analyzed eight lots of oseltamivir that had expired from April 2010 to September 2012, as well as a lot that had not expired. They found concentrations of oseltamivir ranging from 91.0% to 104.8%, well within the 90%-to-110% US Pharmacopeia acceptance range.

The authors say the study "suggests that it is unnecessary to replace the entire cache [in the national stockpile] at this time. Instead, we propose a strategy to create a rotating inventory so that the cost of replacement is distributed over several years and the life of the existing lots is extended."



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

[ODH Influenza Activity Summary MMWR 43](#)

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