

Toledo-Lucas County Health Department Seasonal Influenza Activity Summary

MMWR Week 14 April 1-7, 2018

Local Surveillance:

Current Influenza Activity Levels:

Lucas County had **21** confirmed Influenza-associated Hospitalizations (IAH) reported in week 14, bringing the total to **656** cases as of April 7, 2018. *85% of cases are flu type A, 91 were H3 strain-the majority were not subtyped.*

--There were no deaths reported

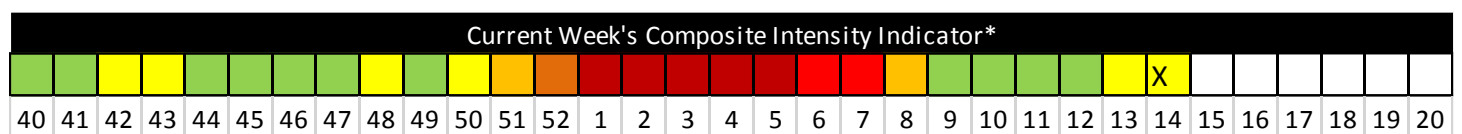
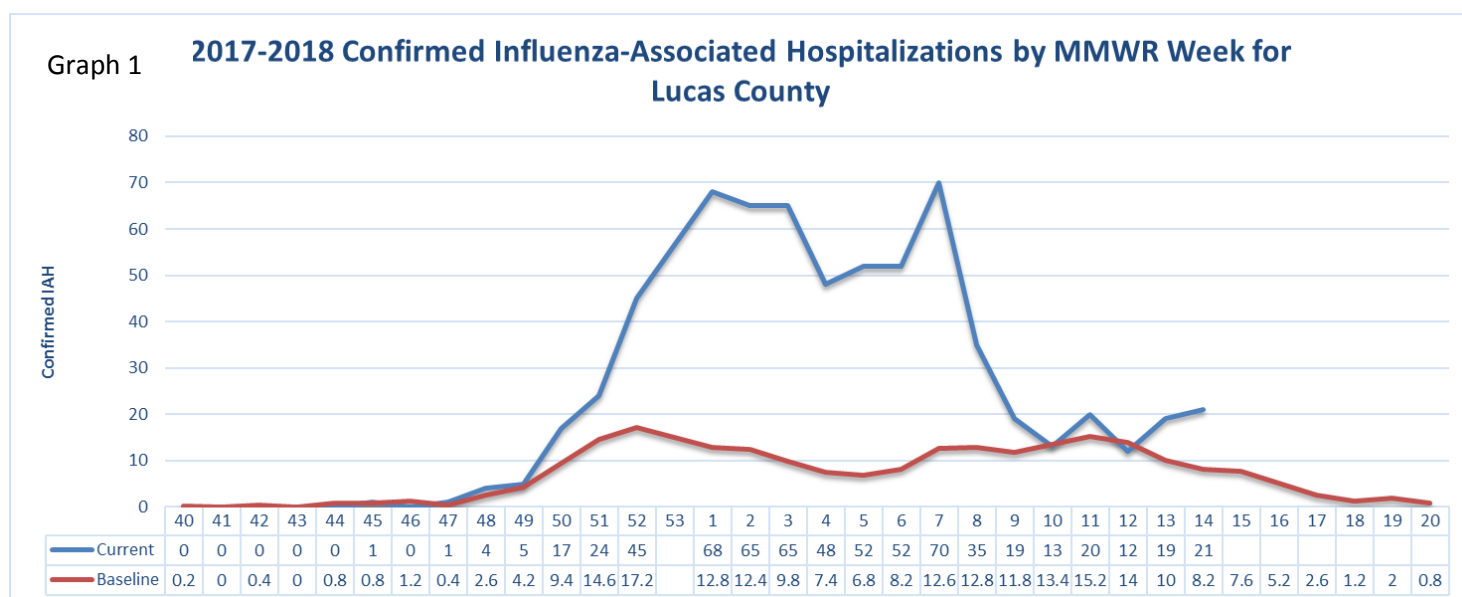
Gender Distribution of Cases: 55% female, 45% male

Lucas County accounts for 4.0% of the IAH reported in Ohio. Rate per 100,000 population^{**}: 147.57

^{*}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.



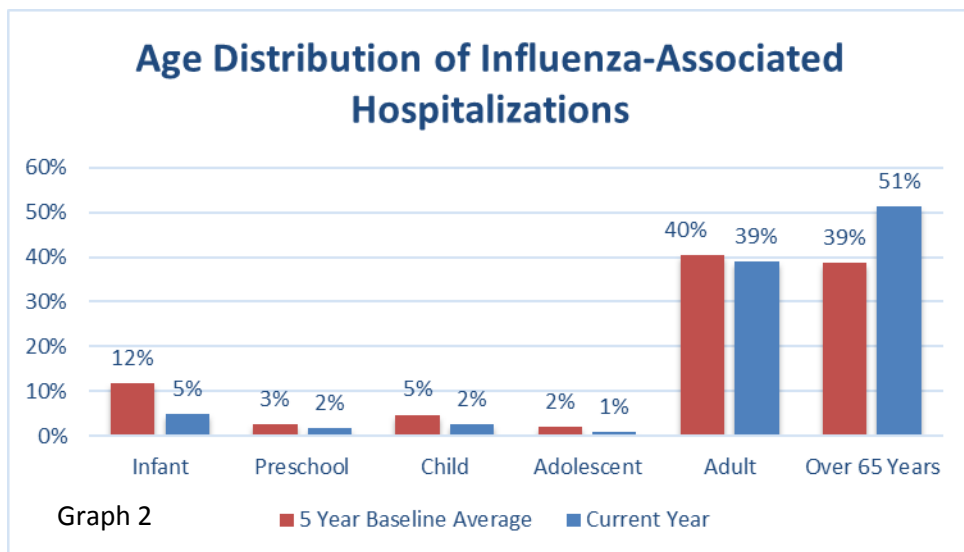
ED Visits are comprised of Influenza-like illness and respiratory syndrome as compared to the baseline average

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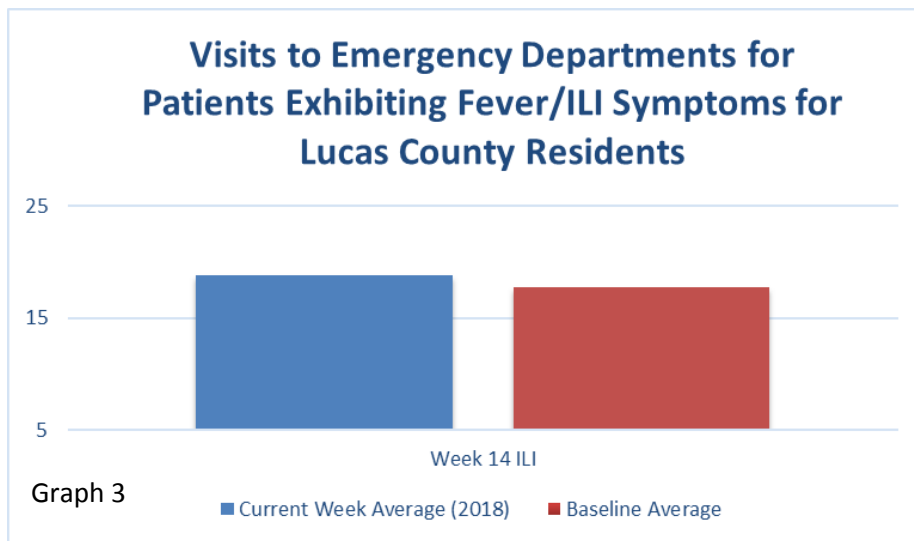
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The number of emergency department visits with patients exhibiting fever/ILI symptoms was right around baseline for MMWR 14. ILI (Influenza-Like Illness) is defined as a fever greater than or equal to 100 degrees F AND a cough or sore throat. (Graph 3)



Summary of State Data: Current Ohio Activity Level (Geographic Spread) – 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 14, public health surveillance data sources indicate decreased influenza-like illness (ILI) activity in outpatient settings reported by Ohio’s sentinel ILINet providers. Outpatient medical claims related to influenza-like

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illness decreased slightly during MMWR Week 14. The percentage of emergency department visits with patients exhibiting constitutional symptoms and ILI specified ED visits decreased slightly as well. Reported cases of influenza-associated hospitalizations are above the seasonal threshold*. There were 526 influenza-associated hospitalizations reported.

State Surveillance:

- ODH lab has reported 1188 influenza tests from specimens sent from various submitters. 2017-2018 influenza season positive results: (683) A/H3N2; (104) A/pdmH1N1; (171) Influenza B; (through 04/07/2018).
- The National Respiratory and Enteric Virus Surveillance System (NREVSS) has reported 71,288 influenza tests performed at participating facilities. 2017-2018 influenza season positive results: (191) H1N1, (627) A/H3N2, (11,045) Flu A Not Subtyped, and (3807) Flu B (through 04/07/2018).
- 4 pediatric influenza-associated mortalities have been reported during the 2017-2018 season (through 04/07/2018).
- No novel influenza A virus infections have been reported during the 2017-2018 season (through 04/07/2018).
- Incidence of confirmed influenza-associated hospitalizations in 2017-2018 season = 16,201* (through 04/07/2018).

Regional Surveillance*: During week 13 (March 25 th – March 31st, 2018), the proportion of outpatient visits for ILI in Region 5 (Ohio is in Region 5) was 2.18%, which is above the regional baseline of 1.8%. Ohio reports Widespread Activity; Kentucky, Michigan, Indiana, and Pennsylvania reported Regional Activity; and West Virginia reported Local Activity.

National Surveillance*: During week 13 (March 25 th – March 31st, 2018), most U.S. states reported Minimal or Low influenza activity, though a few are still reporting Moderate or High activity. The proportion of outpatient visits for ILI was 2.4%, which is above the national baseline of 2.2%. Seven of 10 regions reported ILI at or above their region-specific baseline level. The most frequently identified influenza virus type reported by public health laboratories was influenza B.

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

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

[ODH Influenza Activity Summary MMWR 14](#)