What is the risk?
The risk of influenza infection in Chicago has increased. In the past week, the proportion of specimens testing positive for influenza at reporting laboratories tripled and the number of reported influenza-associated intensive care unit admissions exceeded the number reported over the prior 10 weeks combined. These surveillance findings suggest that influenza is circulating in Chicago and activity is likely to increase in coming weeks. Locally, influenza A strains are predominating, with both the H3N2 and 2009 H1N1 subtypes being reported; sporadic influenza B strains have also been identified. These viruses remain similar to the viruses chosen for the 2010-2011 flu vaccine, and remain susceptible to the antiviral drugs oseltamivir and zanamivir. Health-care providers are reminded to consider influenza infection in the differential diagnosis of persons hospitalized with acute respiratory illness, and Chicagoans aged six months and older are encouraged to get vaccinated. Vaccine is available in doctor’s offices, retail pharmacies, CDPH Neighborhood Health Centers, and immunization walk-in clinics. A list of CDPH clinics is available on the City of Chicago website¹ and by calling 311.

Are severe cases of influenza occurring?
Since the beginning of the influenza reporting season (October 2010), a total of seven influenza-associated intensive care unit hospitalizations of Chicago residents have been reported to CDPH. Of these, 5 (71%) occurred in patients whose influenza-positive specimens were collected during surveillance week 51 (December 19-25, 2010). Cases meeting the current influenza reporting requirements² should be reported to CDPH via INEDSS³.

How much influenza-like illness is occurring?
For the week of December 19-25, 2010, with 16 hospitals reporting, 3.9% of emergency room visits were due to ILI (i.e., fever of 100°F or greater, with cough or sore throat). With 6 Chicago ILINet outpatient clinics reporting, 3.8% of doctor’s office visits were due to ILI. CDC uses data collected by ILINet to produce a measure of ILI activity by state. Illinois’ estimate of ILI activity was raised from “minimal” in week 50 to “moderate” in week 51 (Figure 1). Click on the map for more information on each state’s activity levels.

Which influenza strains are circulating?
With 7 laboratories reporting, 19 (10.2%) of 187 specimens tested were positive for influenza in week 51. Among 18 specimens that tested positive for influenza A, 8 were subtyped as 2009 H1N1, 7 were subtyped as H3N2, and 3 were not subtyped (Figure 2). One specimen tested positive for influenza B.

Where can I get more information?
The Centers for Disease Control and Prevention’s Flu-View⁴ 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 Illinois⁵ and Suburban Cook County⁶ are also available online.


Figure 1. Influenza-like illness (ILI) activity* level by state, determined using the proportion of doctor’s office visits due to ILI as reported through ILINet, December 18-25, 2010.

Figure 2. Influenza-positive tests reported by local laboratories serving Chicago hospitals that are equipped to identify influenza by types, by week, October 9-December 25 2010.

* activity levels are compared to the average percent of ILI visits during the spring and fall weeks when little or no influenza virus circulation is occurring. Minimal activity corresponds to ILI activity below the average and high activity corresponds to ILI activity much higher than the average. Data is preliminary and may change as more data is received.