**What is the risk?**
Currently, the risk of influenza infection is low.

**Are severe cases of influenza occurring?**
For the week of October 22-28 2017, no influenza-associated ICU hospitalizations were reported. During the past several seasons, the number of reported influenza-associated ICU hospitalizations begins to increase towards the end of November (Figure 1).

**Which influenza strains are circulating?**
Data on influenza virus test results are reported by Chicago laboratories performing influenza RT-PCR. For the week of October 22-28 2017, with 6 laboratories reporting, 2 of the 509 (<1%) specimens tested for influenza were positive for influenza A (unknown subtype [subtyping not attempted or not all subtypes tested]) (Figure 2).

Since October 1, 2017, 8 of 2,018 (<1%) specimens tested for influenza have been positive; seven typed as influenza A (5 H3N2, 2 unknown subtype) and one typed as influenza B.

**How much influenza-like illness is occurring?**
CDPH receives data from several hospitals in Chicago that provide emergent care, which report on a weekly basis the total number of emergency department visits, and of those visits, the number with influenza-like illness (ILI). ILI is defined as fever of 100°F or greater and cough and/or sore throat. Influenza-like illness is not lab-confirmed influenza, but is used to monitor emergency department and doctor’s office visits for people with flu-like symptoms.

For the week of October 22-28 2017, with eight hospitals reporting, 2.1% of emergency department visits were due to 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 October 22-28 2017, with 22 facilities reporting, 1.7% of outpatient clinic visits were due to influenza-like illness (Figure 4).

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All data are preliminary and may change as more reports are received.
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 October 22-28, 2017, 385 of the 23,592 (1.6%) emergency department visits among the 59 Chicago zip codes analyzed were due to influenza-like illness (ILI). Among age groups, children under five years of age had the highest percentage of visits due to influenza-like illness at 8.1%, followed by those 5-17 years of age at 3.0%; those 18-44, 45-64, and 65 and older were less than 1%.

**Figure 5** represents the percentage of emergency department visits due to influenza-like illness aggregated by patient zip code. For the week of October 22-28, 2017, 47 of 59 (80%) zip codes had ILI activity levels in the minimal to low categories and 12 (20%) had ILI activity levels in the moderate to high categories; the median percent ILI was 1.3% with a range from <1% to 3.5% (Figure 6).

Where can I get more information?
The Centers for Disease Control and Prevention’s FluView² 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 Illinois³ and Suburban Cook County⁴ 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 Chicago⁵.

Reporting Information
The Illinois Department of Public Health (IDPH) has issued influenza testing and reporting recommendations⁶; healthcare facilities can report cases to the Chicago Department of Public Health via the Illinois National Electronic Disease Surveillance System (INEDSS).⁷

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