

# Chicago Flu Update



City of Chicago

Rahm Emanuel, Mayor

January 13, 2012 Previous Chicago Flu Update Chicago Department of Public Health Bechara Choucair, MD, Commissioner

#### What is the risk?

Currently, the risk of influenza infection in the Chicago area is low. Nationally, influenza activity has also remained relatively low. To date, less than two percent of the 31,163 specimens tested for influenza at collaborating laboratories across the U.S. have been positive, with 88% of these being influenza A (44% subtyped as A (H3)). Since October 2011, all viruses tested for antiviral resistance have been susceptible to the antiviral medications oseltamivir (Tamiflu®) and zanamivir (Relenza®). However, rare sporadic cases of oseltamivir resistant 2009 H1N1 and A (H3N2) viruses have been detected worldwide. Vaccination is the best way to protect against human seasonal influenza infection and all Chicagoans aged six months and older are encouraged to get vaccinated. Chicagoans should ask their healthcare provider or pharmacist about vaccine availability. Uninsured individuals and those with insurance that does not cover flu shots can obtain a voucher for a free flu shot at Walgreens¹. The Chicago Department of Public Health has influenza vaccine available at CDPH immunization clinics².

## Are severe cases of influenza occurring?

No influenza-associated ICU hospitalizations were reported for week 1 (January 1-7, 2012). Since October 2011, one influenza-associated ICU hospitalization has been reported. Suspected novel influenza, pediatric influenza-associated deaths, and influenza-associated ICU hospitalizations should all be reported to CDPH via INEDSS<sup>3</sup>. Outbreaks of influenza-like illness in a congregate setting are also reportable; in Chicago these reports can be made by phone to (312) 746-5911.

#### How much influenza-like illness is occurring?

For the week of January 1-7, 2012, with 16 hospitals reporting, 3.1% of emergency room visits were due to ILI (i.e., fever of 100°F or greater, with cough or sore throat). This is lower than levels reported during the same surveillance week in 2010 and is a two percentage point decrease from the previous week (Figure 1). From January 1-7, 2012, with 16 outpatient clinics reporting, 3.0% of outpatient clinic visits were due to ILI. This is similar to levels reported during the same surveillance week in 2010 (Figure 2).

### Which influenza strains are circulating?

Data on influenza virus test results are reported by Chicago laboratories performing influenza subtyping. For the week of January 1-7, 2012, with 4 laboratories reporting, 4 of 208 specimens tested for influenza were positive, all subtyped as human influenza A (H3N2). Since October 2011, 9 out of 1,986 specimens tested for influenza have been positive, with 6 typed as influenza A (5 H3 and 1 not subtyped) and 3 typed as influenza B.

#### Where can I get more information?

The Centers for Disease Control and Prevention's <u>Flu-View</u><sup>4</sup> 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 <u>Illinois</u><sup>5</sup> and <u>Suburban Cook County</u><sup>6</sup> are also available online.

Figure 1. Weekly reported percent of <u>emergency department visits</u> attributed to influenza-like illness, Chicago, by week, for current season (2011-2012) and previous two seasons, October-May.

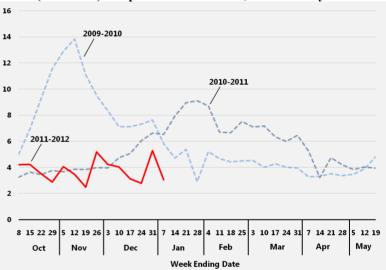


Figure 2. Weekly reported percent of <u>outpatient</u> clinic visits attributed to influenza-like illness, Chicago, by week, for current season (2011-2012) and previous season (Chicago and Illinois), October-May.

