What is the risk?
Currently, the risk of influenza infection in the Chicago area is low. Compared to the same time period last season, the number of positive influenza specimens and the number of influenza-associated hospitalizations reported to CDPH are substantially lower (Table 1). Influenza activity normally peaks in February. 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 Walgreens. The Chicago Department of Public Health has influenza vaccine available at CDPH immunization clinics.

Are severe cases of influenza occurring?
No influenza-associated ICU hospitalizations were reported for week 5 (January 29–February 4, 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. 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 29–February 4, 2012, with 16 hospitals reporting, 4.7% of emergency room visits were due to ILI (i.e., fever of 100°F or greater, with cough or sore throat). This is four percentage points lower than levels reported during the same surveillance week in 2011 (Figure 1). From January 29–February 4, 2012, with 17 outpatient clinics reporting, 2.4% of outpatient clinic visits were due to ILI. This is the third consecutive week that an increase has been noted, however this is nearly at half the level reported during the same surveillance week in 2011 (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 29–February 4, 2012, with 6 laboratories reporting, 1 of 213 specimens tested for influenza was positive, subtyped as human influenza A (H1N1). Since October 2011, 17 out of 2,855 (<1%) specimens tested for influenza have been positive, with 14 typed as influenza A (8 H3N2, 3 H1N1, and 3 not subtyped) and 3 typed as influenza B.

Where can I get more information?
The Centers for Disease Control and Prevention’s FluView 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 Illinois and Suburban Cook County are also available online.

Table 1. Influenza testing results and ICU hospitalizations reported for surveillance weeks 40 through 5 by season, Chicago.

<table>
<thead>
<tr>
<th>Influenza Season</th>
<th># Specimens Tested*</th>
<th># Specimens Positive</th>
<th># ICU Hospitalizations</th>
</tr>
</thead>
<tbody>
<tr>
<td>2010-2011</td>
<td>2,958</td>
<td>307</td>
<td>40</td>
</tr>
<tr>
<td>2011-2012</td>
<td>2,793</td>
<td>16</td>
<td>1</td>
</tr>
<tr>
<td>% Change</td>
<td>-6%</td>
<td>-95%</td>
<td>-98%</td>
</tr>
</tbody>
</table>

*5 Chicago laboratories performing influenza subtyping that have consistently reported results for both seasons.

Figure 1. Weekly reported percent of emergency department visits 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 outpatient clinic visits attributed to influenza-like illness, Chicago, by week, for current season (2011-2012) and previous season (Chicago and Illinois), October-May.