



Chicago Flu Update



City of Chicago

May 4, 2012

Chicago Department of Public Health

Rahm Emanuel, Mayor

[Previous Chicago Flu Updates](#)

Bechara Choucair, MD, Commissioner

What is the risk?

Currently, the risk of influenza infection in the Chicago area is low. Influenza activity peaked in mid-March and continues to decline. The number of positive influenza specimens and the number of influenza-associated ICU hospitalizations reported to CDPH remain lower compared to the same time period last season (Table 1). 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. The Chicago Department of Public Health has influenza vaccine available at [CDPH immunization clinics](#)¹.

Are severe cases of influenza occurring?

No influenza-associated ICU hospitalizations were reported for week 17 (April 22-28, 2012). Since October 2011, 61 influenza-associated ICU hospitalizations have been reported. Among all hospitalized ICU cases, 48% tested positive for influenza A (38% H1N1, 10% H3N2, and 52% un-subtyped) and 52% tested positive for influenza B. Over half (59%) were ≥ 50 years (median: 56 years, range: 4 months-107 years), 44% had underlying lung disease (including asthma) and 21% required ventilator support. No deaths were reported for week 17. A total of seven deaths have been reported so far this season with 5 (71%) positive for influenza B. In contrast, during the previous season 100% (11/11) of the reported deaths among ICU hospitalizations were positive for influenza A. Suspected novel influenza, pediatric influenza-associated deaths, and influenza-associated ICU hospitalizations should all be reported to CDPH via [INEDSS](#)². Outbreaks of influenza-like illness in a congregate setting are also reportable; in Chicago call (312) 746-5911.

How much influenza-like illness is occurring?

For the week of April 22-28, 2012, with 17 hospitals reporting, 3.5% of emergency room visits were due to ILI (i.e., fever of 100°F or greater, with cough or sore throat). This is the seventh consecutive week that a decrease has been noted and the lowest level reported since January (Figure 1). From April 22-28, 2012, with 22 outpatient clinics reporting, 3.5% of outpatient clinic visits were due to ILI. This is half the level reached during the peak in mid-March.

Which influenza strains are circulating?

Data on influenza virus test results are reported by Chicago laboratories performing influenza subtyping. For the week of April 22-28, 2012, with 6 laboratories reporting, 12 of 244 (4.9%) specimens tested for influenza were positive. Among the positive specimens, 7 typed as influenza A (5 H1N1, 1 H3N2, 1 un-subtyped), and 5 typed as influenza B. The percentage of specimens testing positive for influenza decreased by nearly half compared to the previous week. Since October 2011, 504 out of 6,514 (7.7%) specimens tested for influenza have been positive, with 254 typed as influenza A (112 H1N1, 94 H3N2, and 48 not subtyped) and 250 typed as influenza B (Figure 2).

Where can I get more information?

The Centers for Disease Control and Prevention's [FluView](#)³ 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](#)⁴ and [Suburban Cook County](#)⁵ are also available online.

Table 1. Influenza testing results and ICU hospitalizations reported for surveillance weeks 40 through 17 by season, Chicago.

Influenza Season	# Specimens Tested*	# Specimens Positive	# ICU Hospitalizations
2010-2011	6,283	676	98
2011-2012	6,058	432	61
% Change	-4%	-36%	-38%

*Five 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.

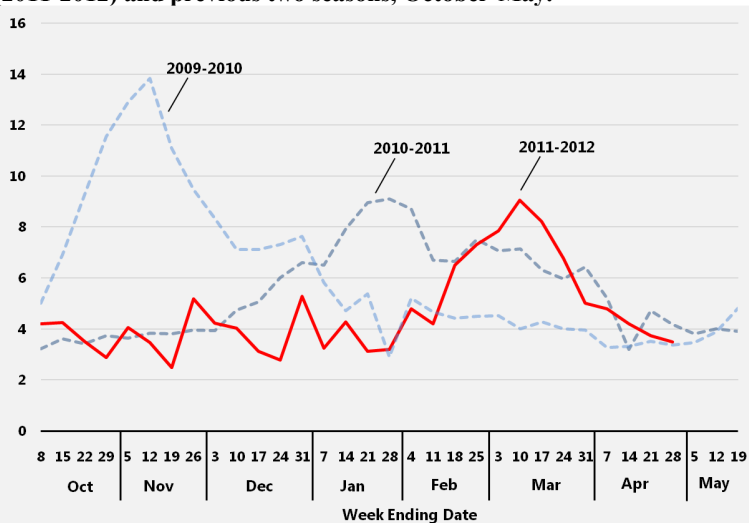
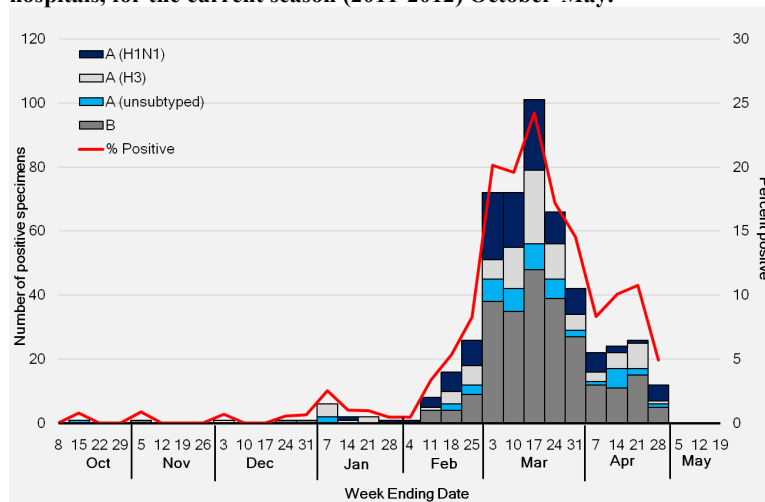


Figure 2. Percentage of specimens testing positive (by RT-PCR) for influenza by subtype as reported by local laboratories serving Chicago hospitals, for the current season (2011-2012) October-May.



Report is preliminary and may change as additional data is received