Public Health - Seattle & King County
Summary of Influenza Syndromic and Laboratory Surveillance

Influenza Update: February 1, 2020

During the week ending February 1, 2020:

• There were two new influenza-related deaths and no new outbreaks reported this week. Eighteen deaths and 15 outbreaks at long-term care facilities have been reported this season (since 9/29/2019).

• Based on data from King County laboratories, influenza was the most commonly identified respiratory pathogen, followed by RSV and rhinovirus. The percent of positive tests for respiratory viral pathogens was comparable to rates observed this time of year and below peak levels observed during the previous five seasons.

• For the week ending February 1st, 2020, the percent of emergency department (ED) visits for influenza-like illness (ILI) was at or above baseline levels among all ages combined, but below peak levels observed during four of the previous five influenza seasons. Among every age group except adults ages 45 years and older, the percent of ED ILI visits overall this season is higher than observed during each of the previous 5 influenza seasons. The percent of ED ILI visits has been highest among pediatric age groups, peaking at or above four of the previous five influenza seasons. This season, the percent of admissions for influenza has been highest among adults ages 65 years and older, but below levels observed during each of the previous five influenza seasons.

At a glance

	Week Ending 02/01/2020	Since 09/29/2019	5-Year Average to Date
Laboratory-confirmed influenza deaths	2	18	21.8
Respiratory disease outbreaks at long-term care facilities (LTCFs)	0	15	36

Percentage positive influenza tests by PCR[1]	21.1%	Season Peak	24.3%		
Number of labs reporting	5	Weekly Average	7		
Number of specimens tested	1473	Weekly Average	1339		
Percentage of emergency department (ED) visits for ILI[2]	4.7%	Season Peak	6.75%	5-Year Average to Date	2.97%

[1]Based on King County hospital laboratory and sentinel provider submissions to CDC's National Respiratory and Enteric Virus Surveillance System (NREVSS).
NREVSS data not available for all previous seasons due to change in reporting procedures. Changes in facilities reporting to NREVSS may impact counts.

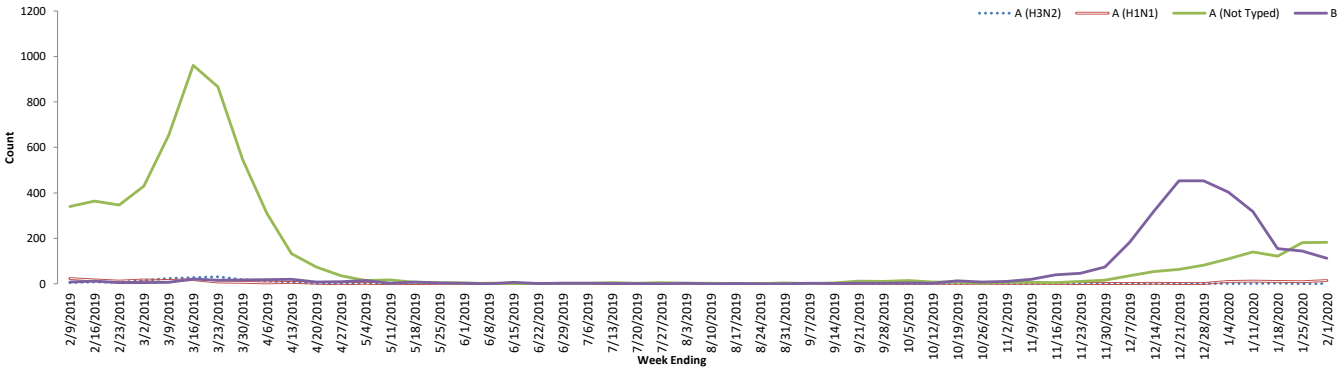
[2]Based on Public Health - Seattle & King County's syndromic surveillance data representing aggregate percent of visits to King County EDs.

Submissions to NREVSS by King County labs, PCR testing only

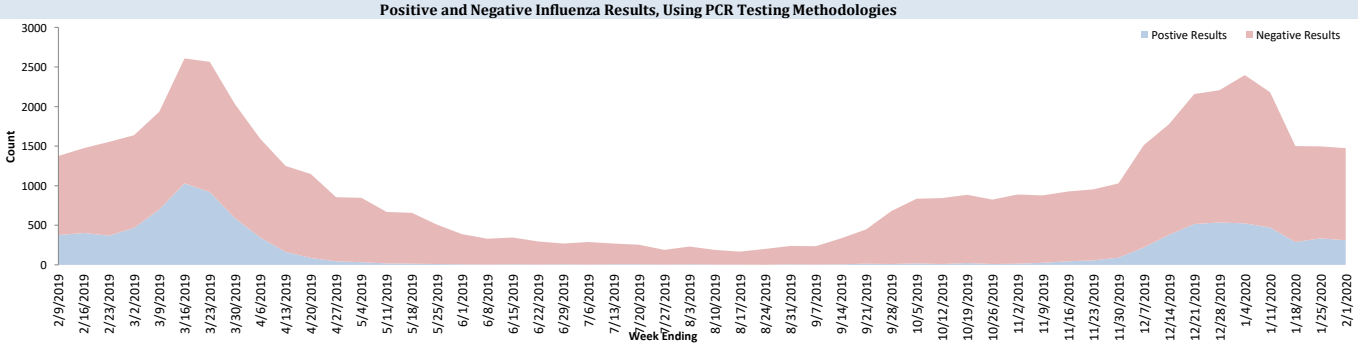
Week #	Week ending	# Labs reporting	A (H1N1)	A (H3N2)	A (Not typed)	B	# Tested	% Flu positive
2	1/11/2020	7	12	1	140	317	2182	21.5%
3	1/18/2020	6	10	2	122	155	1502	19.2%
4	1/25/2020	5	9	0	181	144	1495	22.3%
5	2/1/2020	5	15	1	182	113	1473	21.1%

Influenza results by subtype, PCR testing only (NREVSS)

Positive Influenza Results by Subtype, Using PCR Testing Methodologies

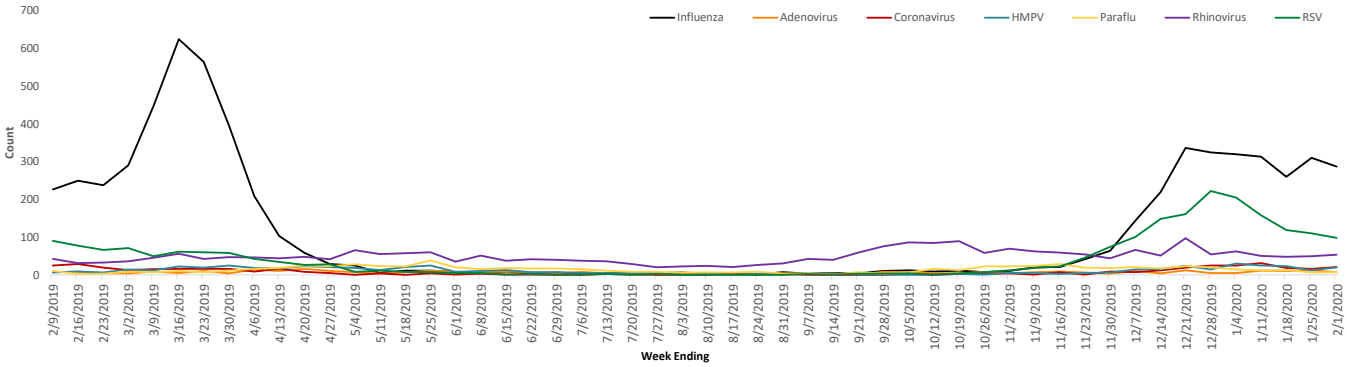


Positive and Negative Influenza Results, Using PCR Testing Methodologies

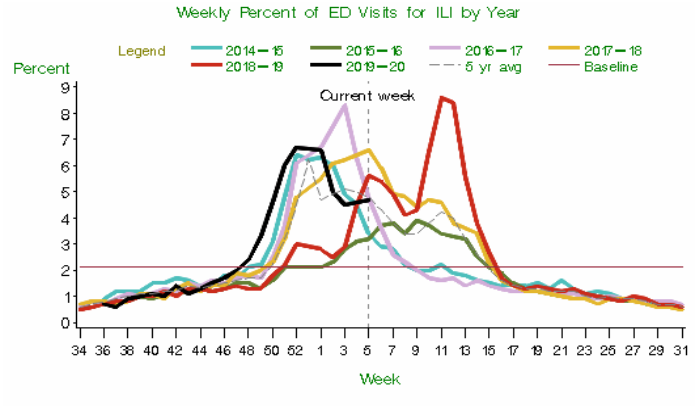


Public Health - Seattle & King County
Summary of Influenza Syndromic and Laboratory Surveillance

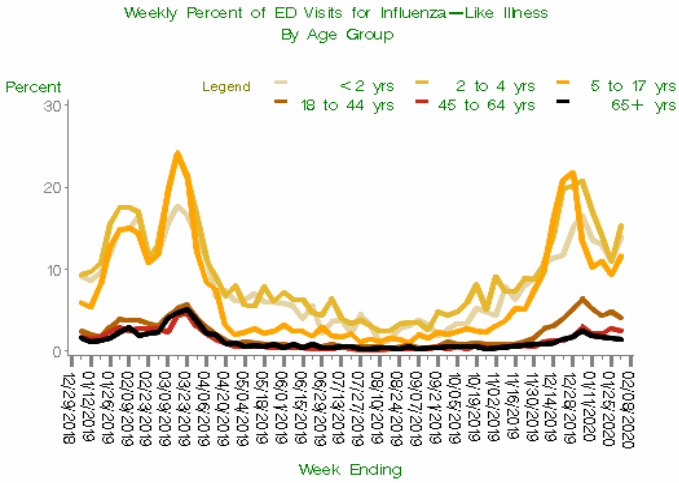
Influenza and other respiratory pathogens, PCR testing only (NREVSS)



King County syndromic surveillance



Note: The change from ICD–9 to ICD–10 codes in October 2015 may impact trends.
Last updated Feb 2, 2020 ; 'current week' is week ending Feb 1, 2020
Baseline: Mean % ILI during non–flu weeks for previous three seasons, adding two standard deviations.
A non–flu week is a period of 2+ consecutive weeks where each one accounted for <2% of the season's total number of specimens that tested positive for influenza by PCR.



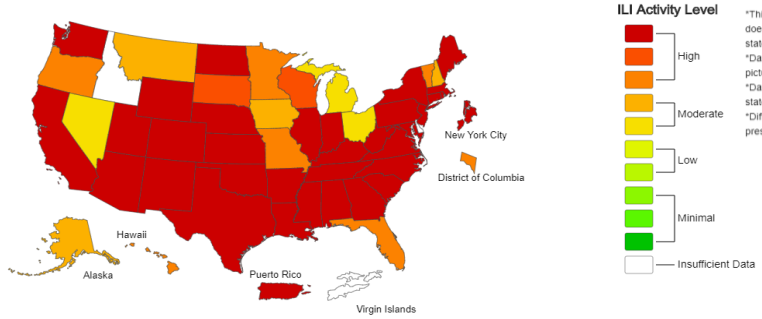
ALLHOSPITALS, Last Updated Feb 4, 2020

National data from CDC

A Weekly Influenza Surveillance Report Prepared by the Influenza Division

Influenza-Like Illness (ILI) Activity Level Indicator Determined by Data Reported to ILINet

2019-20 Influenza Season Week 4 ending Jan 25, 2020



*This map uses the proportion of outpatient visits to healthcare providers for influenza-like illness to measure the ILI activity level within a state. It does not, however, measure the extent of geographic spread of flu within a state. Therefore, outbreaks occurring in a single city could cause the state to display high activity levels.
*Data collected in ILINet may disproportionately represent certain populations within a state, and therefore may not accurately depict the full picture of influenza activity for the whole state.
*Data displayed in this map are based on data collected in ILINet, whereas the State and Territorial flu activity map are based on reports from state and territorial epidemiologists. The data presented in this map is preliminary and may change as more data is received.
*Differences in the data presented by CDC and state health departments likely represent differing levels of data completeness with data presented by the state likely being the more complete.

Please report any of the following:
- Laboratory-Confirmed influenza-associated deaths
- Patients with novel or unsubtypable influenza viruses
- Outbreaks of influenza-like illness in a long-term care facility

Reporting Timeframe
Within 3 business days
Immediately
Immediately

Contact Information
Phone: (206) 296-4774
Fax: (206) 296-4803

Public Health
Seattle & King County

Additional Resources:
Additional King County Flu Information, Resources, and Surveillance
UW Virology Laboratory Respiratory Virus Surveillance
Washington State Influenza Surveillance Update
National Influenza Update
Global Influenza Update

Report updated on 2/5/2020

Public Health - Seattle & King County

Summary of Influenza Deaths and Long-Term Care Facility (LTCF) Influenza Outbreaks

Confirmed cases as of week 5 (ending 02/01/20)

	2019-2020	2018-2019	2017-2018	2016-2017	2015-2016	2014-2015	5-year avg
Influenza Deaths in Week 5	2	1	3	9	0	6	3.8
Influenza deaths, season to date (since 9/29/2019)	18	2	23	53	4	27	21.8
LTCF Outbreaks in Week 5	0	2	4	6	0	3	3.0
LTCF Outbreaks, season to date (since 9/29/2019)	15	10	30	81	6	53	36.0

	2019-2020	2018-2019	2017-2018	2016-2017	2015-2016	2014-2015	5-year avg
Total Seasonal LTCF Outbreaks	15	43	68	92	18	65	57.2
Flu type:							
A	9 60%	37 86%	15 22%	62 67%	7 39%	49 75%	34 59%
B	3 20%	0 0%	6 9%	3 3%	7 39%	4 6%	4 7%
A and B	2 13%	1 2%	5 7%	4 4%	0 0%	2 3%	2.4 4%
Info not available	1 7%	5 12%	42 62%	23 25%	4 22%	10 15%	16.8 29%

	2019-2020	2018-2019	2017-2018	2016-2017	2015-2016	2014-2015	5-year avg
Total Seasonal Influenza Deaths	18	52	50	84	16	43	49
Flu type:							
A	11 61%	48 92%	33 66%	75 89%	10 63%	40 93%	41.2 84%
H1/H1N1	4 22%	11 21%	1 2%	1 1%	6 38%	0 0%	3.8 8%
H3	1 6%	5 10%	6 12%	18 21%	1 6%	7 16%	7.4 15%
A (not typed)	6 33%	32 62%	26 52%	56 67%	3 19%	33 77%	30 61%
B	6 33%	2 4%	11 22%	7 8%	6 38%	3 7%	5.8 12%
Not typed	1 6%	2 4%	6 12%	1 1%	0 0%	0 0%	1.8 4%
Sex:							
Male	9 50%	27 52%	17 34%	41 49%	7 44%	17 40%	21.8 44%
Female	9 50%	25 48%	33 66%	43 51%	9 56%	26 60%	27.2 56%
Age:							
Under 5 years	0 0%	0 0%	0 0%	0 0%	0 0%	0 0%	0 0%
5 - 17	1 6%	0 0%	0 0%	0 0%	0 0%	0 0%	0 0%
18 - 44	1 6%	1 2%	0 0%	1 1%	3 19%	1 2%	1.2 2%
45 - 64	4 22%	13 25%	7 14%	5 6%	5 31%	6 14%	7.2 15%
65+ years	12 67%	38 73%	43 86%	78 93%	8 50%	36 84%	40.6 83%
Average	*67.8*	*73.6*	*81.1*	*81.9*	*64.9*	*81.7*	*76.6*
Race:							
White	10 56%	35 67%	33 66%	54 64%	12 75%	35 81%	33.8 69%
Asian	2 11%	5 10%	2 4%	13 15%	2 13%	1 2%	4.6 9%
Black	1 6%	1 2%	3 6%	4 5%	2 13%	5 12%	3 6%
Amer Indian	0 0%	1 2%	0 0%	0 0%	0 0%	0 0%	0.2 0%
Hispanic/Latino	1 6%	2 4%	2 4%	3 4%	0 0%	1 2%	1.6 3%
Other	1 6%	0 0%	1 2%	1 1%	0 0%	1 2%	0.6 1%
Unknown	3 17%	8 15%	9 18%	9 11%	0 0%	0 0%	5.2 11%
Flu vaccine status							
Up to date	8 44%	16 31%	26 52%	39 46%	6 38%	21 49%	21.6 44%
Not up to date	10 56%	19 37%	10 20%	20 24%	8 50%	5 12%	12.4 25%
Unknown	0 0%	17 33%	14 28%	25 30%	2 13%	17 40%	15 31%

Report updated on 2/5/2020