Influenza Update: May 16, 2020

During the week ending May 16, 2020:

- There was one new influenza-related death and no new outbreaks reported this week. Thirty-seven deaths and 25 outbreaks at long-term care facilities have been reported this season (since 9/29/2019).
- The percent of positive tests for respiratory viral pathogens at King County laboratories was below levels observed this time of year and below peak levels observed during the previous five seasons. COVID-19 testing is not currently included in laboratory reporting of respiratory pathogens.
- During the week ending May 16th, the percent of emergency department (ED) visits for influenza-like illness (ILI) was below baseline levels among all ages combined, and among each individual age group. The percent of ED ILI visits peaked in week 10 and has been on a downward trend overall since then. Among every age group except for adults ages 65 years and older, the percent of ED ILI visits overall this season is higher than observed during each of the previous five 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.

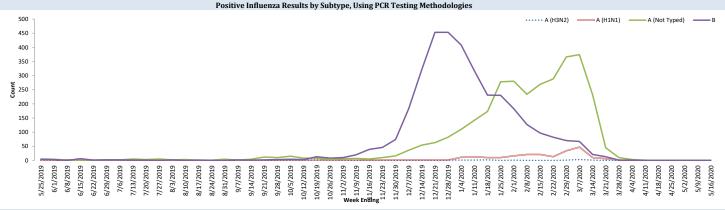
At a glance **Week Ending** Since 09/29/2019 05/16/2020 5-Year Average to Date 37 47.2 Laboratory-confirmed influenza deaths 1 0 25 56 Respiratory disease outbreaks at long-term care facilities (LTCFs) 0% Percentage positive influenza tests by PCR¹ Season Peak 25.1% Number of labs reporting 4 Weekly Average 127 Weekly Average Number of specimens tested 1380 Percentage of emergency department (ED) visits for ILI2 Season Peak 6.93% 2.97% 5-Year Average to Date

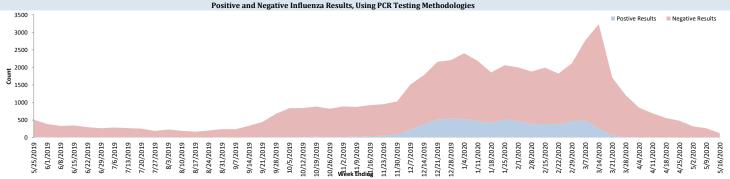
 $NREVSS\ data\ not\ available\ for\ all\ previous\ seasons\ due\ to\ change\ in\ reporting\ procedures.\ Changes\ in\ facilities\ reporting\ to\ NREVSS\ may\ impact\ counts\ procedures.$

²Based 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 endin		# Labs reporting	A (H1N1)	A (H3N2)	A (Not typed)	В	# Tested	% Flu positive					
17	4/25/2020	8	0	0	0	0	479	0%					
18	5/2/2020	8	0	0	0	0	320	0%					
19	5/9/2020	8	0	0	0	0	266	0%					
20	5/16/2020	4	0	0	0	0	127	0%					

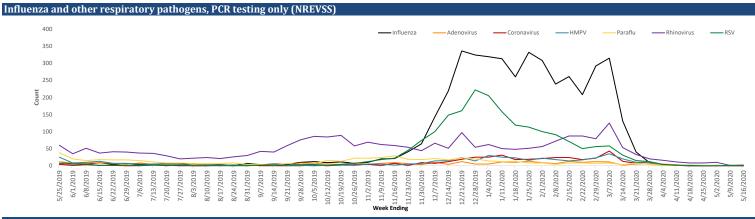
Influenza results by subtype, PCR testing only (NREVSS)



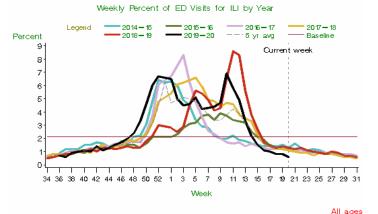


¹Based on King County hospital laboratory and sentinel provider submissions to CDC's National Respiratory and Enteric Virus Surveillance System (NREVSS).

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



King County syndromic surveillance



Note: The change from ICD-9 to ICD-10 codes in October 2015 may impact trends. Last updated May 17, 2020 ; 'current week' is week ending May 16, 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 May

May 20 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 19 ending May 09, 2020





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"This map uses the proportion of outpatient visits to healthcare providers for influenza-like illness to measure the LLI 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.

todes for, however, measure the extern of geographic spread of no within a state. Therefore, obtained as occurring in a single city could cause 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

Additional Resources:

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

Reporting Timeframe Within 3 business days

Immediately
Immediately

Contact Information

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

National Influenza Update Global Influenza Update



Report updated on 5/20/2020

Public Health - Seattle & King County Summary of Influenza Deaths and Long-Term Care Facility (LTCF) Influenza Outbreaks

Confirm	ned cas	es as o	f wee	k 20 (endi	ng 05	/16/	20)							
	201	9-2020	2018	3-2019	2017	7-2018	2016	-2017	2015	-2016	2014	-2015	5-yea	ar avg	
Influenza Deaths in Week 20		1		0		0		0		0		0	0	0.0	
Influenza deaths, season to date (since 9/29/2019)		37	!	51		45		83	16		4	41	47.2		
,, ., ., .,														I	
LTCF Outbreaks in Week 20		0		0		1		0		0		0		0.2	
LTCF Outbreaks, season to date (since 9/29/2019)		25		43	(67	92		17		(51	56	56.0	
	2019-2020		2018-2019		2017-2018		2016-2017		2015-2016		2014-2015		5-year avg		
Total Seasonal LTCF Outbreaks		25		43		68		92		18		65		57.2	
Flu type:															
A	12	48%	37	86%	15	22%	62	67%	7	39%	49	75%	34	59%	
В	4	16%	0	0%	6	9%	3	3%	7	39%	4	6%	4	7%	
A and B	2	8%	1	2%	5	7%	4	4%	0	0%	2	3%	2.4	4%	
Info not available	7	28%	5	12%	42	62%	23	25%	4	22%	10	15%	16.8	29%	
	201	0.2020	2016	2010	2017	7 2010	2016	2017	2015	2016	2014	2015	F		
		2019-2020		2018-2019		2017-2018		2016-2017		2015-2016		2014-2015		5-year avg	
Total Seasonal Influenza Deaths		37	!	52	!	50		84	:	16	4	43	4	19	
Flu type:															
A	22	59%	48	92%	33	66%	75	89%	10	63%	40	93%	41.2	84%	
H1/H1N1	8	22%	11	21%	1	2%	1	1%	6	38%	0	0%	3.8	8%	
H3	1	3%	5	10%	6	12%	18	21%	1	6%	7	16%	7.4	15%	
A (not typed)	13	35%	32	62%	26	52%	56	67%	3	19%	33	77%	30	61%	
В	14	38%	2	4%	11	22%	7	8%	6	38%	3	7%	5.8	12%	
Not typed	1	3%	2	4%	6	12%	1	1%	0	0%	0	0%	1.8	4%	
Sex:	20	E 40/	27	F20/	17	2.40/	44	400/	_	4.40/	17	400/	24.0	4.40/	
Male Female	20 17	54% 46%	27 25	52% 48%	17 33	34% 66%	41 43	49% 51%	7 9	44% 56%	17 26	40% 60%	21.8 27.2	44% 56%	
Tentale	''	4070	23	4070	33	0076	43	J1/0	9	30%	20	0070	27.2	30%	
Age:															
Under 5 years	1	3%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	
5 - 17	1	3%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	
18 - 44	4	11%	1	2%	0	0%	1	1%	3	19%	1	2%	1.2	2%	
45 - 64	4	11%	13	25%	7	14%	5	6%	5	31%	6	14%	7.2	15%	
65+ years	27	73%	38	73%	43	86%	78	93%	8	50%	36	84%	40.6	83%	
Average		68.0		73.6		81.1		81.9		64.9		81.7		76.6	
Race:															
White	23	62%	35	67%	33	66%	54	64%	12	75%	35	81%	33.8	69%	
Asian	2	5%	5	10%	2	4%	13	15%	2	13%	1	2%	4.6	9%	
Black	1	3%	1	2%	3	6%	4	5%	2	13%	5	12%	3	6%	
Amer Indian	1	3%	1	2%	0	0%	0	0%	0	0%	0	0%	0.2	0%	
Hispanic/Latino	3	8%	2	4%	2	4%	3	4%	0	0%	1	2%	1.6	3%	
Other	0	0%	0	0%	1	2%	1	1%	0	0%	1	2%	0.6	1%	
Unknown	7	19%	8	15%	9	18%	9	11%	0	0%	0	0%	5.2	11%	
Flu vaccine status															
Up to date	14	38%	16	31%	26	52%	39	46%	6	38%	21	49%	21.6	44%	
Not up to date	15	41%	19	37%	10	20%	20	24%	8	50%	5	12%	12.4	25%	
Unknown	8	22%	17	33%	14	28%	25	30%	2	13%	17	40%	15	31%	

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