Connecticut Department of Public HealthWeekly Influenza Update



2019-2020 Quick Notes for Week 49 (December 1-December 7, 2019)

2013-2020 Quick Notes for Week 49 (Determiner 1-Determiner 7, 2013)			
Influenza Geographic Activity = WIDESPREAD			
Influenza-associated Hospitalizations:	Reported This Week: 29	Season To Date: 120	
Influenza-associated Deaths:	Reported This Week: 1 Pediatric New This Week: 0	Season To Date: 3 Pediatric Season Total: 0	
Influenza-like Illness was 2.70%, similar to the 2.65% observed last week.			

2019-2020 Overview for Week 49 (December 1-December 7, 2019)			
Outpatient Influenza-like illness (ILI) activity was similar to the previous week. Influenza geographic activity is WIDESPREAD .	A total of 120 influenza-associated hospitalizations have been reported since the beginning of the 2019-20 season.		
The percent of emergency department visits for ILI statewide was 7.55%, slightly lower than the previous week but higher than levels seen at this time in the previous year.	One influenza-associated death was reported this week, resulting in a total of 3 influenza-associated deaths reported since the beginning of the 2019-20 season.		
Of 400 positive influenza tests reported to DPH this season, 16 (4 %) were Influenza A 2009 (H1N1), 10 (3 %) was Influenza A (H3N2), 150 (38 %) Influenza Type B, and 224 (56 %) were Influenza A (type unspecified).	No influenza-associated pediatric deaths were reported this week. No influenza-associated pediatric deaths have been reported since the beginning of the 2019-20 season. Annual vaccination is the best way to protect children from influenza.		
ALL DATA ARE PRELIMINARY AND SUBJECT TO CHANGE.			

National influenza statistics through Flu View.

Annual vaccination is the best way to protect against severe illness due to influenza.

This year's flu season data collection begins with Week 35; August 25, 2019.

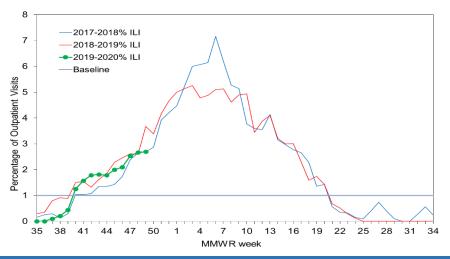
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ILINet Surveillance

Each week a network of volunteer outpatient providers, including clinics, health centers, urgent care centers, and emergency departments, known as ILINet, report the percentage of patient visits with influenza-like illness (ILI), which consists of cough and/or sore throat and a fever >100°F in the absence of a known cause. The ILINet system was expanded in 2019 and should not be directly compared with previous seasons. As of December 7, 2019, outpatient ILI is **2.70%**.

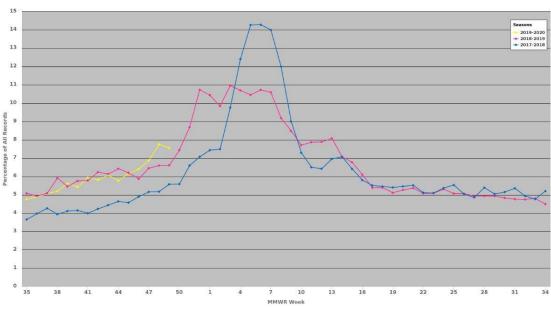
Percentage of outpatient patient visits associated with ILI per MMWR week.



Hospital Syndromic Surveillance

DPH receives near real-time information about emergency department (ED) visits from all 38 licensed, hospital EDs in Connecticut. This system was fully in place starting with the 2018-2019 season. Data from previous years are derived from the Hospital Emergency Department Syndromic System. As of December 7, 2019, **7.55%** of ED patients had ILI.

Percentage of patients presenting to emergency departments statewide with complaints of ILI.



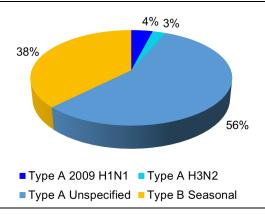
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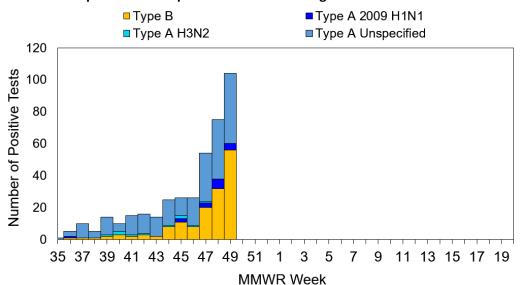
Laboratory Surveillance

Laboratories report positive influenza tests to DPH. Test results may include the virus subtype (as H3N2), which helps determine the specific virus strains circulating in CT. Other results only provide a general type (Type A Unspecified, Type B). As of December 7, 2019, **400** positive influenza tests have been reported. **Increased numbers of circulating influenza B viruses have been observed in recent weeks in Connecticut.**

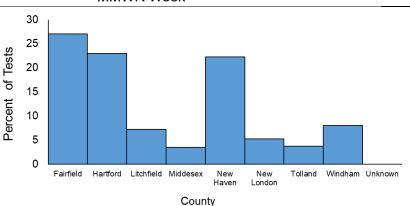


Percent of each influenza virus type reported to DPH during the current season.

Total number of positive influenza tests and the number of each influenza virus type reported to DPH per MMWR week during the current season.



Percentage of all positive laboratory tests reported from each county in Connecticut during the current season.



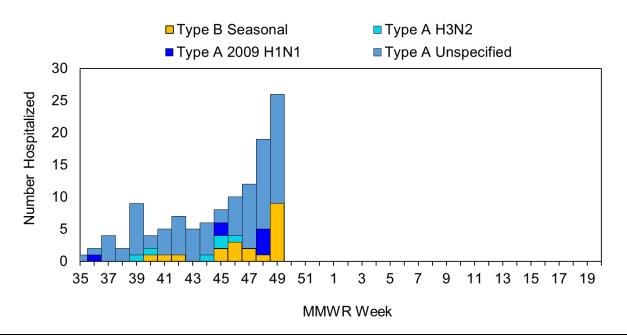
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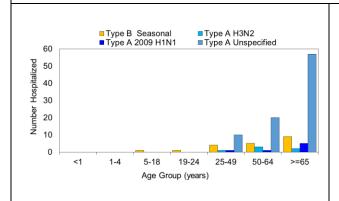
Hospital Surveillance

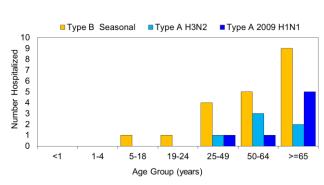
Hospitals report patients hospitalized with influenza to DPH. As of December 7, 2019, **120** patients have been hospitalized with influenza during the current season.

Total number of patients hospitalized with laboratory-confirmed influenza by virus type per MMWR week.



Total number of reported patients hospitalized with influenza by age and influenza virus type during the current season. NOTE: Type A Unspecified test results are not displayed in the second figure below so other results may be clearly seen.





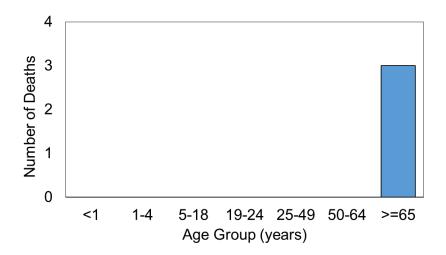
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Influenza-associated Deaths

Influenza-associated deaths are reported to DPH. The graph shows the number of deaths associated with influenza by age group. Comparisons to previous years are provided when new data are available. **Due to the need to confirm reports and reporting delays, consider the current week data preliminary.** As of **December 7, 2019, 3 influenza-associated deaths have been reported to DPH this season.**



Total number of influenza-associated deaths per month for the 2015-2016, 2016-2017, 2017-2018 2018-2019, and current influenza seasons.

