

BOSTON PUBLIC HEALTH COMMISSION (BPHC)

Communicable Disease Control Division 1010 Massachusetts Ave - Boston, MA 02118 Phone: (617) 534-5611 - Fax: (617) 534-5905

Influenza Report - For the week ending 1/6/2018

10/1/2017 -1/6/2018

Reported Cases (Boston Res.)	#
Influenza A	312
Influenza B	59
Influenza A and B	0
Influenza (type unspecified)	0
TOTAL (season-to-date)	371

ED Surveillance	
This Week % ILI	1.83%
Average % ILI (since 10/1/2017)	1.10%

Summary: As of 1/6/2018, 371 cases of laboratory-confirmed influenza in Boston residents have been reported to the Boston Public Health Commission (BPHC), with 92 (25%) requiring hospitalization. Two influenza-associated deaths have been reported to date; both persons had multiple underlying medical conditions. Emergency department visits for influenza-like illness (ILI) comprised 1.83% of all ED visits this week.

Note: Boston city data may not parallel aggregate statewide data as other areas of Massachusetts may experience different trends.

Providers should continue offering vaccine to all persons ≥6 months of age through the remainder of the season. Vaccination is the best way to prevent influenza and its complications.

Cases of influenza diagnosed in Boston and confirmed by any laboratory test must be reported to BPHC by calling (617) 534-5611 or faxing reports to (617) 534-5905.

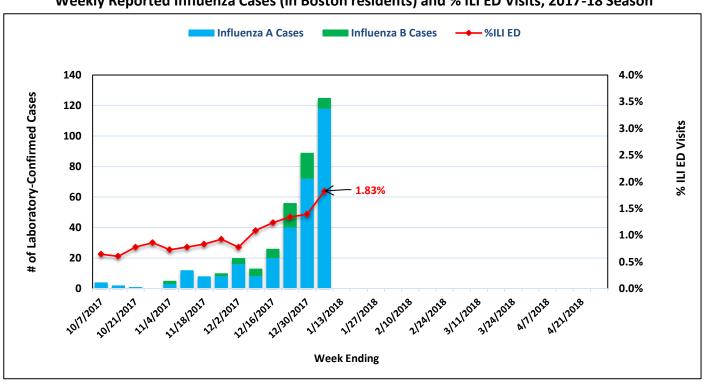
On December 27, 2017, a Health Advisory was released by CDC providing: 1) a notice about increased influenza A(H3N2) activity and its clinical implications; 2) a summary of influenza antiviral drug treatment recommendations; 3) an update about approved treatment drugs and supply this season; and 4) background information for patients about influenza treatment. For more information, see: https://emergency.cdc.gov/han/han00409.asp

Among all circulating wild-type influenza viruses, including H3N2, no significant antigenic drift has occurred. In addition, the majority of H3N2 viruses collected and tested by the CDC since October 1, 2017 are similar to the egg-grown reference virus representing the virus recommended for use in egg-based Northern Hemisphere vaccines.

Even though it is still possible for some persons who have been vaccinated to get the flu (though NOT from the vaccine itself), studies have shown that prior vaccination during the season can attenuate the severity of illness and result in fewer influenza-associated deaths.

***VACCINATION IS THE BEST WAY TO PREVENT INFLUENZA ***

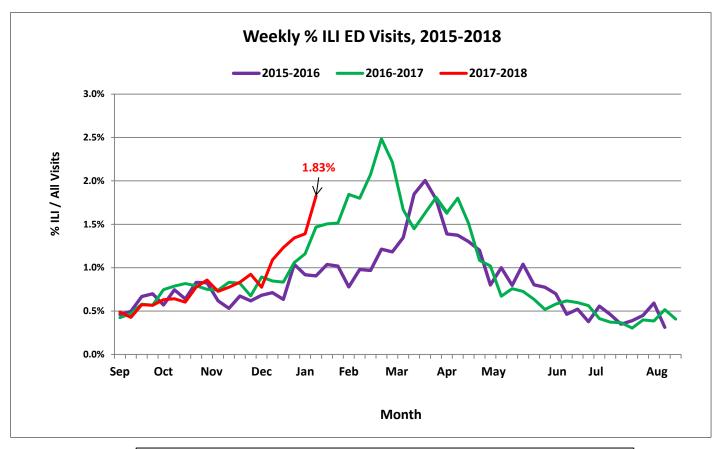
Weekly Reported Influenza Cases (in Boston residents) and % ILI ED Visits, 2017-18 Season





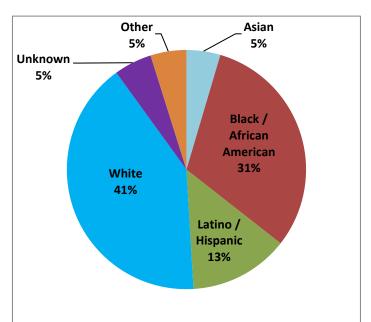
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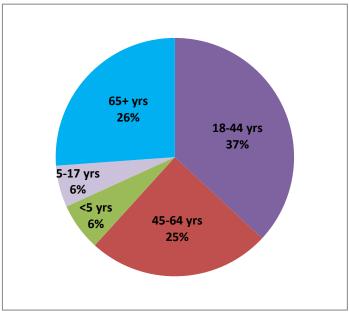


Influenza-like illness (ILI) is defined as "flu" OR "fever and a cough or sore throat" in the ED chief complaint as captured by the BPHC Syndromic Surveillance System.

Race/Ethnicity of Confirmed Influenza Cases, 10/1/2017 - 1/6/2018, Boston Residents



Age Distribution of Confirmed Influenza Cases, 10/1/2017 - 1/6/2018, Boston Residents



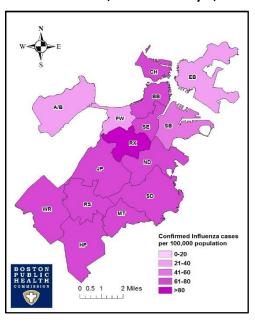


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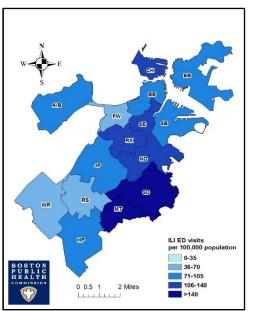
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Geographic Distribution

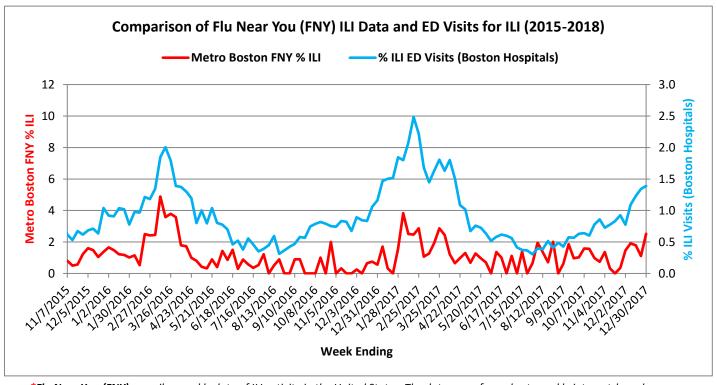
Rate of Confirmed Influenza Cases by Neighborhood per 100,000 Population October 1, 2017 - January 6, 2018 Rate of ILI Syndrome ED Visits by Neighborhood per 100,000 Population October 1, 2017 - January 6, 2018







Comparison of ILI Using Flu Near You (FNY)* ILI Data and ED Visits for ILI, 2015-2018



^{*}Flu Near You (FNY) compiles weekly data of ILI activity in the United States. The data come from short, weekly internet-based surveys completed by voluntary participants who indicate whether they are healthy or have experienced any of a short list of symptoms.