



# Chicago Flu Update



City of Chicago  
Rahm Emanuel, Mayor

November 9, 2012

Chicago Department of Public Health  
Bechara Choucair, MD, Commissioner

## What is the risk?

Currently, the risk of influenza infection is low. Vaccination is the best way to protect against 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. For those without a healthcare provider or whose healthcare providers do not have the influenza vaccine, a complete schedule of [City of Chicago influenza vaccine clinics](#)<sup>1</sup> is available on the City website and by calling 311

## Are severe cases of influenza occurring?

The Illinois Department of Public Health (IDPH) has issued interim influenza testing and reporting recommendations. Suspected novel and variant influenza, pediatric influenza-associated deaths, influenza-associated ICU hospitalizations and outbreaks of influenza-like illness in a congregate setting should all be reported to CDPH via [INEDSS](#)<sup>2</sup>. Since September 30, 2012, CDPH has not received any reports of these types of influenza cases.

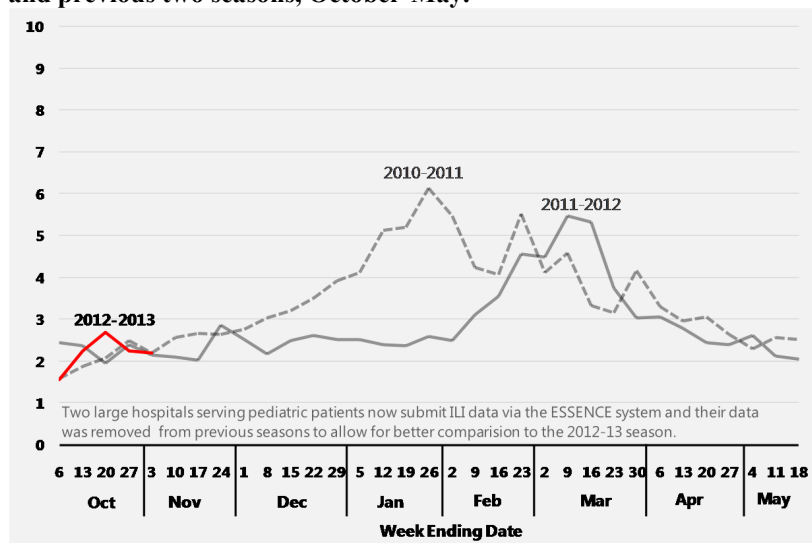
## How much influenza-like illness is occurring?

CDPH receives data from over 50 surveillance sites across Chicago, which report the total number of patient visits seen weekly, and of those visits, the number with influenza-like illness (ILI) (i.e., fever of 100°F or greater, with cough or sore throat). All hospitals in Chicago that provide emergent care are required to report on a weekly basis the total number of emergency department visits, and of those visits, the number with ILI. For the week of October 28-November 3, 2012 (week 44), with 11 hospitals reporting, **2.2%** of emergency department visits were due to ILI. Currently, ILI activity is at similar levels seen in previous influenza seasons (**Figure 1**).

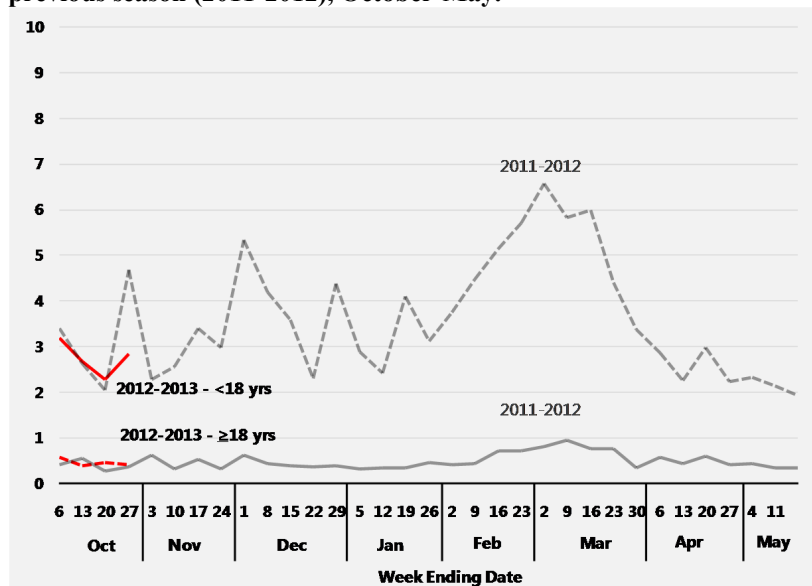
ESSENCE is an electronic syndromic surveillance system that utilizes emergency department chief complaint data submitted daily by participating Chicago hospitals. ILI activity is determined by an algorithm solely based on the patient's chief complaint and does not take into account the entire medical record, as the ILI activity reported in Figure 1 does. Currently, 10 Chicago hospitals submit data to ESSENCE.

**Figure 2** shows the percent of the total emergency department visits due to ILI for pediatric patients (**2.9%**) and adult patients (**<1%**) for the

**Figure 1. Percent of emergency department visits attributed to influenza-like illness based on manual reporting as determined by individual hospitals, Chicago, by week, for current season (2012-2013) and previous two seasons, October-May.**



**Figure 2. Percent of emergency department visits attributed to influenza-like illness based on chief complaint data submitted to ESSENCE, Chicago, by week, for current season (2012-2013) and previous season (2011-2012), October-May.**



<sup>1</sup>[http://www.cityofchicago.org/city/en/depts/cdp/provdrs/flu/svcs/cdp\\_flu\\_shot\\_sitesacrosschicago.html](http://www.cityofchicago.org/city/en/depts/cdp/provdrs/flu/svcs/cdp_flu_shot_sitesacrosschicago.html); <sup>2</sup><https://dph.partner.illinois.gov/>

week of October 28-November 3, 2012 plus the ILI activity by age group for the previous season.

Several outpatient clinics and two large outpatient clinic networks throughout Chicago participate in CDC's Influenza-like Illness Surveillance Network (ILINet) by reporting on the number of patients with ILI seen weekly. From October 28-November 3, 2012, with 14 outpatient clinics reporting, 2.9% of doctor's office visits were due to influenza-like illness (Figure 3).

### Which influenza strains are circulating?

Data on influenza virus test results are reported by Chicago laboratories performing influenza subtyping. For the week of October 21-27, 2012, with 5 laboratories reporting, 5 of the 195 (2.6%) specimens tested for influenza were positive. Among the positive specimens, 4 typed as influenza A (H3) and 1 typed as influenza B. Since September 2012, 9 of 969 (<1%) specimens tested for influenza have been positive, with 6 typed as influenza A (H3) and 3 typed as influenza B. Table 1 shows the total number of specimens tested for influenza so far this season and the number positive compared to the same time period last season.

### Where can I get more information?

The Centers for Disease Control and Prevention's [FluView](#)<sup>3</sup> 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](#)<sup>4</sup> and [Suburban Cook County](#)<sup>5</sup> are also available online. Current and archived issues of the *Chicago Flu Update* can be found on the CDPH website section [Current Flu Situation in Chicago](#)<sup>6</sup>.

### National Snapshot (October 28-November 3, 2012)

**Viral Surveillance:** Of 3,277 specimens tested and reported by U.S. World Health Organization (WHO) and National Respiratory and Enteric Virus Surveillance System (NREVSS) collaborating laboratories during week 44, 227 (6.9%) were positive for influenza.

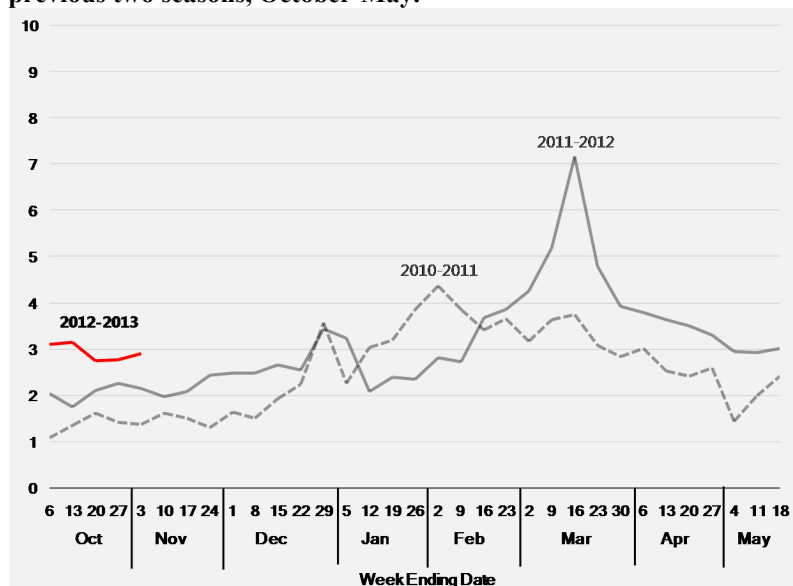
**Pneumonia and Influenza Mortality:** The proportion of deaths attributed to pneumonia and influenza (P&I) was slightly above the epidemic threshold.

**Influenza-associated Pediatric Deaths:** No influenza-associated pediatric deaths were reported.

**Outpatient Illness Surveillance:** The proportion of outpatient visits for influenza-like illness (ILI) was 1.3%, which is below the national baseline of 2.2%. All 10 regions reported ILI below region-specific baseline levels. One state experienced low ILI activity; New York City and 49 states experienced minimal ILI activity, and the District of Columbia had insufficient data.

**Geographic Spread of Influenza:** The geographic spread of influenza in 1 state was reported as regional; 8 states reported local activity; the District of Columbia and 32 states reported sporadic activity; Guam and 8 states reported no influenza activity, and Puerto Rico, the U.S. Virgin Islands, and 1 state did not report.

**Figure 3. Percent of outpatient visits attributed to influenza-like illness, Chicago, by week, for current season (2012-2013) and previous two seasons, October-May.**



**Table 1. Influenza testing results reported for surveillance weeks 40 through 44 by season, Chicago.**

| Laboratory Results              | Influenza Season |           |
|---------------------------------|------------------|-----------|
|                                 | 2011-2012        | 2012-2012 |
| # Specimens Tested*             | 617              | 969       |
| # Specimens Positive            | 2                | 9         |
| <b>Positive for Influenza A</b> | <b>1</b>         | <b>6</b>  |
| Subtype H3                      | 0                | 6         |
| Subtype 2009 H1N1               | 0                | 0         |
| Unsubtyped                      | 1                | 0         |
| <b>Positive for Influenza B</b> | <b>1</b>         | <b>3</b>  |

\*Six Chicago laboratories performing influenza subtyping that have consistently reported results for both seasons.

<sup>3</sup><http://www.cdc.gov/flu/weekly/index.htm>; <sup>4</sup><http://www.idph.state.il.us/flu/surveillance.htm>; <sup>5</sup><http://www.cookcountypublichealth.org/data-reports#Influenza>; <sup>6</sup>[http://www.cityofchicago.org/city/en/depts/cdp/supp\\_info/influenza/current\\_flu\\_situationinchicago2011.html](http://www.cityofchicago.org/city/en/depts/cdp/supp_info/influenza/current_flu_situationinchicago2011.html)