



**Austin Public Health  
Epidemiology and Disease Surveillance Unit**



**Travis County Influenza Surveillance**

**Summary** – Season 2016-2017 (Data through the week ending March 18, 2017).

**Travis County influenza and influenza-like illness (ILI) activity:**

- Since March 18<sup>th</sup>, influenza activity in Travis has decreased but still remain elevated with 26.2% of tests returning positive during week 11. Nationally, the percentage of respiratory specimens testing positive for influenza viruses was 17.8%, according to CDC.
- Timing of Flu season varies. While flu season has peaked, flu activity is still elevated and is expected to continue for several more weeks.
- Four influenza-associated deaths occurred until the week 11. No influenza-associated pediatrics deaths have been reported during this season.
- CDC recommends annual vaccination for everyone  $\geq 6$  months old. Is not too late to get the vaccine for the 2016-2017 influenza season. If you have not gotten vaccinated yet, you should get vaccinated now.
- For the week ending March 18, one outbreak of influenza was reported in a long-term care facility.
- Since the start of the 2016-2017 influenza season, the most common influenza subtype detected has been influenza A.
- Seasons in which influenza A (H3) predominates have been associated with more severe illness, particularly in young children and adults  $\geq 65$  years old.
- While influenza A (H3) viruses have predominated during the early season, the past two weeks have shown an increase in influenza B (Yamagata lineage). The vaccine is a good match to the circulating influenza.
- PCR testing is performed for specimens referred by area sentinel Influenza surveillance reporters. Providers interested in becoming sentinel providers may call the Austin/Travis County Health and Human Services Epidemiology and Health Statistics Unit at (512) 972-5555.

Austin/Travis County influenza surveillance does not attempt to capture all cases of influenza or influenza-like illness. These data should be used for trending purposes over time and for identifying types/strains of influenza that are occurring in the Austin area rather than for estimating the total number of cases.



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### Texas influenza activity (as for March 25, 2017 – MMWR week 12):

- Influenza activity has decreased in Texas over the past few weeks.
- Compared to the previous week, the percentage of specimens testing positive for influenza reported by public health and hospital laboratories and patient visits due to influenza-like illness (ILI) marginally decreased.
- Eight influenza outbreaks have been reported.
- No influenza-associated pediatric deaths were reported.
- In addition to flu, other respiratory viruses—especially RSV and rhino/enteroviruses—were detected in Texas during week ending March 25.
- There is increased risk for highly pathogenic avian influenza (HPAI) H5 virus identification in birds during the fall and winter migratory season. HPAI H5 has not been identified in Texas birds and would be expected to be seen in more northerly states first, but identifications are possible.
- Due to the annual epidemics of human infections with avian influenza A (H7N9) virus, CDC has recommended to Public health officials should consider H7N9 virus infection as a possible etiology among travelers returning from China with severe respiratory illness, especially if they have exposure to poultry.

### Preventive Actions:

- The CDC recommends that anyone six months of age and older should be vaccinated for the flu every flu season. Individuals who are at high risk are especially advised to be vaccinated. High risk individuals are as follows:
  - Persons 65 years of age and older
  - Pregnant women
  - Individuals with certain chronic medical conditions, including diabetes, asthma, heart and lung disease
  - Health care workers
  - Individuals who live with and/or care for high risk individuals
- In addition to the vaccine, there are certain preventive measures an individual can take to prevent the flu:
  - Wash your hands often with soap and water, or use an alcohol-based hand sanitizer if soap is not available.
  - Practice proper sneezing and coughing measures.
  - Avoid touching your nose, mouth and eyes.

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- Avoid coming into contact with an individual who is sick.
- If you are sick, stay home until you are fever free for 24 hours without the use of fever-reducing medications. CDC also recommends prompt treatment with influenza antiviral drugs for people who are very sick with flu and people who are at high risk of flu complications who get flu.

***Although these preventive actions are highly recommended they do not take the place of the flu vaccine.***

**Figure 1. Influenza Surveillance for the last 8 weeks, Travis County Providers <sup>1,2,3</sup>**

Week Ending	1/28/2017	2/4/17	2/11/17	2/18/17	2/25/17	3/4/17	3/11/17	3/18/17
MMWR <sup>4</sup> Week	4	5	6	7	8	9	10	11
# Influenza Rapid Tests Performed	1869	2455	3081	2930	2355	1933	1967	1316
# Total Positive Influenza Tests	468	818	1008	936	686	564	577	345
% Positive Influenza Tests	25.0%	33.3%	32.7%	31.9%	29.1%	29.2%	29.3%	26.2%
# Positive A Influenza	398	731	875	798	562	432	415	235
# Positive B Influenza	68	87	133	136	124	130	162	109
# Non-Differentiated Influenza <sup>5</sup>	2	0	0	2	0	2	0	1

Data source: Austin/Travis County Influenza surveillance reporters

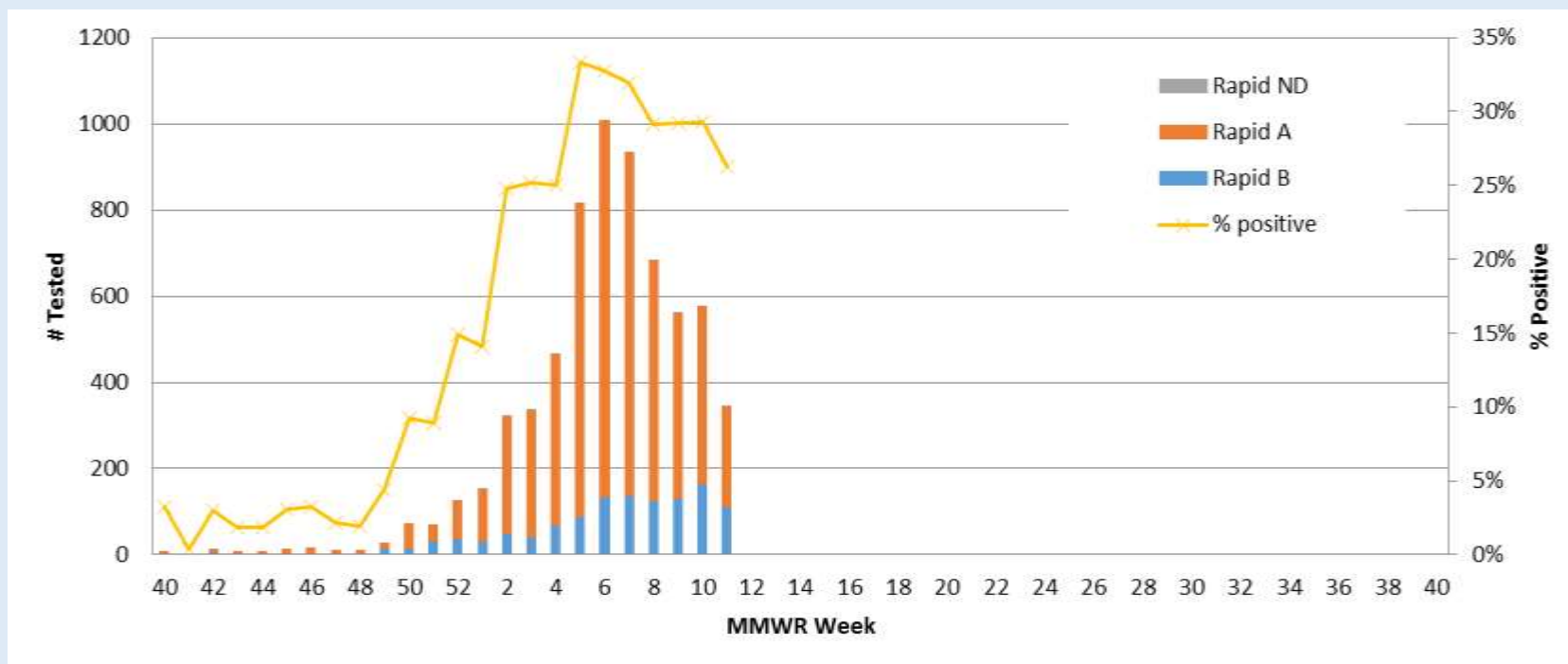
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**Figure 2. Number Tested and Percent Positive Rapid Influenza tests by Week,  
Travis County: 2016-2017 Influenza Season <sup>1,2,3,6</sup>**



Data source: Austin/Travis County Influenza surveillance reporters

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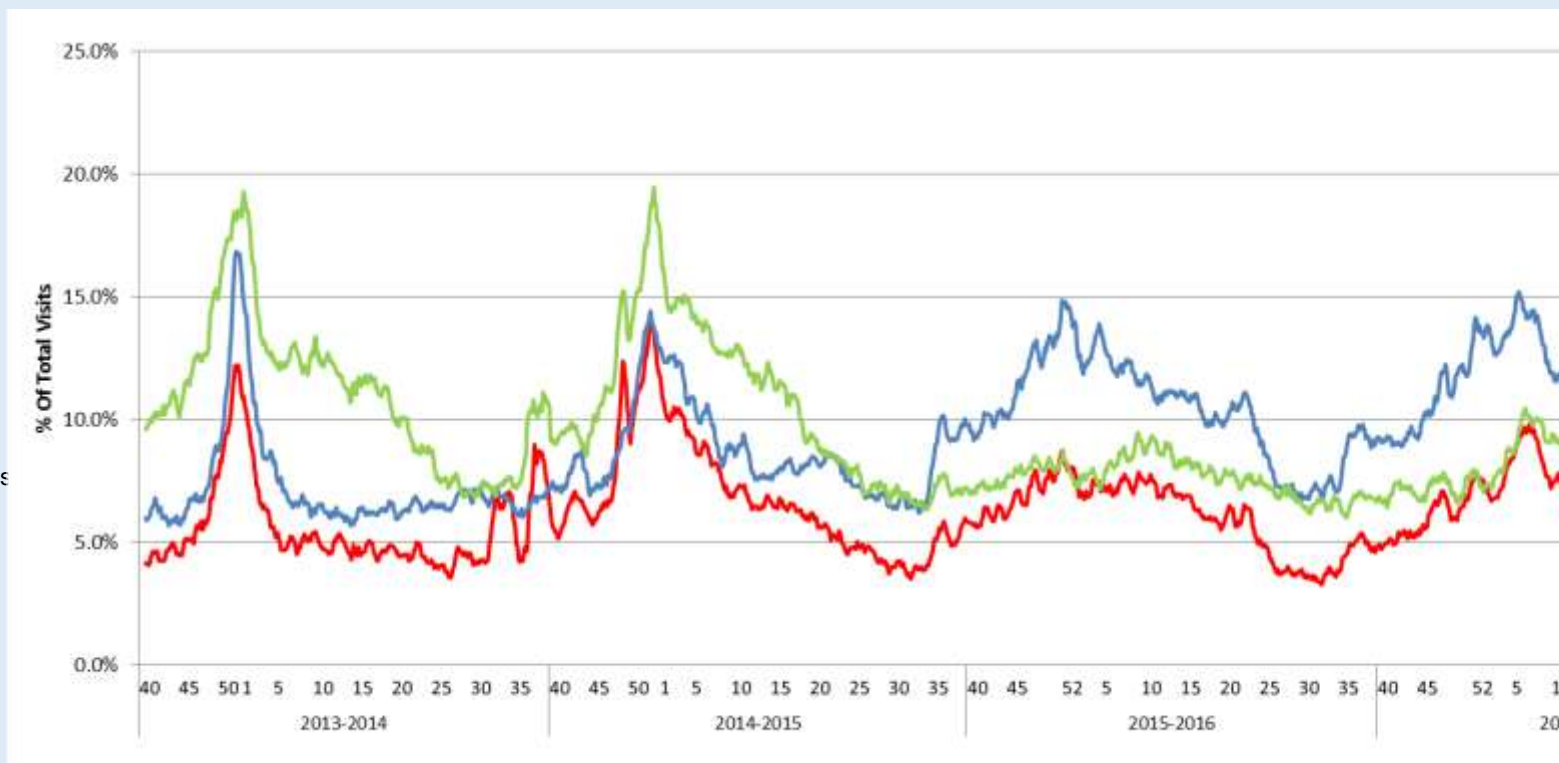


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### Figure 3. Real-time Outbreak and Disease Surveillance Data, Travis County: 2010-2017

Data source: University of Pitts



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**For additional information about Influenza surveillance, contact:**

*The Austin/Travis County Health and Human Services Epidemiology and Health Statistics Unit at (512) 972-5555*

***Other Helpful Resources:***

*Texas Department of State Health Services (DSHS)*

*<http://www.texasflu.org/>*

*World Health Organization (WHO)*

*<http://www.who.int/influenza/en/>*

*Centers for Disease Control and Prevention (CDC)*

*<https://www.cdc.gov/flu/index.htm>*

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- <sup>1</sup> Influenza is not a reportable condition in Texas; therefore, data is provided by sentinel surveillance reporters and is only a sample of the Influenza activity occurring in the Austin/Travis County area
- <sup>2</sup> Data represent rapid Influenza testing; these tests provide quick results reporting only Influenza A or B (no subtyping). Early in the flu season, results should be used with caution due to false positive results which can occur, especially during times when Influenza activity is low
- <sup>3</sup> Influenza data is collected from a variety of reporters; the number of reporters can vary from week to week
- <sup>4</sup> MMWR is the Morbidity and Mortality weekly report week published by the CDC
- <sup>5</sup> Influenza A is commonly split into 2 subtypes: H1N1 and H3N2. Both strains can circulate each Influenza season
- <sup>6</sup> Data for Austin/Travis County ILI reporters only; the number of reporters can vary from week to week

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