

# FLU EXPRESS



*Flu Express* is a weekly report produced by the Respiratory Disease Office of the Centre for Health Protection. It monitors and summarizes the latest local and global influenza activities.

## Local Situation of Influenza Activity (as of May 3, 2017)

**Reporting period: Apr 23 – 29, 2017 (Week 17)**

- According to the latest surveillance data, the local influenza activity has increased in the past few weeks.
- From May 5, 2017 onwards, the Centre for Health Protection (CHP) will collaborate with the Hospital Authority (HA) and private hospitals to reactivate the enhanced surveillance for severe seasonal influenza cases (i.e. influenza-associated admissions to intensive care unit or deaths) among patients aged 18 or above in order to monitor the severity of influenza infection. Besides, the CHP continues to routinely monitor severe paediatric influenza-associated complications or deaths among people aged below 18 years.
- Apart from adopting personal, hand and environmental hygiene practices against respiratory illnesses, those members of the public who have not received influenza vaccine are urged to get vaccinated as soon as possible for personal protection.
- Influenza can cause serious illnesses in high-risk individuals and even healthy persons. Given that seasonal influenza vaccines are safe and effective, all persons aged 6 months or above except those with known contraindications are recommended to receive influenza vaccine for personal protection.
- The Vaccination Subsidy Scheme (VSS) 2016/17 was launched on Oct 20, 2016. Subsidised vaccination has been provided for children aged 6 months to under 12 years, elderly aged 65 years or above, pregnant women, persons with intellectual disabilities and persons receiving Disability Allowance (DA). In addition, starting from Nov 3, 2016, the eligibility of free vaccination under the Government Vaccination Programme has been expanded to include children aged 6 years to under 12 years from families receiving Comprehensive Social Security Assistance or holding valid Medical Waiver Certificates as well as persons receiving DA who are existing clients of public clinics and hospitals. Please refer to the webpages ([http://www.chp.gov.hk/en/view\\_content/46107.html](http://www.chp.gov.hk/en/view_content/46107.html)) and ([http://www.chp.gov.hk/en/view\\_content/18630.html](http://www.chp.gov.hk/en/view_content/18630.html)) for details.

### Influenza-like-illness surveillance among sentinel general outpatient clinics and sentinel private doctors, 2013-17

In week 17, the average consultation rate for influenza-like illness (ILI) among sentinel general outpatient clinics (GOPCs) was 4.0 ILI cases per 1,000 consultations, which was higher than 3.6 recorded in the previous week (Figure 1, left). The average consultation rate for ILI among sentinel private doctors was 49.9 ILI cases per 1,000 consultations, which was higher than 31.6 recorded in the previous week (Figure 1, right).

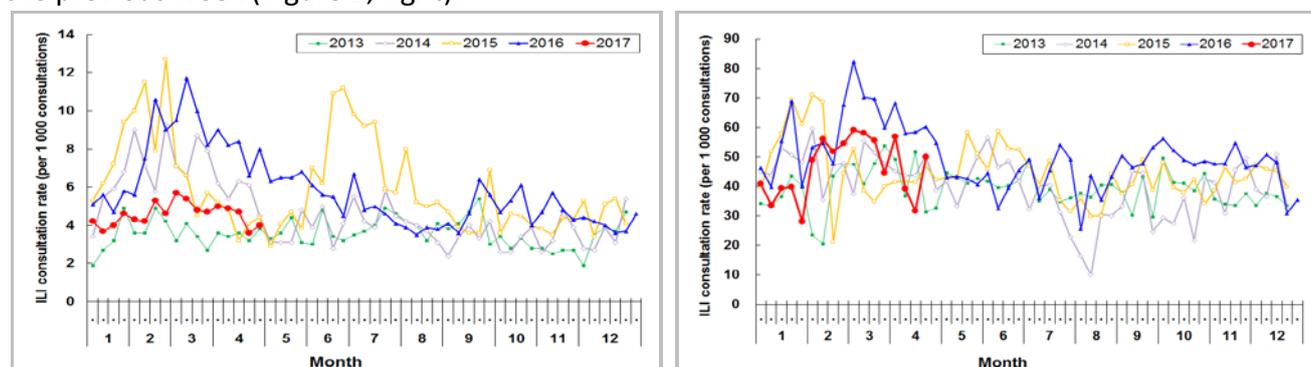


Figure 1 ILI consultation rate at sentinel GOPCs (left) and private doctors (right), 2013-17

## Laboratory surveillance, 2013-17

Among the respiratory specimens received in week 17, 398 (10.08%) were tested positive for seasonal influenza viruses, including 126 (3.19%) influenza A(H1), 223 (5.65%) influenza A(H3), 39 (0.99%) influenza B and 10 (0.25%) influenza C. The percentage of respiratory specimens tested positive for seasonal influenza viruses last week was 10.08%, which was higher than 8.44% recorded in the previous week (Figure 2). Among the influenza viruses detected in the last week, the proportions of A(H3), A(H1), B and C were 56.0%, 31.7%, 9.8% and 2.5% respectively.

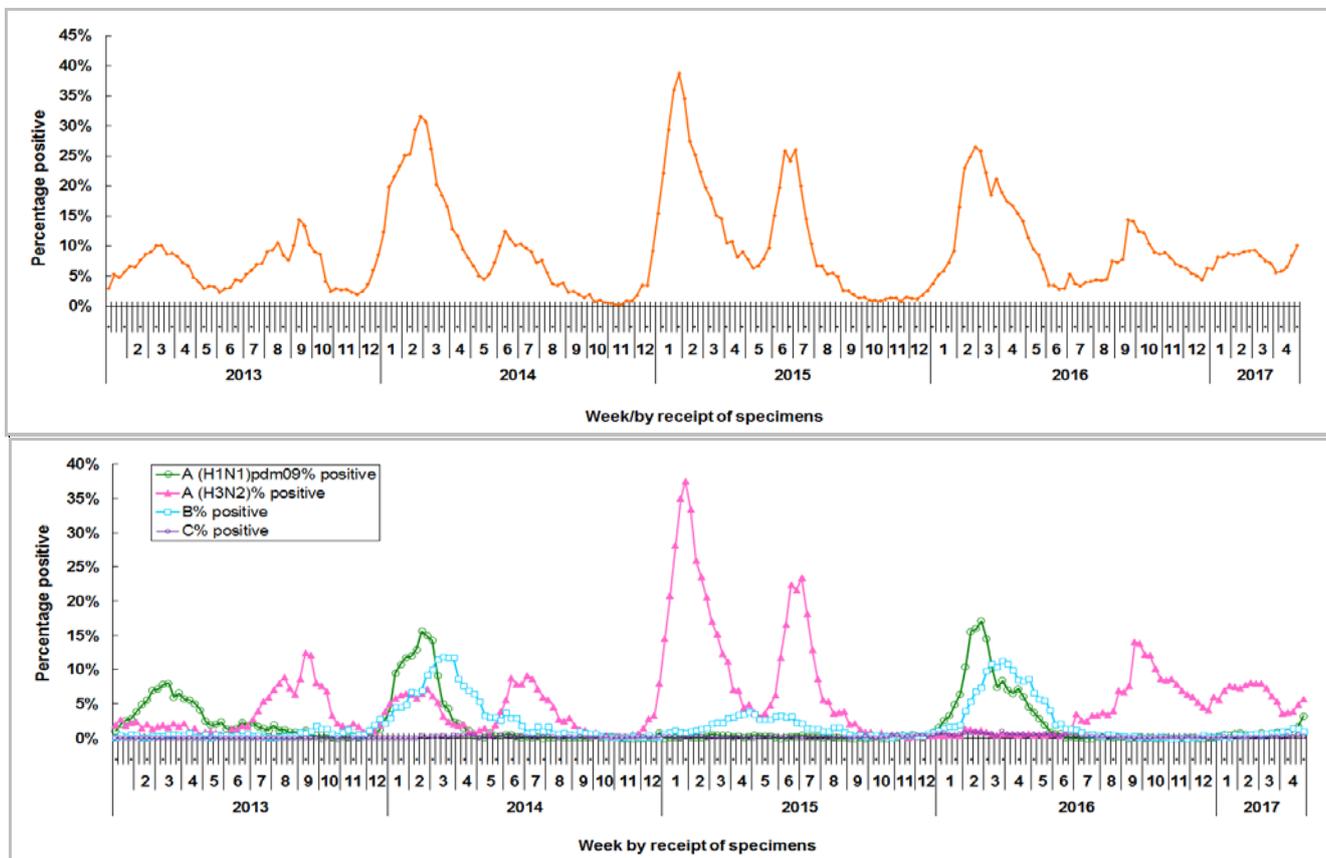


Figure 2 Percentage of respiratory specimens tested positive for influenza viruses, 2013-17 (upper: overall positive percentage, lower: positive percentage by subtypes)

## Influenza-like illness outbreak surveillance, 2013-17

In week 17, four ILI outbreak occurring in schools/institutions were recorded (affecting 21 persons), as compared to one outbreak recorded in the previous week (affecting four persons) (Figure 3). In the first 4 days of week 18 (Apr 30 to May 3, 2017), four institutional ILI outbreaks were recorded (affecting 18 persons).

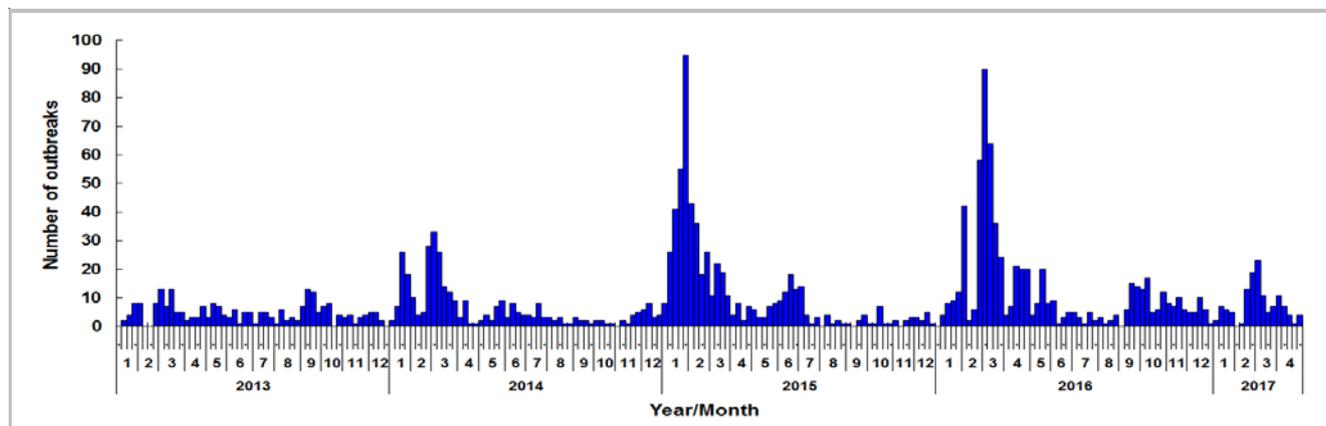


Figure 3 ILI outbreaks in schools/institutions, 2013-17

## Rate of influenza-like illness syndrome group in accident and emergency departments, 2013-17<sup>#</sup>

In week 17, the rate of the influenza-like illness syndrome group in the accident and emergency departments (AED) was 153.4 (per 1,000 coded cases), which was lower than the rate of 160.6 in the previous week (Figure 4).

*#Note: The influenza-like illness syndrome group includes codes such as influenza, upper respiratory tract infection, fever, cough, throat pain, and pneumonia.*

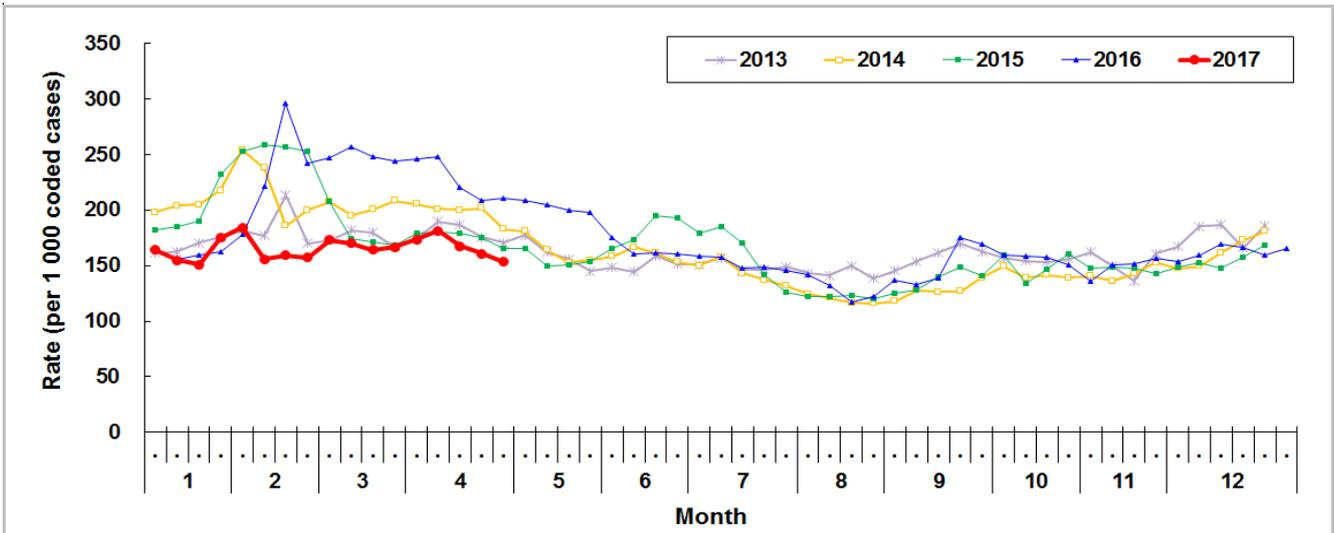


Figure 4 Rate of ILI syndrome group in AED, 2013-17

## Influenza associated hospital admission rates and deaths in public hospitals based on discharge coding, 2013-17

In week 17, the admission rates in public hospitals with principal diagnosis of influenza for persons aged 0-4 years, 5-9 years, 10-64 years and 65 years or above were 1.47, 0.48, 0.06 and 0.31 cases (per 10,000 people in the age group) respectively, as compared to 0.89, 0.34, 0.08 and 0.30 cases in the previous week (Figure 5). Weekly number of deaths with any diagnosis of influenza is also shown in Figure 5.

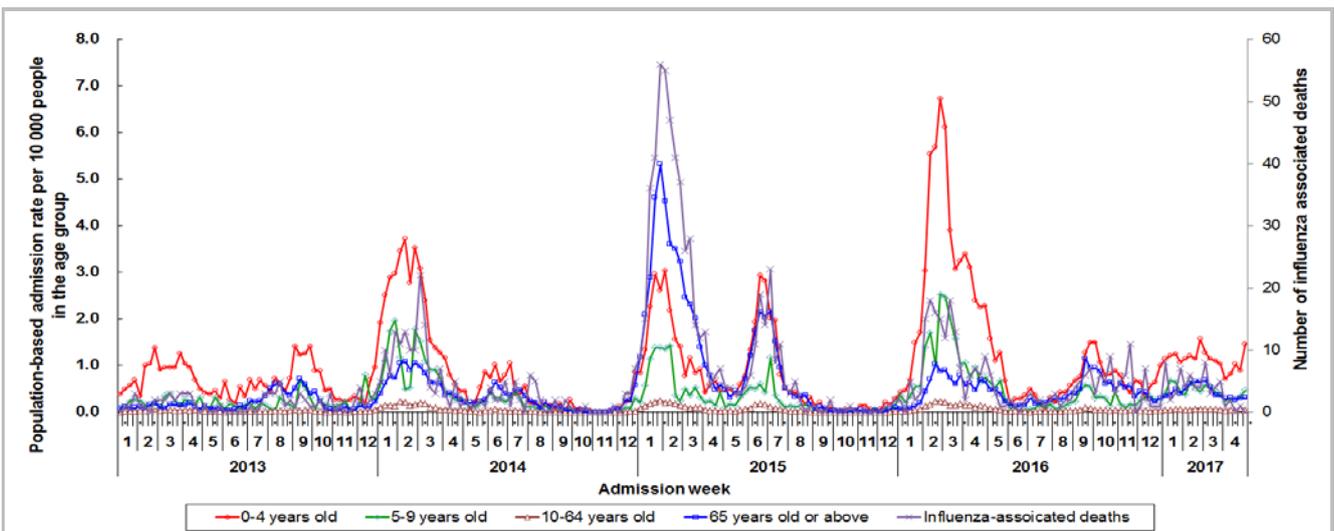


Figure 5 Influenza associated hospital admission rates and deaths, 2013-17

### Fever surveillance at sentinel child care centres/ kindergartens, 2013-17

In week 17, 0.54% of children in the sentinel child care centres/ kindergartens (CCC/ KG) had fever (38°C or above) as compared to 0.88% recorded in the previous week (Figure 6).

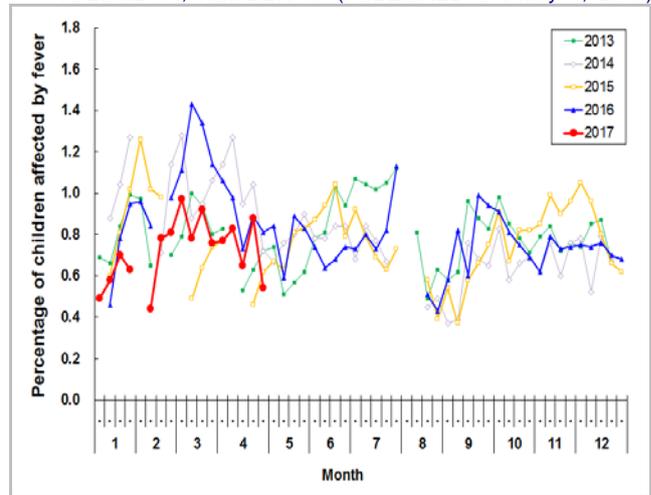


Figure 6 Percentage of children with fever at sentinel CCC/ KG, 2013-17

### Fever surveillance at sentinel residential care homes for the elderly, 2013-17

In week 17, 0.08% of residents in the sentinel residential care homes for the elderly (RCHEs) had fever (38°C or above), as compared to 0.11% recorded in the previous week (Figure 7).

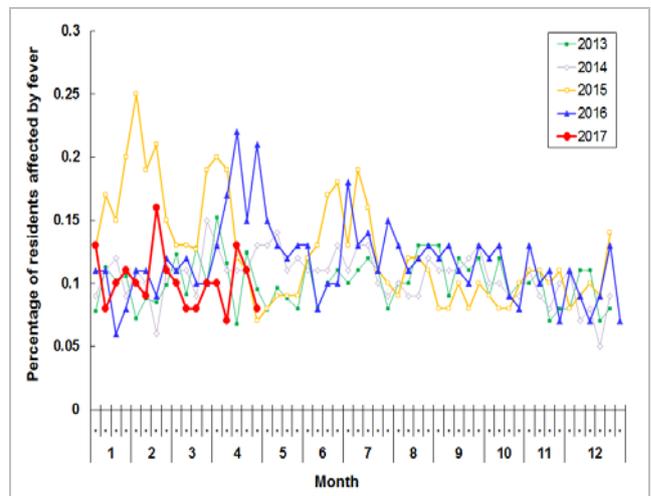


Figure 7 Percentage of residents with fever at sentinel RCHE, 2013-17

### Influenza-like illness surveillance among sentinel Chinese medicine practitioners, 2013-17

In week 17, the average consultation rate for ILI among Chinese medicine practitioners (CMPs) was 0.83 ILI cases per 1,000 consultations as compared to 2.02 recorded in the previous week (Figure 8).

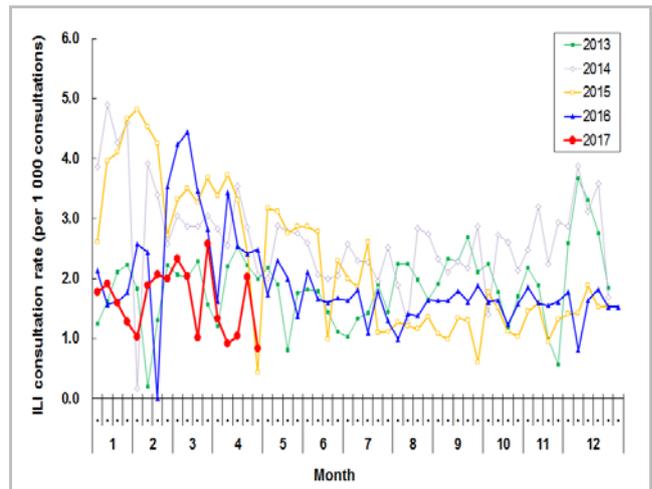


Figure 8 ILI consultation rate at sentinel CMP, 2013-17

## Surveillance of severe paediatric influenza-associated complication/death (Aged below 18 years)

- In week 17 and the first 4 days of week 18 (Apr 30 to May 3), there were no new cases of severe paediatric influenza-associated complication/death.

## Surveillance of oseltamivir resistant influenza A(H1N1)pdm09 virus infection

- In week 17 and the first 4 days of week 18 (Apr 30 to May 3), there were no new reports of oseltamivir (Tamiflu) resistant influenza A(H1N1)pdm09 virus infection. There are totally 48 reports of oseltamivir resistant influenza A(H1N1)pdm09 virus detected in Hong Kong since 2009.

## Global Situation of Influenza Activity

In most areas in the Northern Hemisphere, the influenza activities were decreasing, but some areas remained above the seasonal threshold. The predominating virus was influenza A(H3N2), but the proportion of influenza B is increasing.

- In the United States (week ending Apr 22, 2017), influenza activity decreased. The proportion of outpatient visits for ILI was 1.8%, which was below the national baseline of 2.2%.
- In Canada (week ending Apr 22, 2017), the overall influenza activity continued to decline slowly. The number of tests positive for influenza declined slightly compared to the previous week. The proportion of detections due to influenza B has been steadily increasing since mid-February and reached 60% in the previous week. To date this season, influenza A(H3N2) is the most common subtype detected.
- In the United Kingdom (week ending Apr 23, 2017), influenza activity continued to decrease across all indicators. The positivity of influenza detection was 4.3% in the week ending Apr 23, which was below the threshold of 8.6% for 2016/17.
- In Europe (week ending Apr 23, 2017), influenza activity across the region decreased further with 38 out of 39 countries reporting low influenza activity. The proportion of influenza virus detections among sentinel surveillance specimens was 13%, which was slightly lower than that in the previous week (15%), but was still above the seasonal threshold of 10%. The proportion of influenza B viruses exceeded the proportion of influenza A viruses in sentinel detections, but the overall number of influenza B virus detections remained low.
- In Taiwan (week ending Apr 22, 2017), the proportions of ILI cases in emergency and outpatient departments were similar to the previous week. The predominating viruses were influenza A(H3N2), but influenza B constituted 23% of the influenza detection recently.
- In Japan (week ending Apr 23, 2017), the average number of reported ILI cases per sentinel site increased to 4.06 in the week ending Apr 23 from 3.98 recorded in the previous week, and was still higher than the baseline level of 1.00.

### Sources:

Information have been extracted from the following sources when updates are available: [United States Centers for Disease Control and Prevention](#), [Public Health Agency of Canada](#), [Public Health England](#), [Joint European Centre for Disease Control and Prevention-World Health Organization/Flu News Europe](#), [Taiwan Centers for Disease Control](#) and [Japan Ministry of Health](#).