

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 Jun 15, 2016)

Reporting period: Jun 5 – 11, 2016 (Week 24)

- The latest surveillance data showed that the local influenza activity remained at a low level.
- 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.
- Eligible children (aged between six months and less than 6 years, or 6 years old or above attending a kindergarten or child care centre in Hong Kong), elderly (aged 65 years or above) and eligible persons with intellectual disabilities can be subsidised for seasonal influenza vaccination from enrolled private doctors participating in the Government's vaccination subsidy schemes starting from Oct 15, 2015. Elderly aged 65 or above living in the community can also receive free vaccination from General Out-patient Clinics under the HA and designated Elderly Health Centres of the Department of Health since Nov 10, 2015. Details are available from the vaccination schemes website (http://www.chp.gov.hk/en/view_content/17980.html).

Influenza-like-illness surveillance among sentinel general outpatient clinics and sentinel private doctors, 2012-16

In week 24, the average consultation rate for influenza-like illness (ILI) among sentinel general outpatient clinics (GOPCs) was 5.5 ILI cases per 1,000 consultations, which was similar to 5.6 recorded in the previous week (Figure 1, left). The average consultation rate for ILI among sentinel private doctors was 32.6 ILI cases per 1,000 consultations, which was lower than 44.5 recorded in the previous week (Figure 1, right).

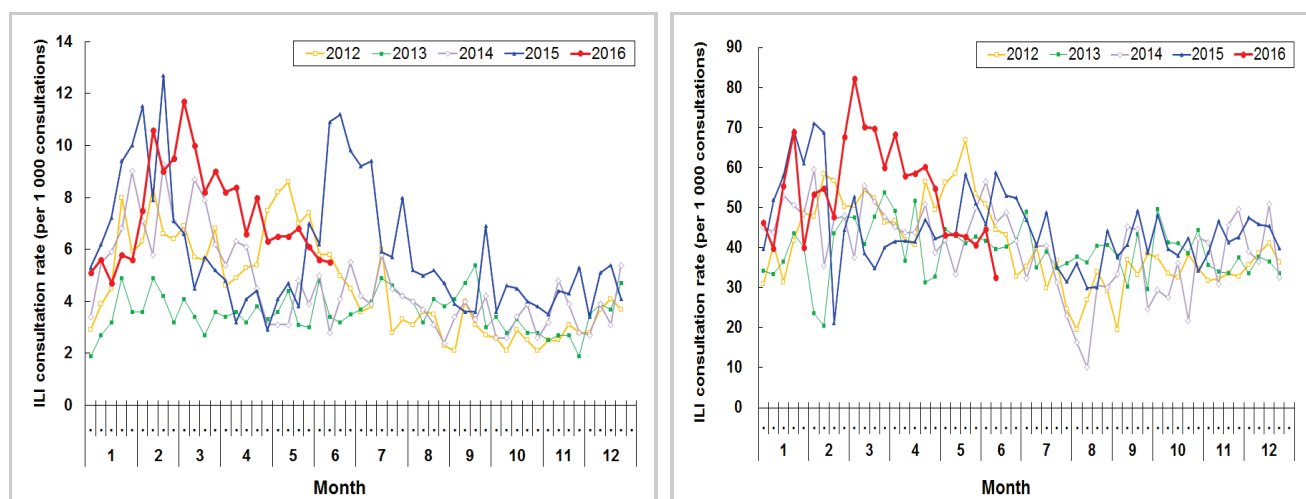


Figure 1 ILI consultation rate at sentinel GOPCs (left) and private doctors (right), 2012-16

Laboratory surveillance, 2012-16

Among the respiratory specimens received in week 24, 113 (3.42%) were tested positive for seasonal influenza viruses, including 22 (0.67%) influenza A(H1), 9 (0.27%) influenza A(H3), 72 (2.18%) influenza B and 10 (0.30%) influenza C. The percentage of respiratory specimens tested positive for seasonal influenza viruses last week was 3.42%, which was slightly lower than 3.52% recorded in the previous week (Figure 2). Among the influenza viruses detected in the last week, the proportions of B, A(H1), C and A(H3) were 63.7%, 19.5%, 8.9% and 8.0% respectively.

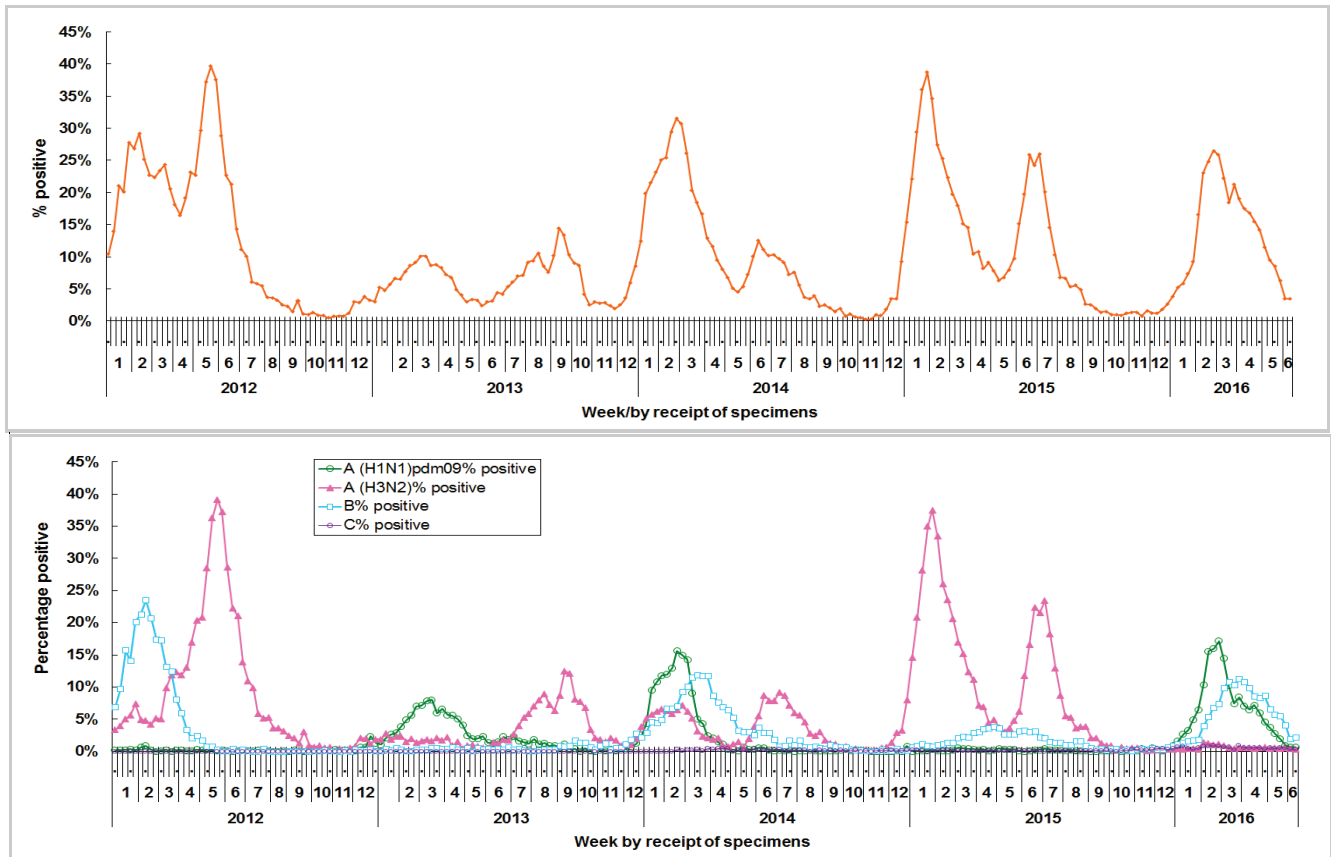


Figure 2 Percentage of respiratory specimens tested positive for influenza viruses, 2012-16 (upper: overall positive percentage, lower: positive percentage by subtypes)

Influenza-like illness outbreak surveillance, 2012-16

In week 24, one ILI outbreak occurring in an institution (affecting 5 persons) was recorded, as compared to 9 outbreaks (affecting 45 persons) recorded in the previous week (Figure 3). In the first 4 days of week 25 (Jun 12 to 15, 2016), one institutional ILI outbreak were recorded (affecting 3 persons).

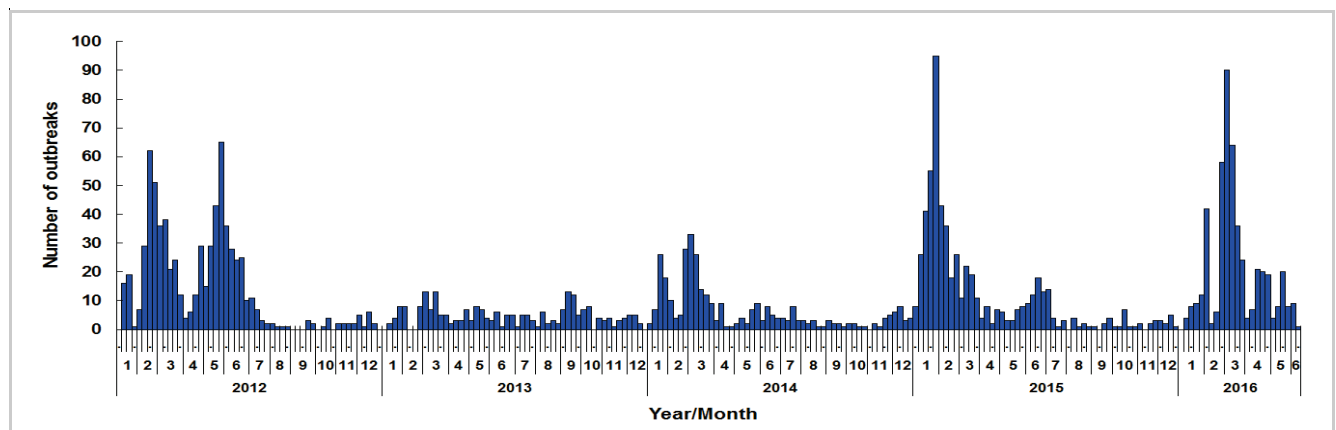


Figure 3 ILI outbreaks in schools/institutions, 2012-16

Rate of influenza-like illness syndrome group in accident and emergency departments, 2012-16[#]

In week 24, the rate of the influenza-like illness syndrome group in the accident and emergency departments (AED) was 162.0 (per 1,000 coded cases), which was higher 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.

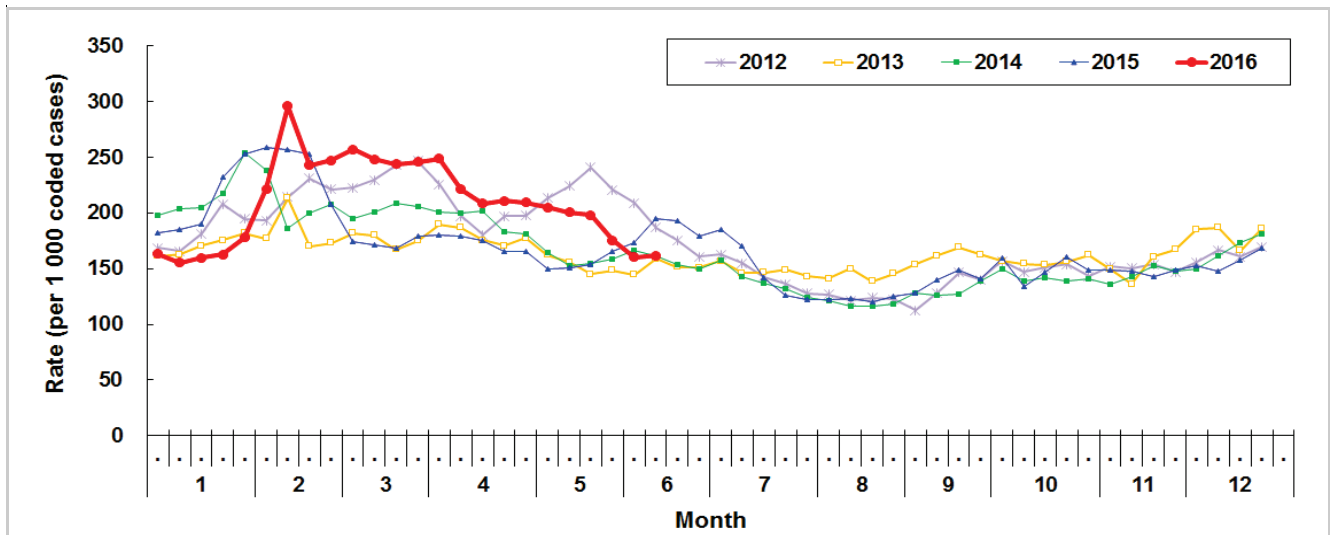


Figure 4 Rate of ILI syndrome group in AED, 2012-16

Influenza associated hospital admission rates and deaths in public hospitals based on discharge coding, 2012-16

In week 24, 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 0.28, 0.11, 0.03 and 0.08 cases (per 10,000 people in the age group) respectively, as compared to 0.18, 0.11, 0.06 and 0.17 cases in the previous week (Figure 5). Weekly number of deaths with any diagnosis of influenza is also shown in Figure 5.

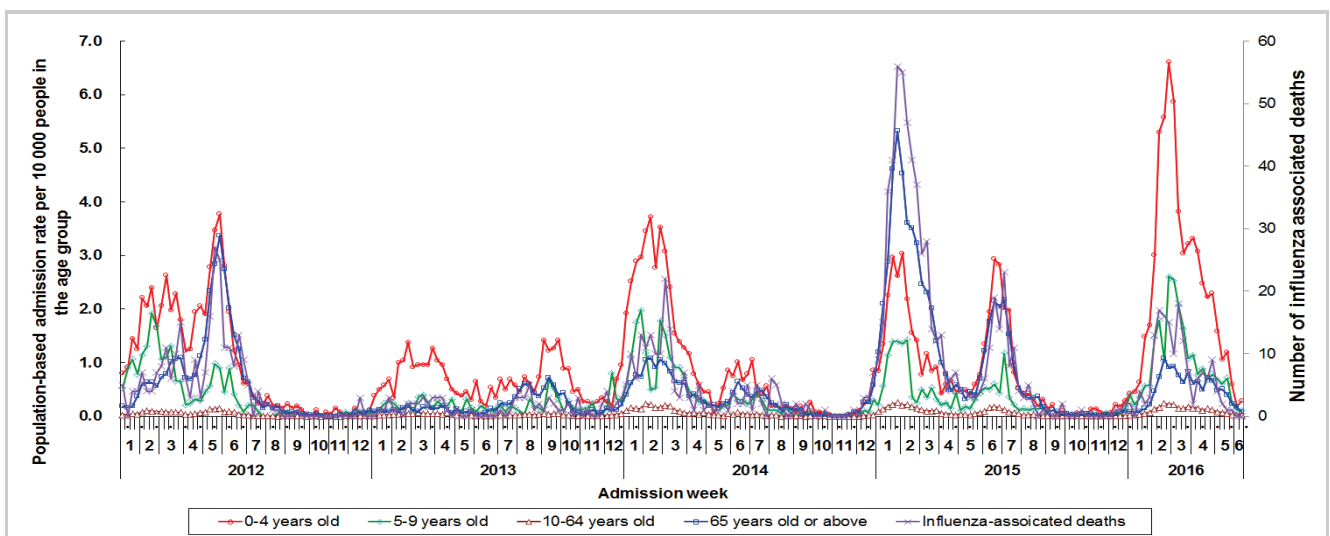


Figure 5 Influenza associated hospital admission rates and deaths, 2012-16

Fever surveillance at sentinel child care centres/ kindergartens, 2012-16

In week 24, 0.68% of children in the sentinel child care centres/ kindergartens (CCC/ KG) had fever (38°C or above) as compared to 0.64% in the previous week (Figure 6).

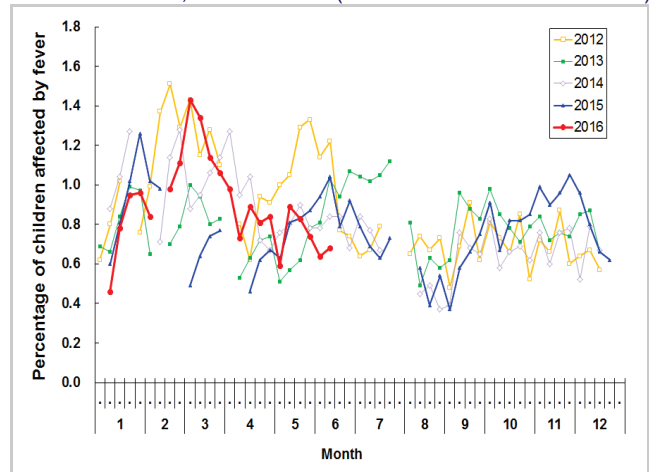


Figure 6 Percentage of children with fever at sentinel CCC/ KG, 2012-16

Fever surveillance at sentinel residential care homes for the elderly, 2012-16

In week 24, 0.10% of residents in the sentinel residential care homes for the elderly (RCHes) had fever (38°C or above) as compared to 0.08% in the previous week (Figure 7).

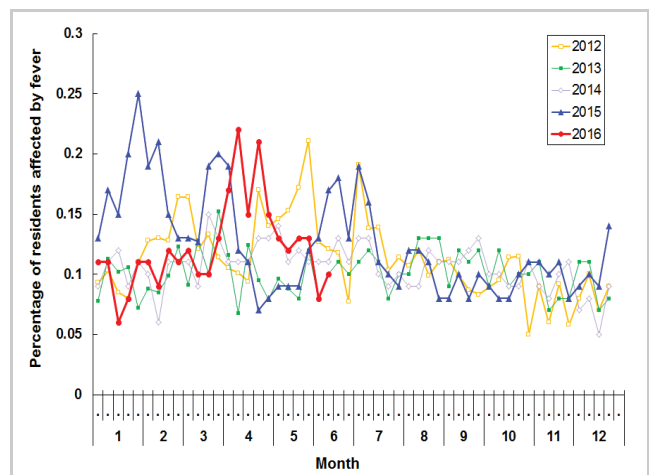


Figure 7 Percentage of residents with fever at sentinel RCHE, 2012-16

Influenza-like illness surveillance among sentinel Chinese medicine practitioners, 2012-16

In week 24, the average consultation rate for ILI among Chinese medicine practitioners (CMPs) was 1.60 ILI cases per 1,000 consultations as compared to 1.66 in the previous week (Figure 8).

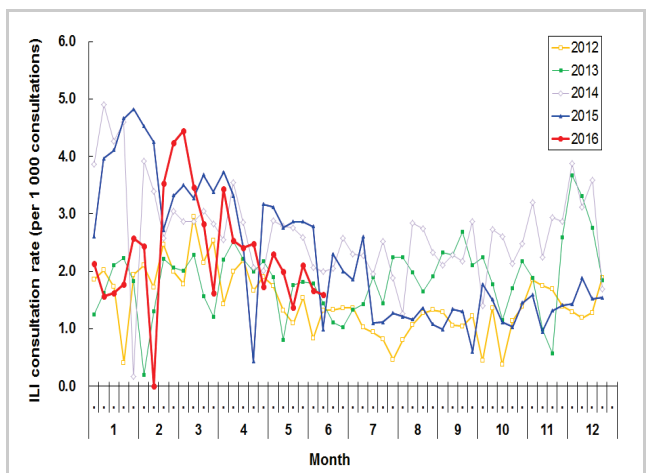


Figure 8 ILI consultation rate at sentinel CMP, 2012-16

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

- In week 24, one case of severe paediatric influenza-associated complication was reported involving a 3-year-old boy who had developed pneumonia. His respiratory specimen was tested positive for influenza B virus. He did not receive seasonal influenza vaccine. In the first 4 days of week 25 (Jun 12 to 15, 2016), there were no new cases of severe paediatric influenza-associated complication/death.

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

- In week 24 and the first 4 days of week 25 (Jun 12 to 15, 2016), 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 the United States (week ending Jun 4, 2016), influenza activity remained at a low level. The proportion of outpatient visits for ILI was 1.3%, which was below the national baseline of 2.1%.
- In the United Kingdom (week ending Jun 5, 2016), influenza activity continued to decrease and was below the baseline levels across surveillance schemes.
- In New Zealand (week ending June 12, 2016), the influenza activity was very low among consultation-seeking patients nationwide.

Sources:

Information have been extracted from the following sources when updates are available: [United States Centers for Disease Control and Prevention](#), [Public Health England](#) and [New Zealand Ministry of Health](#).