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FLU EXPRESS

衞生防護中心
Centre for Health Protection
保障市民健康
Protecting Hong Kong's health

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 Sep 21, 2016)

Reporting period: Sep 11 – 17, 2016 (Week 38)

- The latest surveillance data showed that the local influenza activity is increasing.
- From September 23, 2016 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.
- 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.
- In the coming 2016/17 season, subsidised vaccination will be provided for children aged 6 months to under 12 years, elderly aged 65 years or above, pregnant women, persons with intellectual disabilities and recipients of Disability Allowance (DA). In addition, the eligibility of free vaccination will be expanded to include children aged 6 years to under 12 years from families receiving Comprehensive Social Security Assistance or holding valid Medical Waiver Certificates and DA recipients who are existing clients of public clinics and hospitals (http://www.chp.gov.hk/en/content/116/45099.html). The various vaccination programmes will be launched by phase starting in mid-October and the details will be announced in due course.

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

In week 38, the average consultation rate for influenza-like illness (ILI) among sentinel general outpatient clinics (GOPCs) was 6.4 ILI cases per 1,000 consultations, which was higher than 4.6 recorded in the previous week (Figure 1, left). The average consultation rate for ILI among sentinel private doctors was 47.7 ILI cases per 1,000 consultations, which was higher than 46.4 recorded in the previous week (Figure 1, right).

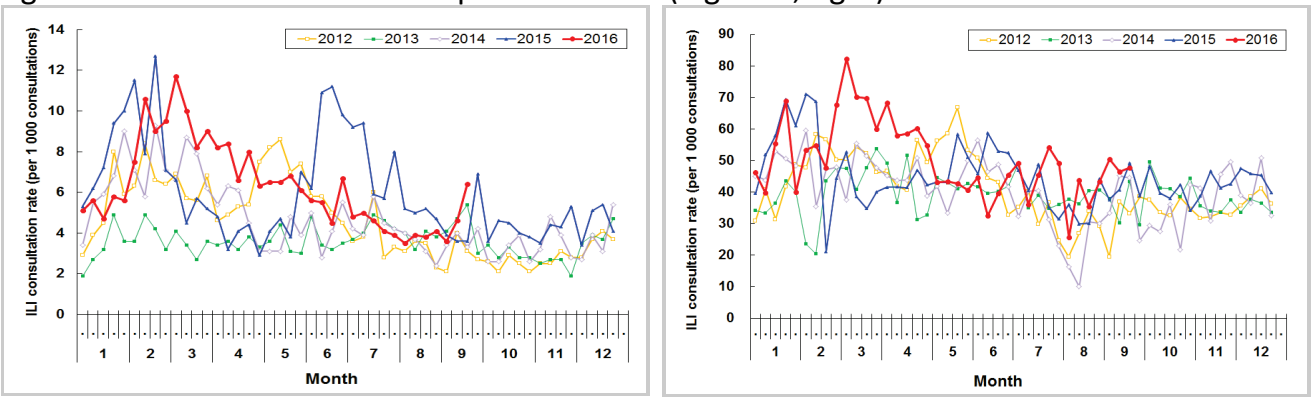

Figure 1 ILI consultation rate at sentinel GOPCs (left) and private doctors (right), 2012-16

Laboratory surveillance, 2012-16

Among the respiratory specimens received in week 38, 478 (14.36%) were tested positive for seasonal influenza viruses, including 3 (0.09%) influenza A(H1), 464 (13.94%) influenza A(H3), 10 (0.30%) influenza B and 1 (0.03%) influenza C. The percentage of respiratory specimens tested positive for seasonal influenza viruses last week was 14.36%, which was higher than 7.83% recorded in the previous week (Figure 2). Among the influenza viruses detected in the last week, the proportions of A(H3), B, A(H1) and C were 97.1%, 2.1%, 0.6% and 0.2% respectively.

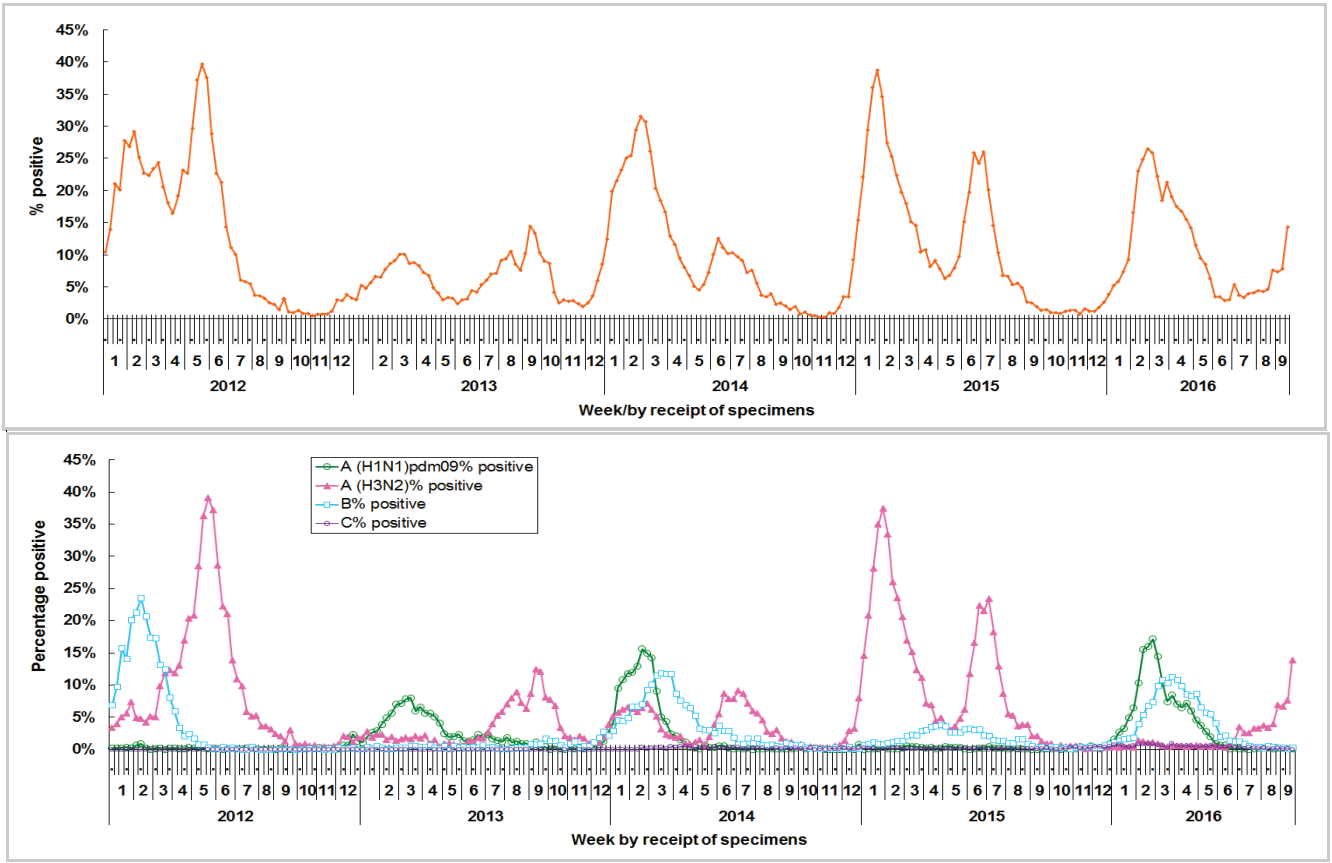

Figure 2 Percentage of respiratory specimens tested positive for influenza viruses, 2012-16 (upper: overall positive percentage, lower: positive percentage by subtypes)

Influenza-like illness outbreak surveillance, 2012-16

In week 38, 15 ILI outbreaks occurring in schools/institutions were recorded (affecting 112 persons), as compared to 6 outbreaks (affecting 27 persons) recorded in the previous week (Figure 3). In the first 4 days of week 39 (Sep 18 to 21, 2016), 12 institutional ILI outbreaks were recorded (affecting 50 persons).

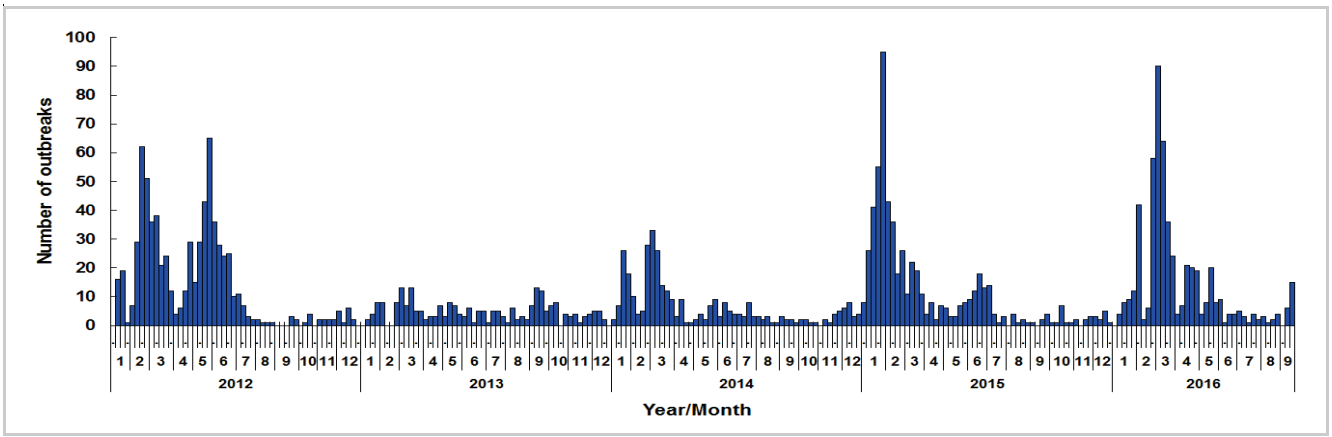

Figure 3 ILI outbreaks in schools/institutions, 2012-16

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

In week 38, the rate of the influenza-like illness syndrome group in the accident and emergency departments (AED) was 176.3 (per 1,000 coded cases), which was higher than the rate of 139.7 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.

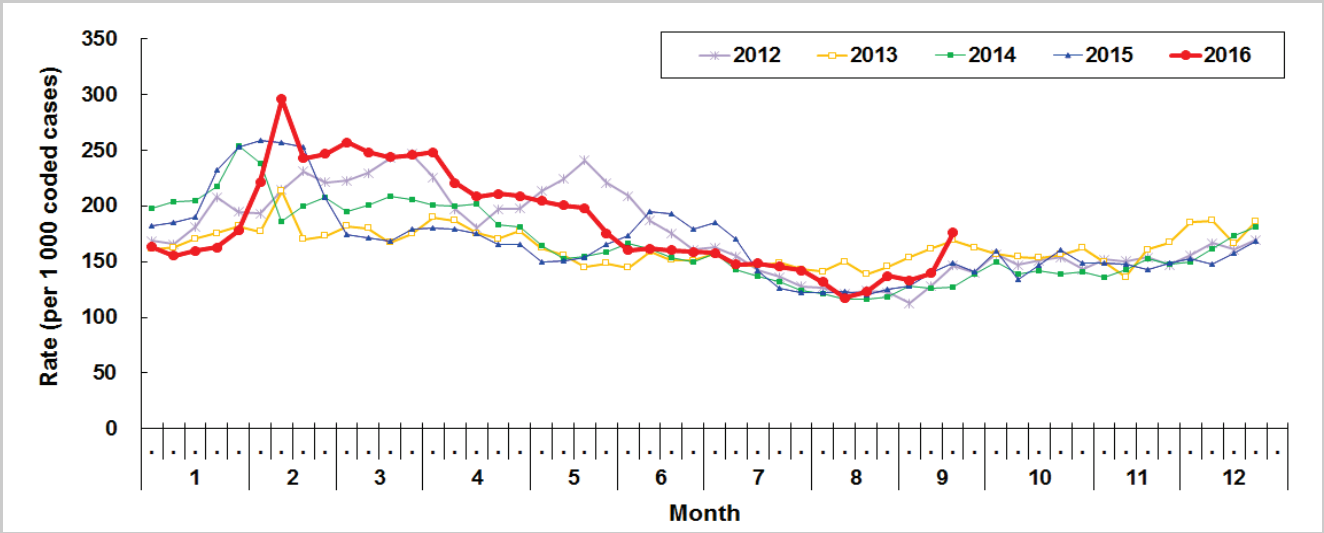

Figure 4 Rate of ILI syndrome group in AED, 2012-16

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

In week 38, 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 1.17, 0.54, 0.10 and 0.89 cases (per 10,000 people in the age group) respectively, as compared to 0.71, 0.43, 0.05 and 0.52 cases in the previous week (Figure 5). Weekly number of deaths with any diagnosis of influenza is also shown in Figure 5.

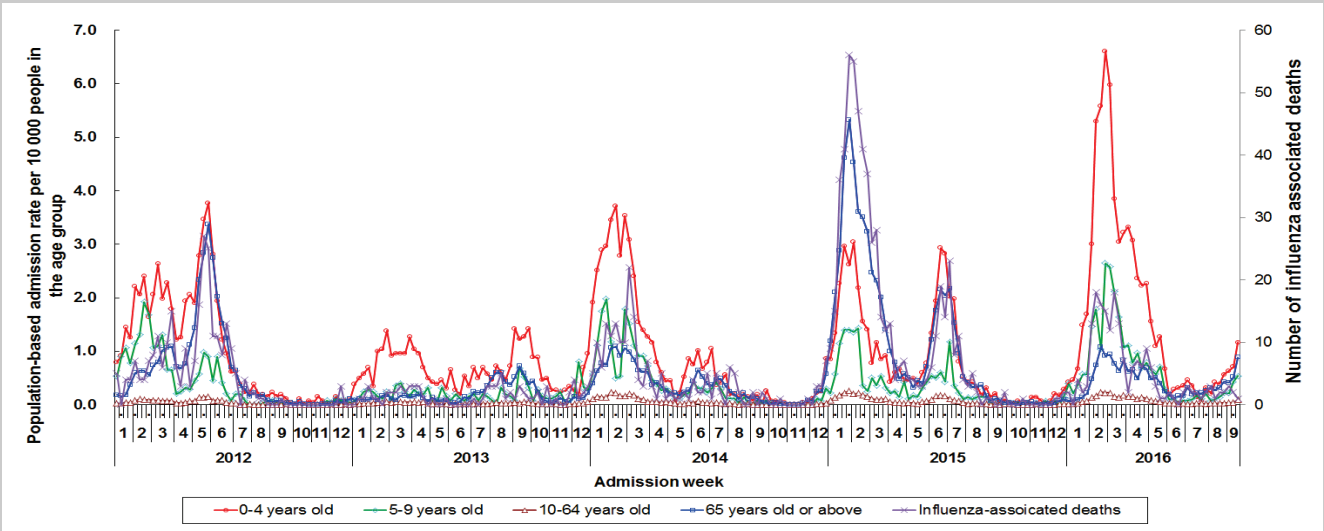

Figure 5 Influenza associated hospital admission rates and deaths, 2012-16

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

In week 38, 0.99% of children in the sentinel child care centres/ kindergartens (CCC/ KG) had fever (38°C or above) as compared to 0.60% in the previous week (Figure 6).

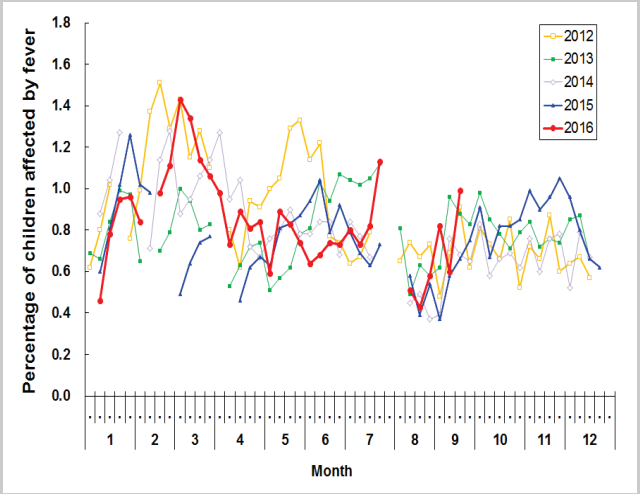

Figure 6 Percentage of children with fever at sentinel CCC/ KG, 2012-16

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

In week 38, 0.10% of residents in the sentinel residential care homes for the elderly (RCHEs) had fever (38°C or above) as compared to 0.11% in the previous week (Figure 7).

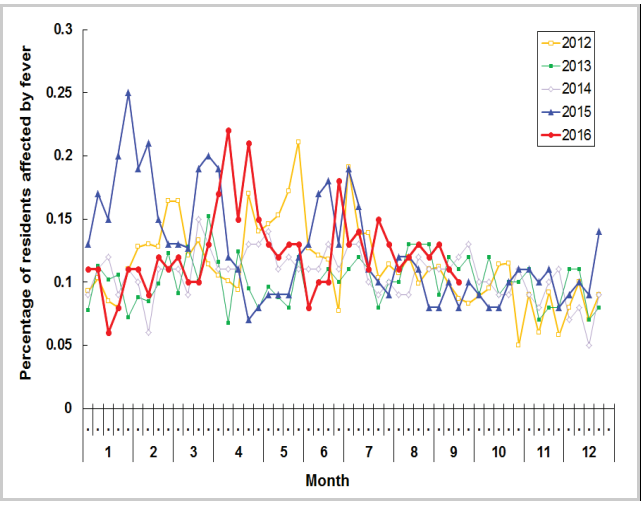

Figure 7 Percentage of residents with fever at sentinel RCHE, 2012-16

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

In week 38, the average consultation rate for ILI among Chinese medicine practitioners (CMPs) was 1.61 ILI cases per 1,000 consultations as compared to 1.79 recorded in the previous week (Figure 8).

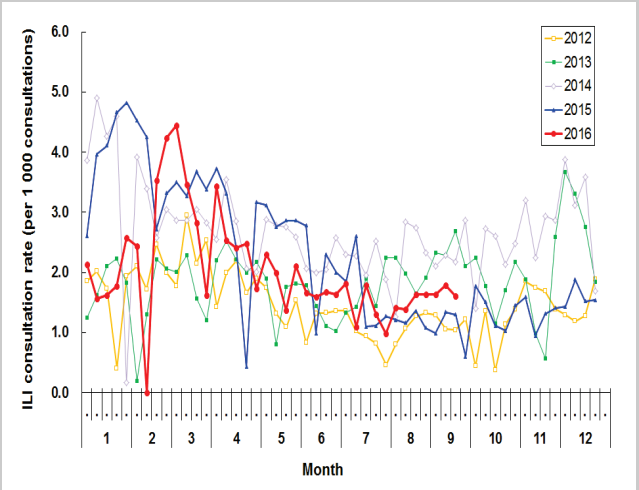

Figure 8 ILI consultation rate at sentinel CMP, 2012-16

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

- In week 38, one case of severe paediatric influenza-associated complication involving a 6-month-old boy who had developed pneumonia was reported. His respiratory specimen was tested positive for influenza A(H3). In the first 4 days of week 39 (Sep 18 to 21, 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 38 and the first 4 days of week 39 (Sep 18 to 21, 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 Sep 10, 2016), the influenza activity remained at a low level. The proportion of outpatient visits for ILI was 1.0%, which was below the national baseline of 2.1%.
- In Canada (week ending Sep 10, 2016), the influenza activity is at interseasonal levels with all regions reporting low to no influenza activity.
- In the United Kingdom (week ending Sep 11, 2016), the influenza activity remained low.
- In Australia (week ending Sep 2, 2016), the influenza activity continued to increase, with most regions reporting widespread and increasing activity. Influenza A(H3N2) was the dominating circulating virus in recent weeks.
- In New Zealand (week ending Sep 18, 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 Agency of Canada, Public Health England, Australian Department of Health and New Zealand Ministry of Health.