



Chicago Flu Update



City of Chicago

April 6, 2012

Chicago Department of Public Health

Rahm Emanuel, Mayor

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Bechara Choucair, MD, Commissioner

What is the risk?

Currently, the risk of influenza infection in the Chicago area continues to decline. The number of positive influenza specimens and the number of influenza-associated ICU hospitalizations reported to CDPH remain substantially lower compared to the same time period last season (Table 1). Vaccination is the best way to protect against human seasonal 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. Uninsured individuals and those with insurance that does not cover flu shots can [obtain a voucher for a free flu shot at Walgreens](#)¹. The Chicago Department of Public Health has influenza vaccine available at [CDPH immunization clinics](#)².

Are severe cases of influenza occurring?

Seven influenza-associated ICU hospitalizations were reported for week 13 (March 25-31, 2012). This is a 42% decrease from the peak reported so far this season. Since October 2011, 54 influenza-associated ICU hospitalizations have been reported. Among all hospitalized ICU cases, there was an equal distribution of those testing positive for influenza A and B, and 56% were ≥ 50 years (median: 55 years, range: 4 months-96 years); 39% had underlying lung disease (including asthma) and 20% required ventilator support. The racial/ethnic distribution of cases was 43% black, 30% Hispanic, 20% white, and 2% Asian/Pacific Islander (5% had no information for race/ethnicity). One death was reported. Suspected novel influenza, pediatric influenza-associated deaths, and influenza-associated ICU hospitalizations should all be reported to CDPH via [INEDSS](#)³. Outbreaks of influenza-like illness in a congregate setting are also reportable; in Chicago call (312) 746-5911.

How much influenza-like illness is occurring?

For the week of March 25-31, 2012, with 16 hospitals reporting, 5% of emergency room visits were due to ILI (i.e., fever of 100°F or greater, with cough or sore throat). This is over a percentage point lower than levels seen during the same surveillance week in 2011 (Figure 1). From March 25-31, 2012, with 13 outpatient clinics reporting, 6.3% of outpatient clinic visits were due to ILI. This is nearly four percentage points lower than the peak reported so far this season.

Which influenza strains are circulating?

Data on influenza virus test results are reported by Chicago laboratories performing influenza subtyping. For the week of March 25-31, 2012, with 6 laboratories reporting, 42 of 289 (14.5%) specimens tested for influenza were positive. Among the positive specimens, 15 typed as influenza A (8 H1N1, 5 H3N2, 2 untyped), and 27 typed as influenza B. This is the second consecutive surveillance week that the proportion of specimens testing positive for influenza B has been higher than for influenza A. Since October 2011, 420 out of 5,526 (7.6%) specimens tested for influenza have been positive, with 213 typed as influenza A (98 H1N1, 77 H3N2, and 38 not subtyped) and 207 typed as influenza B (Figure 2).

Where can I get more information?

The Centers for Disease Control and Prevention's [FluView](#)⁴ 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](#)⁵ and [Suburban Cook County](#)⁶ are also available online.

Table 1. Influenza testing results and ICU hospitalizations reported for surveillance weeks 40 through 13 by season, Chicago.

Influenza Season	# Specimens Tested*	# Specimens Positive	# ICU Hospitalizations
2010-2011	5,486	647	95
2011-2012	5,200	373	54
% Change	-5%	-42%	-43%

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

Figure 1. Weekly reported percent of emergency department visits attributed to influenza-like illness, Chicago, by week, for current season (2011-2012) and previous two seasons, October-May.

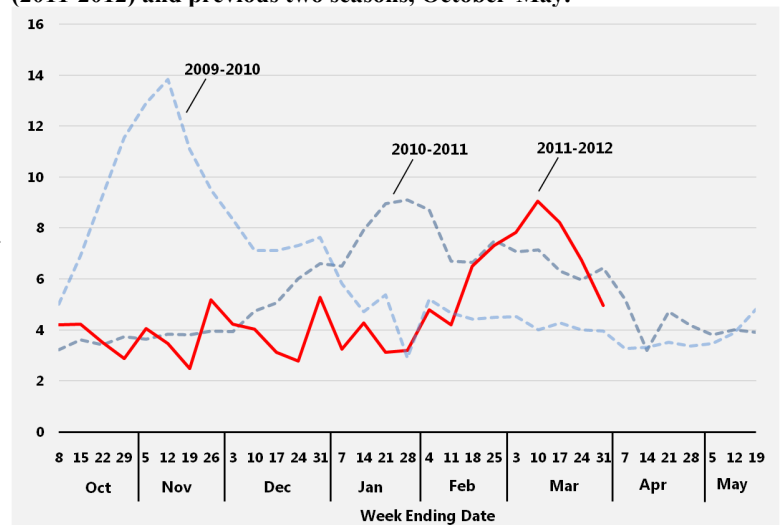
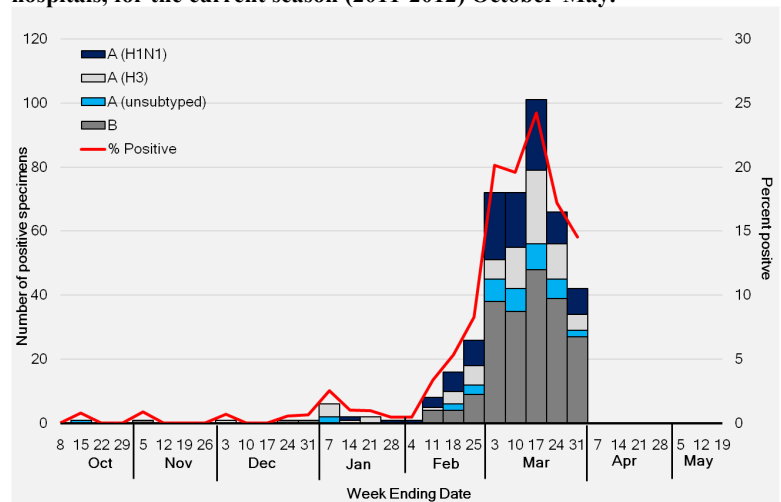


Figure 2. Percentage of specimens testing positive (by RT-PCR) for influenza by subtype as reported by local laboratories serving Chicago hospitals, for the current season (2011-2012) October-May.



¹<https://www.chicagohan.org/ViewsFlash/servlet/flash?cmd=showform&pollid=Vouchers!Indiv>; ²http://www.cityofchicago.org/content/city/en/depts/cdp/supp_info/infectious/immunizations_walk-inclinics.html; ³<https://dph.partner.illinois.gov/>; ⁴<http://www.cdc.gov/flu/weekly/index.htm>; ⁵<http://www.idph.state.il.us/flu/surveillance.htm>; ⁶<http://www.cookcountypublichealth.org/data-reports#influenza>