Public Health Wales CDSC Weekly Influenza & Acute Respiratory Infection Surveillance Report



Wednesday 25th March 2020 (covering week 12 2020)

Current level of influenza activity: Baseline activity

Trend: Stable

Confirmed cases since 2019 week 40: **1,673** (94% influenza A and 6% influenza B. Of the influenza A cases, 17% were A(H1N1)pdm09, 67% were A(H3N2) and 16% were A(not typed).

Key points - Wales

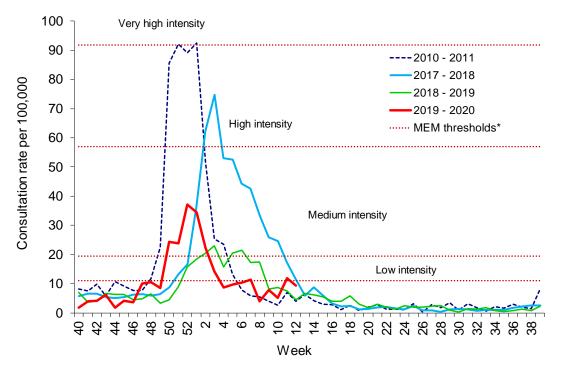
Surveillance indicators suggest that influenza is circulating in Wales.

The sentinel GP consultation rate for influenza-like illness (ILI) increased during week 12 (ending 22/03/2020). During week 12, 22 cases of influenza were confirmed. Rhinovirus was the most commonly detected cause of Acute Respiratory Infection (ARI) but other causes of ARI continue to be detected. Respiratory Syncytial Virus (RSV) activity in children under five years of age increased this week but remains at baseline levels.

- The Sentinel GP consultation rate for influenza-like illness (ILI) in Wales during week 12 was 9.4 consultations per 100,000 practice population (Table 1).
- The ILI consultation rate decreased compared to week 11 (11.8 per 100,000 practice population) and and is now below baseline threshold for activity (11.1 per 100,000 practice population) (Figure 1).
- Data on respiratory-related consultations with Out Of Hours GPs are only currently available up to week 02 (Figure 7). The percentage of calls to NHS Direct Wales which were 'influenza-related' (cold/flu, cough, fever, headache and sore throat) during week 12 decreased to 45.1% (Figure 8).
- Twelve surveillance samples from patients with ILI, collected by sentinel GPs during week 12 had been received by Public Health Wales Microbiology as at 25/03/2020. The following numbers of patients tested positive: One SARS-COV2, four rhinovirus, one COV-NL63 and six samples were negative for all routinely tested respiratory pathogens.
- During week 12, 793 specimens were tested by Public Health Wales Microbiology from hospitalised and non-sentinel GP patients with ARI. These figures do not include local influenza 'point of care test' results. The following numbers of patients tested positive: 16 influenza A(H1N1)pdm09, six influenza B, 105 rhinovirus, 49 human metapneumovirus, 50 seasonal coronaviruses, 29 adenovirus, 15 parainfluenza, 15 RSV, seven enterovirus and five mycoplasma, (Figure 4). The proportion of samples from hospital patients positive for influenza was 3.0%. Twenty-eight respiratory specimens were tested from patients in intensive care units (ICU), one specimen was positive for influenza (Figure 5).
- RSV seasonal activity increased but remained at baseline levels during week 12. Two (2.3%) of the 86 samples from children younger than five years with ARI tested positive for RSV during week 12 and there were 1.2 confirmed cases per 100,000 in this age-group (Figure 6). The average duration of seasonal activity is 11-13 weeks and the current season lasted 12 weeks.
- During week 12, 29 ARI outbreaks were reported to the Public Health Wales Health Protection team, 21 were in residential homes, five were in prisons and three were in a community, mixed or other setting.
- At the end of week 12, uptake of influenza vaccine was: 69.4% in those aged 65 years and older, 44.1% in patients aged six months to 64 years at clinical risk, and 50.7% in children aged two and three years old. In the 1,331 primary schools visited thus far as part of the universal childhood influenza programme, uptake was 68.7%.

Influenza activity in Wales

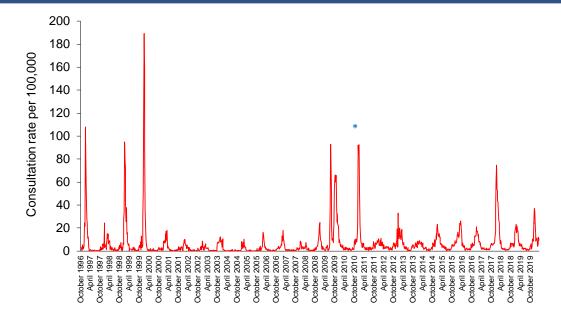
Figure 1. Clinical consultation rate per 100,000 practice population in Welsh sentinel practices (as of 22/03/2020).



A technical issue affected data submitted from sentinel practices utilising a specific brand of GP software. As a result, between week 47 2019 and week 03 2020, data from affected practices has been excluded from calculations of the weekly ILI consultation rate. Weekly rates from week 47 2019 to week 03 2020 are based on data from approximately 20 practices.

Week 52 and week 01 consultation rates adjusted for the reduced general practice opening hours.

Figure 2. Clinical consultation rate per 100,000 practice population in Welsh sentinel practices (week 48 1996 – week 12 2020).



^{*} Reporting changed to Audit+ surveillance system

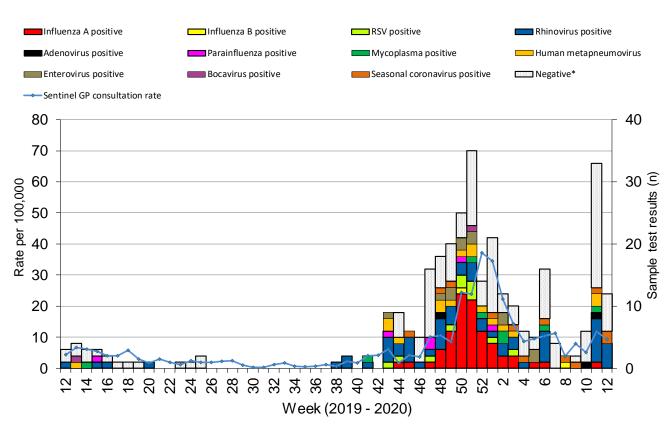
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^{*} The Moving Epidemic Method (MEM) threshold calculated for Wales ILI consultation rates is 11.1 per 100,000. MEM thresholds used in this chart are based on influenza from 2010-11 to 2018-19 seasons.

Table 1. Age-specific consultations (per 100,000) for influenza in Welsh sentinel practices, week 07 – week 12 2020 (as of 22/03/2020).

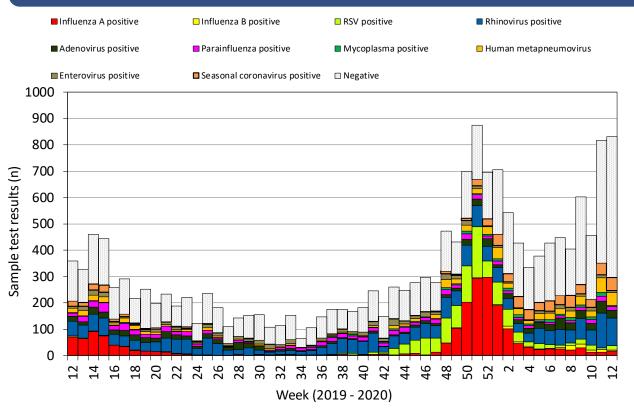
| Age | | | | | | |
|---------|------|-----|------|------|------|------|
| group | 7 | 8 | 9 | 10 | 11 | 12 |
| < 1 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 31.4 |
| 1 - 4 | 0.0 | 6.3 | 6.3 | 0.0 | 6.3 | 0.0 |
| 5 - 14 | 9.2 | 0.0 | 9.1 | 0.0 | 4.5 | 6.8 |
| 15 - 24 | 13.1 | 6.4 | 12.9 | 8.8 | 4.3 | 8.6 |
| 25 - 34 | 12.0 | 7.8 | 13.7 | 4.0 | 23.5 | 9.8 |
| 35 - 44 | 18.9 | 6.2 | 8.2 | 10.6 | 8.2 | 8.2 |
| 45 - 64 | 12.2 | 3.7 | 7.4 | 8.7 | 17.5 | 12.9 |
| 65 - 74 | 10.9 | 2.1 | 0.0 | 0.0 | 10.7 | 8.6 |
| 75+ | 5.0 | 0.0 | 4.9 | 0.0 | 7.3 | 7.3 |
| Total | 11.3 | 3.9 | 7.9 | 5.1 | 11.8 | 9.4 |

Figure 3. Specimens submitted for virological testing by sentinel GPs as of 22/03/2020, by week of sample collection, week 12 2019 - week 12 2020.



^{*} Tested negative for influenza, adenovirus, rhinovirus, RSV, parainfluenza, mycoplasma, human metapneumovirus, enterovirus, bocavirus and coronaviruses.

Figure 4. Specimens submitted for virological testing for hospital patients and non-sentinel GPs as of 22/03/2020 by week of sample collection, week 12 2019 to week 12 2020.



Combined data for tests carried out in Public Health Wales Microbiology: Cardiff laboratory, provided by Public Health Wales Microbiology Cardiff Specialist Virology Centre. This chart summarises individual test results, patients who are positive for multiple infections within a given week will appear multiple times.

Figure 5. Specimens submitted for virological testing for ICU patients, by week of sample collection, week 12 2019 to week 12 2020.

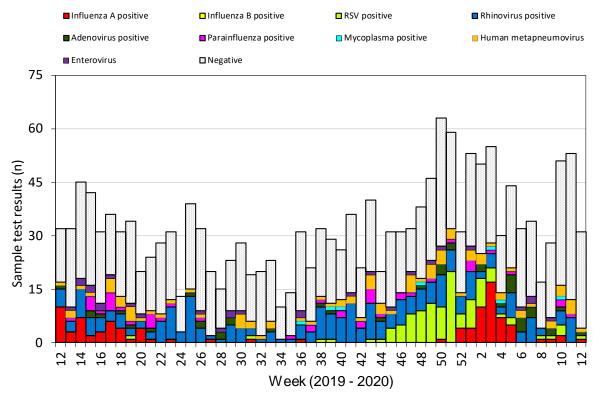
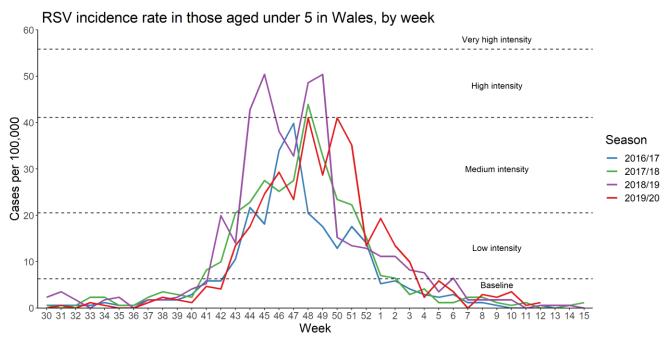


Figure 6. RSV incidence rate per 100,000 population aged under five years, week 30 2016 to week 12 2020.



Out of Hours consultations and calls to NHS Direct Wales

Figure 7. Weekly total consultations to Out of Hours services in Wales and numbers of respiratory-related diagnoses (as of 12/01/2020) (latest data available).

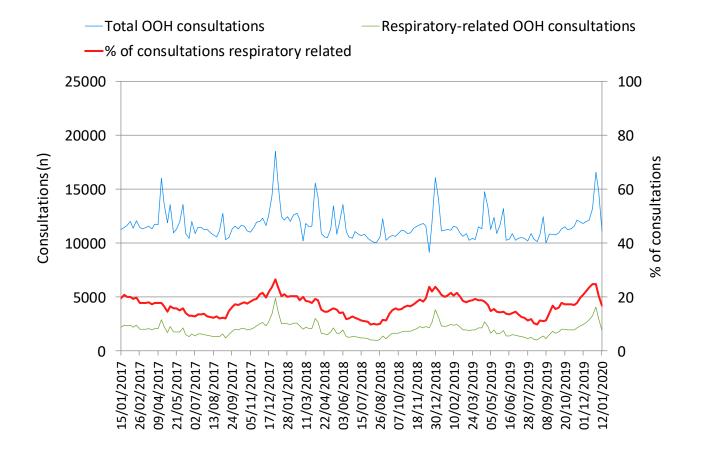
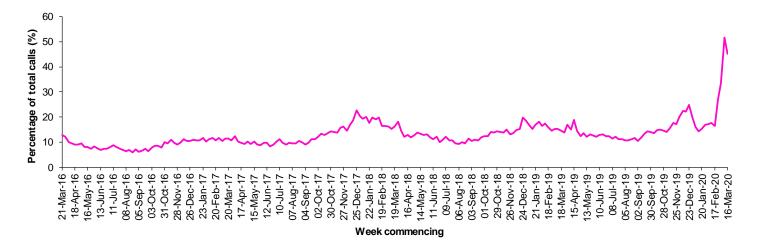


Figure 8. Influenza related calls to NHS Direct Wales¹ (as a percentage of total calls) from week 12 2016 - week 12 2020 (as of 22/03/2020).



¹ Data supplied by Health Statistics and Analysis Unit, Welsh Government.

Flu related calls are the sum of calls recorded as 'cold/flu', 'cough', 'headache', 'fever' and 'sore throat'. Following changes to the NHS Direct calls system, including the start of the 111 pilot, there has been a change in the way in which denominator data are calculated for this chart, NHS Direct Wales now count the total number of nurse triaged calls (ie calls which could have symptom data recorded against them), note that 111 includes out-of-hours calls.

Influenza Vaccine Uptake in Wales

Table 2. Uptake of influenza immunisations in GP Practice patients, school children and NHS staff in Wales 2019/20 (as of 22/03/2020).

| Influenza immunisation uptake in the 2019/20 season | | | | | |
|---|-------|--|--|--|--|
| People aged 65y and older | 69.4% | | | | |
| People younger than 65y in a clinical risk group | 44.1% | | | | |
| Children aged two & three years | 50.7% | | | | |
| Children aged four to ten years* | 68.7% | | | | |
| NHS staff | 55.8% | | | | |
| NHS staff who have direct patient contact | 58.7% | | | | |

^{*} In school sessions carried out so far.

The end of season report Influenza in Wales 2018/19 is available to download and contains a full breakdown of vaccination uptake amongst eligible groups.

Link to report: http://www.wales.nhs.uk/sites3/page.cfm?orgid=457&pid=55714

Key points – Influenza activity in the UK and Europe

- As of week 11, indicators for influenza have increased in primary care but remain lowin other indicators in the UK. GP ILI consultations increased in Northern Ireland to 18.1 per 100,000 and in Scotland to 27.6 per 100,000, and are now in the low intensity threshold in both countries. The weekly ILI GP consultation rate in England reported through the RCGP system increased to 14.6 per 100,000 and is now above the MEM threshold for baseline activity (12.7 per 100,000).
- During week 11, six samples tested positive for influenza (two influenza A(H1N1)pdm09, one influenza A(H3) and three influenza B) through the UK GP sentinel swabbing schemes, an overall positivity of 4.2%. Fifty-nine (3.4%) of the 1,752 respiratory test results reported through Public Health England's DataMart scheme tested positive for influenza (18 influenza A(H1N1)pdm09, one influenza A(H3), 16 influenza A(not subtyped) and 24 influenza B). UK summary data are available from the Public Health England National Influenza Report.
- The WHO and the European Centre for Disease Prevention and Control (ECDC) reported that as of week 11, influenza activity remained elevated but continued to decline across the WHO European Region. During week 11, a total of 1,520 sentinel specimens were tested for influenza, 469 of which were positive (117 influenza A(H1N1)pdm09, 108 influenza A(H3N2), 46 influenza A(not typed) and 198 influenza B).
 Source: Flu News Europe: http://www.flunewseurope.org/

World update

- The WHO reported on 16/03/2020 that in the temperate zones of the northern hemisphere, respiratory illness indicators and influenza activity appeared to decrease overall. In North America, influenza activity started to decline. In Europe, influenza activity remained elevated overall. In Central Asia, influenza activity decreased with detections of all seasonal influenza subtypes. In Northern Africa, influenza activity continued to increased in Algeria and Tunisia. In Western Asia, influenza activity remained elevated overall, although returned to low levels in some countries. In East Asia, influenza-like illness (ILI) and influenza activity decreased overall. Influenza activity was reported in some Caribbean and Central American countries. In tropical South American countries, influenza activity remained low. In tropical Africa, influenza activity was low across reporting countries. In Southern Asia, increased influenza activity was reported in Bhutan. In South East Asia, influenza activity continued to be reported in some countries. In the temperate zone of the southern hemisphere, influenza activity remained at inter-seasonal levels. Worldwide, seasonal influenza A viruses accounted for the majority of detections.
- Based on FluNet reporting (as of 12/03/2020), during the time period from 17/02/2020 01/03/2020, National Influenza Centres and other national influenza laboratories from 111 countries, areas or territories reported influenza surveillance data. The WHO Global Influenza Surveillance and Response System laboratories tested more than 233,445 specimens during that time period, 62,423 were positive for influenza viruses, of which 42,013 were typed as influenza A (7,348 influenza A(H1N1)pdm09, 2,516 influenza A(H3N2) and 32,149 influenza A(not subtyped)) and 20,410 influenza B (of the characterised influenza B viruses 18 belonged to the B-Yamagata lineage and 1,574 to the B-Victoria lineage).
 Source: WHO influenza update:

http://www.who.int/influenza/surveillance monitoring/updates/en/

Update on influenza activity in North America

- The USA Centers for Disease Control and Prevention (CDC) report that during week 11 (ending 14/03/2020) laboratory confirmed influenza continued to decrease but influenza-like-illness activity increased. Nationally, 6,927 (15.3%) out of 45,167 specimens have tested positive for influenza in week 11, of these positives 5,297 (76.5%) were influenza A and 1,630 (23.5%) were influenza B. Further characterisation has been carried out on 1,374 specimens by public health laboratories, and 413 tested positive for influenza, 333 (80.6%) were influenza A (264 influenza A(H1N1)pdm09 (93.0%), 20 influenza A(H3N2) (7.0%), and subtyping was not performed on 49 specimens) and 80 influenza B (19.4%). **Source:** CDC Weekly US Influenza Surveillance Report: http://www.cdc.gov/flu/weekly/
- The Public Health Agency of Canada reported that during week 11, influenza activity continued to be
 reported in all regions, however, almost all indicators decresed compared to the previous week. The
 percentage of visits to healthcare professionals due to ILI was 1.9%, which is an increase on the previous
 week and around average for this time of year. The percentage of tests positive for influenza is 14%, a
 decrease on previous weeks.

Source: Public Health Agency of Canada

https://www.canada.ca/en/public-health/services/diseases/flu-influenza/influenza-surveillance/weekly-influenza-reports.html

Middle East respiratory syndrome coronavirus (MERS-CoV) – latest update from WHO and ECDC

- On 12/03/2020 WHO reported an additional case of Middle East Respiratory Syndrome coronavirus (MERS-CoV). Globally, 2,521 laboratory confirmed cases of human infection with MERS-CoV, including 866 associated deaths, have officially been reported to WHO since 2012.
 Source: WHO Global Alert and Response website: http://www.who.int/csr/don/archive/year/2020/en/
- The majority of the MERS cases continue to be reported from the Middle East, and specifically from Saudi Arabia. Rapid risk assessments of the situation from ECDC, which contain epidemiological updates and advice for travellers and healthcare workers, are available from: https://ecdc.europa.eu/en/middle-east-respiratory-syndrome-coronavirus
- Further updates and advice for healthcare workers and travellers are available from WHO: http://www.who.int/emergencies/mers-cov/en/ and from NaTHNaC: https://travelhealthpro.org.uk/news/237/mers-cov-update-travelhealthpro-country-pages

Coronavirus disease 2019 (COVID-19) – latest WHO situation report

- As at 24/03/2020, WHO reported 372,757 confirmed COVID-19 cases globally, with 16,231 fatal cases reported. WHO report a risk assessment level of 'Very High' at global level. Daily WHO situation updates are available from: https://www.who.int/emergencies/diseases/novel-coronavirus-2019/situation-reports/
- As at 25/03/2020, there are 8,077 reported confirmed cases of COVID-19 in the UK. The number of
 confirmed cases in Wales reported is 628, with 22 deaths reported. Public Health Wales produce a daily
 statement on COVID-19, available from: https://covid19-phwstatement.nhs.wales/
- Links to further information and guidance are available from the Public Health Wales website: https://phw.nhs.wales/topics/latest-information-on-novel-coronavirus-covid-19/

Human infection with avian influenza A(H7N9), China - latest update from WHO

- The latest WHO Influenza at Human-Animal Interface summary (21/01/2020 to 28/02/2020) reports that no new cases of avian influenza A(H7N9) were reported. Since February 2013, a total of 1,568 laboratory-confirmed cases of human infection with avian influenza A(H7N9), including at least 616 deaths, have been reported: http://www.fao.org/ag/againfo/programmes/en/empres/H7N9/Situation_update.html
- The risk of international spread of avian influenza A(H7N9) is considered to be low at present. However, it is important that clinicians are aware of the possibility of human infection with animal influenza, in persons presenting with severe acute respiratory disease, while travelling or soon after returning from an area where avian influenza is a concern. WHO Global Alert & Response updates: http://www.who.int/csr/don/en/

Links:

Public Health Wales influenza surveillance webpage:

http://www.publichealthwales.org/flu-activity

GP Sentinel Surveillance of Infections Scheme:

http://www.wales.nhs.uk/sites3/page.cfm?orgid=457&pid=27918

NICE influenza antiviral usage guidance:

http://www.nice.org.uk/Guidance/TA158

Wales influenza information:

http://www.wales.nhs.uk/sitesplus/888/page/43745

England influenza surveillance:

https://www.gov.uk/government/statistics/weekly-national-flu-reports-2019-to-2020-season

Scotland influenza surveillance:

https://www.hps.scot.nhs.uk/a-to-z-of-topics/influenza/#data

Northern Ireland influenza surveillance:

https://www.publichealth.hscni.net/directorate-public-health/health-protection/seasonal-influenza

European Centre for Communicable Disease:

http://ecdc.europa.eu/

European influenza information:

http://flunewseurope.org/

Advice on influenza immunisation (for NHS Wales users)

http://nww.immunisation.wales.nhs.uk/home

For further information on this report, please email Public Health Wales using: surveillance.requests@wales.nhs.uk