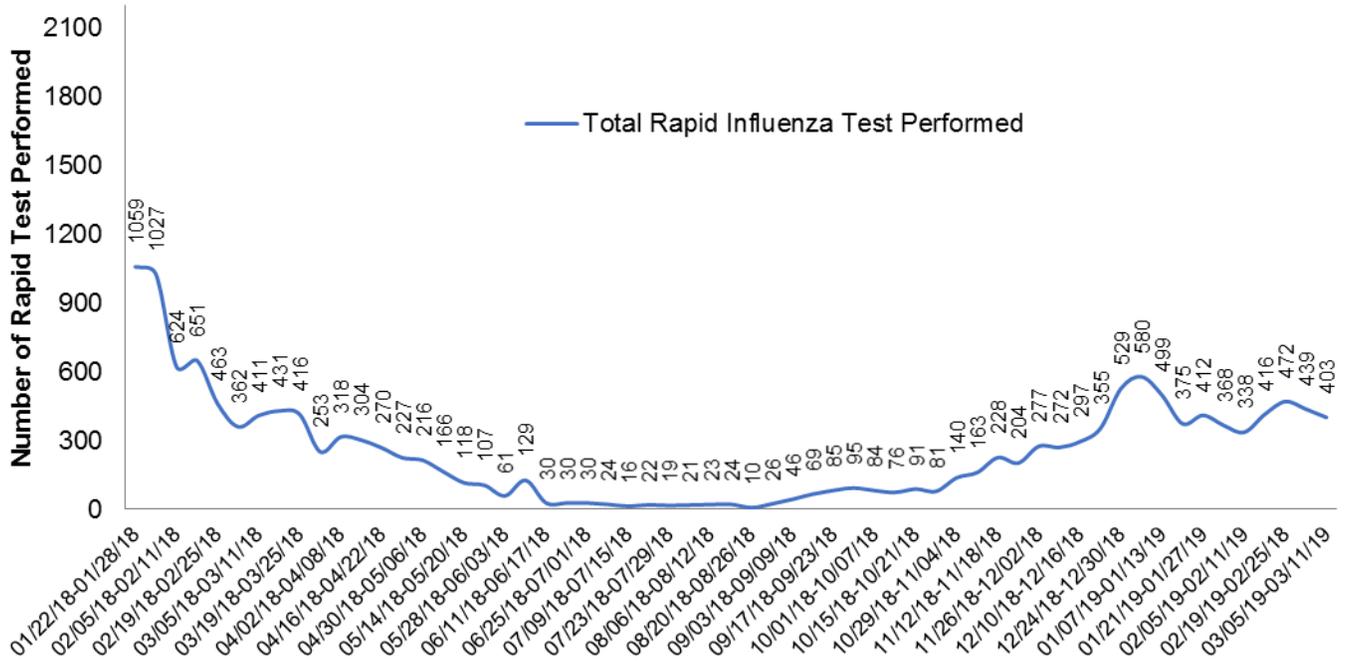
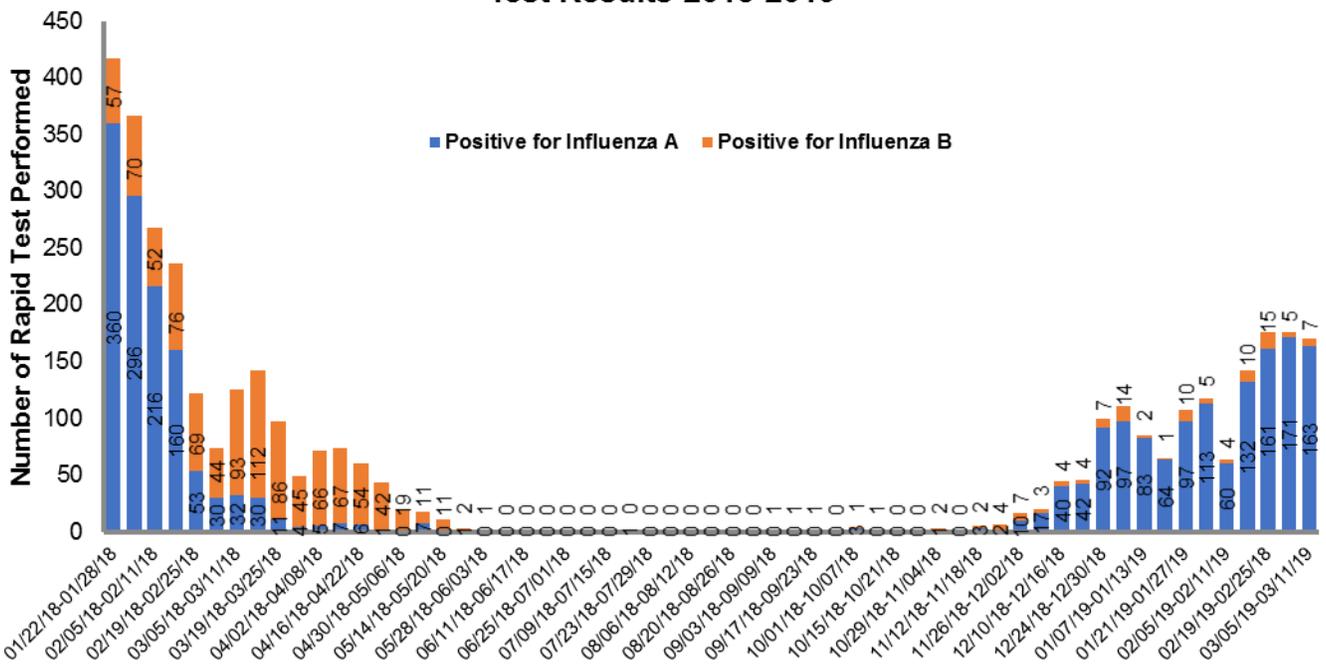


2018-2019 Will County Influenza Like Illness (ILI) Activity Report (Hospitals & Urgent Care Center Visits Surveillance), For Week Ending 3/11/2019

Weekly Influenza Like Illness (ILI Visits) Activity in Will County Hospitals, 2018-2019



Antigenic Characteristics of Rapid Influenza Test Results 2018-2019



2018-2019 Will County Influenza Like Illness (ILI) Activity Report (Hospitals & Urgent Care Center Visits Surveillance), For Week Ending 3/11/2019

Synopsis: Influenza activity decreased slightly, but remains elevated in the United States. Influenza A(H1N1)pdm09, influenza A(H3N2), and influenza B viruses continue to co-circulate. Below is a summary of the key influenza indicators for the week ending March 9, 2019:

Viral Surveillance: The percentage of respiratory specimens testing positive for influenza viruses in clinical laboratories decreased slightly. Nationally, during week 10, influenza A(H3) viruses were reported more frequently than influenza A(H1N1)pdm09 viruses. During the most recent three weeks, influenza A(H3) viruses were reported more frequently than influenza A(H1N1)pdm09 viruses in HHS Regions 2, 4, 5, 6, 7, 8 and 10.

- **Virus Characterization:** The majority of influenza viruses characterized antigenically are similar to the cell-grown reference viruses representing the 2018–2019 Northern Hemisphere influenza vaccine viruses.
- **Antiviral Resistance:** The vast majority of influenza viruses tested (>99%) show susceptibility to oseltamivir and peramivir. All influenza viruses tested showed susceptibility to zanamivir.

Influenza-like Illness Surveillance: The proportion of outpatient visits for influenza-like illness (ILI) decreased slightly to 4.5%, which is above the national baseline of 2.2%. All 10 regions reported ILI at or above their region-specific baseline level.

ILI State Activity Indicator Map: 30 states experienced high ILI activity; 11 states experienced moderate ILI activity; New York City, the District of Columbia and five states experienced low ILI activity; Puerto Rico and four states experienced minimal ILI activity; and the U.S. Virgin Islands had insufficient data.

Geographic Spread of Influenza: The geographic spread of influenza in Puerto Rico and 46 states was reported as widespread; four states reported regional activity; the District of Columbia reported local activity; the U.S. Virgin Islands reported sporadic activity; and Guam did not report.

Influenza-associated Hospitalizations A cumulative rate of 41.3 laboratory-confirmed influenza-associated hospitalizations per 100,000 population was reported. The highest hospitalization rate is among adults 65 years and older (123.9 hospitalizations per 100,000 population).

Pneumonia and Influenza Mortality: The proportion of deaths attributed to pneumonia and influenza (P&I) was below the system-specific epidemic threshold in the National Center for Health Statistics (NCHS) Mortality Surveillance System.

Influenza-associated Pediatric Deaths: Four influenza-associated pediatric deaths were reported to CDC during week 10.