Victorian Weekly Influenza Report

Health Protection Branch

Report: 28/2019   Issue date: 8 November 2019

This report comprises data as at: week ending 2 November 2019

Summary

- **Notified cases[1]:**

    o Cases in **week ending 2 November** are slightly **LOWER** when compared with cases for the week prior

    o Cases (since 1 January 2019) are tracking over seven times **HIGHER** than cases for the same time in 2018, and are **ABOVE EXPECTED LEVELS** for this time of the year

    o Weekly notifications of influenza (since 1 April 2019) are: **DECREASING**

    o The predominant influenza type across Victoria is currently: **Type A**

    o National data indicate **A/H3N2 is predominating**

    o Geographical spread[2] is currently: **WIDESPREAD**

    o There was one new respiratory outbreak due to laboratory-confirmed influenza in Residential Aged Care Facilities reported in **week ending 2 November**

- **Vaccine distribution figures*:**

    o Influenza vaccines distributed state-wide**: 2,137,211** doses (as at **6 November 2019)**

    * includes vaccines distributed as part of Commonwealth and Victorian Immunisation Programs
    * excludes vaccines purchased from the private market

Additional disease reports can be found at: https://www2.health.vic.gov.au/public-health/infectious-diseases/infectious-diseases-surveillance/interactive-infectious-disease-reports/state-wide-surveillance-report

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1. As of 1 September 2018, notification data includes only laboratory-confirmed influenza cases.

As clinical information is no longer collected in the notification dataset, and timely mortality data are not available, number of deaths among all notified cases is not reported

2. Geographic spread:

Sporadic – small numbers of laboratory-confirmed influenza cases reported, not above expected background level
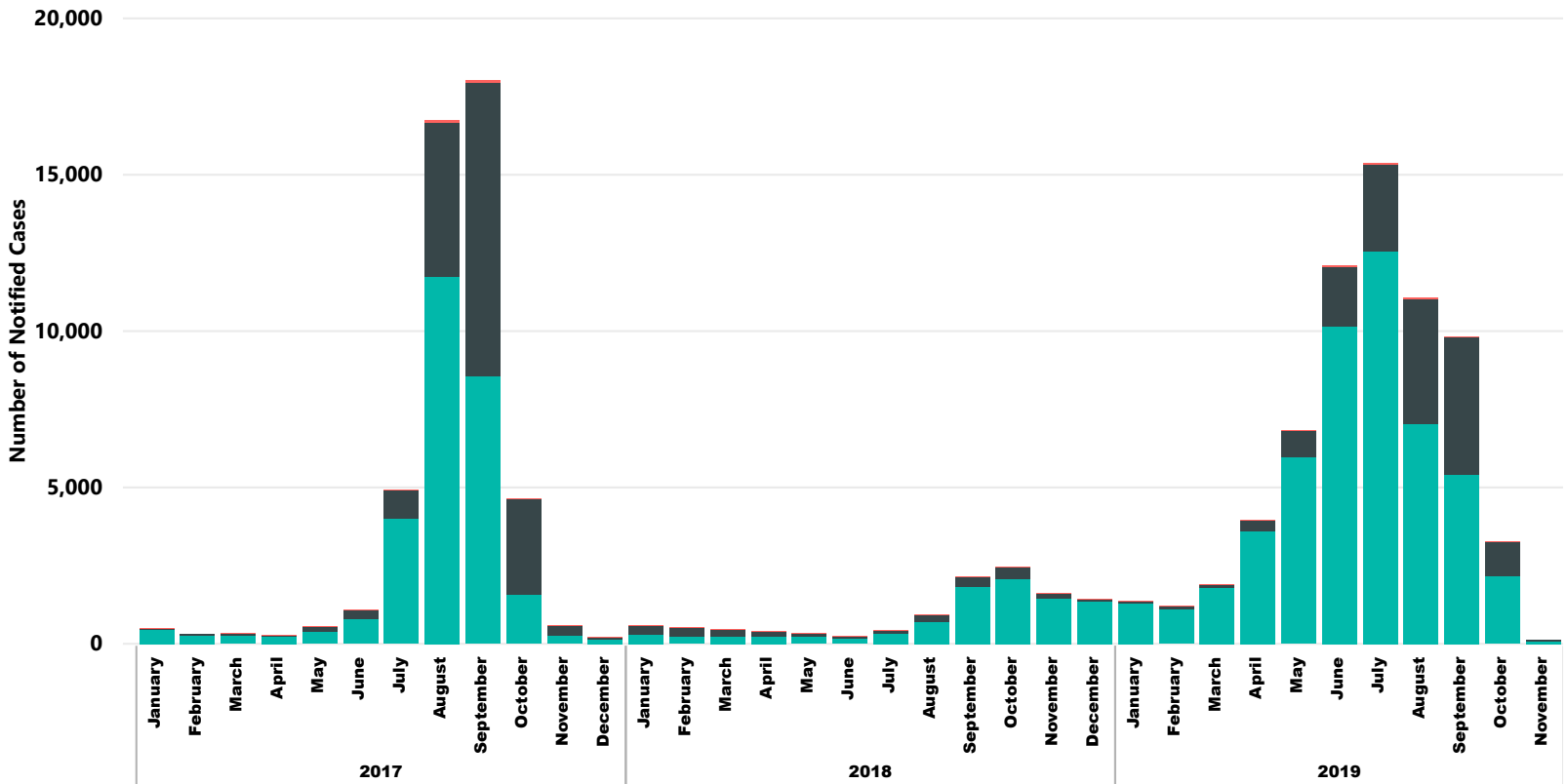**Localised** – laboratory-confirmed influenza detections above background level in less than 50% of the state
Regional – significant numbers of laboratory-confirmed influenza cases reported above background level in less than 50% of the state
Widespread – significant numbers of laboratory confirmed influenza cases reported above background level in equal to or greater than 50% of the state

Victorian Influenza Snapshot

Notified cases of laboratory-confirmed influenza at week ending: 02/11/2019

Influenza Type ● **Influenza A** ● **Influenza B** ● **Other/not typed**

Notified cases of laboratory-confirmed influenza as at week ending: 02/11/2019

Age group (years) ▲	Week ending 02/11/2019	Week ending 26/10/2019	Trend	% change	2019 YTD	2018 YTD	2017 YTD	5 yr avg YTD (2014-18)	Trend 5 yr avg to 2019 YTD	% change (5 yr avg to 2019 YTD)
00 to 04	36	39	▽	-8%	6896	860	3898	951.6	▲	625 %
05 to 14	66	60	▲	10%	12949	1252	7331	1716.6	▲	654 %
15 to 64	239	243	▽	-2%	36700	5360	25677	6207.4	▲	491 %
65+	98	99	▽	-1%	10415	1475	10665	2428	▲	329 %
Total	439	441	▽	0%	66960	8947	47571	11303.6	▲	492 %

 # Data from some laboratories may be incomplete

Respiratory outbreaks due to influenza in Residential Aged Care Facilities year-to-date as at: 02/11/2019

Year-to-date ▼	Outbreaks	Resident cases	Hospitalisations	Deaths **
2019	268	3611	357	138
2018	21	301	36	9
2017	275	3880	460	151

** Refer to last page of report for an explanation of the aged care respiratory outbreak dataset.

Reported deaths are not necessarily due to laboratory-confirmed influenza.

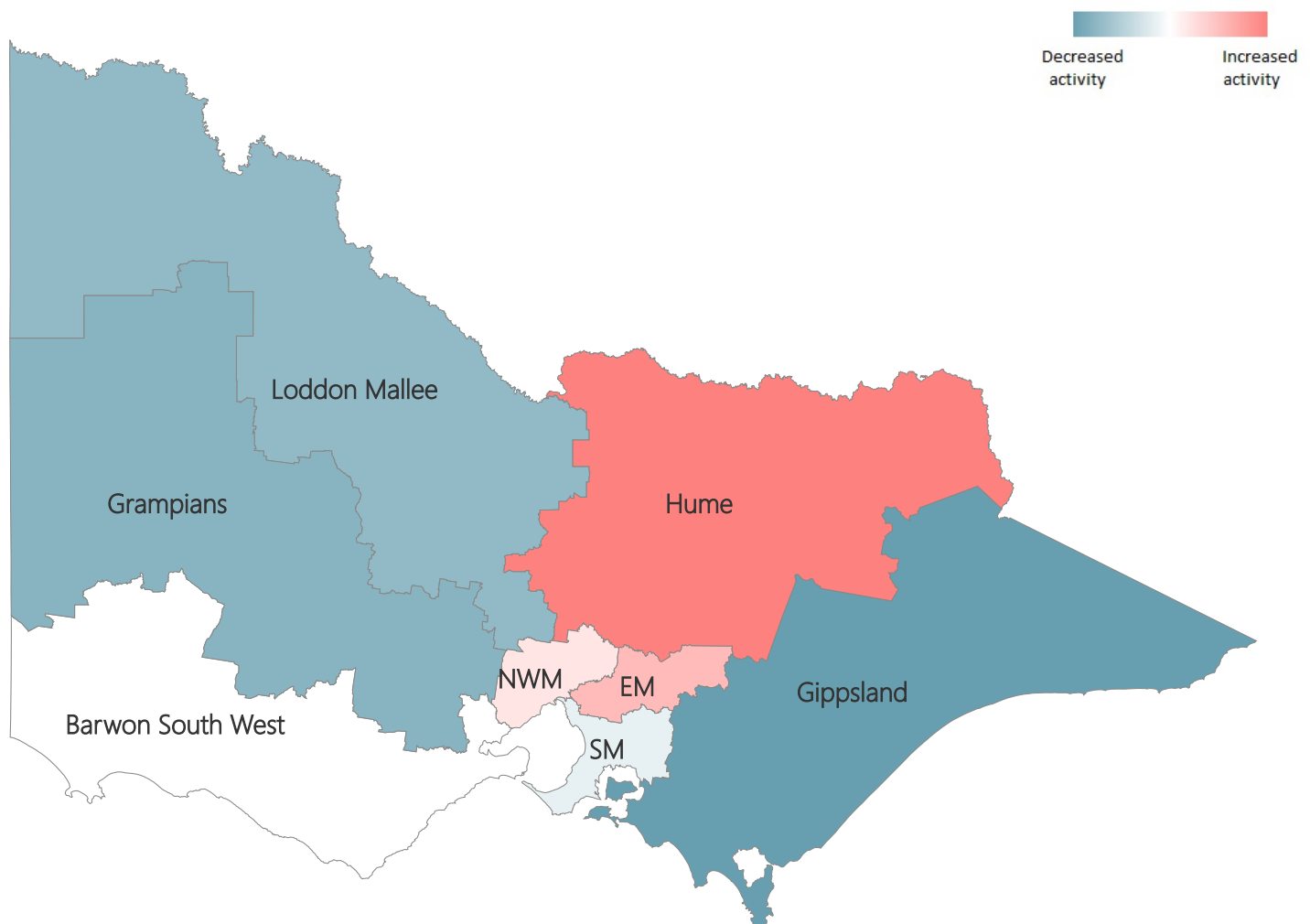Data are subject to revision.

Release dates vary by dataset.

Influenza Snapshot by region

Region	Week ending 02/11/2019 ▼	Week ending 26/10/2019	Trend	% change		2019 YTD	2018 YTD	5 yr avg YTD (2014-18)	Trend (5 yr avg to 2019 YTD)	% change (5 yr avg to 2019 YTD)
NORTHERN AND WESTERN METROPOLITAN	155	146	▲	6%		22747	2963	5713.2	▲	298 %
SOUTHERN METROPOLITAN	109	121	▽	-10%		18204	2519	5630.4	▲	223 %
EASTERN METROPOLITAN	107	92	▲	16%		12631	1596	3581	▲	253 %
HUME	26	20	▲	30%		2931	425	809.6	▲	262 %
BARWON SOUTH WEST	16	16	--	0%		3407	455	1094.4	▲	211 %
LODDON MALLEE	14	26	▽	-46%		2206	340	634.8	▲	248 %
GIPPSLAND	4	11	▽	-64%		2996	344	924.4	▲	224 %
GRAMPIANS	4	8	▽	-50%		1512	242	478.4	▲	216 %

 # Data from some laboratories incomplete

% Week on week change by region

Decreased activity   Increased activity

Victorian Influenza Snapshot

VicSPIN Sentinel GP Consultations rate for ILI (per 1,000 patients) as at : 2/11/2019

SIZE / SEVERITY / SPREAD
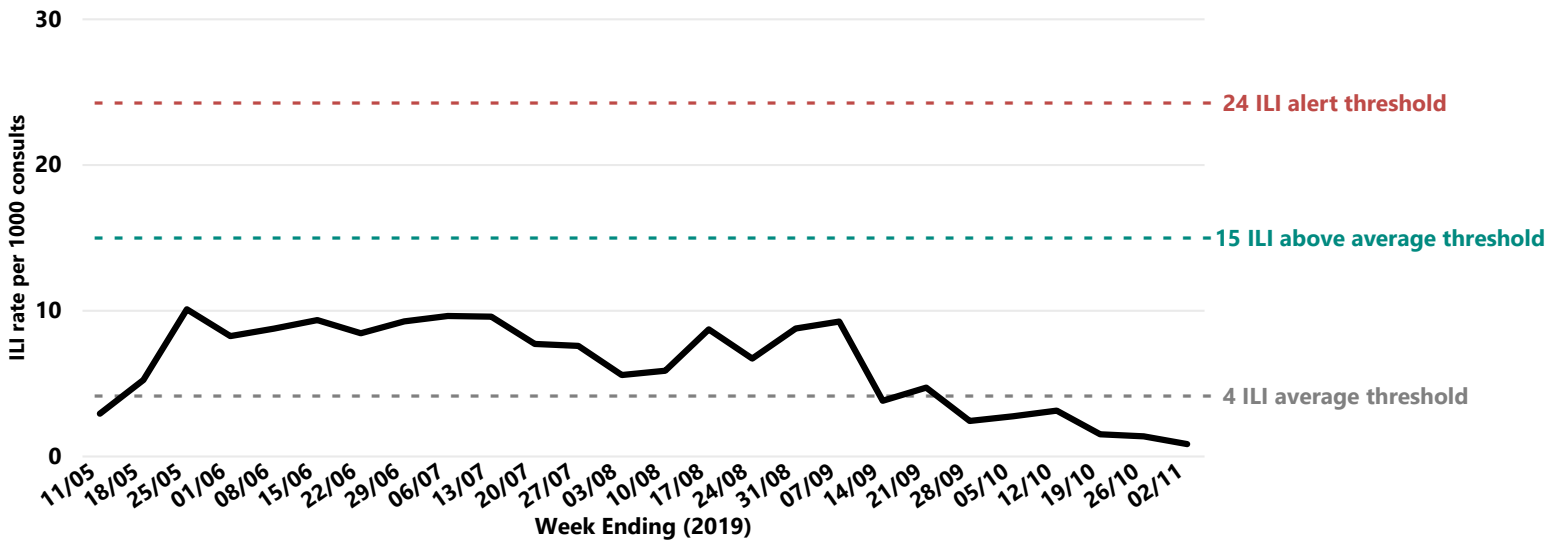
VicSPIN Sentinel GP influenza types as at : 2/11/2019
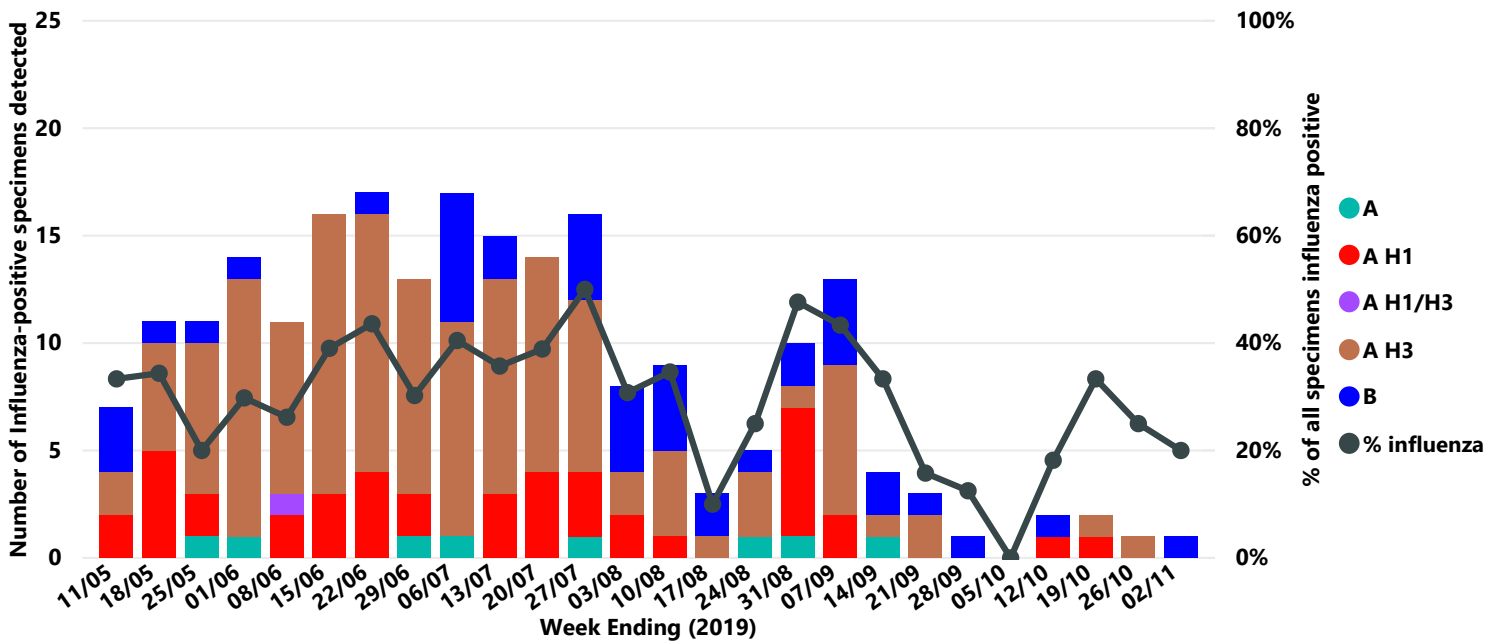
FluCAN sentinel hospital admissions for laboratory-confirmed influenza as at: 2/11/2019

SEVERITY

Laboratory-confirmed influenza admissions from 1 April – 18 October					
	2019		2018		2017	
	year-to-date	ICU %	year-to-date	ICU %	year-to-date	ICU %
Adult #	969	6.9	185	9.7	1,029	10.9
Paediatric #	700	10.1	127	7.1	--	--

\# Data from some sites incomplete

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All data are subject to revision.

Weekly Influenza Report - Data sources

Notified cases of laboratory-confirmed influenza	It is a Victorian statutory requirement that pathology services notify the Department of Health and Human Services (the department) of a case of laboratory-confirmed influenza within five days of confirmation. These data are stored in the department's notifiable diseases database, the Public Health Event Surveillance System (PHESS). During influenza season, data on notified cases are reported weekly (a week is defined as Sunday to Saturday). Laboratory reporting is increasing due to the widespread availability of influenza testing. As of 1 September 2018, medical practitioners were no longer required to report influenza.
Respiratory outbreaks reported to the Health Protection Branch	Reporting of respiratory outbreaks in aged care facilities to the department is not legislated, but is encouraged. Samples are not collected and tested for all residents during outbreaks, but if any case tests positive for influenza, the outbreak is deemed to be due to influenza. The cases included in this report are residents who experienced an influenza-like illness during the course of the outbreak, but not all cases, hospitalisations and deaths are necessarily due to laboratory-confirmed influenza.
VicSPIN	The Victorian Sentinel Practice Influenza Network (VicSPIN) is a sentinel general practitioner (GP) surveillance program funded by the department, and coordinated by the Epidemiology Unit of the Victorian Infectious Diseases Reference Laboratory (VIDRL) based at the Peter Doherty Institute for Infection and Immunity. VIDRL is one of the department's two public health reference laboratories. Approximately 90 GPs submit weekly reports from May to October detailing the proportion of their consultations that were for patients with influenza-like illness and the proportion that were swabbed for virological testing. Refer to https://www.vidrl.org.au/surveillance/influenza-surveillance/ for full weekly reports.
FluCAN	The Influenza Complications Alert Network (FluCAN) is a rapid alert system for severe respiratory illness. The sentinel surveillance system is a national system (across major hospitals throughout Australia) providing both clinical and laboratory information for reported cases. The following six Victorian hospitals are participating: The Alfred Hospital, Royal Melbourne Hospital, Monash Medical Centre, University Hospital Geelong, Royal Children's Hospital and Monash Children's Hospital