

Victorian Weekly Influenza Report

Health Protection Branch

Report: 7/2019 Issue date: 14 June 2019

This report comprises data as at: week ending 8 June 2019

Summary

- **Notified cases¹:**
 - Cases in **week ending 8 June** are **HIGHER** when compared with cases for the week prior
 - Cases (since 1 January 2019) are tracking **HIGHER THAN** cases for the same time in 2018, and are **ABOVE EXPECTED LEVELS** for this time of the year
 - Weekly notifications of influenza (since 1 April 2019) are trending: **UPWARDS**
 - The predominant influenza type (and subtype) across the state is currently: **Type A**
 - National data indicate **A/H3N2 is predominating**
 - Geographical spread² is currently: **WIDESPREAD**
 - There were **nine** new respiratory outbreaks due to laboratory-confirmed influenza in Residential Aged Care Facilities reported in **week ending 8 June**

- **Vaccine distribution figures*:**
 - Influenza vaccines distributed state-wide: over **2,000,000** doses (as at **8 June 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>

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.

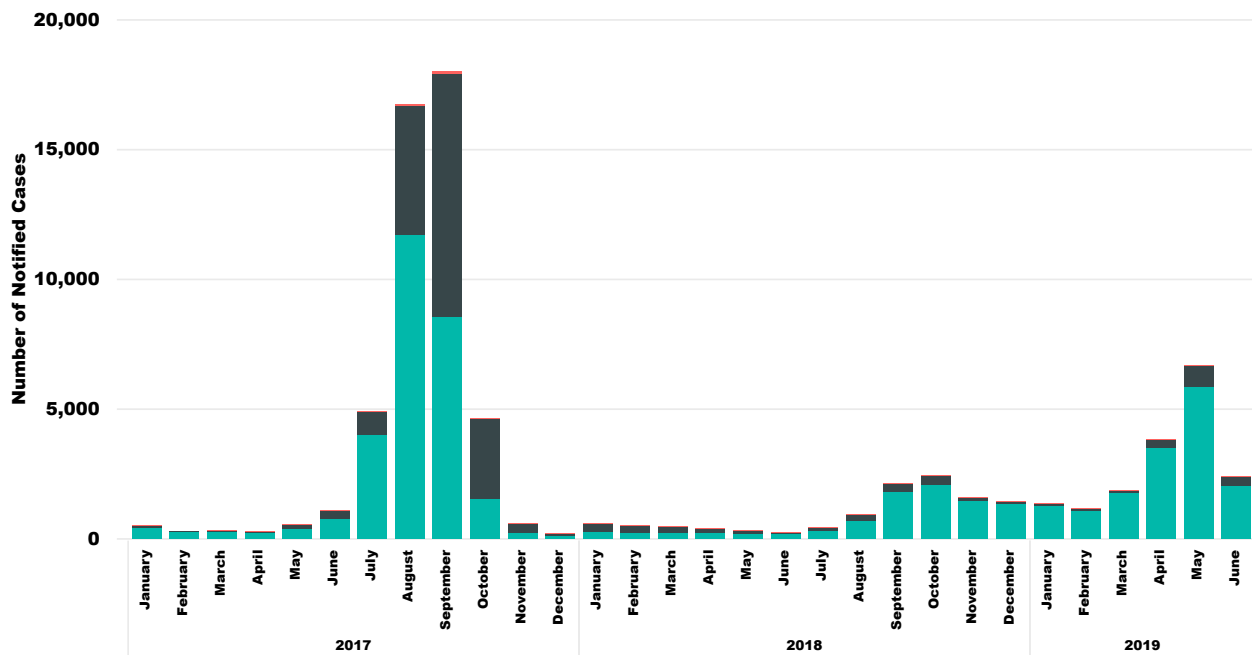
Victorian Influenza Snapshot

Report issued: 14/06/2019

Notified cases of laboratory-confirmed influenza at week ending: 08/06/2019

SIZE

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



SIZE / SEVERITY / SPREAD

Notified cases of laboratory-confirmed influenza as at week ending: 08/06/2019

Age group (years)	Week ending 08/06/2019	Week ending 01/06/2019	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)
▲ 00 to 04	269	215	▲	25%	1754	189	126	▲	1292 %
05 to 14	619	450	▲	38%	2941	215	141.6	▲	1977 %
15 to 64	1248	851	▲	47%	9769	1516	1053.6	▲	827 %
65+	260	225	▲	16%	2890	514	394.8	▲	632 %
Total	2396	1741	▲	38%	17354	2434	1716	▲	911 %

SPREAD/ SEVERITY

Respiratory outbreaks due to influenza in Residential Aged Care Facilities year-to-date as at: 08/06/2019

Year-to-date	Outbreaks	Resident cases	Hospitalisations	Deaths **
2019	69	856	86	27
2018	6	67	6	0
2017	10	105	12	2

** 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.



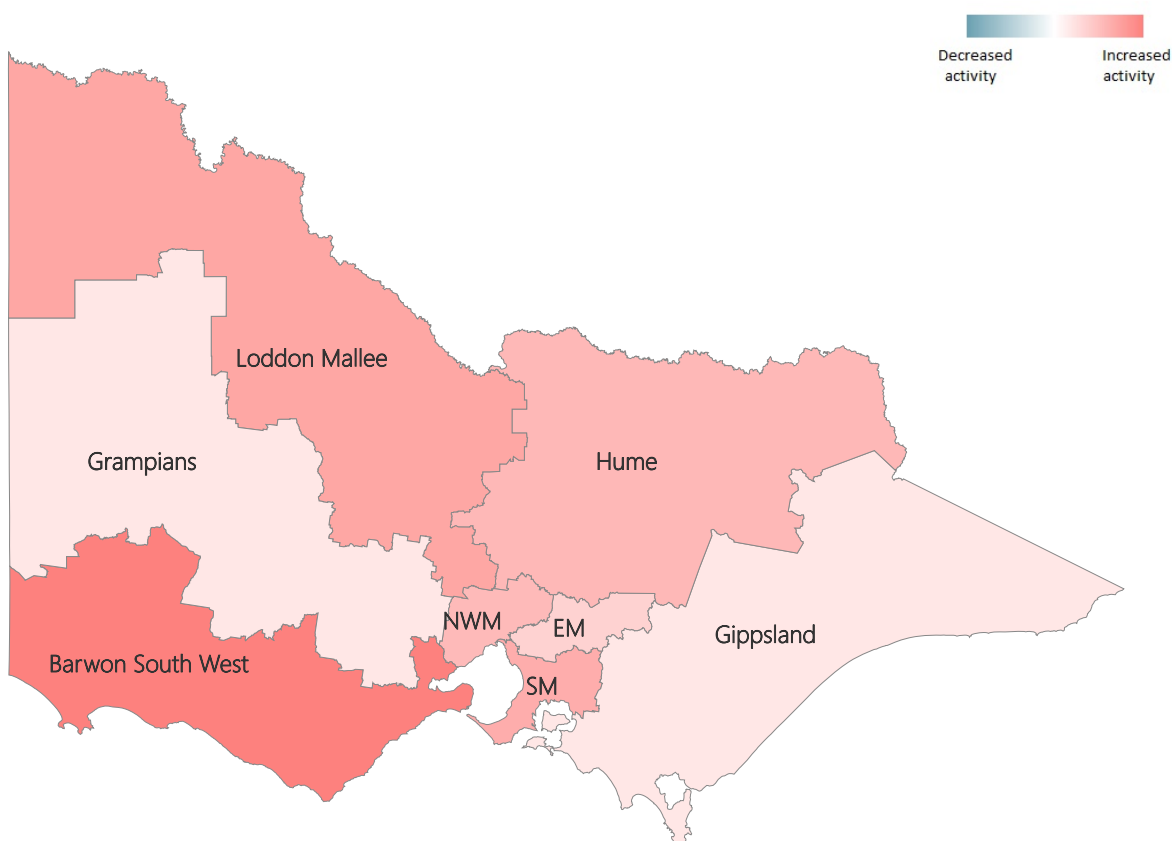
Data are subject to revision.
Release dates vary by dataset.

Influenza Snapshot by region

Report issued: 14/06/2019

Region	Week ending 08/06/2019	Week ending 01/06/2019	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	760	550	▲	38%	5706	685	516.8	▲	1004 %
SOUTHERN METROPOLITAN	639	440	▲	45%	4646	741	550.2	▲	744 %
EASTERN METROPOLITAN	438	351	▲	25%	3333	593	356.2	▲	836 %
BARWON SOUTH WEST	158	93	▲	70%	1198	121	107.6	▲	1013 %
HUME	96	69	▲	39%	628	74	47.6	▲	1219 %
LODDON MALLEE	79	53	▲	49%	643	67	49.6	▲	1196 %
GIPPSLAND	68	60	▲	13%	556	73	66.2	▲	740 %
GRAMPIANS	68	60	▲	13%	573	70	41	▲	1298 %

% Week on week change by region

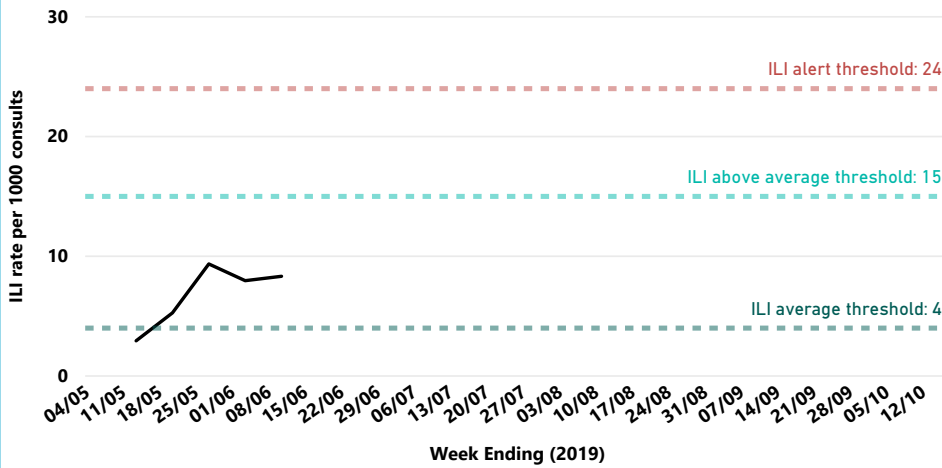


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Victorian Influenza Snapshot

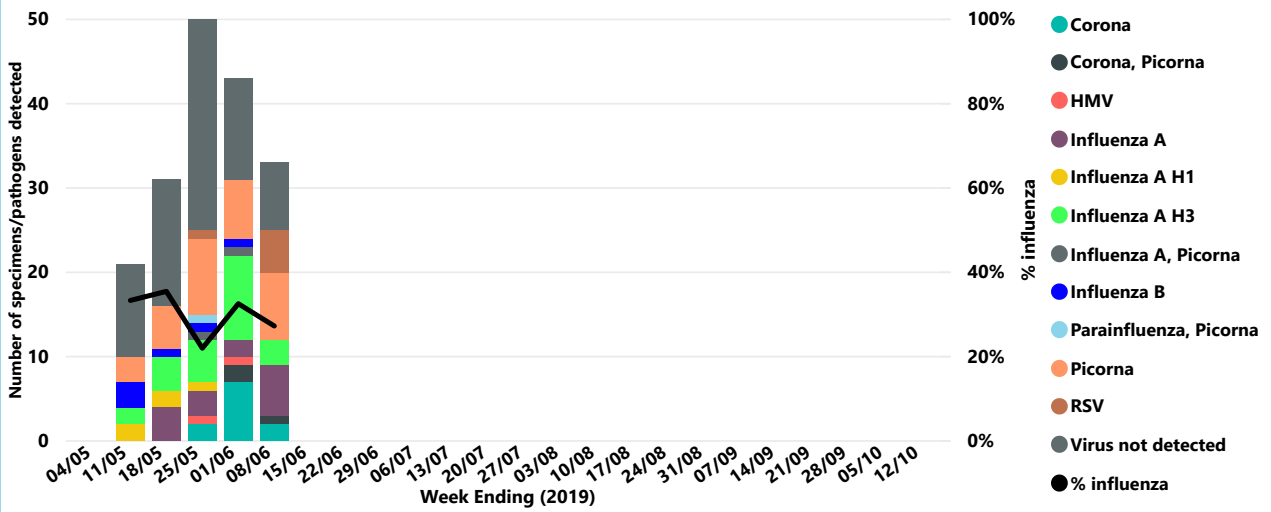
Report issued: 14/06/2019

VicSPIN Consultations rate for ILI (per 1,000 patients) as at : 8/06/2019



SIZE / SEVERITY / SPREAD

VicSPIN respiratory pathogens as at : 8/06/2019



SEVERITY

FluCAN sentinel hospital admissions for laboratory-confirmed influenza as at: 01/06/2019

			2019		2018		2017	
	admissions per 100 beds		admissions		admissions		admissions	
	WE 08/06/19	WE 01/06/19	year-to-date*	ICU %	year-to-date*	ICU %	year-to-date*	ICU %
Adult #	0.3	0.7	161	5.6	15	6.7	33	12.1
Paediatric #	1.5	5.2	210	6.7	11	9.1	--	--

* Data include admissions from 1 April 2019

Data from some sites incomplete



All data are subject to revision.

Weekly Influenza Report - Data sources

<p>Notified cases of laboratory-confirmed influenza</p>	<p>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.</p>
<p>Respiratory outbreaks reported to the Health Protection Branch</p>	<p>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.</p>
<p>VicSPIN</p>	<p>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.</p>
<p>FluCAN</p>	<p>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</p>