CUYAHOGA COUNTY PUBLIC HEALTH COLLABORATIVE







October 27 - November 2, 2019 (MMWR Week 44) Highlights

Flu activity was 'minimal' for the 5th consecutive week.

Flu activity rating explanation and weekly flu reports can be found here: http://www.ccbh.net/flu-weekly-reports/

6.7% of deaths reported were due to pneumonia-related causes. 0 flu related deaths were reported this week.

2 confirmed case of flu associated hospitalization was reported this week. 4 confirmed cases were reported so far this flu season.

2.5% of emergency room visits were due to flu like illness.

Local Flu Activity Dashboard (All data are preliminary and may change as updated data are received.)

Current Week Flu Activity		Oct	Nov	Dec	Jan	Feb	Mar	Apr	May			
	X			Weekly	40 41	42 43 44 45 46 4	7 48 49 50 51	52 1 2 3	4 5 6 7 8	8 9 10 11 12	13 14 15 16 1	17 18 19 20
	Low	Mod	High	Intensity								

Table 1. Cuyahoga County Influenza Data Dashboard

Influenza (Flu) Indicator	Current Activity Level	Activity Compared to Last Week	#Weeks ¹²³⁴	2019-2020 Season Total/Trend	
Percent of pneumonia deaths & number of flu related deaths - [Fig 1]	Pneumonia: 6.67% Flu: 0 deaths	52.9% Stable	▲ 1 ● 4	Trend data to begin in week 45	
Influenza like illness (ILI) doctor visits [Fig 2]	Cuyahoga: 0.18%	(73.5%)	▼ 1	Trend data to begin in week 45	
Flu associated hospitalizations [Fig 3]	2	+1	1	n=4	
School absenteeism due to ILLNESS ONLY – [Fig 4A]	2.10%	13.0%	• 2	Trend data to begin in week 45	
School absenteeism due to ALL CAUSES – [Fig 4B]	4.25%	15.8%	• 4	Trend data to begin in week 45	
Emergency room visit due to ILI [Fig 5]	2.52%	8.9%	_1	Trend data to begin in week 45	
Sales of over-the-counter medications used to treat ILI. [Fig 6]	241	(2.0%)	•1	Trend data to begin in week 45	
Congestion & cough complaints [Fig 8]	12.30%	4.2%	•2	Trend data to begin in week 45	
Vomiting & nausea complaints [Fig 9]	10.05%	5.1%	_1	Trend data to begin in week 45	
Diarrhea complaints [Fig 10]	2.99%	14.7%	^ 2	Trend data to begin in week 45	

¹Due to small percentages, caution should be used while interpreting the 'Activity Compared to Last Week' box.

 $^{^{2}}$ For figures 2, 4a-4b, ▲ = (Increase ≥ 20%), ▼= (Decrease ≥ -20%), ● = Stable (-19.9% to +19.9%)

 $^{^{3}}$ For figures 1, 5-10, ▲ = (Increase ≥ 5%), ▼ = (Decrease ≥ -5%), ○ = Stable (-4.9% to +4.9%)

⁴For flu related deaths (Fig 1) & Fig 3, ▲ = (Increase # of deaths/cases), ▼ = (Decrease # of deaths/cases), ○ = Stable (Same # of deaths/cases)

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October 27 - November 2, 2019 (MMWR Week 44)

Flu Summary

This report is intended to provide an overview of influenza related activity occurring in Cuyahoga County while providing some information on state activity that is one week behind the current week. It will be published on a weekly basis and can be found at the following website: http://www.ccbh.net/flu-weekly-reports/

Note: Data are provisional and subject to change. Updates will be included in future reports.

Pneumonia and Influenza (P&I) Mortality

6.67% of deaths reported were due to pneumonia for this week. 66.7% of deaths were adults 65 years old or older. No flu related deaths were reported this week (**Figure 1**).

Influenza-Like Illness (ILI) Reports

Two ILI sentinel providers reported 0.18% of patients had ILI symptoms this week (**Figure 2**). ILI is defined as a fever ($\geq 100^{\circ}$ F), **and** cough and/or sore throat.

Influenza-Associated Hospitalizations and Influenza-Associated Pediatric Mortality

In Cuyahoga County, 2 confirmed cases of influenza-associated hospitalization were reported this week (**Figure 3**). There were 21 statewide confirmed influenza associated hospitalizations reported in week 44. No pediatric flu deaths reported so far this flu season in Ohio.

School Absenteeism

Participating schools in Cuyahoga County reported the percentage (median = 2.10%) of absenteeism *due to any illness* on Tuesday (**Figure 4A**). **Figure 4B** shows the total absenteeism *due to any reason* (median = 4.25%).

Emergency Department (ED) visits and Over-the-Counter (OTC) Medication Sales

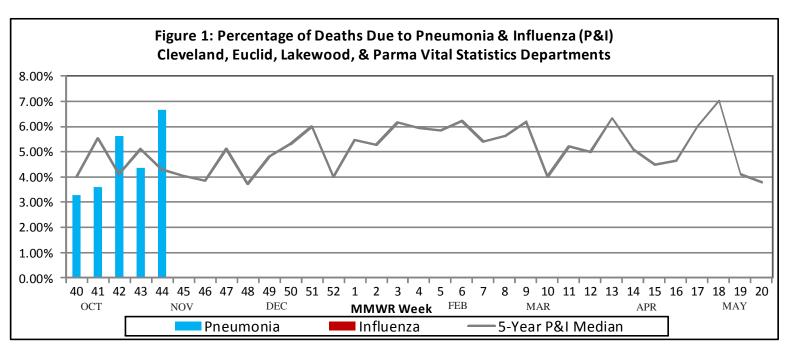
2.5% of all ED visits were for fever + ILI symptoms. About 25 more patients visited EDs for fever and ILI symptoms this week compared to the previous 5-year weekly median (**Figure 5**). **Figure 6** shows 45 fewer OTC products per drugstore were purchased this week than the previous 5-year weekly median.

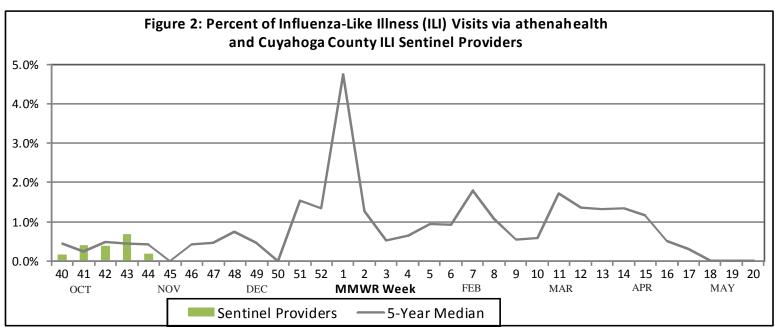
Figure 7 shows, by zip code, the fever + ILI symptoms collected for Figure 5. Three other maps show, by zip code, the frequency of ED visits for three symptoms that are common during the fall and winter seasons and are of interest to the general public: congestion and cough (**Figure 8**), vomiting and nausea (**Figure 9**), and diarrhea (**Figure 10**).

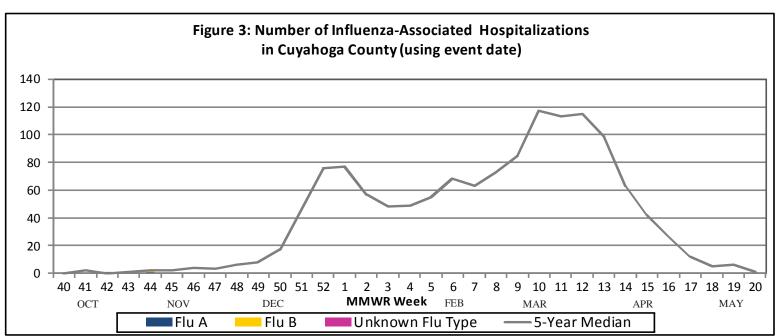
Descriptions of data sources used to complete the weekly influenza write-up can be found on the last page of this report.

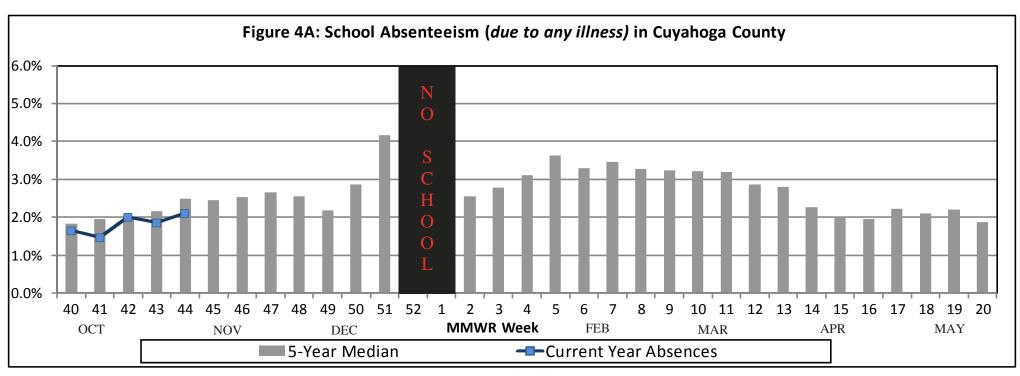
Additional Links

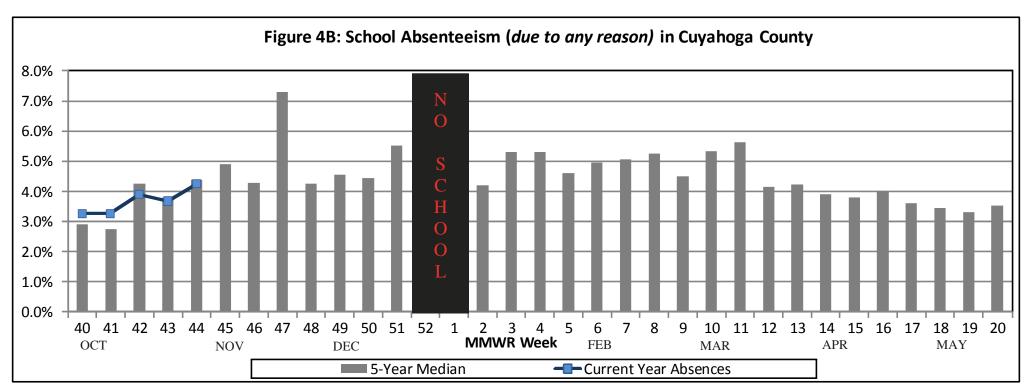
- Weekly U.S. Influenza Surveillance Report http://www.cdc.gov/flu/weekly
- Ohio Influenza Surveillance https://odh.ohio.gov/wps/portal/gov/odh/know-our-programs/ohio-immunization-program/ohio-flu-activity/ohio-flu-activity
- HealthMap Flu Trends http://www.healthmap.org/flutrends/#
- Vaccine Finder https://vaccinefinder.org/

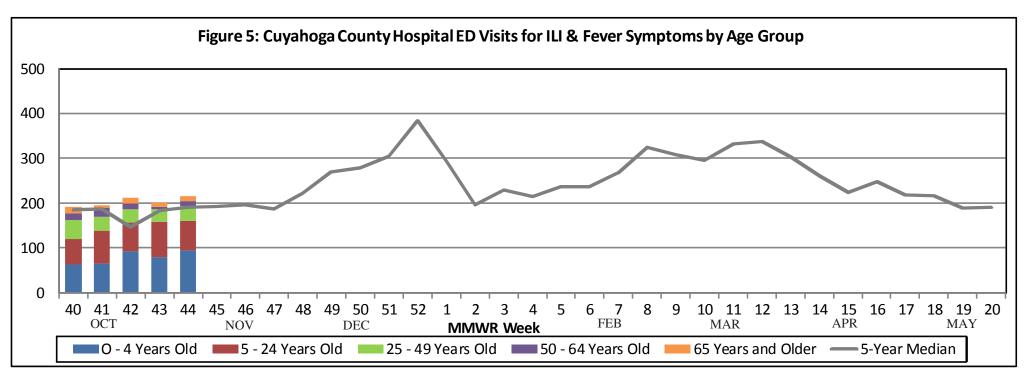


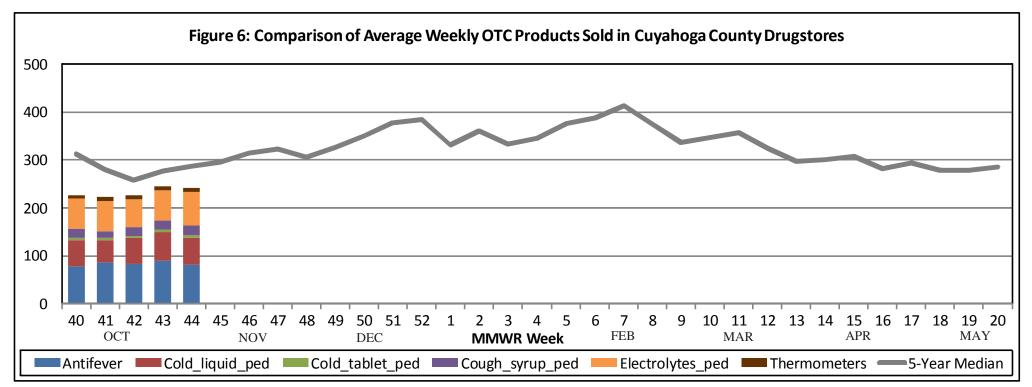


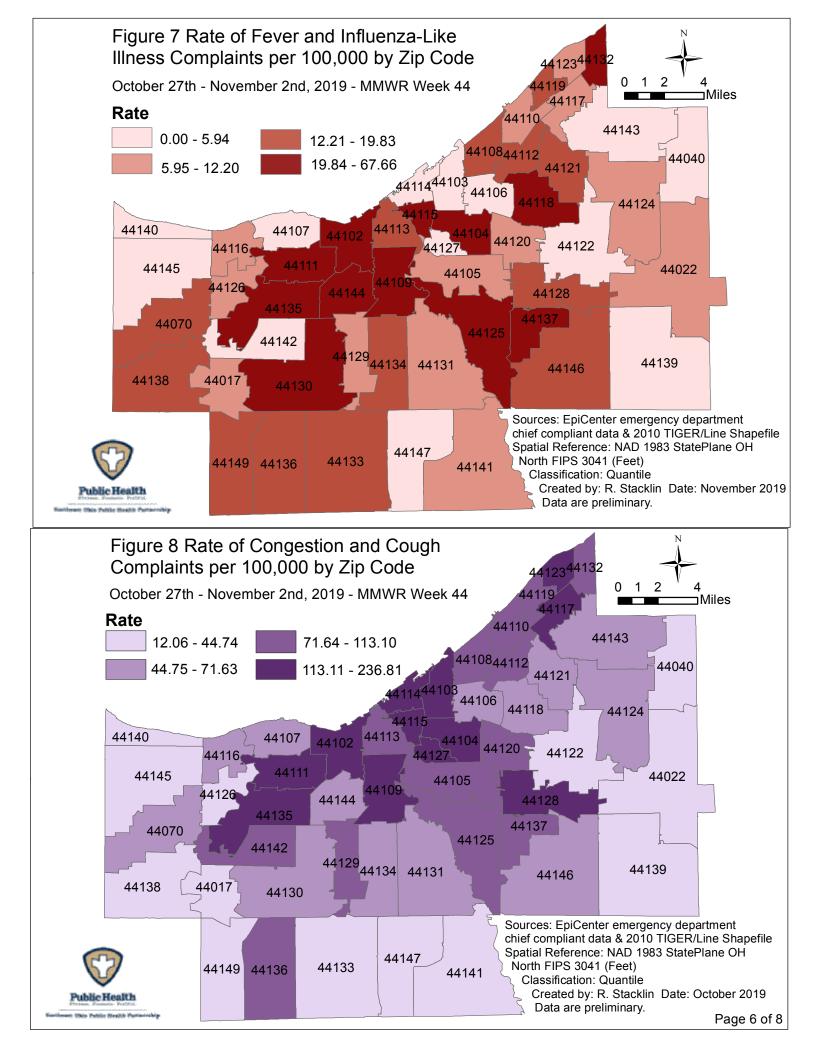


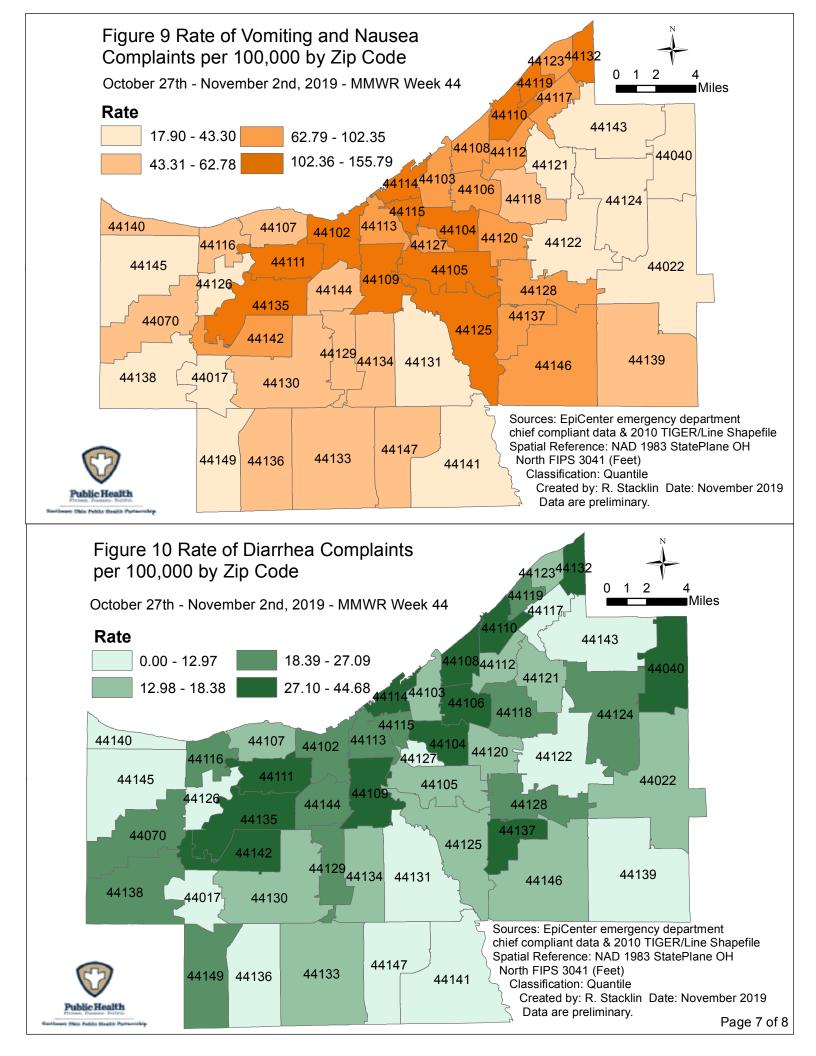












Sources of Influenza Surveillance Data

Five types of data sources are examined on a weekly basis to help determine the influenza activity level for Cuyahoga County:

- 1) Ohio Department of Health (ODH) Seasonal Influenza Activity Summary: The ODH influenza summary provides state-wide data. Data used from this report include: frequency of fever plus influenza-like illness (ILI) associated hospitalizations, number of influenza-associated pediatric mortalities, and number of lab-confirmed influenza cases.
 - A) **Influenza-associated Hospitalizations (ODRS):** Influenza-associated hospitalizations are reported by the Cuyahoga County Board of Health (CCBH) and hospitals using the Ohio Disease Reporting System (ODRS). Hospitalizations can be used as an indicator of the severity of illness during a particular influenza season. This condition became reportable in January 2009.
 - B) Influenza-associated Pediatric Mortality (ODRS): Influenza-associated pediatric mortalities are reported into ODRS by CCBH and hospital staff. Pediatric deaths can be an indicator of the severity of illness during the influenza season. This condition became reportable in 2005.
 - C) **Sentinel Providers (ILINet):** Sentinel providers, through the US Influenza-like Illness Surveillance Network (ILINet), collect outpatient influenza-like illness (ILI) data. ILI is defined as a fever (> 100 F), **and** cough *and/or* sore throat without another known cause. Providers report the total number of patients seen, by age group, on a weekly basis. Sentinel providers also submit specimens for influenza testing to the ODH laboratory throughout the influenza season. There are 2 sentinel providers enrolled in Cuyahoga County for the 2019-2020 season.
- 2) Mortality Reporting System (Vital Statistics): Vital Statistics offices in Cuyahoga County (Cleveland, Euclid, Lakewood, & Parma) reports the percentage of deaths that are due to pneumonia or influenza that occur within their jurisdiction. Cleveland issues death certificates for 56 of the 59 cities in the county.
- 3) School Absenteeism data (due to illness and due to any reason): More than 50 Cuyahoga County schools provide absenteeism data for each Tuesday on the number children absent due to any illness or due to any reason as well as sentinel schools that report week absenteeism data.
- 4) National Retail Data Monitor (NRDM)-OTC Drug Purchases: The NRDM collects over-the-counter (OTC) drug sales information from Cuyahoga County chain drug stores and grocery stores. Pediatric cold products, anti-fever products, and thermometer sales are monitored on a weekly basis.
- 5) **Emergency Department Visits** (**EpiCenter**): EpiCenter collects emergency department chief complaint data from hospitals and urgent care facilities across Cuyahoga County and classifies them into symptom and syndrome categories. Rates for chief complaints regarding fever + ILI and other symptoms commonly detected during the winter are analyzed.