**Weekly Highlights**

- Overall influenza activity in the DON is **low**.
- Laboratory-positive cases, dispensed antivirals, and the percent of outpatient visits for ILI are **low** and the trend has decreased over the prior two weeks.
- Inpatient activity for both laboratory-positive cases (N=0) and inpatient dispensed antivirals (N=2) is **low**.

**Influenza Surveillance Indicators**

<table>
<thead>
<tr>
<th>Overview</th>
<th>Trend</th>
<th>Activity Level</th>
</tr>
</thead>
<tbody>
<tr>
<td>Laboratory Cases</td>
<td>N 22</td>
<td>▼ Low</td>
</tr>
<tr>
<td>Dispensed Antivirals</td>
<td>N 24</td>
<td>▼ Low</td>
</tr>
<tr>
<td>ILI Outpatient Visits</td>
<td>% 2.6</td>
<td>▲▲ Low</td>
</tr>
</tbody>
</table>

**Severity**

- Inpatient Laboratory Cases: N 0, ▲▲ Low
- Inpatient Dispensed Antivirals: N 2, ▲▲ Low

**Active Duty and Recruits**

- Active Duty Laboratory Cases: N 3, ▲▲ Low
- Active Duty Dispensed Antivirals: N 4, ▲▲ Low
- Recruit Laboratory Cases: N 0, ▲▲ Low
- Recruit Dispensed Antivirals: N 1, ▲▲ Low

**Overall Burden (Data Lagged, Week 21)**

**DON Total Influenza Cases from Laboratory, Pharmacy and Encounter Data**

Summary for Week 21:
- Total Cases: 73
- % in Lab: 32.9
- % in Pharmacy: 56.2
- % in Encounters: 52.1

**Supporting Surveillance**

Not available
Laboratory Surveillance

- **Burden:** Laboratory-positive influenza cases (N=22) are low and below the seasonal threshold. The trend over the past two weeks has decreased. The number of laboratory-positive cases decreased from the prior week by 8.3%.
- **Specimens:** Overall percent positivity is 6.5%, with 65.2% of cases identified as influenza A.
- **Severity:** No inpatient laboratory-positive cases were identified.
- **Age:** Children ages 0-4 had the highest rate of laboratory-positive influenza cases at 2.6 cases per 100,000 persons, while children ages 5-17 had the second highest rate at 2.1 cases per 100,000 persons.
- **Location:** NMC Camp Lejeune (N=6), NH Yokosuka (N=5), and NH Rota (N=5) had the highest number of laboratory-positive cases for the week.

Data sources: HL7-formatted CHCS chemistry and microbiology databases. Denominators for rates are from M2 eligibility records.
**Antiviral Surveillance**

- **Burden:** Dispensed antivirals (N=24) are low and below the seasonal threshold. The trend over the past two weeks has decreased. The number of dispensed antivirals decreased from the prior week by 40%.
- **Severity:** 2 inpatient dispensed antivirals were identified in a sponsor (N=1) and a spouse (N=1).
- **Location:** NH Jacksonville (N=3), NH Camp Pendleton (N=3), WRNMMC (N=3), NHC Corpus Christi (N=2), and NMC Camp Lejeune (N=2) had the highest number of dispensed antivirals for the week.

Data sources: HL7-formatted CHCS chemistry and microbiology databases.

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### Top MTFs, Dispensed Antivirals, Week 22

- NH CAMP PENDLETON: 3
- NH JACKSONVILLE: 3
- WALTER REED NATL MIL MED CNTR: 3
- NHC CORPSUS CHRISTI: 2
- NMC CAMP LEJEUNE: 2

### Top MTFs, Dispensed Antivirals, Season 2018 - 2019

- NH PENSACOLA: 1054
- NMC PORTSMOUTH: 1057
- NMC SAN DIEGO: 537
- NH JACKSONVILLE: 490
- NMC CAMP LEJEUNE: 490
- WALTER REED NATL MIL MED CNTR: 402

*Note: Season counts are since Week 37.*

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### Influenza-Like Illness (Data Lagged, Week 21)

- **All outpatient:** Influenza-like illness (ILI) activity is low. The percentage of outpatient medical encounters due to ILI was 2.6% in Week 21, below the surveillance threshold of 4.5%.
- **Note:** ILI activity is used to indicate the burden of ILI on healthcare resources.

Data source: CAPER

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### Medical Event Reports (MER)

- 1 MER for an influenza-associated hospitalization was reported to DRSi this week.
- The MER matched to either laboratory or pharmacy surveillance data.
- **Note:** An influenza-associated hospitalization for an individual 65 or younger is a reportable medical event.

Data source: Disease Reporting System-internet

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### MERs for Influenza-Associated Hospitalizations

<table>
<thead>
<tr>
<th>MER</th>
<th>Match to Surveillance Data</th>
</tr>
</thead>
<tbody>
<tr>
<td>Week 22</td>
<td>N</td>
</tr>
<tr>
<td>N</td>
<td>1</td>
</tr>
<tr>
<td>Season</td>
<td>121</td>
</tr>
</tbody>
</table>

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Prepared by the EpiData Center | email | web
Navy and Marine Corps Public Health Center
DON Active Duty and Recruits

- **AD Laboratory Cases**: 3 laboratory-positive cases were identified among AD Sailors (N=2) and Marines (N=1).
- **AD Dispensed Antivirals**: 4 dispensed antivirals were identified among AD Sailors (N=3) and Marines (N=1).
- **Recruits**: 1 dispensed antiviral was identified among a recruit. No laboratory-positive cases were identified among recruits.
- **Location (Active Duty)**: Laboratory-positive cases among active duty Sailors or Marines occurred most frequently at NH Rota (N=2) and NMC Camp Lejeune (N=1).
- **Location (Recruits)**: No laboratory-positive cases occurred among recruit Sailors or Marines.
- **Vaccination Status**: 2 AD laboratory-positive cases (66.7%) had a vaccination record more than fourteen days prior to infection.

Data Sources: HL7-formatted CHCS chemistry, microbiology and pharmacy databases, MRRS and ITS.

### Laboratory-Positive Cases Among DON Active Duty Service Members, 2018 - 2019

<table>
<thead>
<tr>
<th></th>
<th>Laboratory</th>
<th>Dispensed AVs</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Week 22</td>
<td>Season</td>
</tr>
<tr>
<td>Total Cases</td>
<td>3</td>
<td>1,621</td>
</tr>
<tr>
<td>Navy AD</td>
<td>2</td>
<td>1,007</td>
</tr>
<tr>
<td>Marine Corps AD</td>
<td>1</td>
<td>523</td>
</tr>
<tr>
<td>Navy Recruit</td>
<td>0</td>
<td>17</td>
</tr>
<tr>
<td>Marine Corps Recruit</td>
<td>0</td>
<td>74</td>
</tr>
</tbody>
</table>

Note: Season counts are since Week 37.

### In the News

- The CDC reports low influenza activity for Week 21. A total of 111 influenza-associated pediatric deaths have occurred this season. [Details](#).

### Methods and Data Sources

The Influenza SITREP methods can be found [here](#).

- HL7 formatted CHCS data from microbiology and chemistry data are available from 2004 to present. HL7 formatted CHCS data from pharmacy databases are available from 2006 to present.
- Data from NH Oak Harbor, NH Bremerton, AMC Madigan, and Fairchild AFB are not captured due to transition to MHS GENESIS.
- Laboratory-positive and AV baselines are calculated as an average of the 2015-2016, 2016-2017, and 2017-2018 seasons.
- ILI threshold is calculated based on the off-season percentage outpatient visits for the 2015-2016, 2016-2017, and 2017-2018 seasons, plus two standard deviations.
- ILI encounters are defined as those where an ILI ICD-10-CM code, per AFHSB, is found in any diagnostic position. The ICD-10-CM codes in the AFHSB definition include: B97.89, H66.9, H66.90, H66.91, H66.92, H6693, J00, J01.9, J01.90, J06.9, J09, J09.X, J09.X1, J09.X2, J09.X3, J09.X9, J10, J10.0, J10.00, J10.01, J10.08, J10.1, J10.2, J10.8, J10.81, J10.82, J10.83, J10.89, J11, J11.0, J11.00, J11.08, J11.1, J11.2, J11.6, J11.8, J11.81, J11.82, J11.83, J11.89, J12.89, J12.9, J12.9, J18, J18.1, J18.8, J18.9, J20.9, J40, R05, R50.9
- The “Overall Burden” and ILI figures are lagged one week due to encounter data availability.
- Prepared by the EpiData Center on 05JUN19.