

U.S. Army Public Health Center

# Army Influenza Activity Report

Week ending 23 March 2019 (week 12)

## Influenza Vaccination Coverage\*

As of 28 March 2019

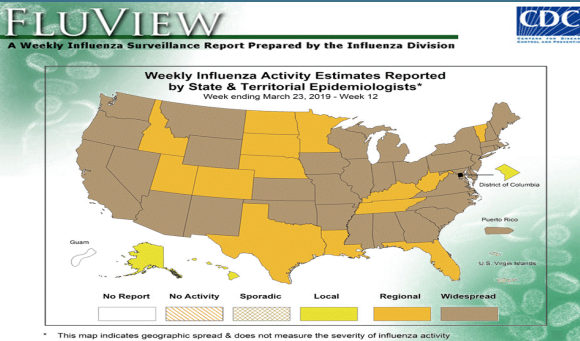
N/A	DoD
98%	Army Active Duty
90%	Army Guard
84 %	Army Reserve

\*Data Source: MEDPROS, ASIMS, MRRS

## SUMMARY

A thirty-nine percent decrease in the overall number of positive respiratory specimens in week 11 was noted when compared to week 12; there were 1137 samples in week 11 and 689 in week 12. The largest reductions in the number of positive respiratory specimens from week 11 to week 12 were observed among influenza A and respiratory syncytial virus, decreasing by 41% and 31%, respectively. The majority of the influenza A positive specimens continue to be reported from non-Active Duty beneficiaries; accounting for 72% (436) of the cases in week 12. One influenza-associated hospitalization with an onset date in week 12 was reported in the Disease Reporting System internet; this case was an unvaccinated, non-Active Duty beneficiary. Outpatient visits for influenza-like illness in Active Duty Service Members are down 6% in week 12, when compared to week 11.

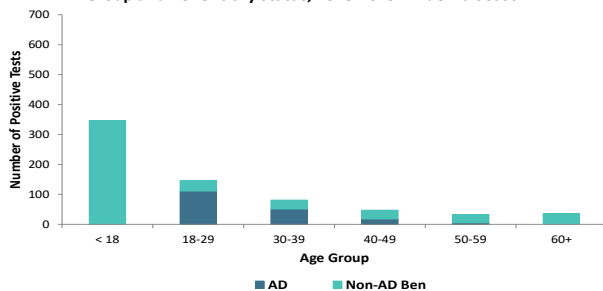
## GEOGRAPHIC SPREAD



In the general U.S. population, widespread influenza activity was reported by 34 states. Regional activity was reported by 13 states, and local activity was reported by the District of Columbia, Alaska and Hawaii. Sporadic activity was reported by the U.S. Virgin Islands. Guam did not report to the Centers for Disease Control and Prevention (CDC) in week 12.

## DEMOGRAPHICS

Positive Respiratory Specimen Results from Army MTFs by Age Group and Beneficiary Status, 2018-2019 Influenza Season

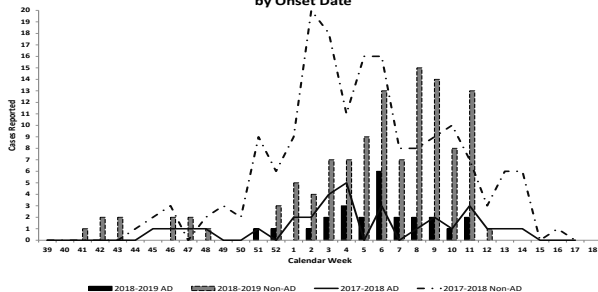


**Active Duty (AD):** In week 12, 27% (n=185) of the total positive specimens (n=689) were among AD Service Members (SMs). Sixty percent (n=111) of the positive specimens among AD Service Members were from individuals in the 18-29 age group.

**Non-AD:** The majority of the positive specimens continue to result from the non-AD population. In week 12, this group accounted for 73% (n=504) of the total positive specimens. Individuals younger than 18 years were disproportionately affected; they accounted for 69% (n=347) of the positive respiratory specimens among non-AD individuals in week 12.

## INFLUENZA-ASSOCIATED HOSPITALIZATIONS

Army Influenza-Associated Hospitalizations Reported in DRSi by Onset Date



One influenza-associated hospitalization, with an onset date in week 12, was reported in DRSi; this case was a non-AD SM. To date, there have been 141 reported hospitalizations this season: 25 AD SMs and 116 non-AD individuals.

\*DRSi does not capture older than 65 years old for influenza-associated hospitalizations.

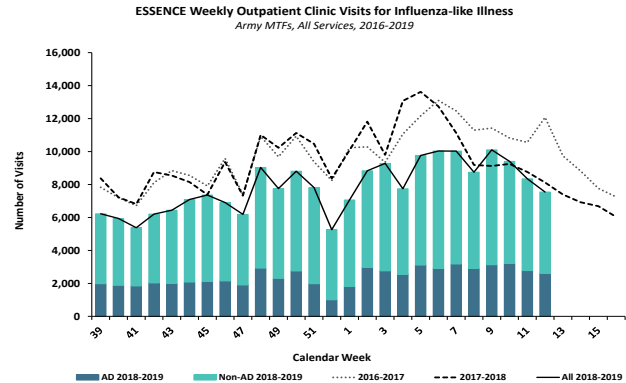
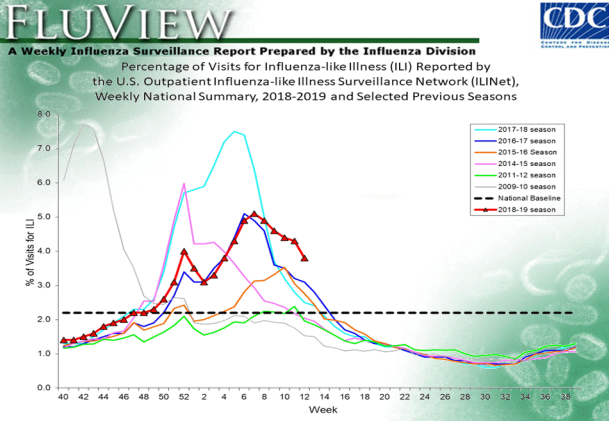
**Additional Resources:** [Army Influenza Reports](#); [ARD Reports](#); [AFHSB Influenza Reports](#); [NHRC FRI Reports](#); [DoD Pandemic Influenza Watchboard](#); [CDC](#)

**Key:** ILI- Influenza-Like Illness; DRSi- Disease Reporting System Internet; NHRC- Naval Health Research Center; RSV- Respiratory Syncytial Virus; DEP- Disease Epidemiology Program

**Questions?**  
Email [APHC DEP](mailto:APHC_DEP)  
410-436-7605

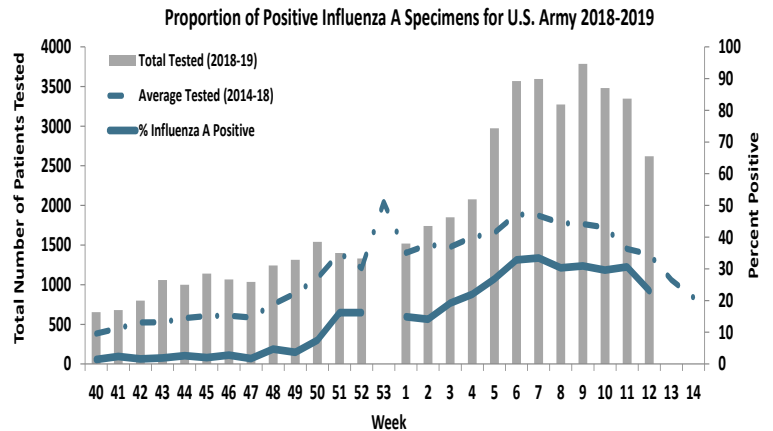
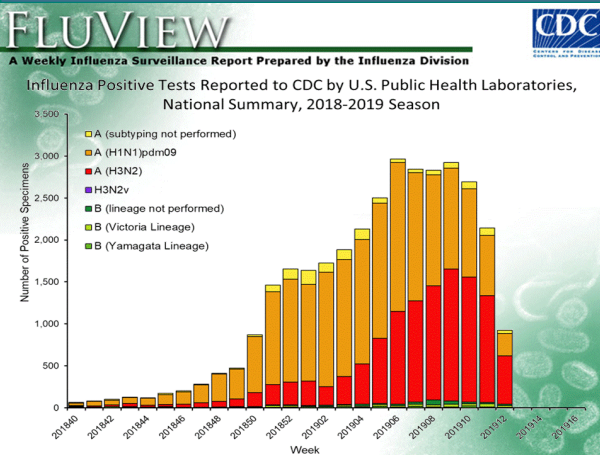
**ILI ACTIVITY - UNITED STATES**

**ILI ACTIVITY - ARMY**



Nationwide in week 12, incidence of ILI activity was 3.8%, which is above the national baseline of 2.2%. Regionally, the percentage of ILI outpatient visits reported to the CDC ranged from 2.8% to 5.6%. At Army medical treatment facilities, overall incidence of ILI activity decreased by 10% when compared to the previous week. ILI activity among the AD population decreased by 6% from week 11 to week 12. When compared to week 12 of the 2017-2018 season, there were 7% fewer ILI outpatient visits in week 12 of the current season.

**LABORATORY RESPIRATORY SPECIMEN TESTING**



Nationwide, 1618 specimens were tested and submitted to the CDC during week 12, of which 923 (57%) were positive for influenza. In the Army population, the majority of the influenza A-positive specimens continue to be reported from RHC-A and RHC-C, with 48% (n=292) and 47% (n=285) specimens, respectively. Influenza A activity was markedly lower in RHC-P and RHC-E, accounting for 4% (n=22) and 2% (n=15) of the positive influenza A specimens, respectively.

		Week 9	Week 10	Week 11	Week 12	Season Total
Test Types Among Positive Influenza A Specimens	RAT	708	712	717	389	6296
	Culture	38	27	10	12	404
	PCR	423	292	297	203	3389
Army MTF Laboratory Results, 2018-19	Influenza A	1169	1031	1024	604	10089
	Influenza B	26	30	38	29	369
	Adenovirus	25	19	17	15	373
	Enterovirus	0	0	0	0	5
	Parainfluenza	8	10	13	10	315
	RSV	54	36	45	31	1764
	Negative	5364	5137	4802	3989	81246
	<b>Total</b>	<b>6646</b>	<b>6263</b>	<b>5939</b>	<b>4678</b>	<b>94161</b>

The number of positive respiratory specimens decreased by 39% from week 11 to week 12; there were 1137 positive specimens in week 11 and 689 in week 12. All respiratory pathogens decreased in the number of positive specimens from week 11 to week 12: influenza A, influenza B, adenovirus, parainfluenza, and respiratory syncytial virus decreased by 41%, 24%, 12%, 23%, and 31% respectively.

**Locations providing week 12 laboratory data as of 27 March 2019:** Ft Belvoir, Ft Benning, Ft Bliss, Ft Bragg, Ft Campbell, Ft Carson, Ft Drum, Ft Eustis, Ft Gordon, Ft Hood, Ft Huachuca, Ft Irwin, Ft Jackson, Ft Knox, Ft Leavenworth, Ft Lee, Ft Leonard Wood, Ft Meade, Ft Polk, Ft Riley, Ft Rucker, Ft Sam Houston, Ft Sill, Ft Stewart, Ft. Wainwright, Landstuhl Regional Medical Center, Korea, Redstone Arsenal, Tripler Army Medical Center, the United States Military Academy, and Walter Reed National Military Medical Center.

## LABORATORY RESPIRATORY SPECIMEN TESTING

Region	Installation	Influenza A			Influenza B			Adenovirus		
		No. Tested	% Positive	Baseline % Positive	No. Tested	% Positive	Baseline % Positive	No. Tested	% Positive	Baseline % Positive
RHCA	Ft. Belvoir	344	27.9	17.2	163	6.7	100	55	10.9	100
	Ft. Benning	217	8.8	3.6	217	0.9	9.2			
	Ft. Bragg	175	32.6	12.2			100			
	Ft. Campbell	139	16.5	4.6	141	0	16.1			100
	Ft. Drum	8	37.5	17.6			100			
	Ft. Eustis	61	37.7	34.1	3	100	100			
	Ft. Gordon	92	21.7	4.1	92	0	31			100
	Ft. Jackson	70	12.9	7.7	71	0	7.7			
	Ft. Knox	37	18.9	0	37	0	33.3			
	Ft. Lee	64	17.2	13.3			100			
	Ft. Meade	5	0	0						
	Ft. Rucker	13	38.5	0	13	0	50			
	Ft. Sam Houston	313	30	1.8	315	0.3	5.5			100
	Ft. Stewart	73	16.4	13	73	0	15.7			100
	Redstone Arsenal	9	0	0	9	0	0			
U.S. Military Academy	40	17.5	11.1	22	0	100	1	100		
RHCC	Ft. Bliss	289	27.3	0	207	0.5	21.7	20	20	5.3
	Ft. Carson	97	22.7	0			100			
	Ft. Hood	177	14.1	0	177	1.7	3.6	16	6.3	
	Ft. Huachuca	5	0	0	8	12.5	0			
	Ft. Irwin	38	21.1	14.3	38	0	0			
	Ft. Leavenworth	40	22.5	13.3	40	0	22.6			
	Ft. Leonard Wood	80	26.3	8.1	64	1.6	5.4			
	Ft. Polk	54	5.6	21.4	1	100	100			
	Ft. Riley	71	21.1	7.1	66	1.5	7.1			
Ft. Sill	62	14.5	0	2	100	100				
RHCE	Landstuhl Regional Medical Center	21	23.8	29.4	16	0	8.3	16	12.5	0.9
RHCP	Redstone Arsenal	31	12.9	2.1	31	6.5	39.6			
	Korea	34	26.5	17.8	15	0	0	15	6.7	2.7
	Tripler Army Medical Center	68	13.2	0	43	0	10.5	43	0	3.8
Region	Installation	Enterovirus			Parainfluenza			RSV		
		No. Tested	% Positive	Baseline % Pos.	No. Tested	% Positive	Baseline % Pos.	No. Tested	% Positive	Baseline % Pos.
RHCA	Ft. Belvoir				59	5.1	100	166	4.2	0
	Ft. Campbell						100			100
	Ft. Drum									0
	Ft. Gordon						100			100
	Ft. Sam Houston						100			
	Ft. Stewart						100	13	30.8	0
	U.S. Military Academy						100			
RHCC	Ft. Bliss							204	2.9	0
	Ft. Carson							18	5.6	0
	Ft. Hood				20	20		45	6.7	68.4
	Ft. Leavenworth							7	28.6	0
	Ft. Leonard Wood						100			
	Ft. Polk							10	0	18.2
	Ft. Riley							18	16.7	15
Ft. Sill							2	0	0	
RHCE	Landstuhl Regional Medical Center				16	0	2.7	19	15.8	4.5
RHCP	Ft. Wainwright							30	6.7	19
	Korea			0	15	20	0	15	0	2.7
	Tripler Army Medical Center	43	0	0	43	0	0			100

No.: Number of specimens tested during MMWR week 12 2019.

% Pos.: Percentage of positive specimens reported during MMWR week 12, 2019.

Baseline % Pos.: Percentage of positive specimens reported in MMWR week 12 during influenza seasons from September 2012 - May 2018.

Missing values indicate that specimens were not tested for the disease during the week of interest.

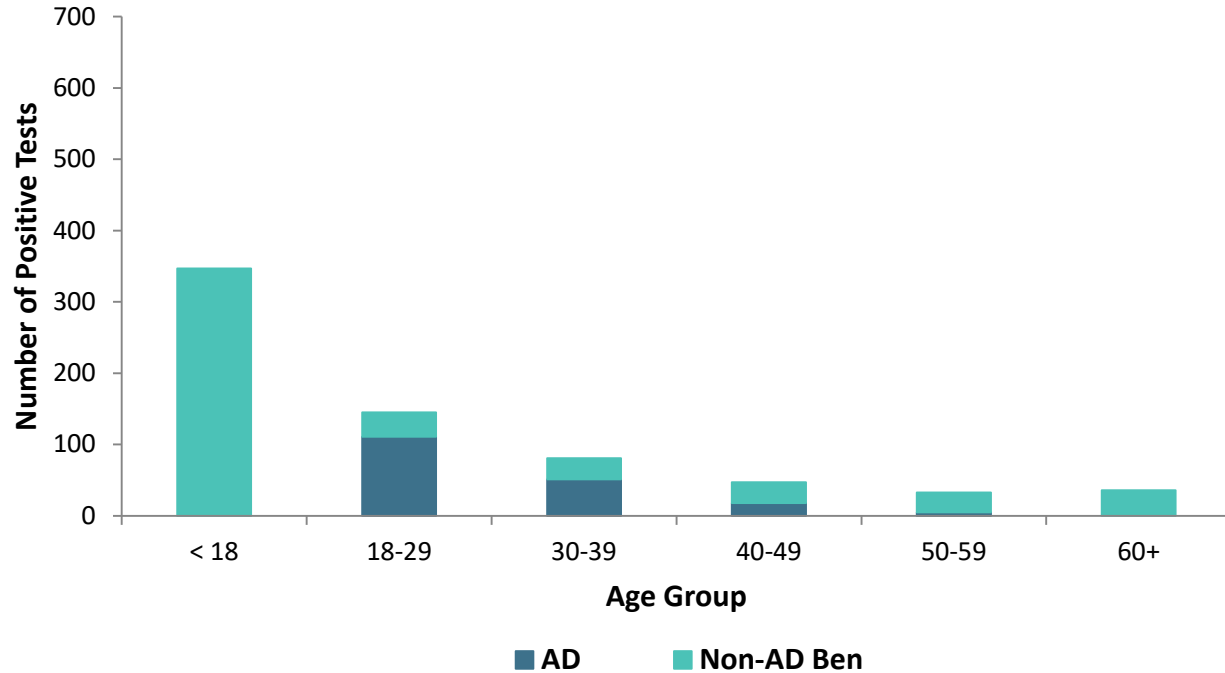
High baseline percent positive values may be due to low numbers of specimens tested.







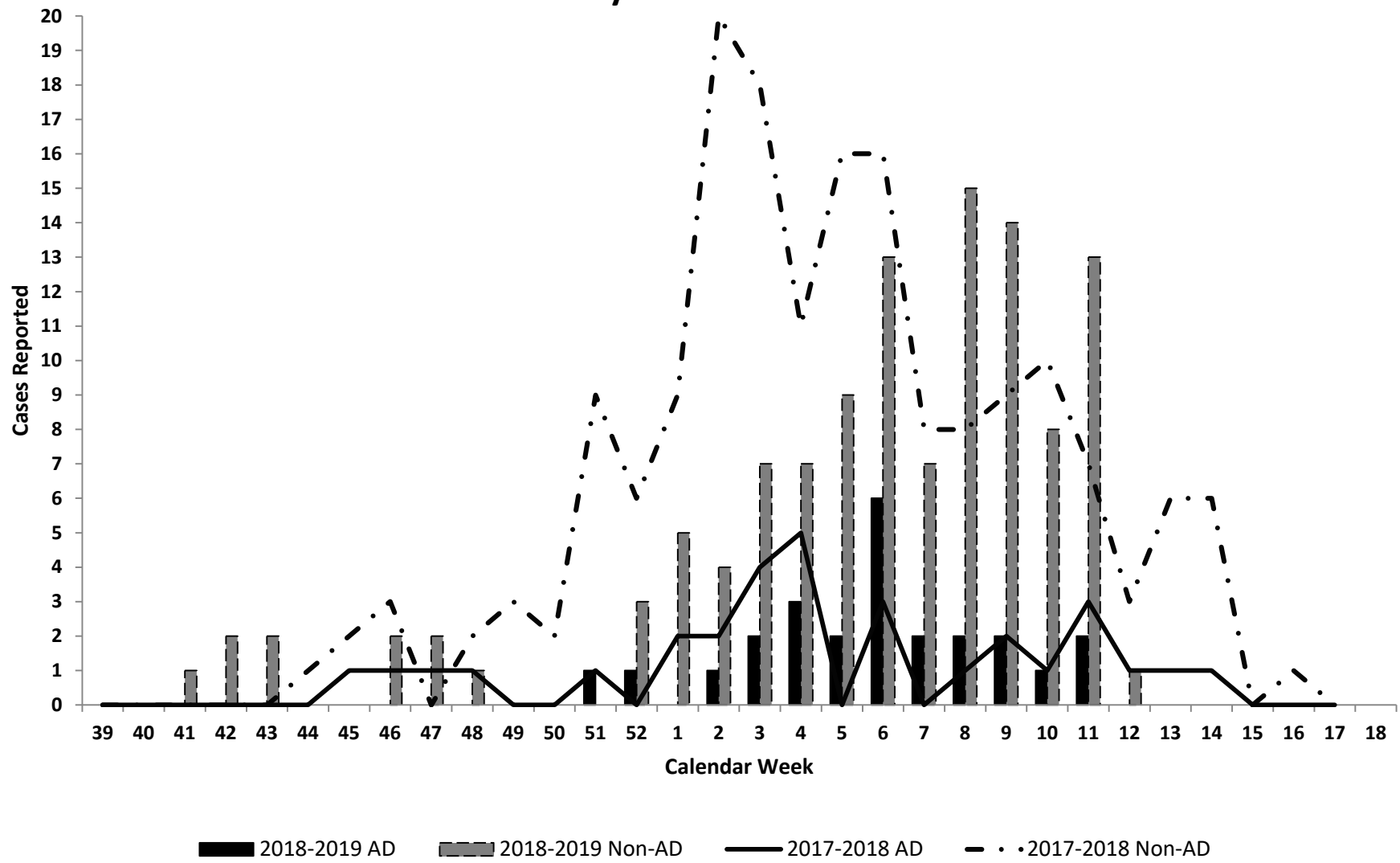
**Positive Respiratory Specimen Results from Army MTFs by Age Group and Beneficiary Status, 2018-2019 Influenza Season**



<b>Week 12</b>			
<b>Age Group</b>	<b>AD</b>	<b>Non-AD Ben</b>	<b>Season Total</b>
< 18	0	347	<b>5802</b>
18-29	111	34	<b>1531</b>
30-39	51	30	<b>1048</b>
40-49	18	29	<b>687</b>
50-59	5	28	<b>472</b>
60+	0	36	<b>549</b>
<b>Total</b>	<b>185</b>	<b>504</b>	<b>10089</b>



## Army Influenza-Associated Hospitalizations Reported in DRSi by Onset Date



**Note:** Reportable influenza cases are defined as only cases that have been hospitalized and are under the age of 65. See [Armed Forces Reportable Medical Events Guidelines and Case Definitions](#) for more information.  
Data as of 27 March 2019.

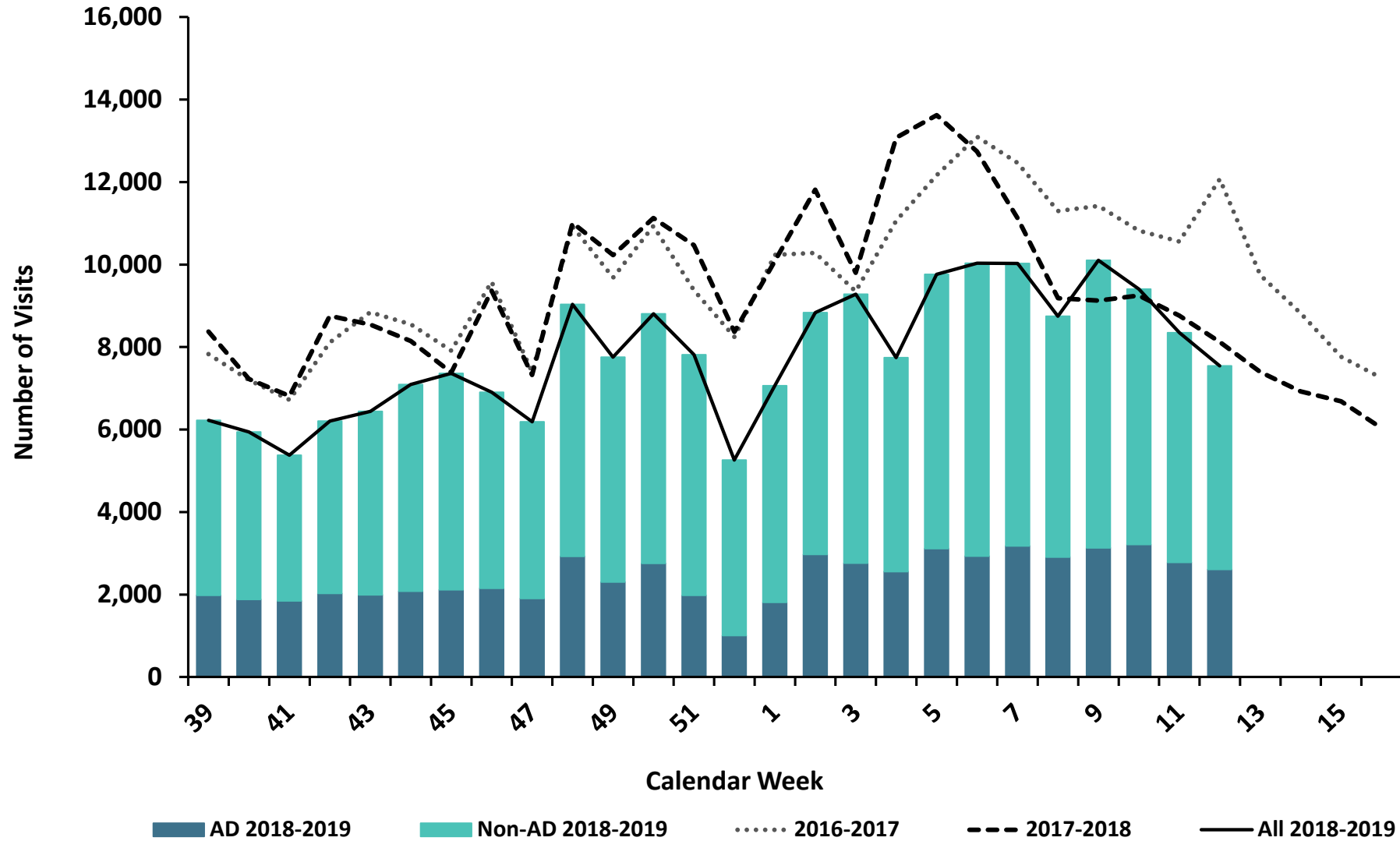






# ESSENCE Weekly Outpatient Clinic Visits for Influenza-like Illness

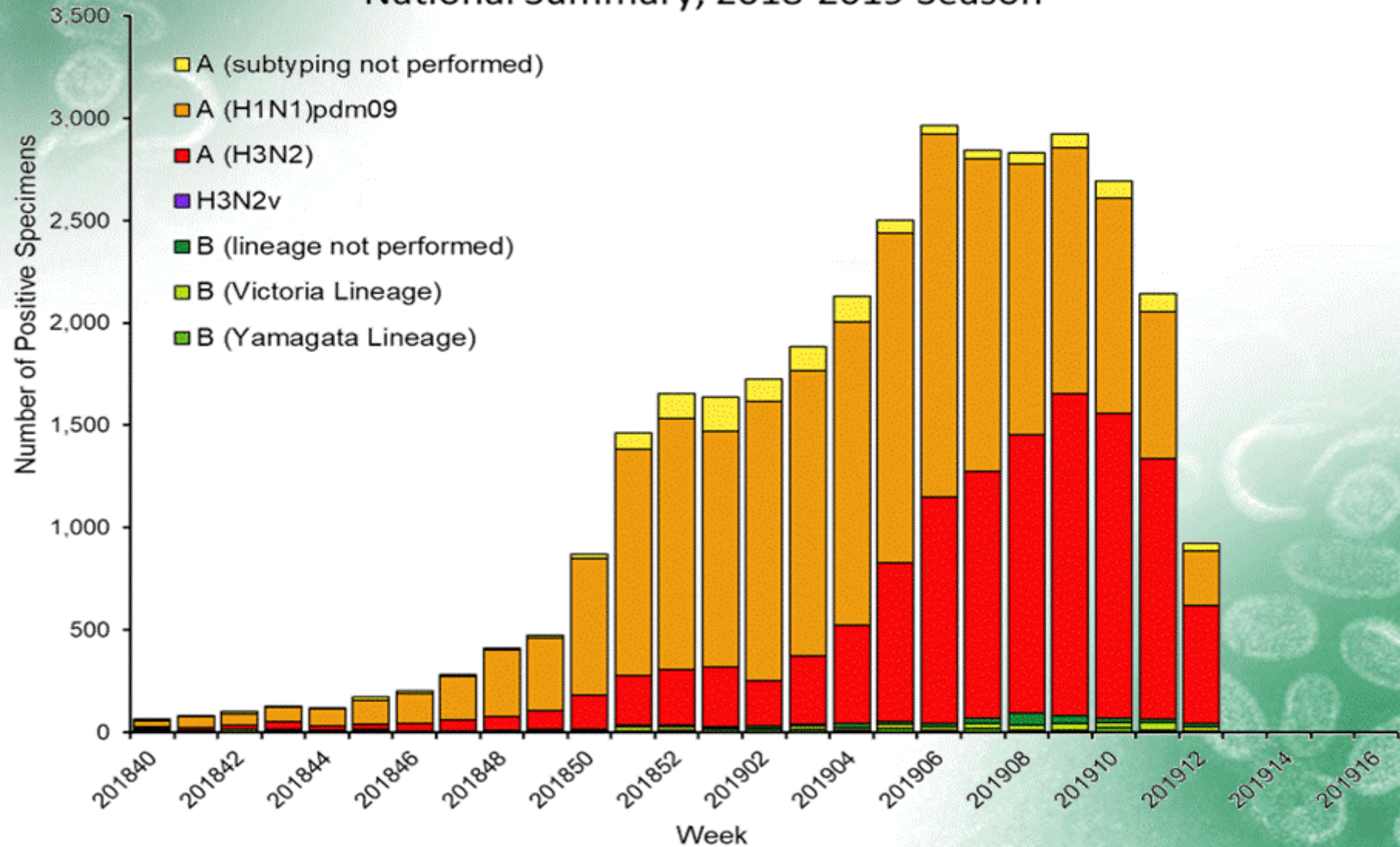
Army MTFs, All Services, 2016-2019



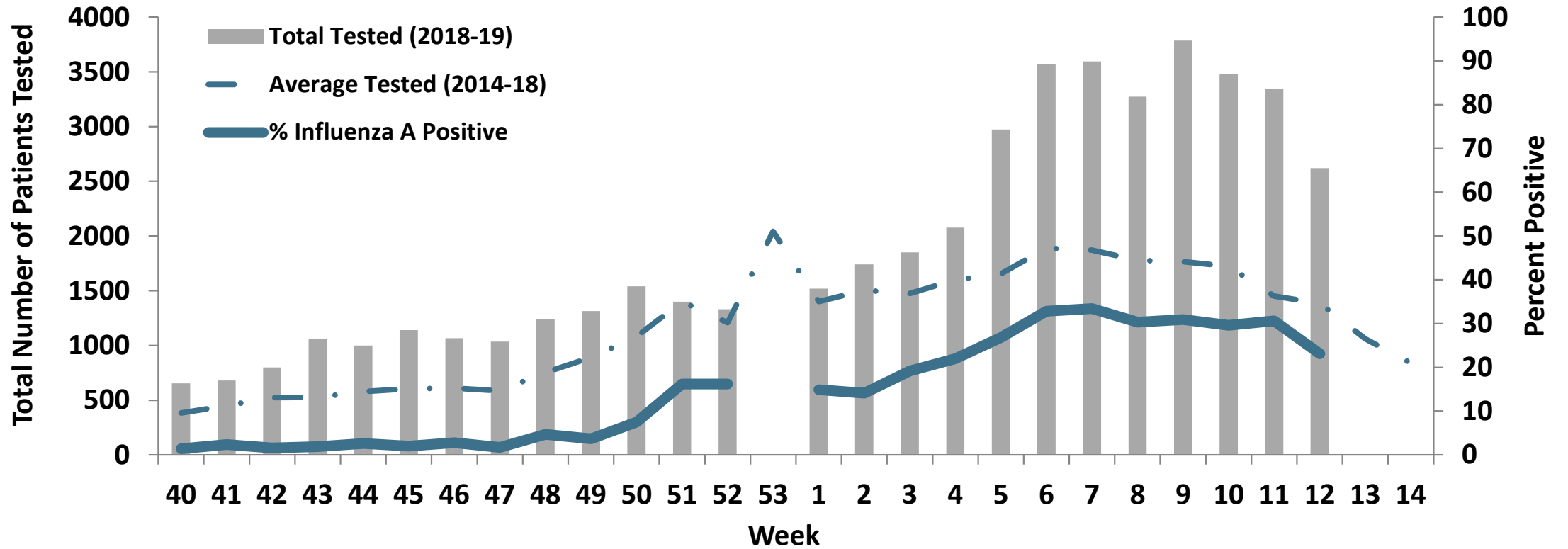
Clinic visits for ILI are obtained from ESSENCE. Data as of 26 March 2019.

A Weekly Influenza Surveillance Report Prepared by the Influenza Division

## Influenza Positive Tests Reported to CDC by U.S. Public Health Laboratories, National Summary, 2018-2019 Season



### Proportion of Positive Influenza A Specimens for U.S. Army 2018-2019





		<b>Week 9</b>	<b>Week 10</b>	<b>Week 11</b>	<b>Week 12</b>	<b>Season Total</b>
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