



DEPARTMENT OF DEFENSE (AFHSB) Seasonal Influenza Surveillance Summary

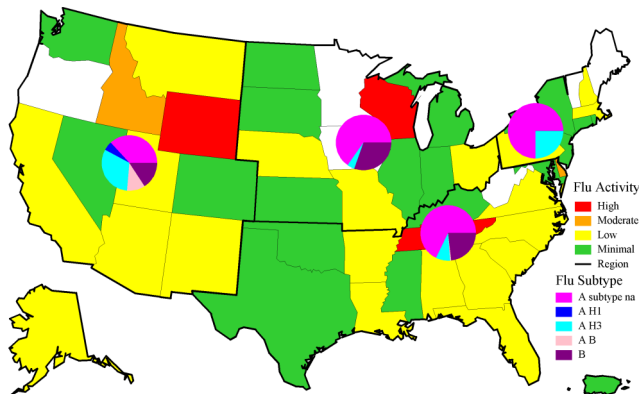


Northern Command -- Week 11 (12 Mar 2017—18 Mar 2017)

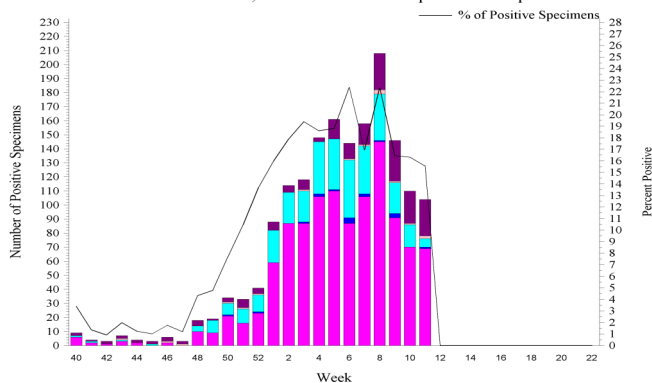
In NORTHCOM during week 11^{1,2}

- ◆ Influenza activity remained minimal to low for most of the country.
- ◆ The percentage of outpatient visits due to ILI increased slightly and was above previous seasons and baseline.
- ◆ The percentage of positive lab tests remained stable at 15.6% for service members and 26.6% for beneficiaries.
- ◆ A/H3N2 continued to predominate over A/H1N1.
- ◆ Two other beneficiary influenza hospitalizations (RMEs) were reported for week 11.

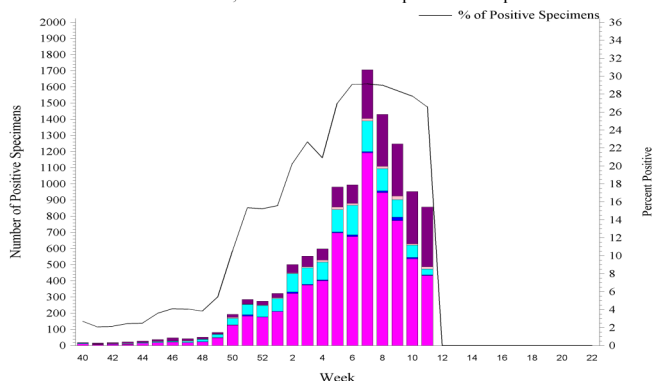
NORTHCOM Service Members, Influenza Activity and Virus Subtype, During the Last 2 Weeks



NORTHCOM Service Members, Influenza Positive Specimens Reported to AFHSB



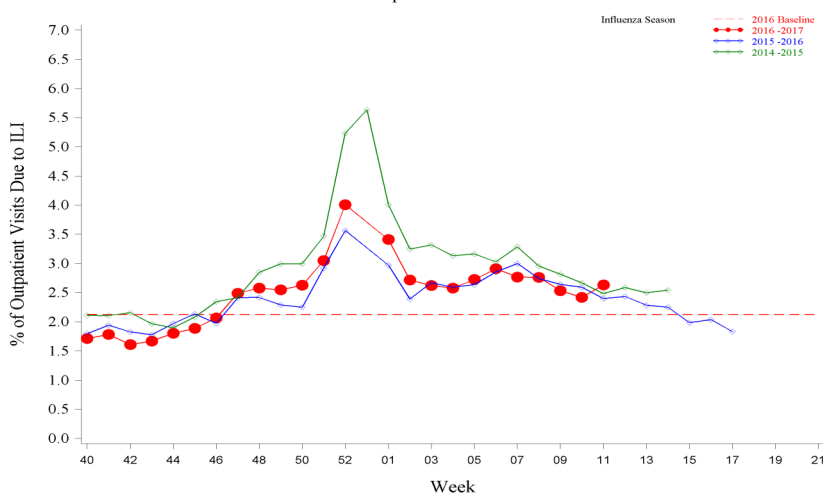
NORTHCOM Beneficiaries, Influenza Positive Specimens Reported to AFHSB



2016 – 2017 NORTHCOM Season Totals^{1,2}

	A/H1N1	A/H3N2	A/Untyped	Flu B	AB	Overall % Positive
Service Members	17	339	1112	199	16	13.47
Dependents	105	1511	7226	2262	164	20.60

NORTHCOM Service Members, 2016-2017 and Previous 2 Influenza Seasons
ILI Outpatient Visits



- ◆ NHRC laboratory-confirmed influenza cases, US Military Basic Trainees: As of Week 10

	Week 10 ³				2016 – 2017 Recruit Season Totals ³				
	A/H1N1	A/H3N2	A/unsubtyped	Flu B	A/H1N1	A/H3N2	A/unsubtyped	Flu B	No. Tested
Ft Benning						9			107
Ft Jackson						10		1	118
Ft Leonard Wood						5			25
NRTC Great Lakes		4				13		2	82
Lackland AFB	1			1	1			1	23
MCRD Parris Island						15			52
MCRD San Diego		4		1		13	1	1	147
CGTC Cape May	1	12		3	1	12		3	98
Total	2	20	0	5	2	77	1	8	652

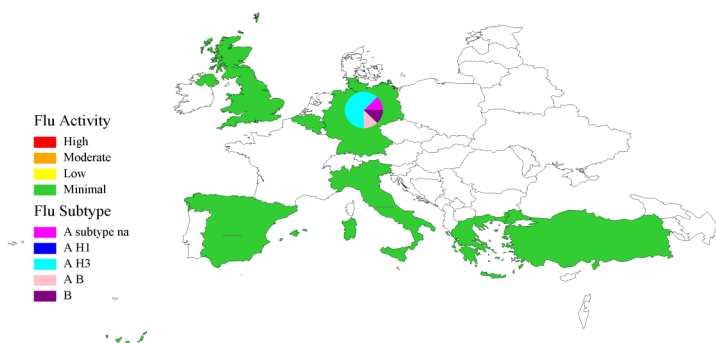
¹AFHSB, ²USAFSAM, ³NHRC, ⁴LRMC, ⁵PHCR-E, ⁶AFRIMS, ⁷NMRC-A, ⁸NAMRU-3, ⁹NAMRU-6

**European Command -- Week 11**

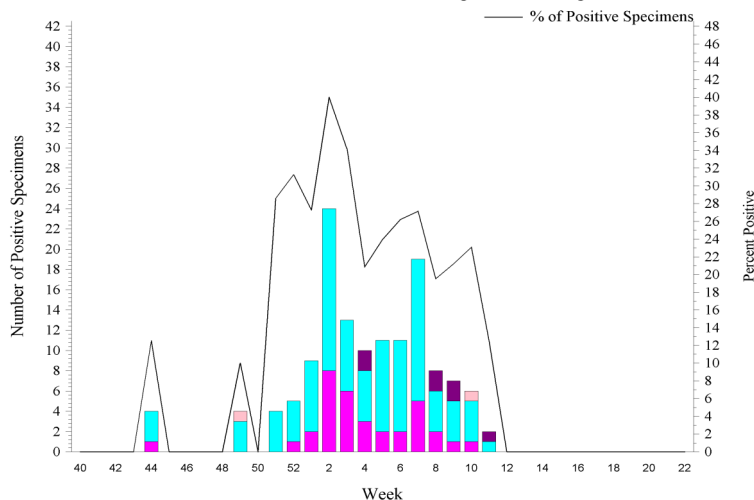
In EUCOM during week 11^{1,4,5}

- ◆ Influenza activity was minimal across EUCOM.
- ◆ The percentage of outpatient visits due to ILI increased, but remained below previous seasons and baseline.
- ◆ The percentage of positive lab tests decreased to 12.5% for service members and 8.3% for beneficiaries for week 11.
- ◆ A/H3N2 continued to predominate over A/H1N1.
- ◆ One other beneficiary influenza hospitalization (RMEs) was reported for week 11.

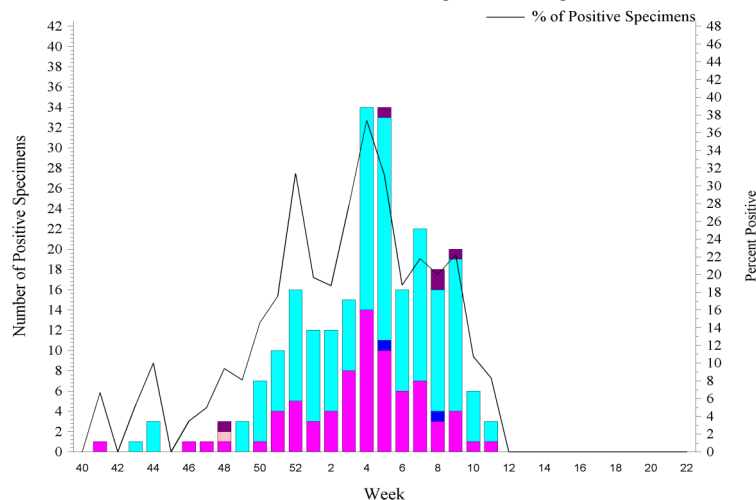
EUCOM Service Members, Influenza Activity and Virus Subtype, During the Last 2 Weeks



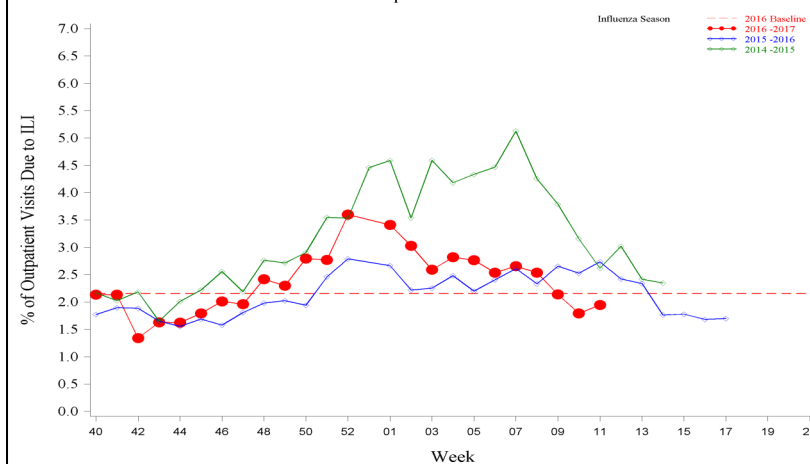
EUCOM Service Members, Influenza Positive Specimens Reported to AFHSB



EUCOM Beneficiaries, Influenza Positive Specimens Reported to AFHSB



EUCOM Service Members, 2016-2017 and Previous 2 Influenza Seasons
ILI Outpatient Visits



2016-2017 EUCOM Season Totals^{1,4,5}

	A/H1N1	A/H3N2	A/Untyped	Influenza B	AB	Overall % Positive
Service Members	0	94	34	7	2	19.86
Dependents	2	155	75	5	1	19.12

¹AFHSB, ²USAFSAM, ³NHRC, ⁴LRMC, ⁵PHCR-E, ⁶AFRIMS, ⁷NMRC-A, ⁸NAMRU-3, ⁹NAMRU-6

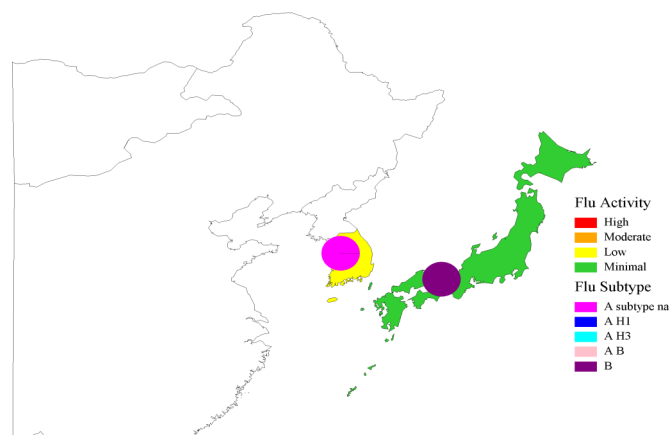
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**Pacific Command -- Week 11**

In PACOM during week 11^{1,6,7}

- ◆ Influenza activity was minimal across PACOM except for the ROK which had low activity.
- ◆ The percentage of outpatient visits due to ILI remained stable and was similar to previous seasons, but below baseline.
- ◆ The percentage of positive lab tests increased to 10.2% for service members and remained high at 26.6% for other beneficiaries during week 11.
- ◆ Among the influenza A specimens subtyped, A/H3N2 continued to be the predominating subtype.

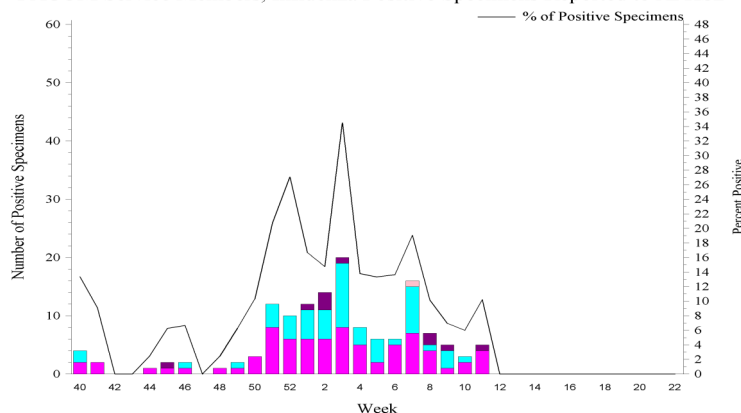
PACOM Service Members, Influenza Activity and Virus Subtype, During the Last 2 Weeks
South Korea and Japan



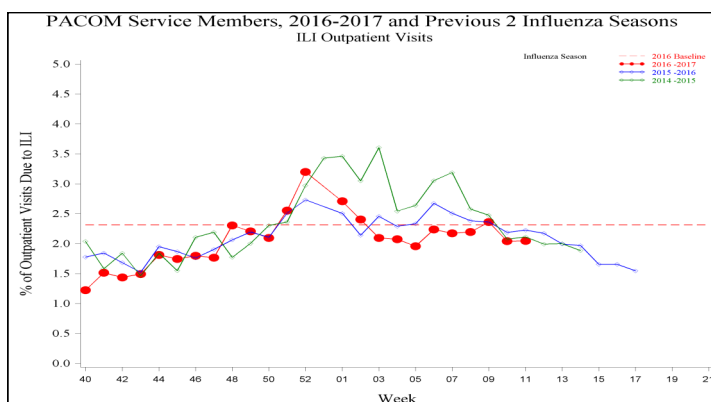
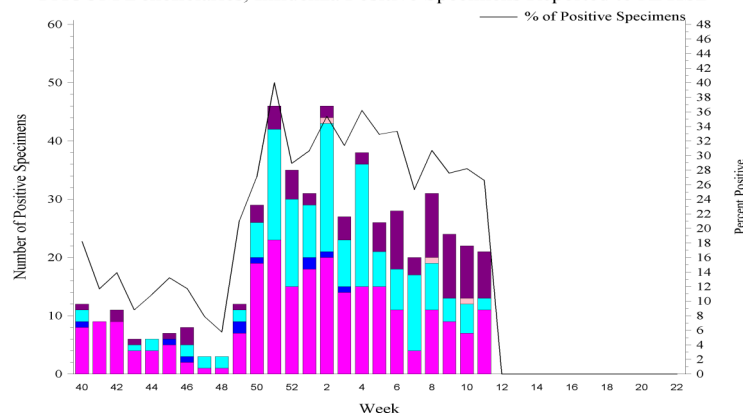
PACOM: Guam and Hawaii Influenza Activity and HL7 Test Positive (MAP: SM+BN, 2 wks)						
Area Name	Influenza Activity	HL7 Type				
		A(H1)	A(H3)	A Untyped	B	AB
Guam	Minimal	0	0	0	0	0
Hawaii*	Minimal	0	5	17	14	1

*Hawaii HL7 Type counts may include samples received from Guam, but tested in Hawaii

PACOM Service Members, Influenza Positive Specimens Reported to AFHSB



PACOM Beneficiaries, Influenza Positive Specimens Reported to AFHSB



2016-2017 PACOM Season Totals ^{1,6,7}						
	A/H1N1	A/H3N2	A/Untyped	Flu B	Flu AB	Overall % Positive
Service Members	0	54	76	10	1	12.56
Dependents	10	158	242	88	3	25.50

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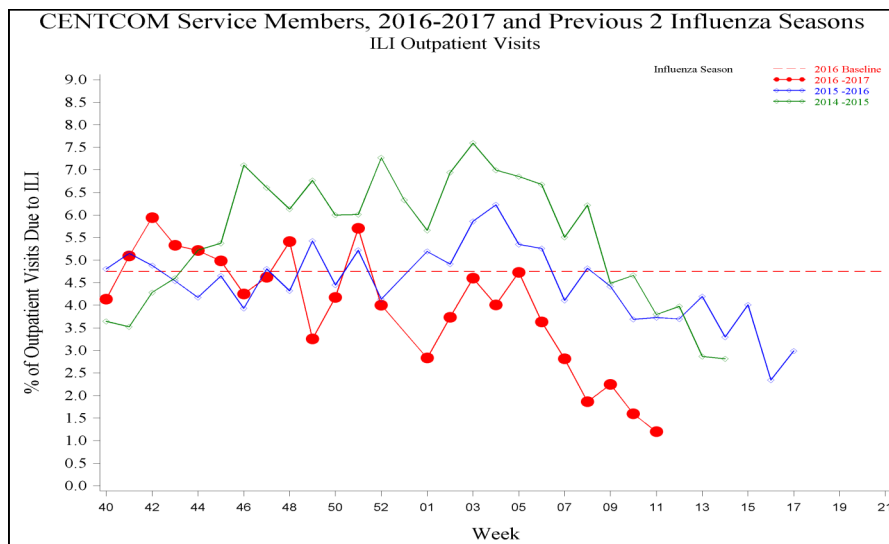
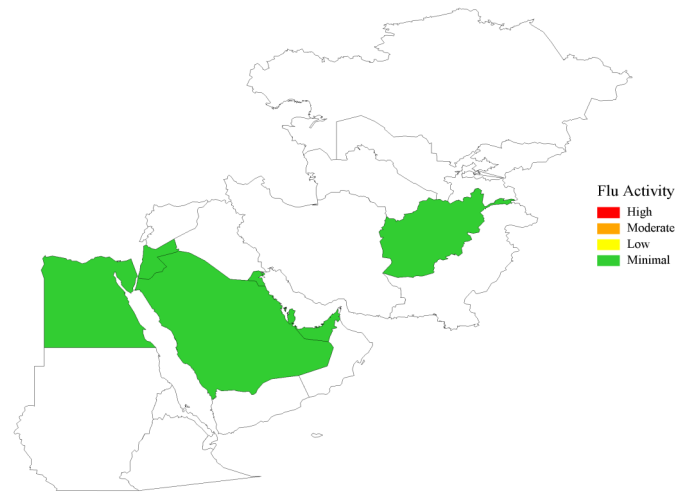
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**Central and Africa Commands -- Week 11**

In CENTCOM and AFRICOM during week 11^{1,8}

- ◆ Influenza activity was minimal for locations with available data in CENTCOM and AFRICOM.
- ◆ The percentage of outpatient visits due to ILI continued to decrease and remained below baseline and previous seasons.

CENTCOM, Influenza Activity, During the Last 2 Weeks

**Southern Command -- Week 11**

In SOUTHCOM during week 11⁹

- ◆ Influenza activity was minimal in Honduras this week based on DMSS data.

¹AFHSB, ²USAFSAM, ³NHRC, ⁴LRMC, ⁵PHCR-E, ⁶AFRIMS, ⁷NMRC-A, ⁸NAMRU-3, ⁹NAMRU-6

Description:

Maps, figures and tables are stratified by Combatant Commands (CCMD). The map provides a measure of influenza activity by state or country within each CCMD for the past two weeks for service members. Influenza activity is defined by the percentage of outpatient visits associated with an Influenza-like Illness (ILI) for each week compared to baseline levels of influenza activity. Additionally, a pie graph by US region or country is generated to display the distribution of influenza types and subtype identified from positive laboratory tests for the past two weeks combined.

Influenza activity: Percentage of Outpatient Visits Associated with ILI:

The percentage of all outpatient visits for ILI is calculated each week for all service members, regardless of component. These data are presented as a map of the past two weeks' activity and a figure to display the entire season's data compared to the two prior seasons and baseline. For the map, the activity level compares the mean reported percent of visits due to ILI for the past two weeks to the mean reported percent of visits due to ILI during baseline weeks. Baseline weeks are defined as non-influenza weeks (weeks 22-39) over the past 3 years.

There are four activity levels reported on each map. The activity level corresponds to the number of standard deviations (SD) below, at or above the mean for the current week compared to the mean of the baseline weeks. Activity levels are classified as minimal, low, moderate, and high. Minimal activity corresponds to an influenza percentage that is less than 2 SD above the mean. Low activity corresponds to an influenza percentage that is equal to or greater than 2 SD above the mean, but less than 4 SD above the mean. Moderate activity corresponds to an influenza percentage that is equal to or greater than 4 SD above the mean, but less than 6 SD above the mean. High activity corresponds to an influenza percentage that is equal to or greater than 6 SD above the mean.

Influenza Positive Specimens:

Lab results from PCR, viral culture, and rapid influenza assays are reported. Although the inclusion of rapid tests may underestimate the weekly and cumulative percent positive estimates due to false negatives, visibility of the positive rapid results provides valuable information for this surveillance report. Influenza types/subtypes are categorized as influenza A not subtyped (A subtype na), influenza A/H1 (A H1), influenza A/H3 (A H3), influenza A and B co-infection (A B), and influenza B (B).

Map: Each US region or country with available data contains a pie chart that displays the distribution of influenza types and subtypes for that area for the past two weeks combined. Two weeks of data are combined instead of using just the current week's data due to delays in reporting of laboratory results.

Figure and Table: Each week, using the total number of influenza laboratory tests performed and the positive test results, the proportions positive for each serotype of influenza are calculated for service members and dependents separately.

Data Sources and Case Definitions:

Medical encounter and demographic data from the Armed Forces Health Surveillance Branch's (AFHSB) Defense Medical Surveillance System (DMSS) are used to generate this report. In addition, health-level 7 (HL-7) format laboratory data is provided by the Navy and Marine Corps Public Health Center (NMCPHC) EpiData Center Division. For the past seasons and baseline calculations, ICD-9 codes from outpatient encounters are used to identify influenza activity. The outcome of influenza activity based on ICD-9 codes is defined using the combined codes for ILI (79.99, 382.9, 460, 461.9, 465.8, 465.9, 466.0, 486, 487.0, 487.1, 487.8, 488, 490, 780.6, or 786.2). For the current season, ICD-10 codes from outpatient encounters are used to identify influenza activity. The outcome of influenza activity based on ICD-10 codes is defined using the combined codes for ILI (B97.89, H66.9, H66.90, H66.91, H66.92, H66.93, 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, J11.8, J11.81, J11.82, J11.83, J11.89, J12.89, J12.9, J18, J18.1, J18.8, J18.9, J20.9, J40, R05, R50.9). An individual can only be counted as a case once per week.

NORTHCOM Regions:

The regions on the NORTHCOM map (bold, black outlines) are defined using the four US Census regions, with the exception of Hawaii and Guam which are a part of PACOM. *Northeast:* Connecticut, Maine, Massachusetts, New Hampshire, Rhode Island, Vermont, New Jersey, New York, Pennsylvania, Puerto Rico, and the U.S. Virgin Islands. *South:* Delaware, the District of Columbia, Maryland, Virginia, West Virginia, Alabama, Florida, Georgia, Kentucky, Mississippi, North Carolina, South Carolina, Tennessee, Arkansas, Louisiana, Texas, and Oklahoma. *Midwest:* Illinois, Indiana, Michigan, Minnesota, Ohio, Wisconsin, Iowa, Kansas, Missouri, Nebraska, North Dakota, and South Dakota. *West:* New Mexico, Colorado, Montana, Utah, Wyoming, Arizona, California, Nevada, Alaska, Idaho, Oregon, and Washington.

(All data are preliminary and subject to change as updated data is received)

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