NATIONAL INSTITUTE FOR COMMUNICABLE DISEASES

Division of the National Health Laboratory Service

Weekly Influenza and Respiratory Syncytial Surveillance Report

Week 27, 2018

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Programme	ILI	Viral Watch	National syndromic surveillance for pneumonia	Private hospital consultations
Start year	2012	1984	2009	2002
Provinces*	KZ	EC	GP	EC
	NW	FS	KZ	FS
	MP	GP	MP	GP
		LP	NW	LP
		MP	WC	MP
		NC		NW
		NW WC		WC
Type of site	Primary health care clinics	General practitioners	Public hospitals	Private hospitals
Case definition	An acute respiratory illness with a temperature (≥38°C) and cough, & onset ≤10 days	An acute respiratory illness with a temperature (≥38°C) and cough, & onset ≤10 days	Acute or chronic lower respiratory tract infection	ICD codes J10-J18
Specimens collected	<ul> <li>≥5 years of age:</li> <li>oropharyngeal/nasop</li> <li>haryngeal swabs</li> <li>&lt;5 years of age:</li> <li>nasopharyngeal</li> <li>aspirates</li> </ul>	Throat and/or nasal swabs or Nasopharyngeal swabs	<ul> <li>≥5 years of age:</li> <li>oropharyngeal/nasop</li> <li>haryngeal swabs</li> <li>&lt;5 years of age:</li> <li>nasopharyngeal</li> <li>aspirates</li> <li>Induced/expectorated</li> <li>sputum</li> </ul>	Not applicable
Main	INF	INF	INF	Not applicable
pathogens	RSV	RSV	RSV	
tested**	BP	BP	SP BP	

#### **Programme Descriptions**

#### **Epidemic Threshold**

Thresholds are calculated using the Moving Epidemic Method (MEM), a sequential analysis using the R Language, available from: http://CRAN.R-project.org/web/package=mem) designed to calculate the duration, start and end of the annual influenza epidemic. MEM uses the 40th, 90th and 97.5th percentiles established from available years of historical data to calculate thresholds of activity. Thresholds of activity for influenza and RSV are defined as follows: Below seasonal threshold, Low activity, Moderate activity, High activity, Very high activity. For influenza, thresholds from outpatient influenza like illness (Viral Watch Programme) are used as an indicator of disease transmission in the community and thresholds from pneumonia surveillance are used as an indicator of impact of disease.

\* EC: Eastern Cape; FS: Free State; GP: Gauteng; KZ: KwaZulu-Natal; LP: Limpopo; MP: Mpumalanga: NC: Northern Cape; NW: North West; WC: Western Cape

\*\*INF: Influenza; RSV: respiratory syncytial virus; BP: Bordetella pertussis; SP: Streptococcus pneumoniae

Reporting period 01/01/2018 to 08/07/2018

Results until end of epidemiologic week 27(2018)

#### **Comments:**

#### Influenza

The 2018 influenza continues. The season started in week 18 (first week of May), when influenza detections in the Viral Watch programme rose above the seasonal threshold, as determined by the Moving Epidemic Method.

ILI programme: In 2018 to date, specimens from 604 patients were received from 3 ILI sites. Influenza was detected in 67 specimens all identified as influenza A(H1N1)pdm09.

Viral Watch programme: During the same period, specimens from 811 patients were received from Viral Watch sites. Since April, when the number of specimens received started to increase, influenza has been detected in 359 specimens, 343 of which were identified as influenza A(H1N1)pdm09, two as influenza A(H3N2), 12 as influenza B, and two influenza A untyped as yet.

In addition, influenza A(H3N2) was detected in three patients, A(H1N1)pdm09 in four, and influenza B in 14, before the start of the influenza season, most of whom had a history of travel or contact with tourists.

Pneumonia surveillance: In this time period, specimens from 2652 patients with severe respiratory illness (SRI) were received from the 6 sentinel sites. Influenza was detected in 151 specimens, 143 of which were identified as A(H1N1)pdm09, seven as influenza B, and one influenza A untyped as yet.

#### **Respiratory syncytial virus**

The 2018 RSV season which started in week 9 (week starting 26 February) when RSV detections in pneumonia surveillance rose above the seasonal threshold, as determined by the Moving Epidemic Method, has ended although sporadic detections of RSV are still being made.

In 2018 to date, RSV has been detected in the specimens of 87 patients in the ILI programme, and 769 from patients in the pneumonia surveillance programme.

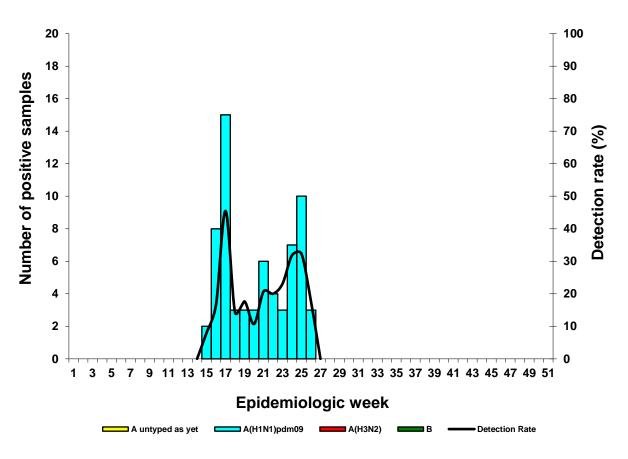
During the same period, 37 specimens from Viral Watch and Enhanced Viral Watch surveillance programme sites tested positive for RSV.

Reporting period 01/01/2018 to 08/07/2018

Results until end of epidemiologic week 27(2018)

Influenza-like illness (ILI) surveillance primary health care clinics

#### Figure 1. Number of positive samples\* by influenza types and subtypes and detection rate\*\* by week



\*Specimens from patients with influenza-like illnesses at 3 sentinel sites in 3 provinces \*\*Only reported for weeks with >10 specimens submitted

Table 1. Cumulative number of influenza type and subtype and total number of samples tested by clinic and province

Clinic (Province)	A not typed as yet	A(H1N1)pdm09	A(H3N2)	В	Total samples
Agincourt Clinic (MP)		3			141
Edendale Gateway Clinic (KZ)		40			259
Jouberton Clinic (NW)		24			204
Total:		67			604

KZ: KwaZulu-Natal; NW: North West, MP: Mpumalanga

Reporting period 01/01/2018 to 08/07/2018

Results until end of epidemiologic week 27 (2018)

Influenza-like illness (ILI) surveillance primary health care clinics



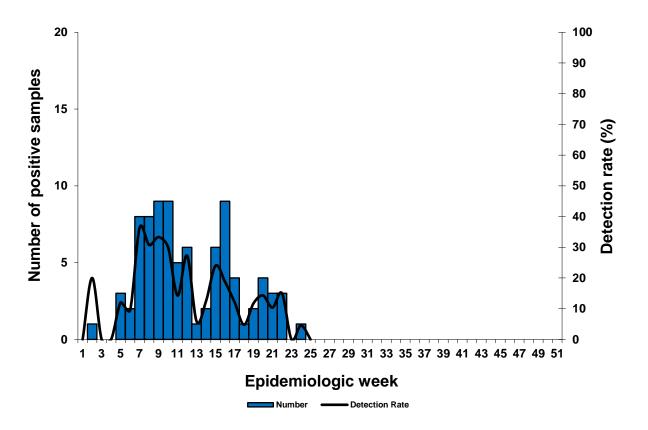


Table 2. Cumulative number of respiratory syncytial virus identified and total number of samples tested by clinic and province

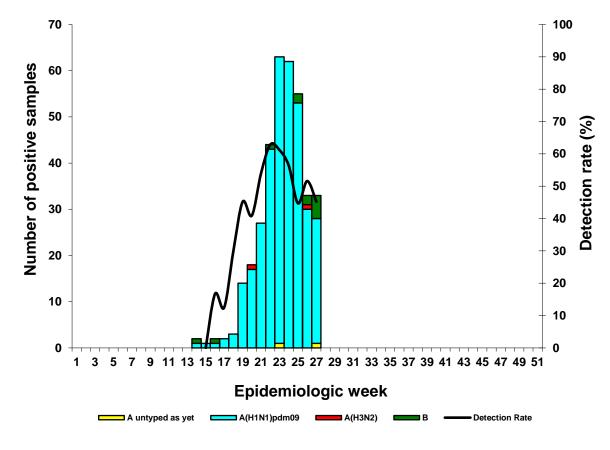
Clinic (Province)	<b>RSV Positive</b>	Total samples
Agincourt Clinic (MP)	38	141
Edendale Gateway Clinic (KZ)	27	259
Jouberton Clinic (NWP)	22	204
Total:	87	604

KZ: KwaZulu-Natal; NW: North West, MP: Mpumalanga

Reporting period 01/01/2018 to 08/07/2018

Results until end of epidemiologic week 27 (2018)

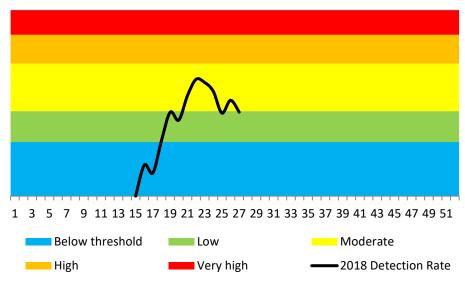
#### Influenza-like illness (ILI) surveillance Viral Watch



#### Figure 4. Number of positive samples\* by influenza types and A not typed as yet and detection rate\*\* by week

\*Specimens from patients with Influenza-like illnesses at 90 sentinel sites in 8 provinces \*\* Only reported for weeks with >10 specimens submitted.

Figure 5. ILI surveillance Viral Watch percentage influenza detections and epidemic thresholds\*



\*Thresholds based on 2007-2017 data (Excluding 2009)

Reporting period 01/01/2018 to 08/07/2018

Results until end of epidemiologic week 27 (2018)

#### Table 4. Cumulative number of influenza type and subtype and total number of samples tested by province

Province	A not typed as yet	A(H1N1)pdm09	A(H3N2)	В	Total samples
Eastern Cape	1	48		3	75
Free State					8
Gauteng		191	2	5	431
Limpopo		14			21
Mpumalanga	1	20		2	70
North West		1			2
Northern Cape		3			12
Western Cape		66		2	192
Total:	2	343	2	12	811

To date in 2018, 78 patients have been tested for influenza at the time of entry into South Africa following travel abroad and 24 have tested influenza positive.

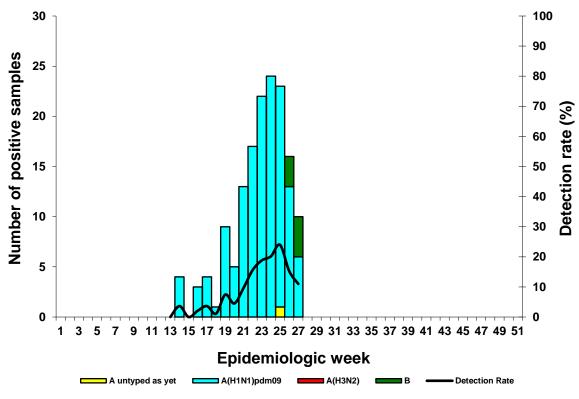
Patients known to have acquired influenza abroad are not included in the table or epidemiological curve.

Reporting period 01/01/2018 to 08/07/2018

Results until end of epidemiologic week 27(2018)

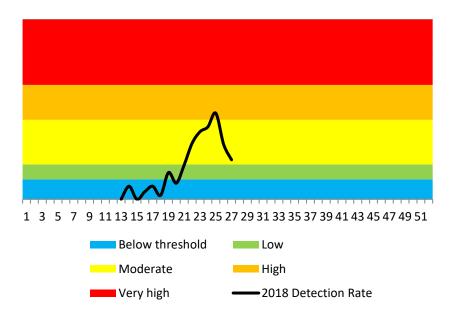
National syndromic surveillance for pneumonia

#### Figure 6. Number of positive samples\* by influenza types and A not typed as yet and detection rate\*\* by week



\*Specimens from patients hospitalised with pneumonia at 6 sentinel sites in 5 provinces \*\*Only reported for weeks with >10 specimens submitted

Figure 7. National syndromic surveillance for pneumonia percentage influenza detections and epidemic thresholds\*



\*Thresholds based on 2010-2017 data

Reporting period 01/01/2018 to 08/07/2018

Results until end of epidemiologic week 27 (2018)

# Table 5. Cumulative number of identified influenza types and subtypes and total number of samples testedby hospital

Hospital (Province)	A not typed as yet	A(H1N1)pdm09	A(H3N2)	В	Total samples
Edendale (KZ)	1	28	0	0	430
Helen Joseph-Rahima Moosa (GP)	0	37	0	2	619
Klerksdorp-Tshepong (NW)	0	8	0	0	388
Mapulaneng-Matikwana (MP)	0	25	0	0	153
Mitchell's Plain (WC)	0	20	0	1	366
Red Cross (WC)	0	25	0	4	696
Total:	1	143	0	7	2652

GP: Gauteng; KZ: KwaZulu-Natal; NW: North West; MP: Mpumalanga; WC: Western Cape

Reporting period 01/01/2018 to 08/07/2018

Results until end of epidemiologic week 27 (2018)

National syndromic surveillance for pneumonia

#### Figure 8. Number of samples testing positive for respiratory syncytial virus and detection rate by week

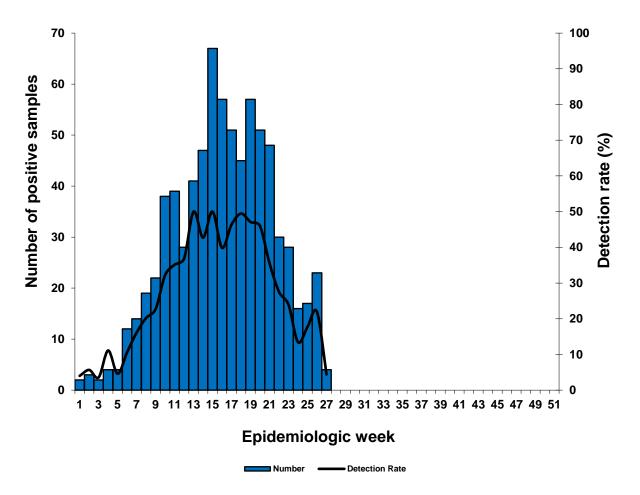


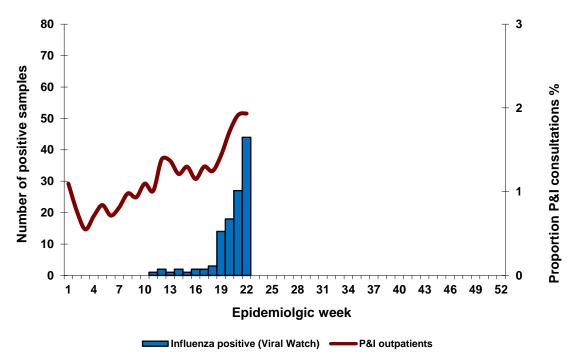
Table 6: Cumulative number of respiratory syncytial virus identified and total number of samples tested by hospital

Hospital (Province)	RSV Positive	Total samples
Edendale (KZ)	77	430
Helen Joseph-Rahima Moosa (GP)	162	619
Klerksdorp-Tshepong (NW)	40	388
Mapulaneng-Matikwana (MP)	45	153
Mitchell's Plain (WC)	135	366
Red Cross (WC)	310	696
Total:	769	2652

GP: Gauteng; KZ: KwaZulu-Natal; NW: North West; MP: Mpumalanga; WC: Western Cape

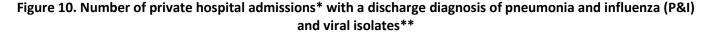
Reporting period 10/04/2017 to 03/06/2018 Results until end of epidemiologic week 22 (2018) Private hospital consultations

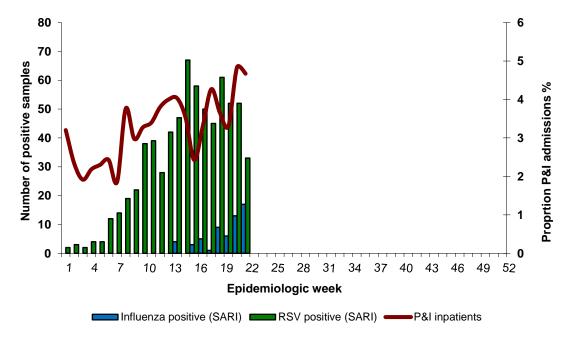




\* Hospital outpatient data from weekly reports of consultations to the Netcare hospital group. Discharge diagnosis is according to International Statistical Classification of Diseases and Related Health Problems coding by clinicians and does not represent laboratory confirmation of aetiology

\*\* Influenza positive specimens from the Viral Watch surveillance programme





\*Hospitalisation admission data from weekly reports of consultations to the Netcare hospital group. Discharge diagnosis is according to International Statistical Classification of diseases and Related Health Problems/ ICD by clinicians and does not represent laboratory confirmation of aetiology \*\* Influenza positive specimens from the national syndromic surveillance for pneumonia.

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Data are provisional as reported to date. Number of consultations/specimens are reported/analysed by date of consultation/specimen collection.