CDC Influenza Surveillance Report
https://www.cdc.gov/flu/weekly/

During week 14 (April 1 - 7, 2018), influenza activity decreased in the United States.

High influenza-like illness (ILI) activity was reported in two states.

Moderate ILI activity was reported in two states.

Low ILI activity was reported in 11 states.

Minimal ILI activity was reported in the District of Colombia, New York City, Puerto Rico, and 35 states (including Delaware).

Widespread influenza activity was reported by seven states (including Delaware). Regional activity was reported by Guam, Puerto Rico, and 22 states. Local activity was reported by the District of Colombia, and 16 states. Sporadic activity was reported by the US Virgin Islands and five states.
<table>
<thead>
<tr>
<th></th>
<th>Week 14</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Specimen Tested</td>
<td>885</td>
<td>89,405</td>
</tr>
<tr>
<td>Positive Specimen (%)</td>
<td>321 (36.3)</td>
<td>49,684 (55.6)</td>
</tr>
<tr>
<td>Influenza A (%)</td>
<td>120 (37.4)</td>
<td>36,476 (73.4)</td>
</tr>
<tr>
<td>Influenza B (%)</td>
<td>201 (62.6)</td>
<td>13,208 (26.6)</td>
</tr>
</tbody>
</table>

In week 14, there were 119 lab-confirmed cases of flu in Delaware, and the state activity remains WIDESPREAD. There were no flu-related deaths.

Figure 1. Confirmed cases¹ of influenza by type and subtype/lineage, Delaware 2017-18

<table>
<thead>
<tr>
<th></th>
<th>Week 14</th>
<th>Total</th>
<th>Week 14</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Delaware</td>
<td>119</td>
<td>8,329</td>
<td>27</td>
<td>1,174</td>
</tr>
<tr>
<td>New Castle</td>
<td>44</td>
<td>3,105</td>
<td>14</td>
<td>653</td>
</tr>
<tr>
<td>Kent</td>
<td>27</td>
<td>2,064</td>
<td>7</td>
<td>248</td>
</tr>
<tr>
<td>Sussex</td>
<td>48</td>
<td>3,160</td>
<td>6</td>
<td>273</td>
</tr>
<tr>
<td>Deaths</td>
<td>0</td>
<td>34</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

¹ Based on patients with positive nucleic acid or viral culture test results reported to the Delaware Division of Public Health.

Data Source: Season 2017 - 2018 Influenza Positive Specimens from Delaware, Reported by WHO/NREVSS Collaborating Laboratories
WHO Afro Outbreaks & Emergencies
Week 14: March 31 – April 6, 2018
http://apps.who.int/iris/bitstream/handle/10665/272343/OEW14-310306042018.pdf

- New Event
- Ongoing Events
  - DRC – Cholera (62,815 cases, 1,357 deaths, CFR 2.2%). The weekly incidence is continuing on a downward trend since its peak in 2017. New cases are being reported in 13 out of the country’s 26 provinces.
  - Nigeria – Lassa fever (433 cases, 106 deaths, 24.5% CFR). The peak of the outbreak occurred in the middle of February, and the weekly incidence has been gradually decreasing since that time. Twenty states have reported cases since the beginning of 2018. The majority of all confirmed cases are from Edo, Ondo, and Ebonyi states.
  - South Africa – Listeriosis (999 cases, 191 deaths, CFR 19%). The incidence continues to steadily decline following the recall of the implicated food source. All nine provinces in the country have been affected, but the majority of cases have been reported from Gauteng, Western Cape, and KwaZulu-Natal provinces. Females and neonates have been disproportionately affected.
  - Zambia – Cholera (5,440 cases, 109 deaths, CFR 2.0%). The outbreak has been ongoing for 27 weeks, and has been in steep decline since the beginning of 2018 (most likely due to the first round of oral cholera vaccination during the second week of 2018). A new upsurge in cases has been seen since March 11. The majority of cases are concentrated in Lusaka district.
- Humanitarian Crisis
  - Central African Republic. A deteriorating security situation in the northwest of the country has lead to over 680,000 IDPs. Clashes between two rival armed groups in Tagbara and Seko have led to the displacement of citizens, restricted humanitarian access, and closing of health facilities. The country is also seeing a monkey pox outbreak (9 cases, 0 deaths).
  - South Sudan. Continuing reports of intercommunal fighting, cattle raiding, and revenge killings in various locations continue to emerge and hamper humanitarian services. There is an increased risk of food insecurity and malnutrition, with an estimated 6.3 million people in crisis, and 50,000 in catastrophe. As of April 1, measles, malaria, acute watery
diarrhea, bloody diarrhea, meningitis, and valley fever health alerts were active, along with 10 others.

**WHO Disease Outbreak News** ([www.who.int/csr/don/en/](www.who.int/csr/don/en/))

- 4/09 – Australia: Listeriosis

**Zika: Areas at Risk**

- **Africa**: Angola, Benin, Burkina-Faso, Burundi, Cameroon, Cape Verde, Central African Republic, Chad, Congo, Cote d’Ivoire, Democratic Republic of the Congo, Equatorial Guinea, Gabon, Gambia, Ghana, Guinea, Guinea-Bissau, Kenya, Liberia, Mali, Niger, Nigeria, Rwanda, Senegal, Sierra Leone, South Sudan, Sudan, Tanzania, Togo, Uganda
- **Asia**: Bangladesh, Burma, Cambodia, India, Indonesia, Laos, Malaysia, Maldives, Pakistan, Philippines, Singapore, Thailand, Timor-Leste, Vietnam
- **Caribbean**: Anguilla, Antigua & Barbuda, Aruba, Barbados, Bonaire, British Virgin Islands, Cuba, Curacao, Dominica, Dominican Republic, Grenada, Haiti, Jamaica, Montserrat, Puerto Rico, Saba, Saint Kitts & Nevis, Saint Lucia, Saint Martin, Saint Vincent & the Grenadines, Sint Eustatius, Sint Maarten; Trinidad & Tobago, Turks & Caicos, US Virgin Islands
- **Central America**: Belize, Costa Rica, El Salvador, Guatemala, Honduras, Nicaragua, Panama
- **North America**: Mexico
- **The Pacific Islands**: Fiji, Papua New Guinea, Samoa, Solomon Islands, Tonga
- **South America**: Argentina, Bolivia, Brazil, Colombia, Ecuador, French Guiana, Guyana, Paraguay, Peru, Suriname, Venezuela

**2018 US Case Counts**

*The CDC is now updating this information on a bi-weekly basis.*

<table>
<thead>
<tr>
<th>As of April 4, 2018</th>
<th>US 2018</th>
<th>Cumulative Since 1/1/15 US Territories 2018</th>
<th>Cumulative Since 1/1/15</th>
</tr>
</thead>
<tbody>
<tr>
<td>Travelers</td>
<td>14</td>
<td>5,392</td>
<td>0</td>
</tr>
<tr>
<td>Local Mosquito-borne infection</td>
<td>0</td>
<td>229</td>
<td>15</td>
</tr>
<tr>
<td>Other Route</td>
<td>0</td>
<td>55</td>
<td>0</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>14</strong></td>
<td><strong>5,676</strong></td>
<td><strong>15</strong></td>
</tr>
</tbody>
</table>
What your dentist should be telling you about oral cancer and HPV

From the Immunization Action Coalition

Issue 1359: April 11, 2018
http://www.immunize.org/express/issue1359.asp

Ask the Experts: March Edition
http://www.immunize.org/express/issue1355.asp


A personalized vaccine helps patients fight back against ovarian cancer.

Parents want the HPV vaccine for their sons

Sanford schools report outbreak of whooping cough (ME)

Vaccinated Montgomery County child contracts mumps (PA)

Lucas Co. hepatitis A spike linked to Michigan outbreak (OH)
Bill tightening vaccine exemptions should be rejected (NJ)

Measles case confirmed in New Orleans, recent traveler from the UK

UNR, health officials: no new measles cases following first Washoe County case in 19 years (NV)

Health officials warn all to get Hep A vaccine with 2nd food prep worker case (KY)

Bad information, not bad parenting, fuels vaccine apathy: Canadian study

Anti-vaxxers lose a message point

Ask the Expert: Importance of Immunizations

In other news…

Brazil Yellow Fever Vaccination Campaign Far Short of Goal

If you want your friend to vaccinate their kids, don’t try to change their mind
https://www.livescience.com/62267-increase-vaccination-rates-behavioral-changes.html

It’s time for smarter vaccination laws

US measles outbreaks catalyzed by vaccine hesitancy

If you have something you would like to see added to the ICD’s Week in Review, please e-mail ksmith@delamed.org.