Please note that Weekly Flu News will go on hiatus starting May 1st
Because the 2019-2020 flu season is drawing to a close, our Weekly Flu News will be on hiatus from May 1 to August 15. Please note that we will continue to distribute our quarterly newsletter, Fighting Influenza, and will remain active on our social media channels (Facebook, Instagram, Twitter, and LinkedIn), so follow us there to stay up-to-date!

Apr. 17, 2020; Centers for Disease Control and Prevention

- Laboratory confirmed flu activity as reported by clinical laboratories continues to decrease sharply and is now low.
- 0.4% of specimens from clinical laboratories tested positive for influenza. Nationally, influenza A (H1N1) viruses are most common at this time. Previously, influenza B/Victoria viruses predominated nationally.
- 2.9% of visits to a health care provider were for influenza-like illness. 5 of 10 regions remain above their baselines.
- The overall hospitalization rate is 68.3 per 100,000.
- 11.9% of deaths were attributed to pneumonia and influenza, which is above the epidemic threshold.
- Two new pediatric flu deaths were reported for the 2019-2020 season during week 15. The total for the season is 168.
Remember influenza? Stay-at-home order and other coronavirus precautions seem to have halted a bad flu season and ‘probably saved thousands of lives’

Apr. 16, 2020; Chicago Tribune

Measures that have kept Chicagoans in their homes in an effort to flatten the curve of the coronavirus pandemic have had another benefit, experts say — stopping a nasty influenza season.

According to data from the Illinois Department of Public Health, the 2019-20 influenza season, now winding down, was particularly harsh. But hospitalizations and other tracking measurements for influenza sharply decreased as news of the COVID-19 pandemic ramped up.

Experts say last month’s good hygiene messaging, like hand-washing and staying home when sick, combined with social distancing pleas from government officials and the statewide stay-at-home order had a dramatic effect on the spread of flu.
Notes from the Field: Seasonal Human Influenza A(H3N2) and Influenza A(H1N1)pdm09 Reassortant Infection — Idaho, 2019

Apr. 10, 2020; CDC MMWR

A male patient aged 13 years with no underlying medical conditions was evaluated in an Idaho hospital emergency department for a 1-day history of fever (103°F [39.4°C]), dry cough, sore throat, headache, and weakness.

Next generation sequencing at CDC revealed a new seasonal human influenza A(H3N2) and A(H1N1)pdm09 reassortant virus, rather than an influenza A(H3N2) variant virus of swine origin. Influenza A reassortment is observed at high rates in animal and cell culture models, but a biologically successful human reassortant virus is rarely reported.

This is CDC's first detection of this type of seasonal human influenza A(H3N2) and influenza A(H1N1)pdm09 reassortment. CDC recommends that state and local health departments, hospitals, and clinicians maintain surveillance to identify patients who might be transmitting newly emerging influenza viruses.

Baloxavir treatment of ferrets infected with influenza A(H1N1)pdm09 virus reduces onward transmission

Apr. 15, 2020; PLOS Pathogens

Although vaccines are available for influenza control, their efficacy varies each season and a vaccine for a novel pandemic virus manufactured using current technology will not be available fast enough to mitigate the effect of the first pandemic wave.

Antivirals can be effective against many different influenza viruses but have not thus far been used extensively for outbreak control.

Baloxavir, a recently licensed antiviral drug that targets the influenza virus endonuclease, has been shown to reduce virus shedding more effectively than oseltamivir, a widely used neuraminidase inhibitor drug. Thus it is possible that treatment with baloxavir might also interrupt onward virus transmission.

Why Did The World Shut Down For COVID-19 But Not Ebola, SARS Or Swine Flu?

Apr. 14, 2020; FiveThirtyEight

In the spring of 2009, a new version of the H1N1 influenza virus — the virus that caused the 1918 Spanish flu pandemic — emerged and began to spread rapidly. The swine flu killed anywhere from 151,700 to 575,400 people worldwide in its first 12 months, through April 2010, according to estimates from the Centers for Disease Control and Prevention, and may have infected over 1 billion by the end of 2010.
So why didn’t the swine flu overwhelm our health care systems and grind our economies to a halt? The main difference is that it ended up being a much milder and less deadly infection. There are a range of estimated case fatality rates for swine flu, but even the highest, less than 0.1 percent, are much lower than the current estimates for COVID-19.

Even with such a low case fatality rate, the swine flu had a high overall death toll due in part to how easily it spread. With an even higher case fatality rate and perhaps even a higher rate of transmission, COVID-19 has required drastic measures to prevent its spread.

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**Benefits of Exercise on Influenza or Pneumonia in Older Adults: A Systematic Review**

*Apr. 13, 2020; Int. J. Environ. Res. Public Health*

Older adults are under a high risk of infection because of weaker immune systems. Therefore, the purpose of this review is to summarize the recent scientific evidence that outlines the effects of exercise on influenza or pneumonia in older adults.

Thirteen randomized control trials investigated the effects of exercise on the immune responses to influenza or pneumonia vaccination.

Most of the current studies suggested that prolonged moderate aerobic exercise may help to reduce the risk of influenza-related infection and improve the immune responses to influenza or pneumonia vaccination in older adults.