



## Synopsis

**Influenza is currently in an epidemic period and shows an increasing trend recently, with A/H1N1 and A/H3N2 co-circulating in the community.**

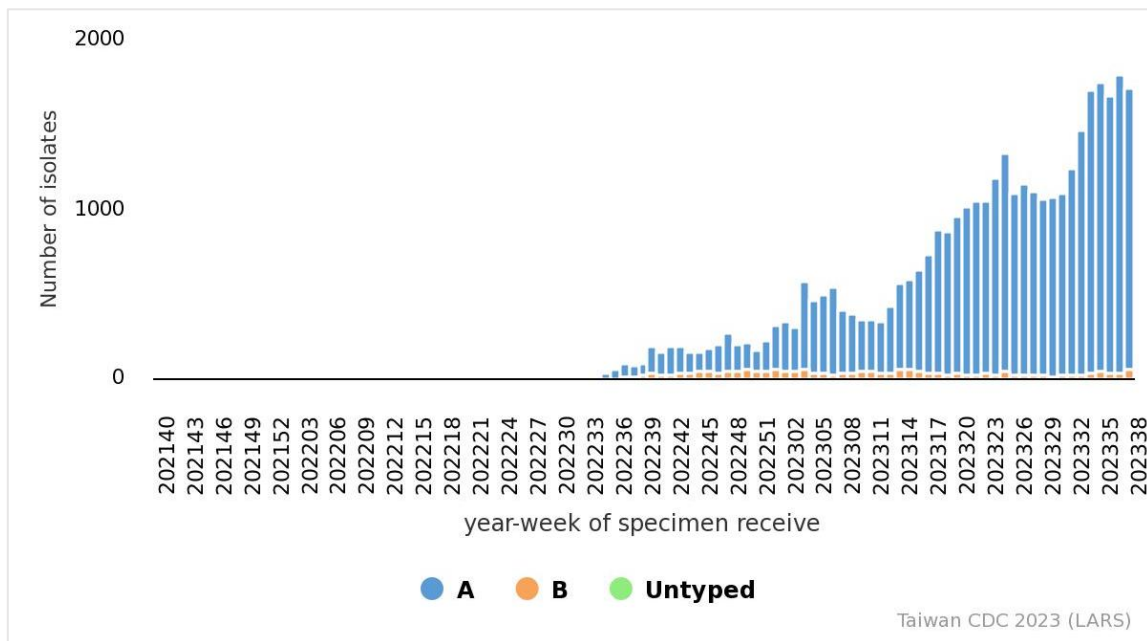
- Influenza A virus is circulating in the community. During the last four weeks, H1N1 and H3N2 were co-circulating.
- The number of medical visits for influenza-like illness (ILI) in outpatient and ER shows an increasing trend recently.
- Since October 1, 2022, there have been 741 influenza cases with severe complications (474 of H1N1, 249 of H3N2, 10 of untyped influenza A, and 8 of influenza B), and among them, 164 cases were fatal.

## Laboratory Surveillance<sup>1</sup>

### Laboratory Automated Reporting System (LARS)

The number of influenza-positive specimens was similar to the previous week. Over the last four weeks, the proportion of influenza A positive specimens was 98%.

**Numbers of influenza-positive specimens from LARS**



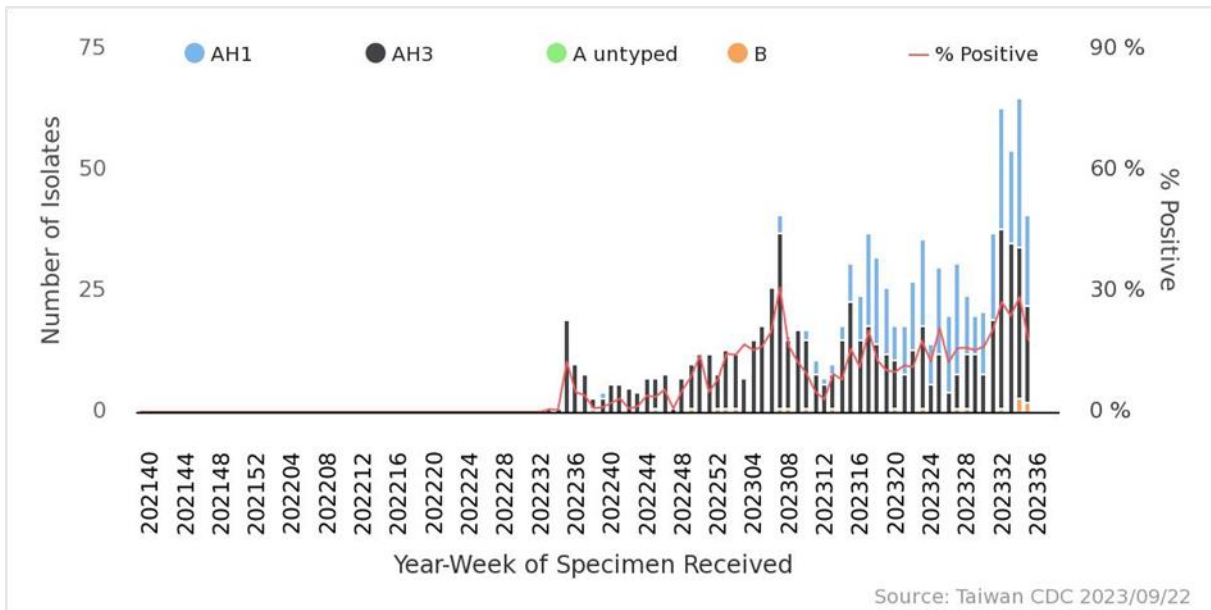
<sup>1</sup> In terms of the surveillance systems in Taiwan, please see: Jian, S. W., Chen, C. M., Lee, C. Y., & Liu, D. P. (2017). Real-Time Surveillance of Infectious Diseases: Taiwan's Experience. Health security, 15(2), 144-153.



## Contracted Virology Laboratories Surveillance

The proportion of influenza-positive specimens of week 36 was 17.8%. During the last four weeks (week 33 to week 36), influenza A was the predominant virus type, with H3N2 and H1N1 accounting for 55.2% and 42.2%, respectively. Weekly virus data are available at <https://nidss.cdc.gov.tw/>.

### Influenza isolates according to Contracted Virology Laboratories

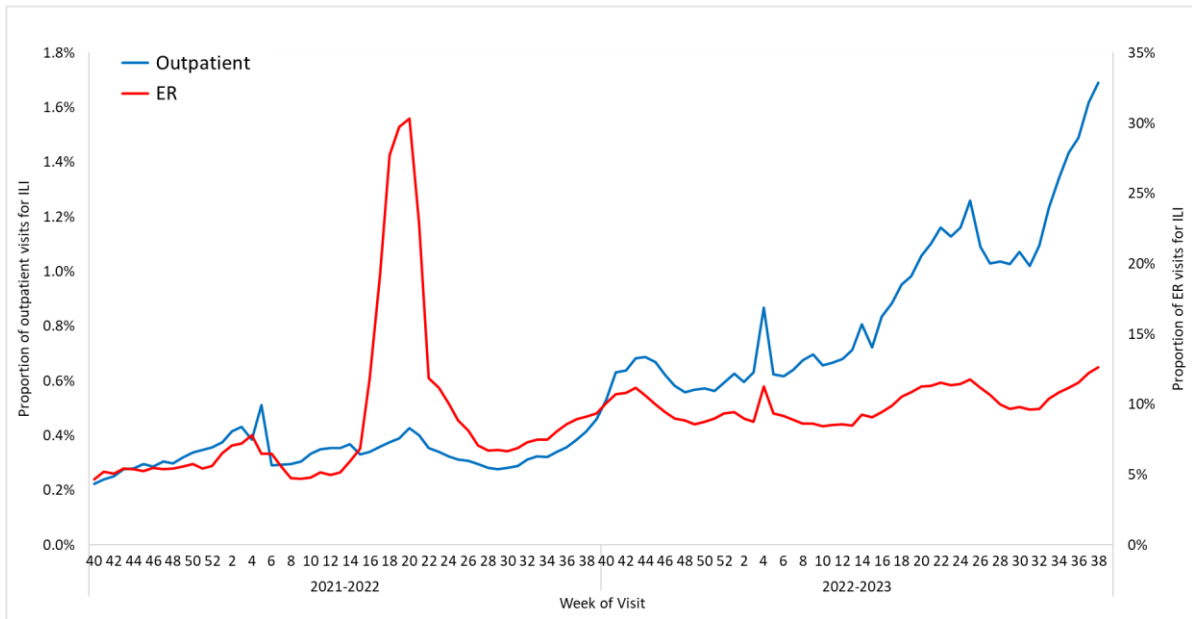


## Influenza-like Illness (ILI) Surveillance

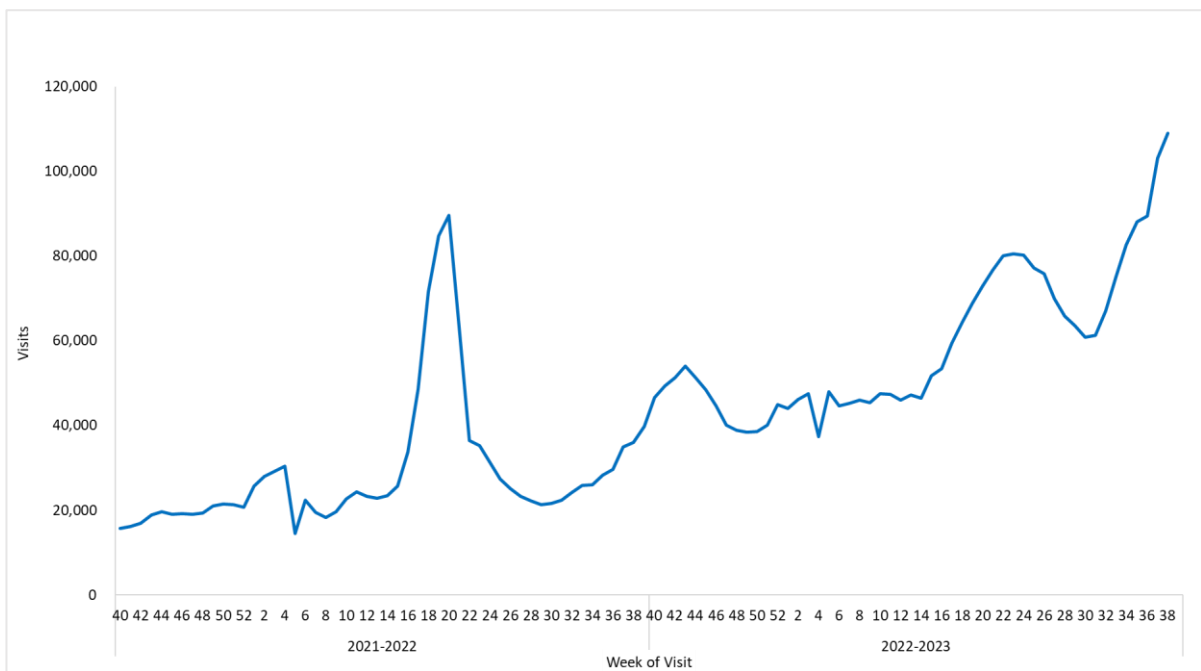
During week 38, the proportions of ILI visits were 1.7% and 12.7% in outpatient and ER, respectively. The total number of visits for ILI in outpatient and ER was 109,054 in week 38, and the trend has been increasing recently.



## Percentages of outpatient and ER visits for ILI



## Total number of outpatient and ER visits for ILI



## Influenza Case with Severe Complications

There were 39 newly confirmed influenza cases with severe complications (20 of H1N1 and 19 of H3N2), and 8 fatal cases (4 of H1N1 and 4 of H3N2). Since October 1, 2022, a total of 741 influenza cases with severe complications (474 of H1N1, 249 of H3N2, 10 of untyped influenza A, and 8 of influenza B) have been confirmed, and among them, 164 cases (121 of H1N1, 38 of H3N2, 3 of untyped influenza A, and 2 of influenza B) were fatal.

### Incidence of influenza cases with severe complications and mortality rate October 1, 2022, to September 25, 2023

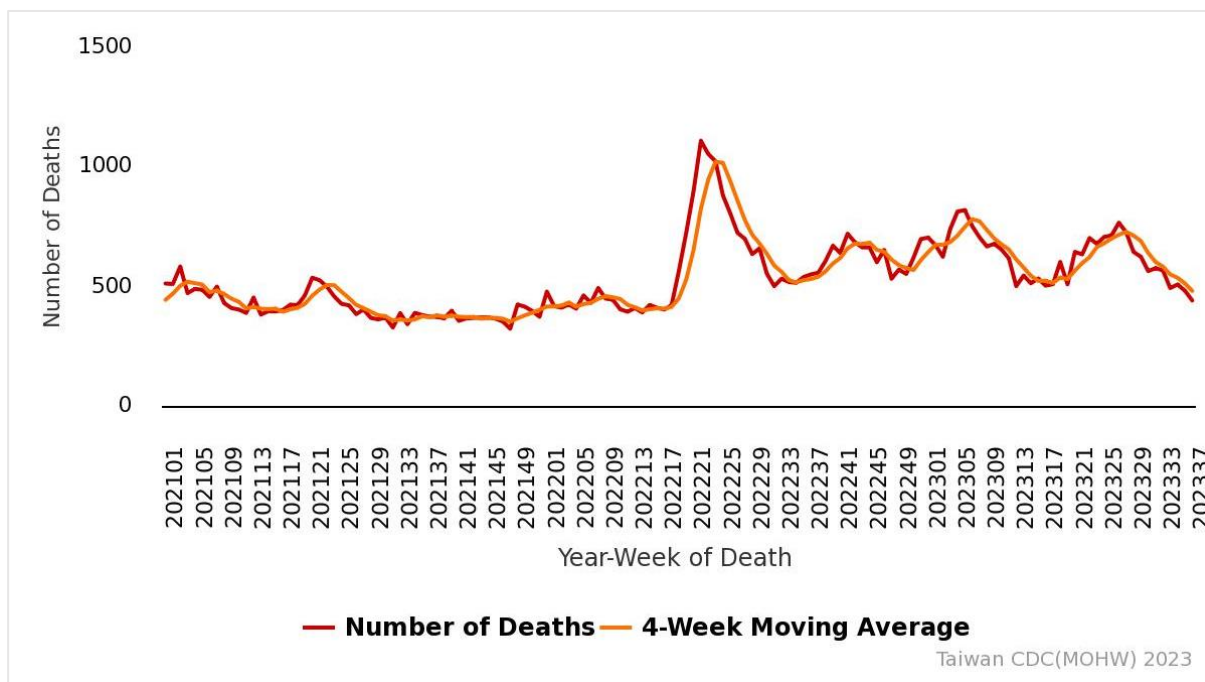
Age Group	Cases	Deaths	Cumulative incidence per 100,000 population	Cumulative mortality per 100,000 population
< 3 y	7	0	1.5	0
3-6 y	17	2	2.2	0.3
7-18 y	38	3	1.6	0.1
19-24 y	4	0	0.2	0
25-49 y	101	16	1.2	0.2
50-64 y	176	37	3.4	0.7
65 +	398	106	10.0	2.7
Total	741	164	3.2	0.7



## Pneumonia and Influenza (P&I) Mortality Surveillance

Based on the Internet System for Death Reporting (ISDR)<sup>2</sup> data, the trend of deaths attributed to pneumonia and influenza (P&I) shows a decrease trend recently. The proportion of deaths attributed to P&I for adults aged 65 and older was the highest among the three age groups (0-49, 50-64, and 65+). Weekly P&I data are available at <https://nidss.cdc.gov.tw/>.

Weekly Number of Deaths due to Pneumonia and Influenza



<sup>2</sup> Medical institutions are required to report any mortality case to the Ministry of Health and Welfare (MOHW) within 7 days after a death certificate is issued through the Internet System for Death Reporting (ISDR). Either the immediate cause of death or the underlying cause of death was used to identify P&I death cases. Only those with keyword texts containing 'pneumonia', 'influenza' or 'common cold' were counted as a P&I death.

