Synopsis

Influenza virus activity increased in recent weeks. The number of medical visits for ILI was increasing.

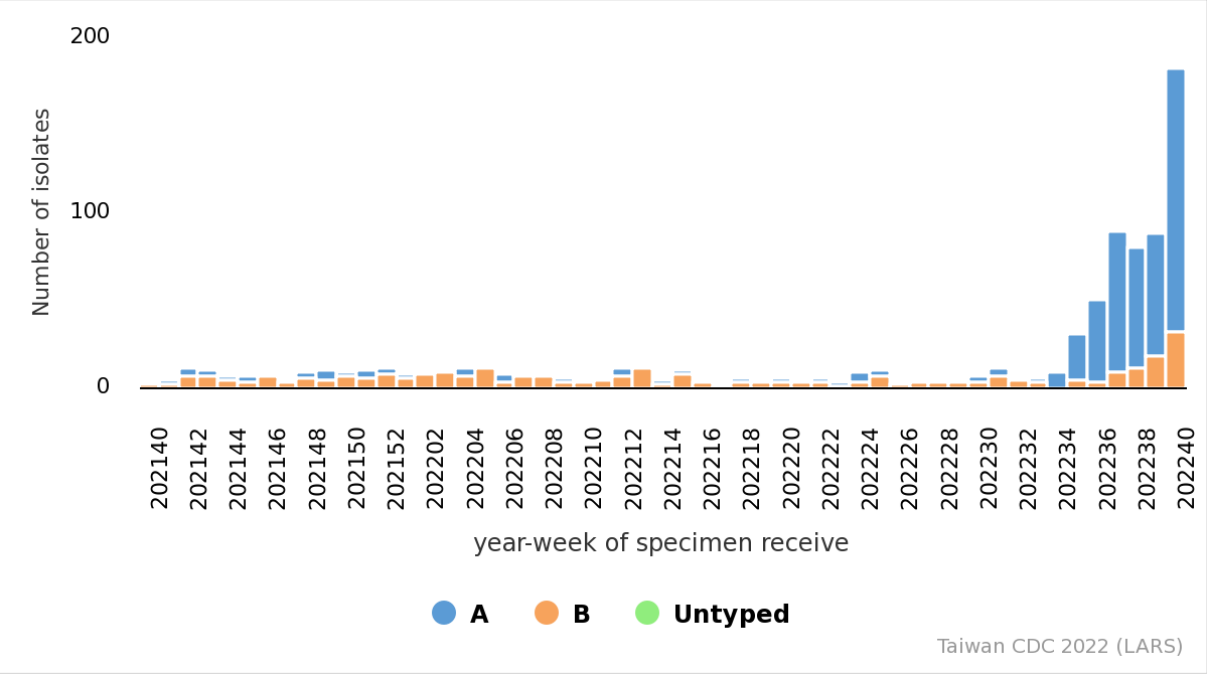
- Influenza virus activity increased recently in community. Influenza virus A/H3N2 was the predominant virus type during the past four weeks.
- The number of medical visits for influenza-like illness (ILI) was increasing recently, and was higher than the same periods of previous two flu seasons.
- There were no influenza cases with severe complications since October 1, 2022 and previous flu season.

Laboratory Surveillance[1]

Laboratory Automated Reporting System (LARS)

The number of influenza-positive specimens was increasing in recent weeks. During the past four weeks, the proportions of influenza A and influenza B positive specimens were 84% and 16% respectively.

Trend of influenza-positive specimens according to LARS

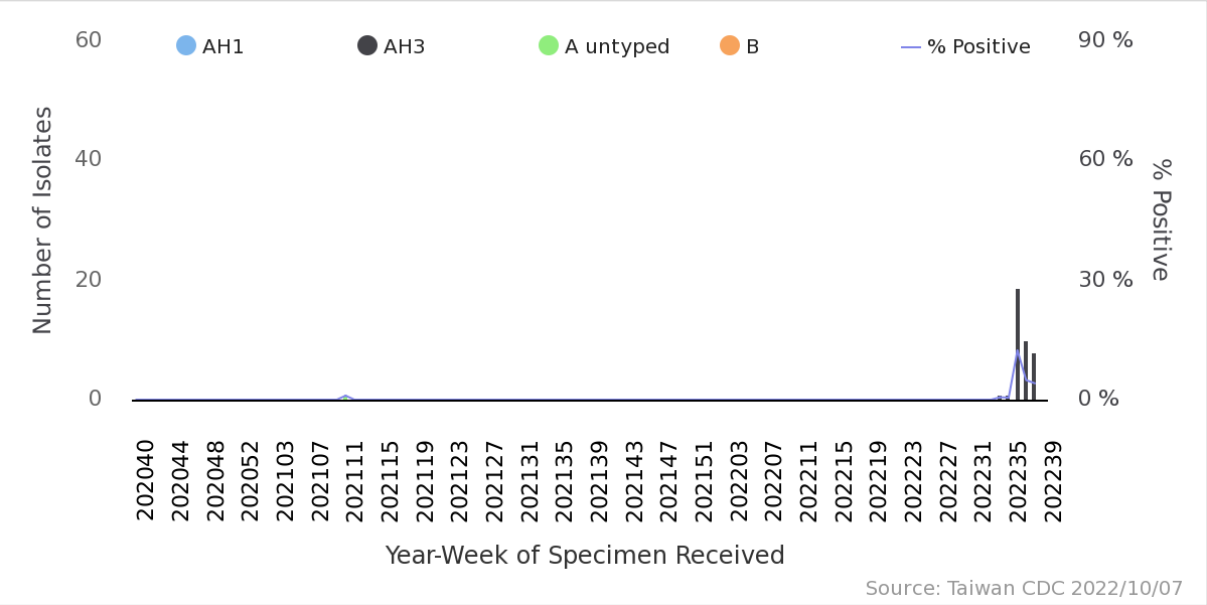


[1] In terms of the surveillance systems in Taiwan, please see: Jian, S. W., Chen, C. M., Lee, C. Y., & Liu, D. P. (2017). Real-Time Surveillance of Infectious Diseases: Taiwan's Experience. Health security, 15(2), 144-153.

Contracted Virology Laboratories Surveillance

The proportion of influenza-positive specimens was 4.1% during week 38, 2022. During the past four weeks (week 35 to week 38, 2022), all influenza isolates were A/H3N2. Weekly virus data are available at https://nidss.cdc.gov.tw/.

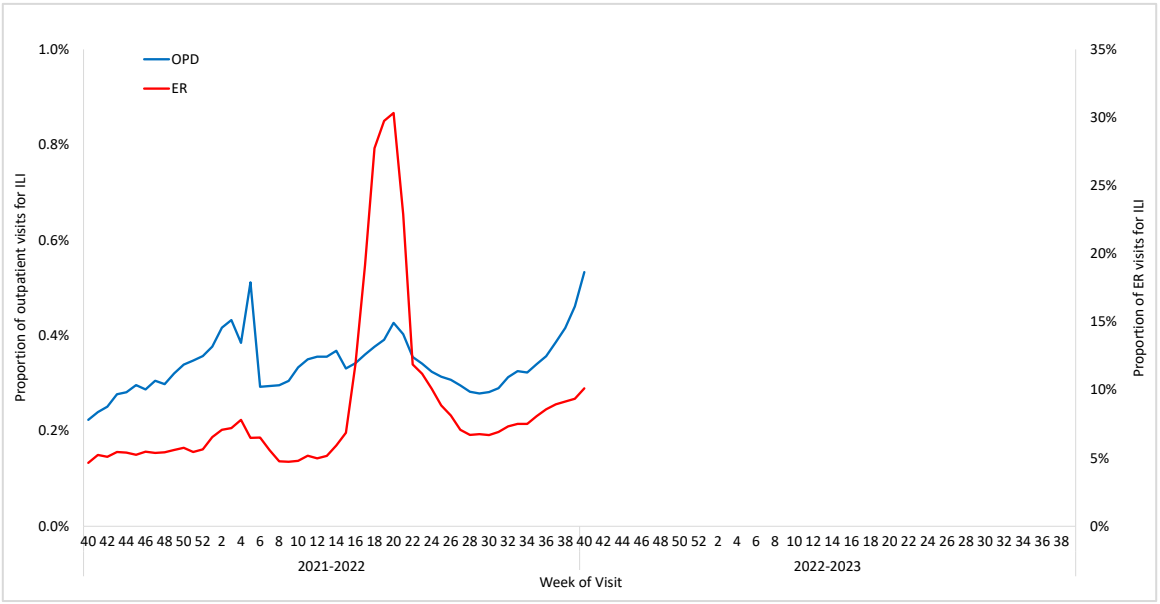
Influenza isolates according to Contracted Virology Laboratories



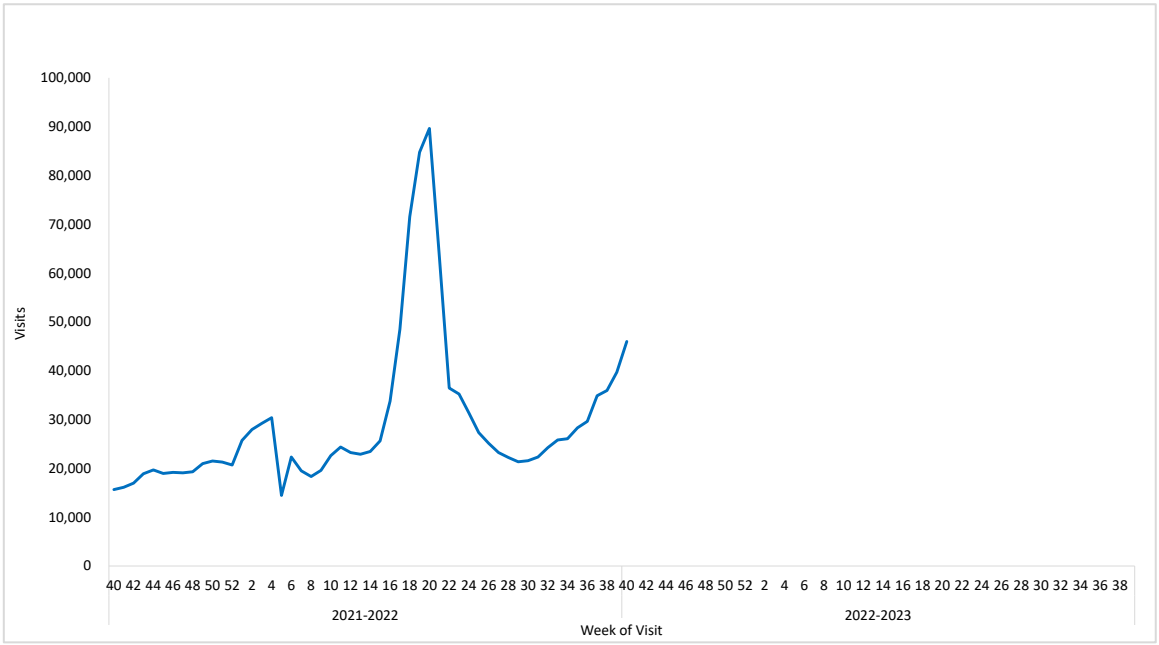
Influenza-like Illness (ILI) Surveillance

During week 40, the proportions of ILI visits were 0.5% and 10.1% for the outpatient and ER visits, respectively. The total number of visits for ILI in outpatient and ER was 45,980 and increasing in recent weeks, higher than the previous two flu seasons.

Percentages of outpatient and ER visits for ILI



Total number of outpatient and ER visits for ILI

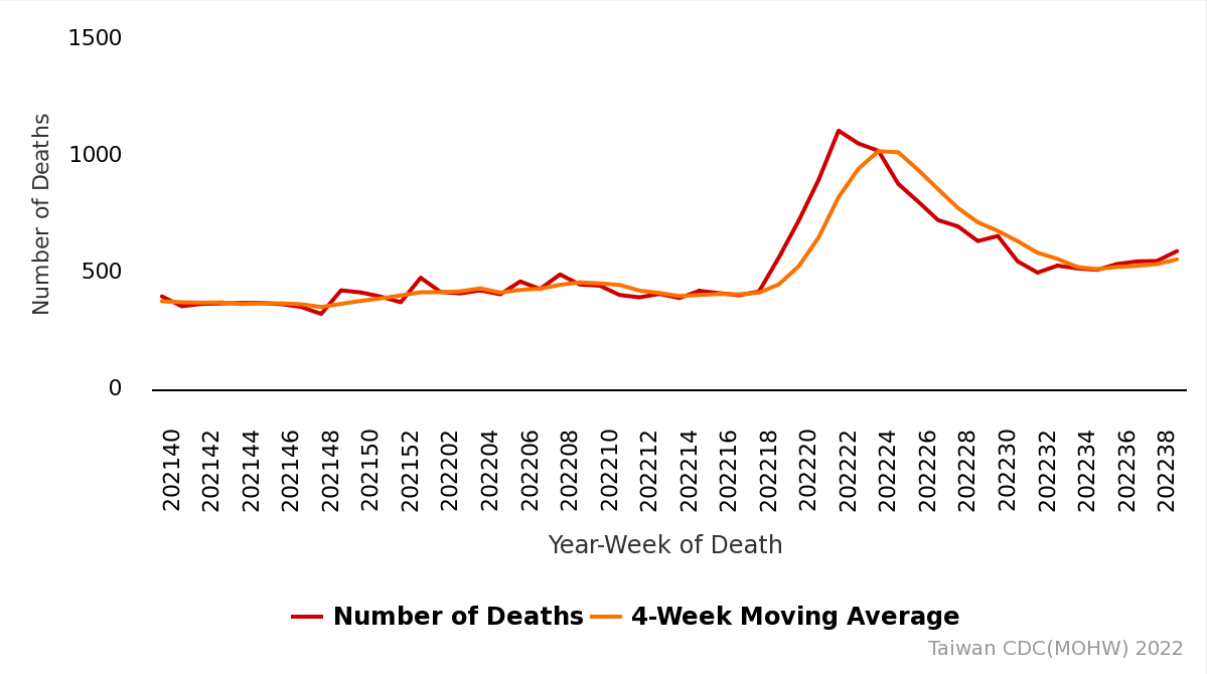


Influenza Case with Severe Complications

There were no influenza cases with severe complications since October 1, 2022 and previous flu season.

Pneumonia and Influenza (P&I) Mortality Surveillance

Based on the Internet System for Death Reporting (ISDR)[2] data, the number of deaths attributed to pneumonia and influenza (P&I) slightly increased in recent weeks. 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/.



[2] 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.