

# Influenza; Reflection on 2017/18 season

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# Aims

- ▶ To provide a summary and reflection of the 2017/18 flu season
- ▶ To inform planning for the 2018/19 season
- ▶ Make recommendations for the Health and Wellbeing Board to support the reduction of influenza burden.



# Background

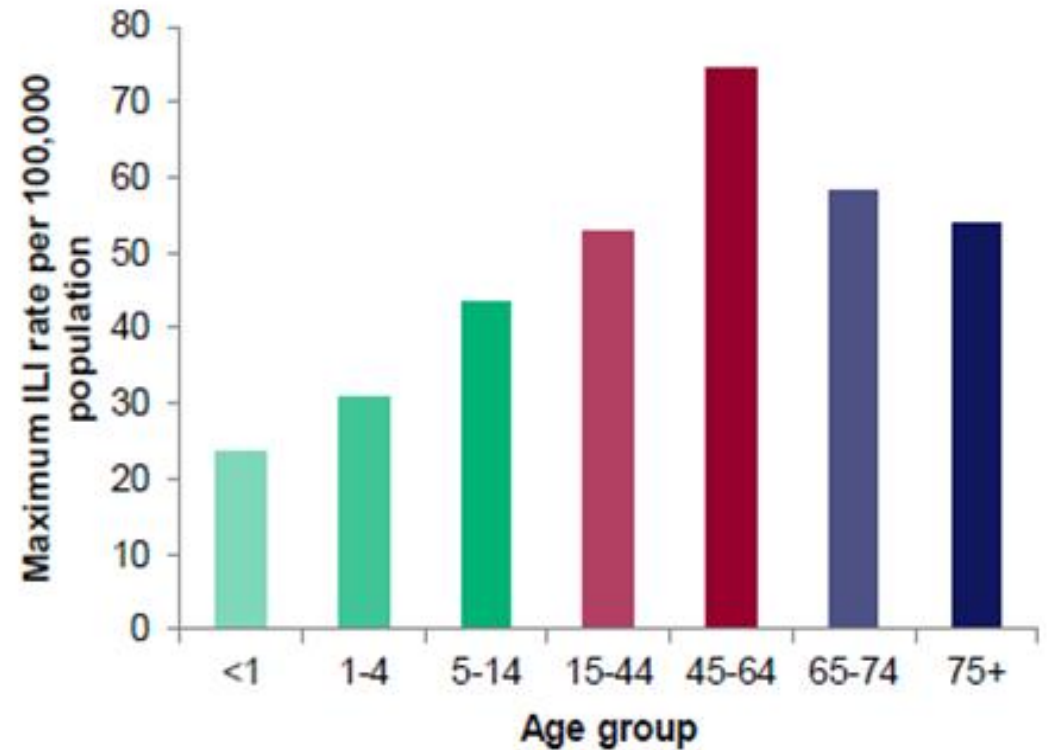
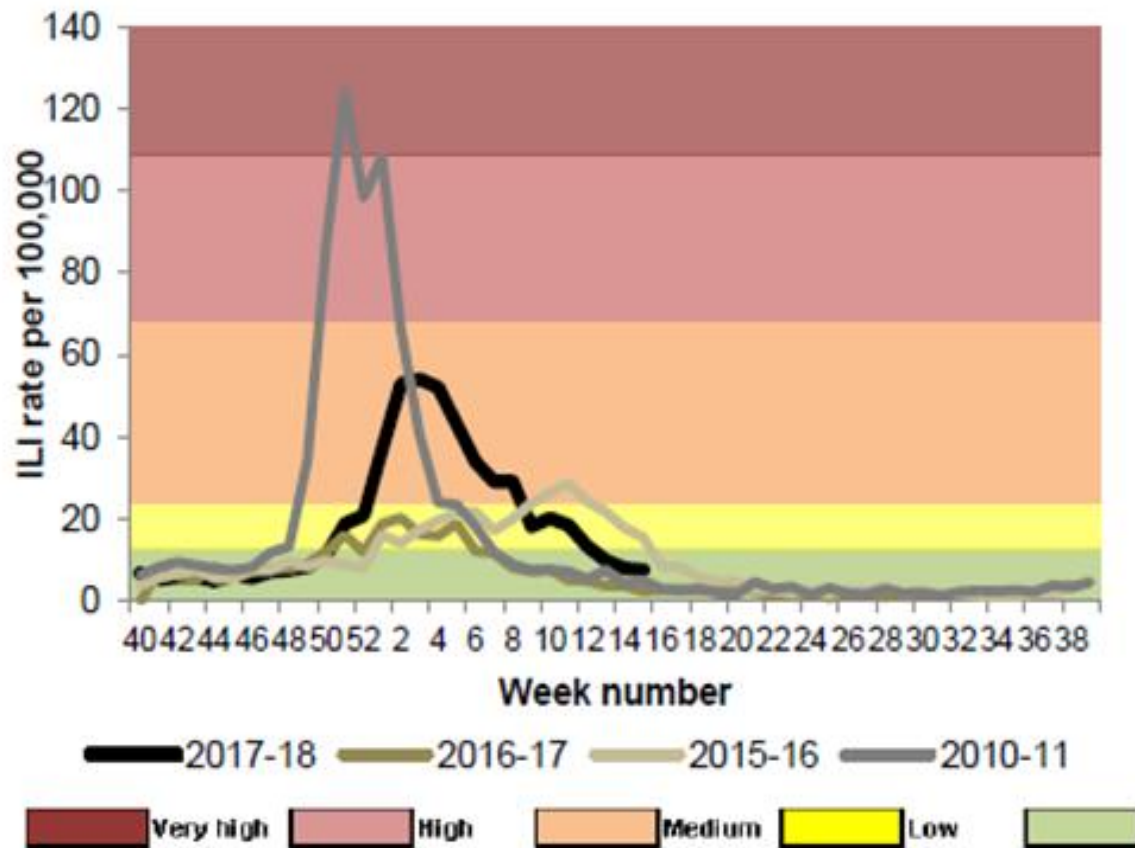
- ▶ Influenza is an acute viral infection. Three type of virus known as A,B and C.
- ▶ Highly infectious - Risk of serious illness highest amongst children, older people and those with underlying conditions.
- ▶ Seasonal influenza morbidity and mortality varies from season to season, impacting NHS and social care services during the September-March period.
- ▶ Seasonal flu vaccination aims to reduce the burden of mortality and morbidity and is targeted to those at highest risk of the complications of flu.
- ▶ Childhood flu vaccination aims to reduce the burden of influenza on children and also reduce the spread.
- ▶ Influenza vaccination is also a statutory requirement for employees of employees exposed to influenza, such as health and social care workers.

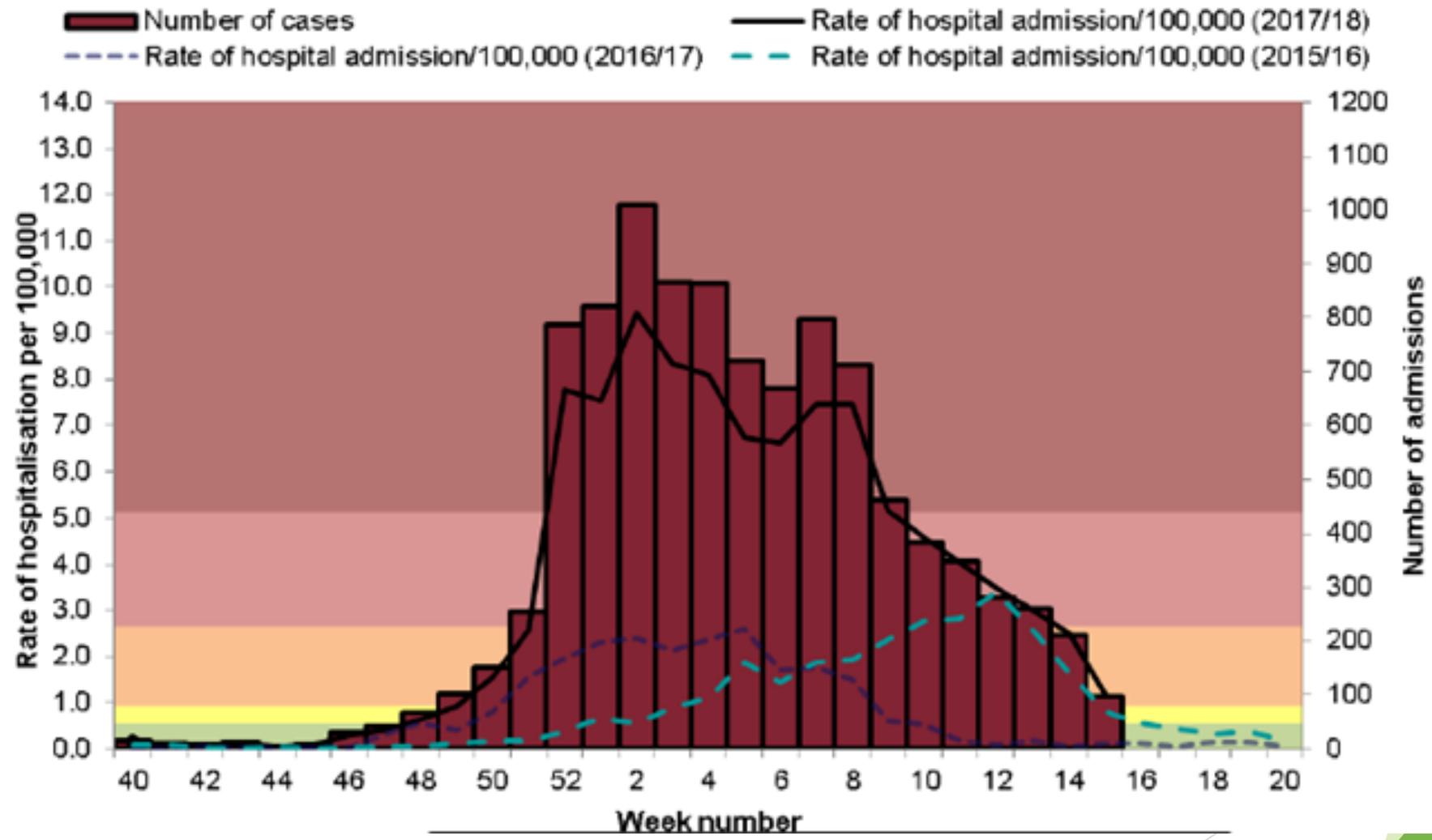
# Review of 2017/18 season



- ▶ Moderate levels of influenza activity seen in the community (Influenza A & B)
- ▶ The majority of strains were genetically and antigenically similar to the Northern Hemisphere 2017/18 vaccine strains.
- ▶ Influenza increased around week 51 (mid-end December), peaking in week 3 (mid/end January) at medium levels.
- ▶ Highest rates seen in those aged 45-64 years
- ▶ Intensive care admissions peaked week 2 (mid January) and fell above the very high impact threshold.
- ▶ Moderate levels of circulating flu in the community resulted in an increased number of reported care home outbreaks.
- ▶ Vaccination levels increased during 2017/18 and were above the national average.

**Weekly all age GP influenza-like illness rates for 2017 to 2018 and past seasons, and peak rates by age group in 2017 to 2018, England (RCGP)**





# Conclusion and Planning for 2018/19

- ▶ Influenza levels can vary considerably, even when vaccination strains are well matched.
- ▶ Influenza peaks around the same time each year.
- ▶ Childhood influenza vaccination has the highest evidence for reducing impacts on health services and circulating flu, alongside vaccination of those most likely to experience complications.
- ▶ Supporting vaccination of care staff and those within front line services to reduce spread and ensure continuity of services.
- ▶ Changes to vaccine likely to support wider protection; Adjuvanted trivalent vaccine to be used for those over 65 years and quadrivalent vaccine for those aged 18-65 years.



# Health and Wellbeing Board partners

- ▶ Ensuring high coverage of flu vaccination amongst front line employees within health and social care.
- ▶ Ensuring high coverage of flu vaccination amongst at risk groups.
- ▶ Support national flu vaccination communications and proactive media engagement.
- ▶ Ensure effective planning for flu and monitor and review seasonal flu activity and impacts.



Any questions ..

