

ACT Influenza Surveillance Report - No. 7, 2022

Summary: Influenza notifications remain high. Subtype A/H3 appears to be the predominant circulating strain. Nearly half of all cases notified this year were aged between 20 and 64 years.

Reporting Period: 1 January to 29 May 2022

Between 1 January and 29 May 2022 there were 855 notifications of laboratory-confirmed influenza made to ACT Health (Figure), and 164 cases had their specimens collected in the week to 29 May 2022.

Almost all (854/855) cases notified so far in 2022 have been influenza A. Of the 201 with subtype information available, 161 (80%) were A/H3 and 40 cases were A/H1. Most cases (677/855, 79%) were aged between 10 and 64 years (Table)

Figure: Number of influenza notifications, by week and year of specimen collection, 1 January 2017 to 29 May 2022, ACT.

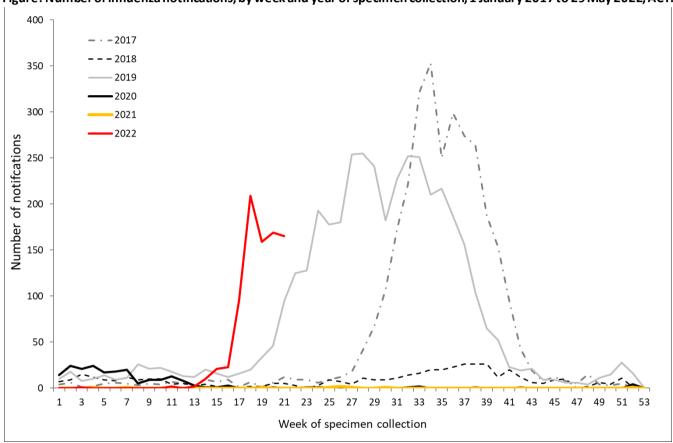


Table: Number and proportion of influenza notifications by age group 1 January 2022 to 29 May 2022, ACT.

Age Group	Number of notifications	Proportion of notifications	Rate (notifications per 100,000 age- specific population)
0-4 years	52	6%	191.7
5-9 years	78	9%	458.7
10-19 years	285	33%	566.2
20-64 years	392	46%	147.7
65 years and over	48	6%	80.4
Total	855	100%	203.8

Data Caveats

- Data provided for the current and most recent weeks may be incomplete. All data are preliminary and subject to change as updates are received.
- Notification data include all cases diagnosed in residents of the ACT. Generally, notified cases represent only a small proportion of cases of influenza
 occurring in the community. From 01/01/2022, the laboratory-confirmed influenza case definition excludes those identified by single high antibody titre. This
 change has minimal impact on the interpretation of influenza notification trends.
- Due to the COVID-19 pandemic, interpretation of 2020-2022 influenza notification data should consider: the impact of travel restrictions, quarantine, and social distancing measures; likely changes in health seeking behaviour of the community; and focussed testing for COVID-19 response activities.
- Notification data were exported on 2 June 2022 from the ACT Notifiable Disease Management System for the period 1 January 2017 to 29 May 2022, by date
 of specimen collection. Rates are calculated using ABS resident population estimates for September 2021.