



FAMILIES

FIGHTING FLU, INC.®

WEEKLY FLU NEWS

April 13, 2020

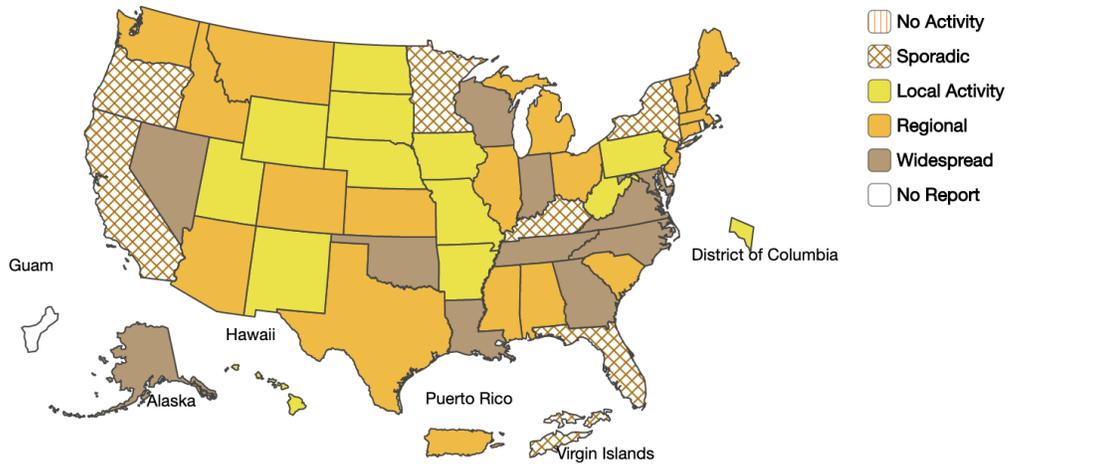


CDC: Weekly U.S. Influenza Surveillance Report: Week 14, Ending Apr. 4, 2020

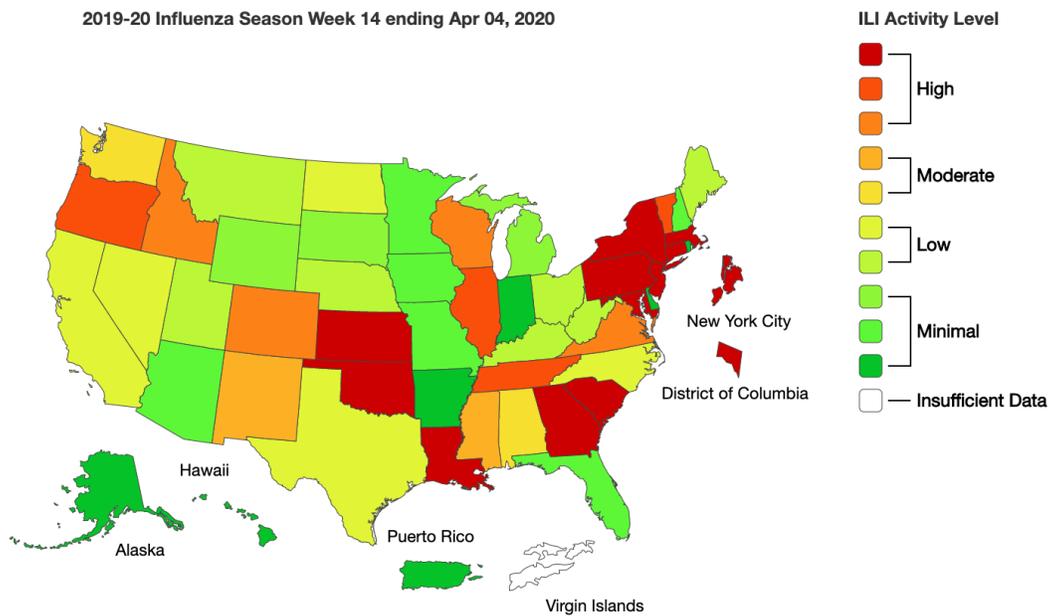
Apr. 10, 2020; [Centers for Disease Control and Prevention](#)

- Laboratory confirmed flu activity as reported by clinical laboratories continues to decrease sharply and is now low. Influenza-like illness activity, while lower than last week, is still elevated.
- 0.8% 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.
- 3.9% of visits to a health care provider were for influenza-like illness. All 10 regions remain above their baselines.
- The overall hospitalization rate is 68.2 per 100,000, which is higher than all recent seasons at this time of year except for the 2017-18 season. Rates in children 0-4 years old and adults 18-49 years old are now the highest CDC has on record for these age groups, surpassing the rate reported during the 2009 H1N1 pandemic. Hospitalization rates for school-aged children are higher than any recent regular season but lower than rates during the pandemic.
- 10% of deaths were attributed to pneumonia and influenza, which is above the epidemic threshold.
- Four new pediatric flu deaths were reported for the 2019-2020 season during week 14. The total for the season is 166.

Week Ending Apr 04, 2020 - Week 14



2019-20 Influenza Season Week 14 ending Apr 04, 2020



2019-2020 U.S. Flu Season: Preliminary Burden Estimates

Apr. 10, 2020; CDC

CDC estimates that, from October 1, 2019, through April 4, 2020, there have been:

- 39 - 56 million flu illnesses
- 18 - 26 million flu medical visits
- 410,000 - 740,000 flu hospitalizations
- 24,000 - 62,000 flu deaths



Coronavirus seems to mutate much slower than seasonal flu

Apr. 6, 2020; [Live Science](#)

Based on current data, it seems as though SARS-CoV-2 mutates much more slowly than the seasonal flu. Specifically, SARS-CoV-2 seems to have a mutation rate of less than 25 mutations per year, whereas the seasonal flu has a mutation rate of almost 50 mutations per year.

Given that the SARS-CoV-2 genome is almost twice as large as the seasonal flu genome, it seems as though the seasonal flu mutates roughly four times as fast as SARS-CoV-2. The fact that the seasonal flu mutates so quickly is precisely why it is able to evade our vaccines, so the significantly slower mutation rate of SARS-CoV-2 gives us hope for the potential development of effective long-lasting vaccines against the virus.



New York City's 2018 Flu Was a Near-Death Experience for Its Medical System

Apr. 7, 2020; [Daily Beast](#)

Two years before the novel coronavirus upended life as we've known it, officials at NYC Health+Hospitals Corporation were worried after a particularly nasty flu season.

Research found that the city's public hospital system—serving 1.1 million patients across five boroughs, more than a third of whom are uninsured—had dangerous gaps in its operational facilities and that another similar influenza season or worse, would tip some of the hospitals into “crisis standards of care.”

Flash forward to 2020, and something more deadly is here. “The public hospitals are on the front line. This is an unprecedented time. This is a public health crisis. In more than a century we haven't had this,” says Anthony Feliciano of the Commission on the Public's Health System.



US trial of Japanese flu drug to treat coronavirus gets approval

Apr. 8, 2020; [The Hill](#)

The U.S. Food and Drug Administration (FDA) has approved a small, randomized trial of a Japanese flu drug that could be used to treat the coronavirus, according to the Boston Globe. The antiviral drug favipiravir, also known by the brand name Avigan, was approved to be used in trials at three Massachusetts hospitals and will involve around 50 or 60 patients with COVID-19.

Reports out of China said infected patients who were given the drug tested negative for COVID-19 after a median of four days. That's compared with a median of 11 days for those who were not treated with the drug.

Why It'll Still Take More Than a Year to Develop a COVID-19 Vaccine



Apr. 8, 2020; [Heathline](#)

Despite positive reports from initial clinical trials, experts tell Healthline the best-case scenario for a vaccination delivered to market is probably 18 months to 2 years. That may sound like too long, given the seriousness of the COVID-19 pandemic, but it's quicker than the 5 to 10 years for many vaccines.

Experts say we need to be careful in how we describe a possible discovery. Schaffner, who was a volunteer in the trials for the swine flu vaccination in 2009, remembers what happened when they overshot their estimates on a delivery date.

One big lesson? “Underpromise and overdeliver,” he said. “Back then, we developed a successful vaccine, but the media story was, ‘The delayed vaccine is finally here.’ We need to not overpromise.”



How Did ‘Spanish Flu’ Get Its Name?

Apr. 9, 2020; [Snopes](#)

Since the earliest reports of the COVID-19 coronavirus disease by Chinese health officials in late 2019, epidemiologists have questioned whether the viral outbreak will surpass the damage of the so-called “Spanish flu” of 1918.

Newspapers recorded the outbreak differently — and wartime censorship was to blame. In an attempt to keep spirits high among Allied and Central Powers countries, newspapers in those countries did not fairly report on the outbreak’s toll. Meanwhile, in Spain, one of only a few European countries to remain neutral in the war, officials talked more openly about how patients were dying from the novel virus.

“‘Spanish’ flu is a misnomer, and the strain is theorized to have actually developed in Kansas,” a 2018 Associated Press story read. “America’s troop mobilization in World War I spread the disease across the country and eventually into Europe once deployed. Stateside military encampments, with their crowded and often unsanitary quarters, became hotbeds of disease.”



Is the US ready for how the coronavirus may impact the next flu season?

Apr. 1, 2020; [AccuWeather](#)

Demand for the flu vaccine is expected to be high in the U.S. this fall as a result of COVID-19 concerns and for preventive health measures.

“I remember during the 2009 pandemic when the flu vaccine came out, they couldn’t keep enough of it,” Dr. Deborah Levy, chair and professor of the Department of Epidemiology at the University of Nebraska Medical Center College of Public Health, told AccuWeather. “If it happened then – and the coronavirus is worse now – I would suspect that you’re going to have a high demand for it.”

“We are planning to increase our total production of flu vaccine doses by 8 percent in 2020 compared to 2019 for both Southern and Northern Hemisphere campaigns,” a

spokesperson for Sanofi replied to AccuWeather in an email. Sanofi is one of the manufacturers of flu vaccines.

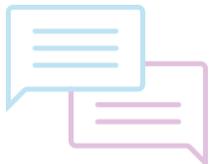


NIH begins study to quantify undetected cases of coronavirus infection

Apr. 10, 2020; [National Institutes of Health](#)

A new study has begun recruiting at the National Institutes of Health in Bethesda, Maryland, to determine how many adults in the United States without a confirmed history of infection with SARS-CoV-2, the virus that causes coronavirus disease 2019 (COVID-19), have antibodies to the virus. The presence of antibodies in the blood indicates a prior infection. In this “serosurvey,” researchers will collect and analyze blood samples from as many as 10,000 volunteers to provide critical data for epidemiological models.

People interested in joining this study should contact clinicalstudiesunit@nih.gov. For more information on this study, please visit ClinicalTrials.gov using identifier [NCT04334954](https://ClinicalTrials.gov/ct2/show/study/NCT04334954).



Join our new Facebook group: Flu Fighting Forum

Want to learn more about flu? Join our new group that is focused solely on flu education and advocacy: [Flu Fighting Forum](#). This group, run by Families Fighting Flu, is a place for conversations about flu prevention, burden, and activity while offering opportunities for flu education and advocacy.



[DONATE NOW](#)