



# Results of season 2017 - 2018 Czech Republic, Europe



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## Site presentation

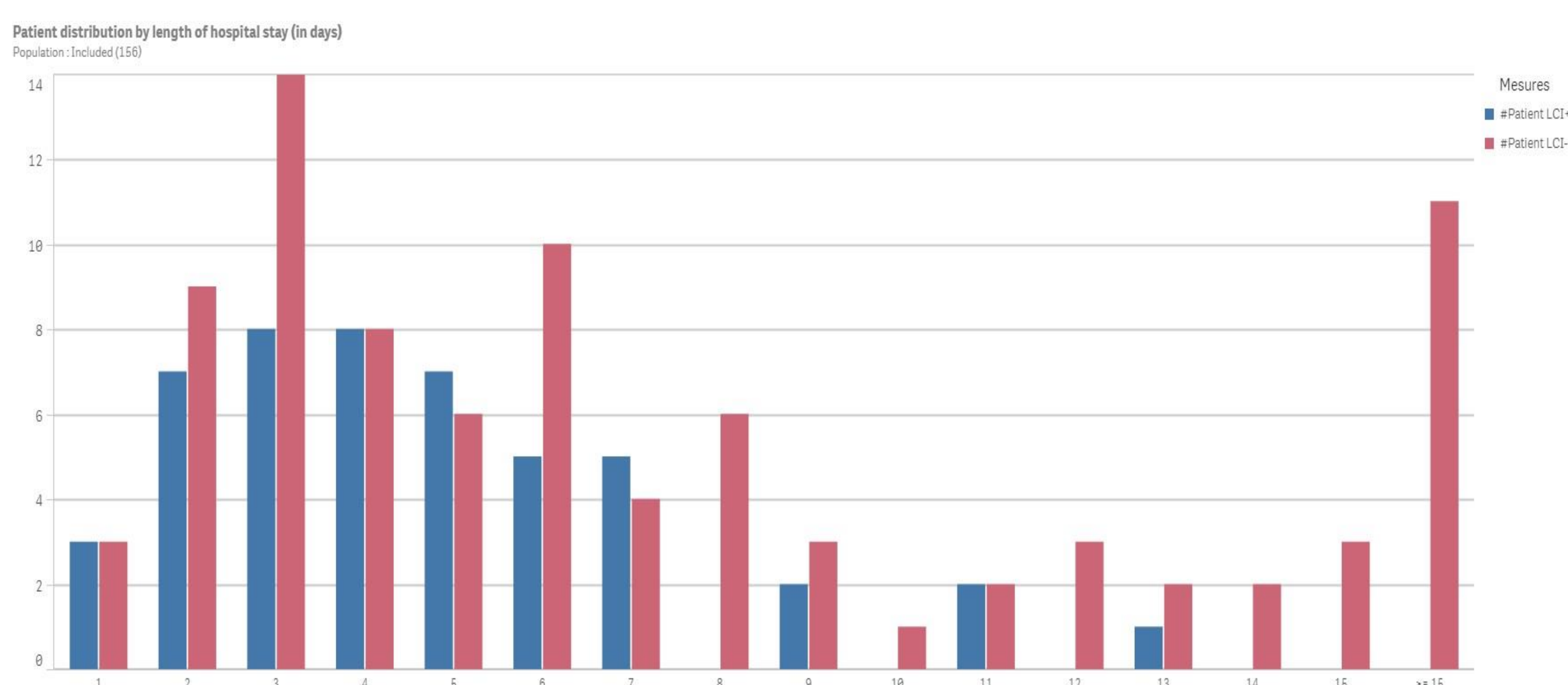
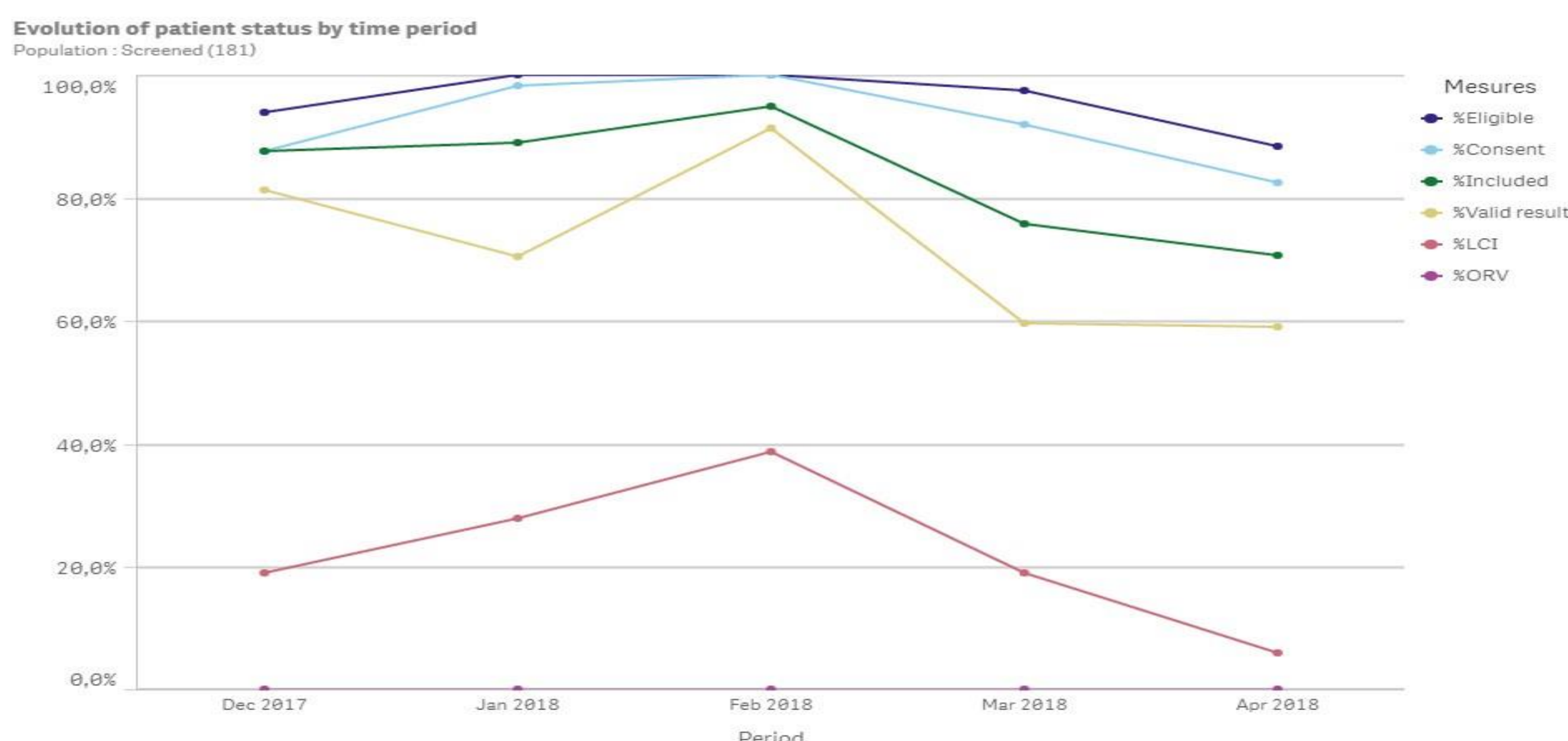
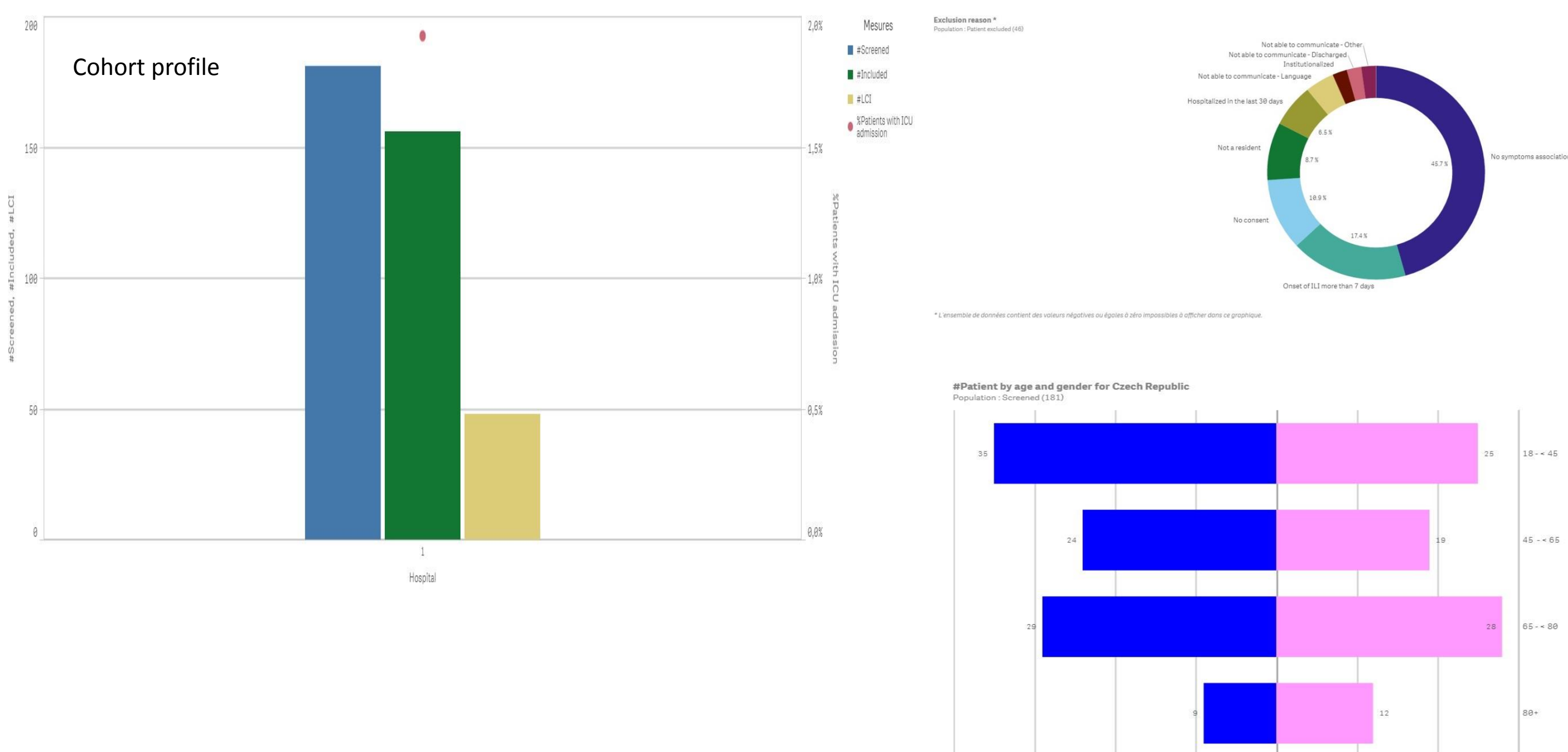
One hospital - Dept. of Infectious Diseases of Hospital Na Bulovce in Prague – referral and tertiary care centre serving for capital Prague and Central Bohemian Region  
Catchment area : 2,5 million population, general population, adults only included  
Main influenza season: December to March (April)



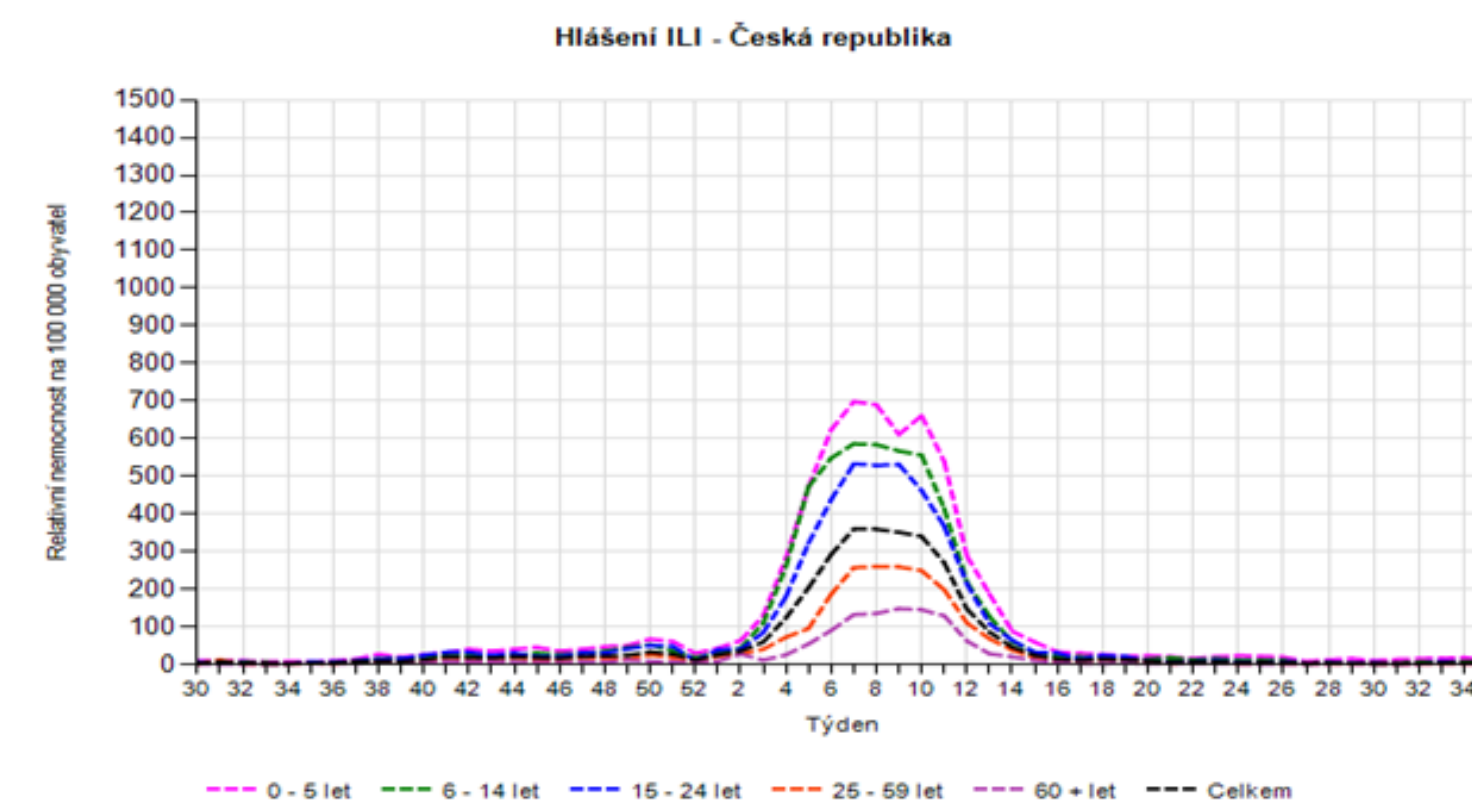
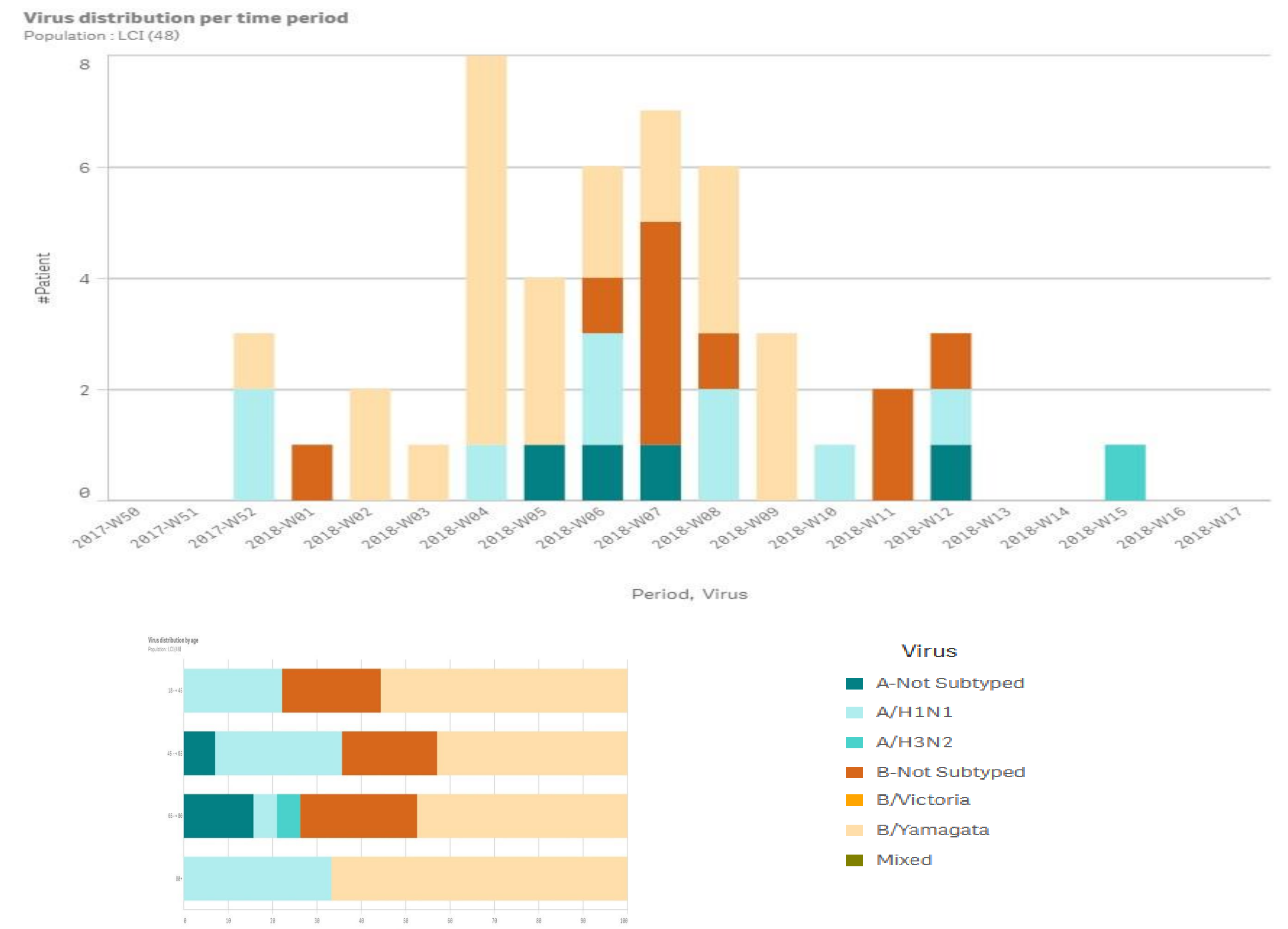
## Methods

Patients > 18 years who have met enter criteria according to "core protocol" were included.  
A nasopharyngeal and pharyngeal swabs were obtained from each patient, both swabs were collected on the same tube. All samples were kept at least at -20°C until sent to reference laboratory in NIPH. q-PCR was performed on the samples to detect the presence of: influenza A (H1 and H3), influenza B (B/Yamagata, B/Victoria).  
Completed questionnaires were processed in NIPH Prague at Department of infectious disease epidemiology.

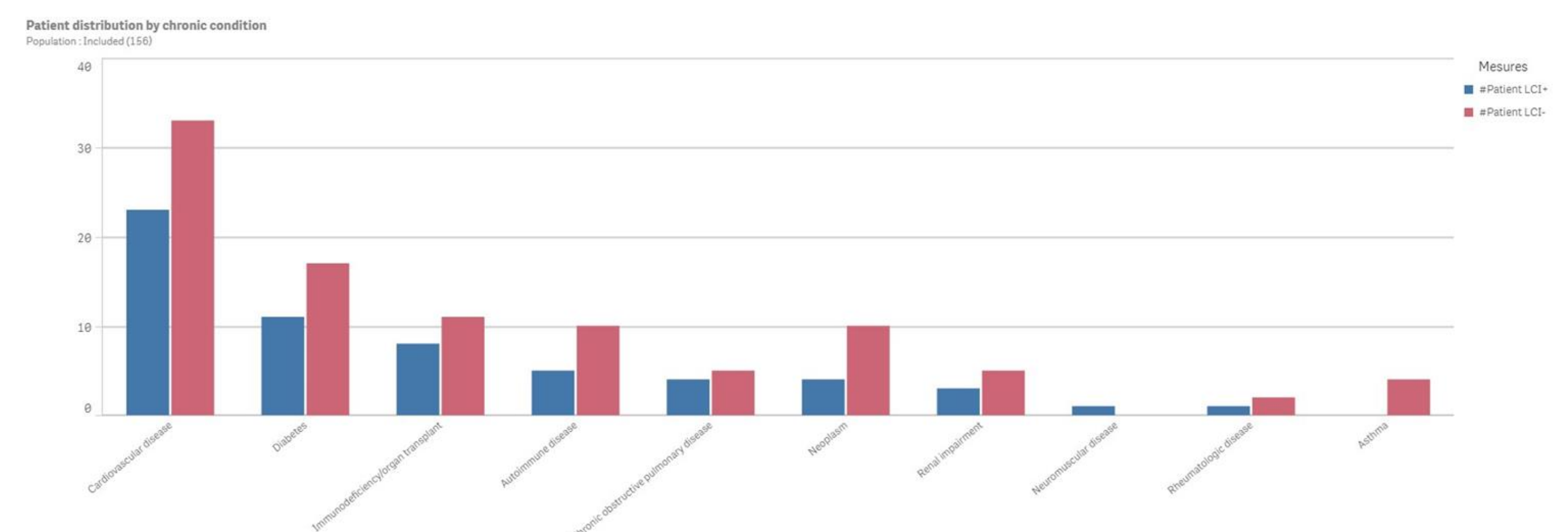
## Results - I



## Results - II



Surveillance data - ILI incidence in the Czech Republic by week and age groups, season 2017-2018



## Key aspects & challenges

- GIHSN 2017/18 flu season lasted from 12 Dec 2017 to 23 Apr 2018 in the Czech Republic, 181 patients were included to the study (156 screened)
- Predominance of influenza B / Yamagata lineage
- Hospitalization with influenza occurred also in healthy and young/middle aged adults (mean age 63.0 years, median 67.3 years, min. 18.8, max. 93.7)
- Cardiovascular disease was the most common chronic condition among our cases
- Vaccination effectiveness: hardly impossible to assess due to low vaccine coverage in the Czech Republic in general, not existence of vaccination registry and relatively low sample size
- Data from the project can improve understanding of influenza epidemiology to better inform public health policy decisions
- Assessing the influenza disease burden might also serve as a first step towards developing targeted interventions to increase vaccine coverage

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