# Shutdown didn't stop the flu – or flu data reporting

By Josh Gray and Dorrie Raymond | January 22, 2018

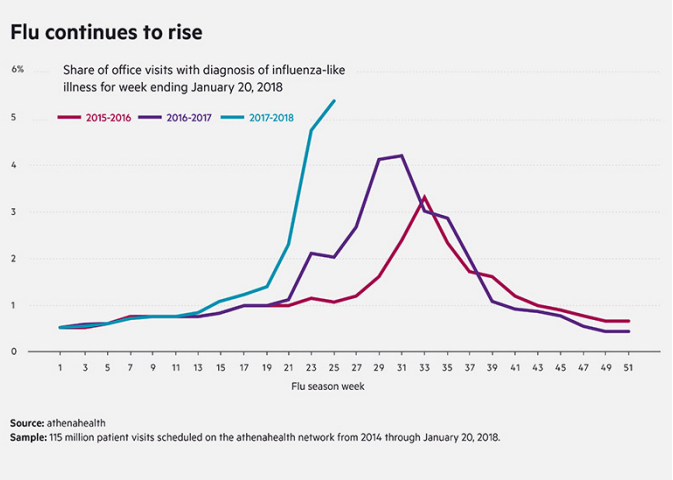
The government shutdown that began Saturday morning, January 20 resolved just two days later. That's a relief – yet the episode serves to underscore the fragility of centralized public health reporting.

While it is hard to know exactly what a continuing shutdown would have meant for government-led flu monitoring, it is quite possible that reporting – at the peak of a severe flu season – would have been slower than usual. In the government shutdown of October 2013, the government discontinued flu reporting entries for 16 days.

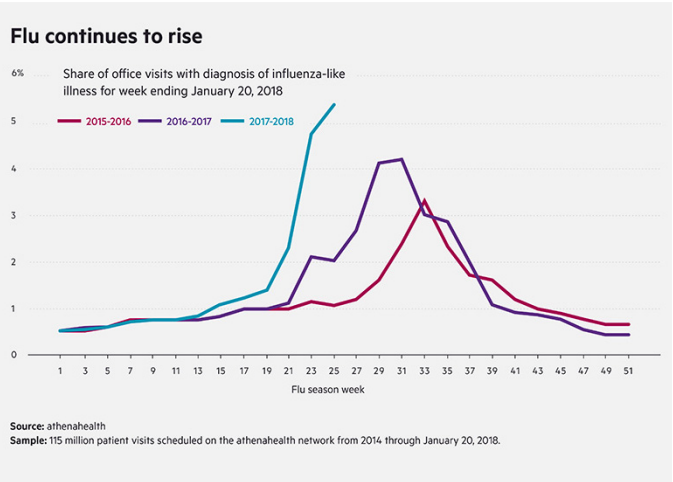
In 2018, however, a range of data sets, from retail to social media to EHR data, are available that complement the CDC's flu reporting and provide a valuable second – and third – set of eyes on the spread of disease through populations.

As researchers at athenahealth, we monitor diagnoses of roughly 700,000 visits each week to a cohort of primary care doctors tracked continuously over the last three years. We analyze the proportion of patient visits resulting in a diagnosis of influenza-like illness (ILI).

The CDC tracks roughly the same volume of patient visits weekly, with larger numbers of visits in some states, including Georgia, Illinois, and Oregon. The athenahealth network tracks more visits in other states, including Texas, Ohio, Florida, and Michigan. This athenahealth data has been shown to correlate accurately with CDC figures and has been shown to be useful in predicting flu prevalence a week in the future in certain urban populations.




Through Saturday, January 20, according to our data, ILI-related patient visits reached 5.6 percent of all primary care visits, up from 5.3 percent the week ending January 13, and significantly higher than measures of flu activity across the network at this time than in the last three years. (Note that, while flu visits are up, it is not necessarily an indication of an increase in overall visit volume.)




The data also show that ILI prevalence is playing out very differently across age groups. Rates have plateaued for all age groups 18 and over, but are increasing for children. The highest rates are evident for 5- to 17- year olds, where ILI accounts for 13.3 percent of visits, up from 8.2 percent just two weeks ago. Rates for 0- to 4-year-old children are 9.7 percent, up from 8.8 percent the previous week.

Given the high toll that flu is taking this year, it is essential to be as rigorous as possible in monitoring the spread of a life-threatening virus, even during a government shutdown. And that's going to take both public and private organizations fully leveraging all available technology and data sets.

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