Montana just reported its first flu-related fatalities of the season. And considering the potential wallop of the strong influenza strain making its way around the globe, the state and the nation at large may be in for a difficult winter.

Two adults over the age of 65 died "due to complications from influenza," said the Dept. of Public Health and reported by the Associated Press. These elderly adults are representative of one of several primary groups most vulnerable to this viral exposure. Another prime target: children under the age of 5.

The nation's death toll may be particularly heavy this season, given that the Centers for Disease Control is reporting that more than 7,000 flu cases are already confirmed. That is more than twice the number reported at this time in 2016, according to the CDC. Meanwhile, seven states – Massachusetts, Virginia, Arkansas, Georgia, Louisiana, Mississippi and Oklahoma – are witnessing "widespread influenza activity." The peak flu season in the United States, says the CDC, starts in December and runs until February 2018.
The primary reason for the concern stems from the outbreak in Australia, which had a particularly punishing flu season over our summer (which was winter in the Southern Hemisphere). The continent reported a greater-than-average number of fatalities and hospitalizations, brought on primarily by the most-impactful flu strain, H3N2. And roughly 90 percent of cases there were from H3N2.

Meanwhile, the vaccine used was just 10 percent effective, on average. The reason for concern in the U.S., experts postulate, is that healthcare workers here are currently deploying the same vaccine.

"It is difficult to predict which influenza viruses will predominate in the 2017–18 influenza season," writes the CDC in its most recent "Update: Influenza Activity" report [3], released Friday. "However, in recent past seasons in which A(H3N2) viruses predominated, hospitalizations and deaths were more common, and the effectiveness of the vaccine was lower."

Typically, flu vaccine is generally effective 40 to 60 percent of the time.

In addition, pregnant woman and those in long-term care facilities are at high risk for infection. Here are the specifics [4], and other facts to be aware of, which includes a list of groups that are "Recommended for Vaccination." [5]

As you can well see, a stronger-than-average flu strain coupled with a weaker-than-usual vaccine is not a great combination. Nonetheless, the best course of action is to be vaccinated, and – especially this season, more than ever – to follow the recommendations [6] as to how to protect
yourself and your loved ones from exposure to the virus.


Links
[3] https://www.cdc.gov/mmwr/volumes/66/wr/mm6648a2.htm