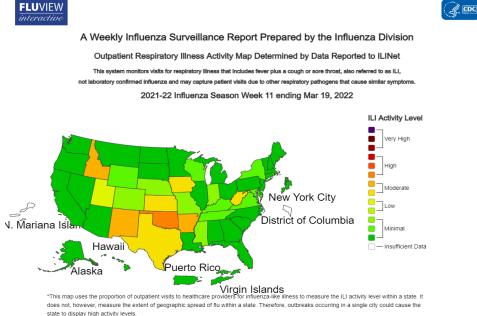


National Influenza Synopsis 2021-2022:

National influenza data is updated Friday of each week. Please visit https://www.cdc.gov/flu/weekly/ for the most current information. The percentage of national respiratory specimens testing positive was at 7.7% this week. Zero new influenza-associated pediatric deaths were reported to the CDC this week. The total for the 2021-2022 season is 13 influenza associated pediatric deaths. This week, National Outpatient ILI data showed seven jurisdictions experienced moderate influenza-like-illness activity and one jurisdiction experienced high or very high influenza-like-illness activity.



state to display high activity levels. *Data collected in ILINet may disproportionately represent certain populations within a state, and the picture of influenza activity for the whole state.

bala displayed in this map are based on data collected in ILINet, whereas the State and Territorial flu activity map are based on reports from state and territorial epidemiologists. The data presented in this map is preliminary and may change as more data is received.

*Differences in the data presented by CDC and state health departments likely represent differing levels of data completeness with data

Summary of International Influenza Activity:

- The current influenza surveillance data should be interpreted with caution as the ongoing COVID-19 pandemic has influenced to varying extents health seeking behaviors, staffing/routines in sentinel sites, as well as testing priorities and capacities in Member States. Various hygiene and physical distancing measures implemented by Member States to reduce SARS-CoV-2 virus transmission have likely played a role in reducing influenza virus transmission.
- Globally, influenza activity remained low and decreased this period after a peak at the end of 2021.
- In the temperate zones of the northern hemisphere, influenza activity decreased with detections of mainly influenza A(H3N2) viruses and B/Victoria lineage viruses reported.
- In North America, influenza virus detections remained low and were predominantly A(H3N2) among those detected and subtyped. Respiratory syncytial virus (RSV) activity also further decreased in the USA and Canada.
- In Europe, influenza activity remained stable at low levels with influenza A(H3N2) predominant. Very little RSV activity was observed. In East Asia, influenza activity with mainly influenza B/Victoria lineage detections decreased in China. Influenza illness indicators and activity remained low in the rest of the subregion.
- In Northern Africa, influenza detections of influenza A(H3N2) continued to be reported.
- In Western Asia, influenza activity was low across reporting countries.
- In the Caribbean and Central American countries, influenza activity of predominantly influenza A(H3N2) decreased overall.
- In tropical South America, low influenza activity was reported with influenza A(H3N2) predominant. In tropical Africa, influenza activity was reported mainly from Eastern Africa with influenza A(H3N2) predominating followed by influenza B/Victoria lineage, and from Middle Africa with influenza B predominantly detected.
- In Southern Asia, influenza virus detections of predominantly influenza A(H3N2) decreased.
- In South-East Asia, mainly influenza A(H3N2) detections were reported as well as some influenza B. RSV activity was elevated in Mongolia and Republic of Korea.
- At the global level, SARS-CoV-2 percent positivity from sentinel surveillance decreased across all WHO regions during this reporting period. However, positivity rate was above 50% in the Eastern Mediterranean and between 20% and 30% in all other Regions of WHO, with exception of the African Region of WHO where positivity remained under 10%. Overall positivity from non-sentinel sites also showed a decreasing trend.
- In the temperate zones of the southern hemisphere, influenza activity remained low overall, although increased detections of influenza A(H3N2) were reported in some countries in temperate South America.

Influenza Surveillance 2021-2022:

During MMWR Week 11, there were **104** laboratory-confirmed cases of influenza reported among Delaware Residents. Reports of influenza-like-illness (ILI) received from participating providers, facilities, and institutions in Delaware show the ILI rate is at **.89%** which is below Delaware's 2021-2022 baseline rate of 2.0%. Nationally, **1.8%** of visits to a healthcare provider were for ILI, which is below the 2021-2022 national baseline of 2.5%.

Past Influenza Surveillance from 2020-2021:

Last Season, during MMWR Week 11, there was 1 laboratory confirmed cases of influenza among Delaware Residents. The ILI rate was at **0.24%** compared to Delaware's 2020-2021 baseline of 1.9%. The rate nationally for the 2020-2021 season, MMWR Week 11, was **0.9%** of visits to a healthcare provider were for ILI compared to the 2020-2021 national baseline of 2.6%.

Past Influenza Surveillance from 2019-2020:

The previous season, during MMWR Week 11, there were **395** laboratory confirmed cases of influenza among Delaware Residents. The ILI rate was **2.28%** compared to Delaware's 2019-2020 baseline of 1.9%. The rate nationally for the 2019-2020 season, MMWR Week 11, was **5.8%** of visits to a healthcare provider were for ILI compared to the 2019-2020 national baseline of 2.4%.

Level of Influenza Activity in Delaware, MMWR Week 11

Widespread
CDC Definitions:
No Activity: No laboratory-confirmed cases ² of influenza and no reported increase in the number of cases of ILI.
Sporadic: Small numbers of laboratory-confirmed influenza cases or a single laboratory-confirmed influenza outbreak has been reported, but there is no increase in cases of ILI.
Local: Outbreaks of influenza or increases in ILI cases and recent laboratory-confirmed influenza in a single region of the state.
Regional: Outbreaks of influenza or increases in ILI and recent laboratory-confirmed influenza in at least two but less than half the regions of the state with recent laboratory evidence of influenza in those regions. ³
Widespread: Outbreaks of influenza or increases in ILI cases and recent laboratory-confirmed influenza in at least half the regions of the state with recent laboratory evidence of influenza in the state.
Influenza-like illness (ILI) is defined as patients presenting with fever of 100° F or greater, cough and/or sore throat.
Laboratory-confirmed case = case confirmed by viral culture or PCR.

³ Region = population under surveillance in a defined geographical subdivision of a state. Regions typically include several counties. Regional does not apply to states with \leq four counties.

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Table 1: Comparison the MMWR Week 11 of the 2019-2020 Influenza Season, 2020-2021 Influenza Season, and current 2021-2022 Influenza Season Confirmed¹ Influenza Cases Reported Statewide by County

	2019-2020 Influenza Season			2020-2	021 Influenza S	Season	Current 2021-2022 Influenza Season ³			
Confirmed Flu Cases by County	Week 11	YTD ²	YTD County Percentage (%)	Week 11	YTD ²	YTD County Percentage (%)	Week 11	YTD ²	YTD County Percentage (%)	
STATEWIDE	395	6862		1	21		104	901		
New Castle County	151	3114	45.38%	1	4	19.05%	33	521	57.82%	
Kent County	130	1747	25.46%	0	13	61.90%	30	143	15.87%	
Sussex County	114	2001	29.16%	0	4	19.05%	41	237	26.31%	

¹Influenza Cases are confirmed via PCR testing

²YTD stands for "Year to Date" and represents the cumulative number of cases through the current MMWR Week being assessed for the 2020-21 and 2021-22 influenza seasons, respectively.

³ There may be technical discrepancies of reporting numbers week to week due to retroactive reporting or reclassification of cases.

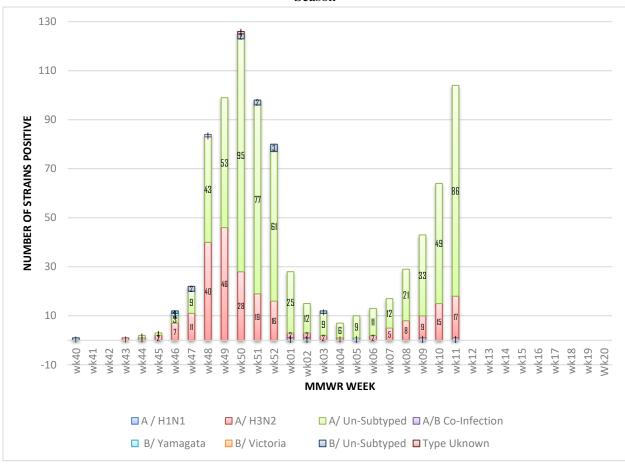
Table 2: Comparison of MMWR Week 11 of the 2019-2020 Influenza Season, 2020-2021 Influenza Season, and current 2021-2022 Influenza Season Confirmed¹ Influenza Cases Reported Statewide by Age

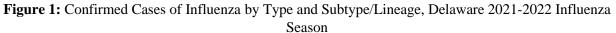
		2019-2020 Influenza Season			2020-2021 Influenza Season			Current 2021-2022 Influenza Season																					
Confirmed Flu Cases by Age Group*		Week 11	Total Count	YTD ²	Week 11	Total Count	YTD ²	Week 11	Total Count	YTD ²																			
	0-4 years	78			-			12																					
	5-11 years	52				-			36																				
VIDE	12-17 years	52						-			-																		
STATEWIDE	18-34 years	44	395	395		395	395	6862	6862	6862	6862	6862	6862	6862	-	1	21	22	104	901									
ST/	35-49 years	44																											-
	50-64 years	67																						-			-		
	65+years	62			-			-																					

¹Influenza Cases are confirmed via PCR testing

²YTD stands for "Year to Date" and represents the cumulative number of cases through the current MMWR Week being assessed for the 2020-21 and 2021-22 influenza seasons, respectively.

*Cell counts with less than 10 cases are suppressed for smaller age groups. Due to suppression guidelines, stratification by age group, within each county, is not shown in the table above.





During MMWR Week 11 for the 2021-2022 Delaware Influenza season, there were **104** confirmed cases of Influenza. Currently in this season the predominate strain of influenza in Delaware is Influenza A (unsubtyped) followed by Influenza A(H3N2).

Table 3: Comparison of the 2019-2020 MMWR Week 11 and the 2010-2022 MMWR Week 11
Influenza-related Hospitalizations and Deaths Statewide

Hospitalizations and Deaths due	2019-2020 Influenza Season				2020-2021 Influenza Season				Current 2021-2022 influenza Season			
to Influenza	Week 11	YTD Totals ¹	Percentage of Confirmed Case (%) ²	YTD Percentage of Confirmed Cases (%) ³	Week 11	YTD Totals ¹	Percentage of Confirmed Case (%) ²	YTD Percentage of Confirmed Cases (%) ³	Week 11	YTD Totals ¹	Percentage of Confirmed Case (%) ²	YTD Percentage of Confirmed Cases (%) ³
Hospitalizations	20	353	5.06%	5.48%	0	1	0%	4.76%	8	65	7.69%	7.21%
Deaths	0	11	0%	.17%	0	1	0%	4.76%	0	0	0%	0%

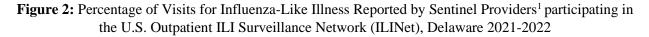
¹YTD stands for "Year to Date" and represents the cumulative number of cases through the current MMWR Week that were hospitalized or died

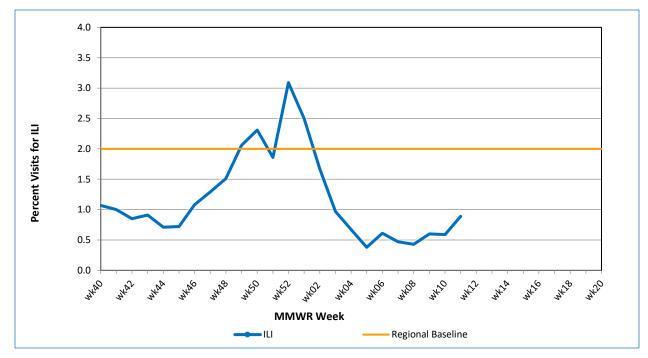
²Percentage of cases confirmed during the single MMWR Week ³Percentage of cases for the cumulative count of confirmed cases through the influenza season to the current MMWR Week. **Table 4:** Annual Number of Influenza Cases Reported by Flu Season, Delaware 2004-05 through 2021-22

Influenza Season	Total Annual Influenza Cases		
2004 - 2005	995		
2005 - 2006	541		
2006 - 2007	508		
2007 - 2008	1,401		
2008 - 2009	738		
2009 - 2010	2,247		
2010 - 2011	1,479		
2011 - 2012	267		
2012 - 2013	1,781		
2013 - 2014	1,843		
2014 - 2015	2,390		
2015 - 2016	1,843		
2016 - 2017	4,590		
2017 - 2018	9,050		
2018 - 2019	6,387		
2019 - 2020	7,075 26		
2020-2021 2021-2022 (YTD)	901		

U.S. Outpatient Influenza-Like Illness Surveillance Network (ILINet) Sentinel Providers

An ILINet (sentinel) provider conducts surveillance for influenza-like illness (ILI) in collaboration with the Division of Public Health and the Centers for Disease Control and Prevention (CDC). Data reported by ILINet providers, in combination with other influenza surveillance data, provide a national and





Delaware's regional baseline¹ for healthcare visits relating to ILI symptoms in the 2021-2022 Influenza Season is 2.0 % and the national baseline² is 2.5%. In MMWR Week 11, the amount of ILI related visits reported by sentinel providers in Delaware is at **.89%** and is below regional and national baselines.

¹The regional baseline is calculated by the CDC using non-influenza weeks from the previous three influenza seasons. Delaware is in Region 3, which also includes DC, MD, PA, VA, and WV.

²The National baseline is calculated by the CDC using non-influenza weeks from the previous three influenza seasons.

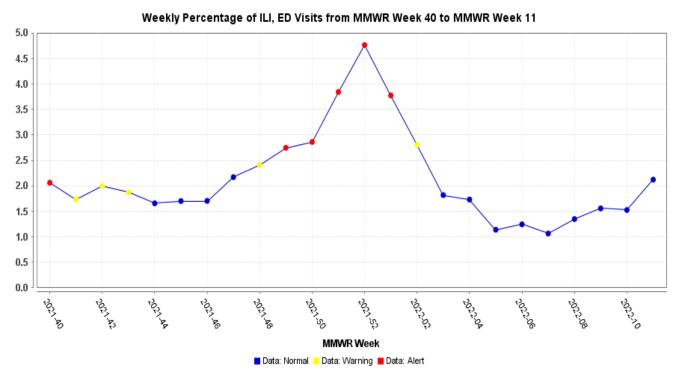


Figure 3: Percentage of Emergency Care Visits Due to Influenza-Like Illness MMWR Week 40-MMWR Week 11, Delaware 2021-2022

Syndromic data collected from ESSENCE shows that from Week 40 through Week 11, the percentage of ED visits due to ILI symptoms has slightly decreased from past weeks and is significantly higher than last year's season. The percentage of ED visits for ILI for Week 11 was highest in Sussex County (4.04%), followed by Kent County (2.06%), and New Castle County (1.42%).

Additional Respiratory Virus Surveillance

Table 5: Current 2021-2022 Respiratory syncytial virus (RSV) Season Confirmed ¹ Influenza Cases
Reported Statewide by County

Confirmed RSV	Cur	Current 2021-2022 Respiratory syncytial virus (RSV) Cases					
Cases by County ³	Week 11	YTD ²	YTD County Percentage (%)				
STATEWIDE	0	25	-				
New Castle County	0	2	8%				
Kent County	0	22	88%				
Sussex County	0	1	4%				

¹Respiratory syncytial virus, (RSV) Cases are confirmed via PCR testing

²YTD stands for "Year to Date" and represents the cumulative number of cases through the current MMWR Week being assessed for the 2020-21 and 2021-22 ¹Respiratory syncytial virus, respectively.

³ There may be technical discrepancies of reporting numbers week to week due to retroactive reporting or reclassification of cases.

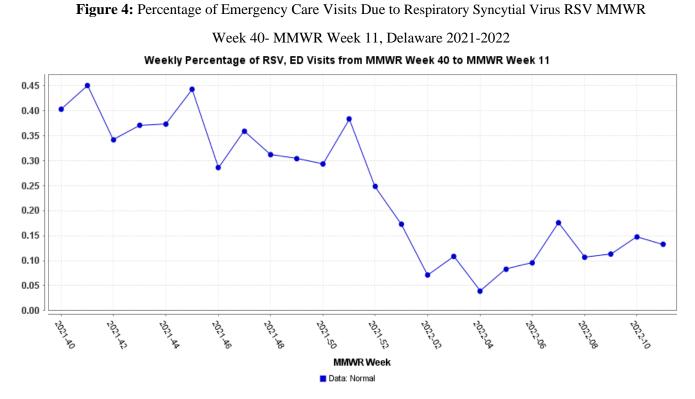
Table 6: Current 2021-2022 Respiratory syncytial virus (RSV) Confirmed¹ Influenza Cases Reported Statewide by Age

		Current 2021-2022 Respiratory syncytial virus (RSV) Cases						
	RSV Cases by Age Group*	YTD by Age Group	Total Count Week 11	YTD2				
	0-4 years	16						
	5-11 years	-						
STATEWIDE	12-17 years	-	0	05				
ATEV	18-34 years	-	U	25				
ST	35-49 years	-						
	60-64 years	-						
	65+years	-						

¹Respiratory syncytial virus, (RSV) Cases are confirmed via PCR testing

²YTD stands for "Year to Date" and represents the cumulative number of cases through the current MMWR Week being assessed for the 2020-21 and 2021-22 Respiratory syncytial virus seasons, respectively.

*Cell counts with less than 10 cases are suppressed. Due to suppression guidelines, stratification by age group, within each county, is not shown in the table above.



Syndromic data collected from ESSENCE shows that from Week 40 through Week 11, the percentage of ED visits due to RSV-related ED* visits has increased from past weeks. The percentage of ED visits for RSV for Week 11 was highest in New Castle County (0.31%), followed by Kent County (0.14%), and Sussex County (0.01%).

*The syndrome is defined a combination of chief complaints and discharge diagnoses

NOTE: Data provided do not reflect the total number of individuals who have been infected with the Influenza virus or Respiratory Syncytial virus in Delaware during the reporting period due to the following factors:

- Many people ill with influenza-like symptoms do not seek medical care.
- Many who do seek medical care are not tested for influenza.
- The Delaware Public Health Laboratory is limited by capacity to processing a maximum of three specimens per day from each reporting entity.

The Delaware Division of Public Health (DPH) is committed to serving you better by providing the most accurate, up-to-date influenza data available.

- For general information on influenza, visit <u>flu.delaware.gov</u>or http://dhss.delaware.gov/dhss/dph/dpc/immunize-flu.html.
- For more information on Respiratory syncytial virus (RSV) visit: <u>https://www.cdc.gov/rsv/index.html</u>
- For specific information on DPH flu clinics, visit http://dhss.delaware.gov/dhss/dph/fluclinics.html.
- For questions on Delaware's weekly flu report, call the DPH Office of Infectious Disease Epidemiology at 302-744-4990.
- For questions regarding influenza vaccination, please call 302-744-1060.