



Delaware Weekly Influenza Report

MMWR Week 18 (May 1, 2022-May 7, 2022)

Delaware Division of Public Health

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 **8.6%** this week. **Zero** new influenza-associated pediatric deaths were reported to the CDC this week. The total for the 2021-2022 season is **24** influenza associated pediatric deaths. This week, National Outpatient ILI data showed **four** jurisdiction experienced moderate influenza-like-illness activity and **four** jurisdictions experienced high or very high influenza-like-illness activity.

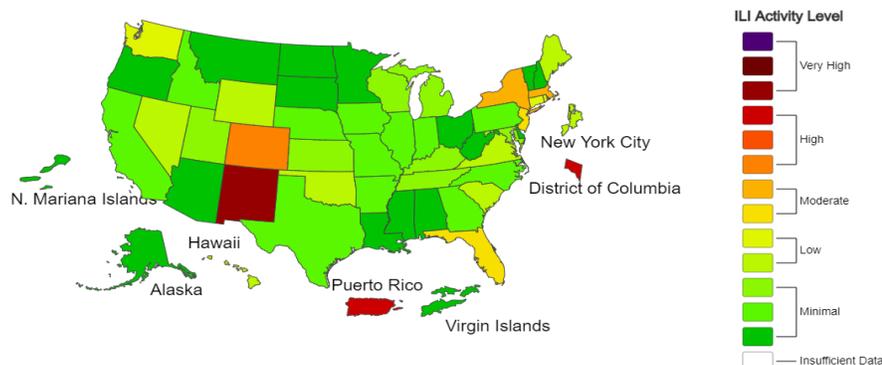


A Weekly Influenza Surveillance Report Prepared by the Influenza Division

Outpatient Respiratory Illness Activity Map Determined by Data Reported to ILINet

This system monitors visits for respiratory illness that includes fever plus a cough or sore throat, also referred to as ILI, not laboratory confirmed influenza and may capture patient visits due to other respiratory pathogens that cause similar symptoms.

2021-22 Influenza Season Week 18 ending May 07, 2022



*This map uses the proportion of outpatient visits to healthcare providers for influenza-like illness to measure the ILI activity level within a state. It does not, however, measure the extent of geographic spread of flu within a state. Therefore, outbreaks occurring in a single city could cause the state to display high activity levels.

*Data collected in ILINet may disproportionately represent certain populations within a state, and therefore may not accurately depict the full picture of influenza activity for the whole state.

*Data 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 presented by the state likely being the more complete.

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.
- In the temperate zones of the northern hemisphere, influenza activity increased or remained stable, except in East Asia where detections decreased. Detections were mainly influenza A(H3N2) viruses and B/Victoria lineage viruses.
- In North America, influenza activity continued to increase in recent weeks but remained lower than pre-COVID-19 pandemic levels at this time of the year and was predominantly due to influenza A viruses, with A(H3N2) predominant among the subtyped viruses. Respiratory syncytial virus (RSV) activity remained low in the United States of America (USA) and Canada.
- In Europe, overall influenza activity has stabilized with influenza A(H3N2) predominant. Very little RSV activity was observed.
- In Central Asia, a single influenza B detection was reported in Kyrgyzstan.
- In East Asia, influenza activity with mainly influenza B/Victoria lineage detections appeared to decrease in China. ILI rate and pneumonia hospitalizations remained elevated in Mongolia. Elsewhere, influenza illness indicators and activity remained low.
- In Northern Africa, increasing detections of influenza A(H3N2) were reported in Tunisia.
- In Western Asia, influenza activity was low across reporting countries, with the exception of Georgia where increased detections of influenza A(H3N2) were reported.
- In the Caribbean and Central American countries, low influenza activity was reported with influenza A(H3N2) predominant.
- 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 viruses.
- In Southern Asia, influenza virus detections were at low levels with influenza A(H1N1)pdm09 and A(H3N2) viruses detected.
- In South-East Asia, influenza detections were at low levels except in Timor-Leste with influenza A(H3N2) predominant.
- In the temperate zones of the southern hemisphere, influenza activity remained low overall, although detections of influenza A viruses (with A(H3N2) predominant among the subtyped viruses) continued to be reported in some countries in temperate South America and South Africa.

Influenza Surveillance 2021-2022:

During MMWR week 18, there were **166** 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 **0.38%** which is below Delaware’s 2021-2022 baseline rate of 2.0%. Nationally, **2.3%** 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 18, there was **0** laboratory confirmed cases of influenza among Delaware Residents. The ILI rate was at **0.35%** compared to Delaware’s 2020-2021 baseline of 1.9%. The rate nationally for the 2020-2021 season, MMWR week 18, was **1.2%** 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:

*Due to the 2020 Covid-19 Pandemic the end of the 2019-2020 influenza season was unable to be accurately tracked and therefor the data is unavailable for this period.

Level of Influenza Activity in Delaware, MMWR Week 18

Widespread
<p>CDC Definitions:</p> <p>No Activity: No laboratory-confirmed cases² of influenza and no reported increase in the number of cases of ILI.</p> <p>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.</p> <p>Local: Outbreaks of influenza or increases in ILI cases and recent laboratory-confirmed influenza in a single region of the state.</p> <p>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</p> <p>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.</p> <p><i>Influenza-like illness (ILI) is defined as patients presenting with fever of 100° F or greater, cough and/or sore throat.</i></p>

² 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 ≤ four counties.

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Table 1: Comparison the MMWR Week 18 of the 2019-2020 Influenza Season, 2020-2021 Influenza Season, and current 2021-2022 Influenza Season Confirmed¹ Influenza Cases Reported Statewide by County

Confirmed Flu Cases by County	2019-2020 Influenza Season			2020-2021 Influenza Season			Current 2021-2022 Influenza Season ³		
	Week 18	YTD ²	YTD County Percentage (%)	Week 18	YTD ²	YTD County Percentage (%)	Week 18	YTD ²	YTD County Percentage (%)
STATEWIDE	-	7075	--	0	23	--	166	2210	--
New Castle County	-	3187	45.05%	0	5	21.73%	74	1040	47.06%
Kent County	-	1810	25.58%	0	14	60.87%	25	485	21.95%
Sussex County	-	2078	29.37%	0	4	17.39%	67	685	31.00%

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.

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

Table 2: Comparison of MMWR Week 18 of the 2019-2020 Influenza Season, 2020-2021 Influenza Season, and current 2021-2022 Influenza Season Confirmed¹ Influenza Cases Reported Statewide by Age

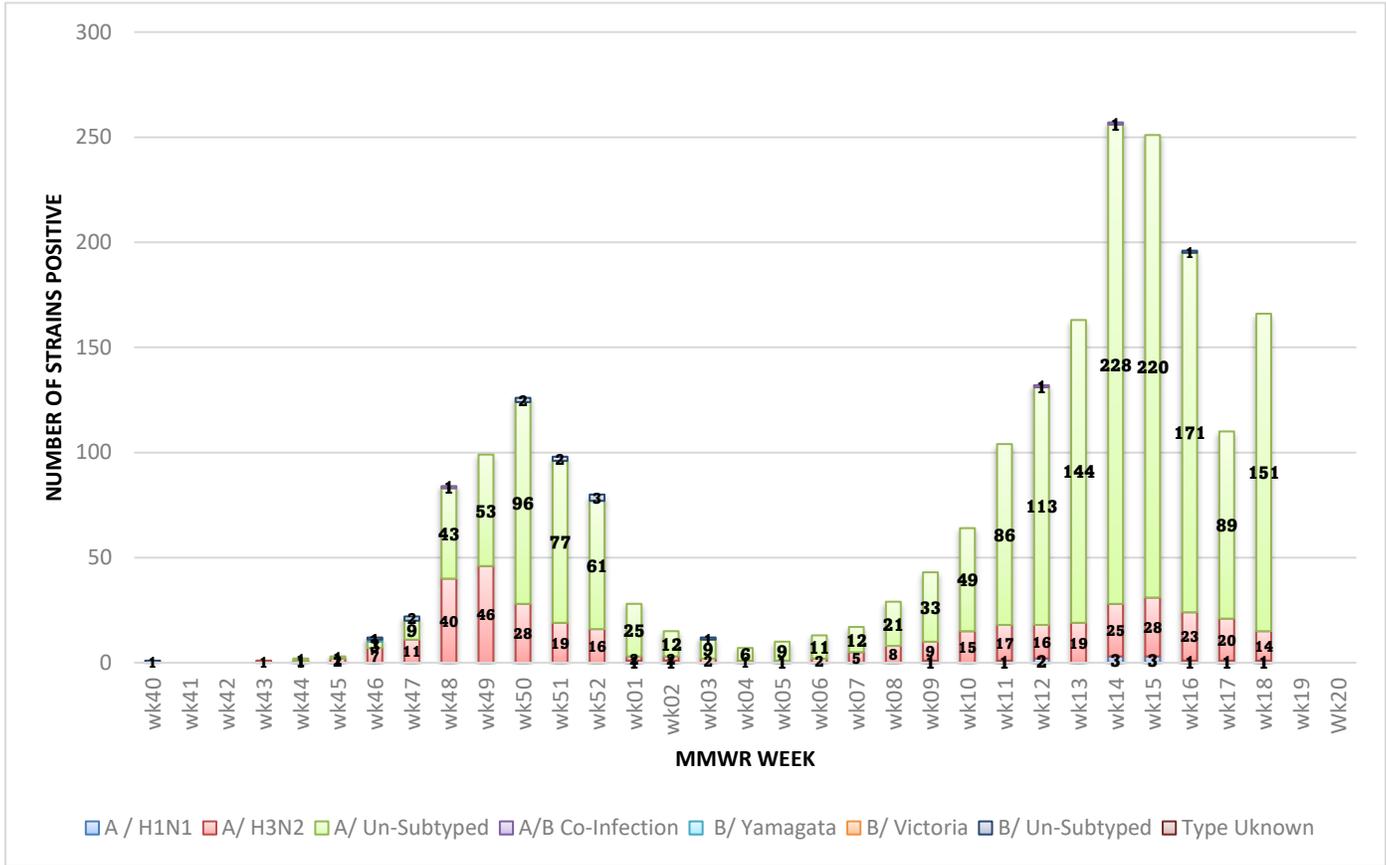
Confirmed Flu Cases by Age Group*		2019-2020 Influenza Season			2020-2021 Influenza Season			Current 2021-2022 Influenza Season		
		Week 18	Total Count	YTD ²	Week 18	Total Count	YTD ²	Week 18	Total Count	YTD ²
STATEWIDE	0-4 years	-	-	7075	-	0	23	29	166	2210
	5-11 years	-			-			48		
	12-17 years	-			-			19		
	18-34 years	-			-			28		
	35-49 years	-			-			10		
	50-64 years	-			-			10		
	65+ years	-			-			19		

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.

Figure 1: Confirmed Cases of Influenza by Type and Subtype/Lineage, Delaware 2021-2022 Influenza Season



During MMWR Week 18 for the 2021-2022 Delaware Influenza season, there were **166** confirmed cases of Influenza. Currently in this season the predominate strain of influenza in Delaware is Influenza A (un-subtyped) followed by Influenza A(H3N2).

Table 3: Comparison of the 2019-2020 MMWR Week 18 and the 2020-2021 MMWR Week 18 Influenza-related Hospitalizations and Deaths Statewide

Hospitalizations and Deaths due to Influenza	2019-2020 Influenza Season				2020-2021 Influenza Season				Current 2021-2022 influenza Season			
	Week 18	YTD Totals ¹	Percentage of Confirmed Case (%) ²	YTD Percentage of Confirmed Cases (%) ³	Week 18	YTD Totals ¹	Percentage of Confirmed Case (%) ²	YTD Percentage of Confirmed Cases (%) ³	Week 18	YTD Totals ¹	Percentage of Confirmed Case (%) ²	YTD Percentage of Confirmed Cases (%) ³
Hospitalizations	-	362	0%	5.12%	0	1	0%	4.76%	5	125	3.01%	5.66%
Deaths	-	11	0%	.16%	0	1	0%	4.76%	0	2	0%	.09%

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.

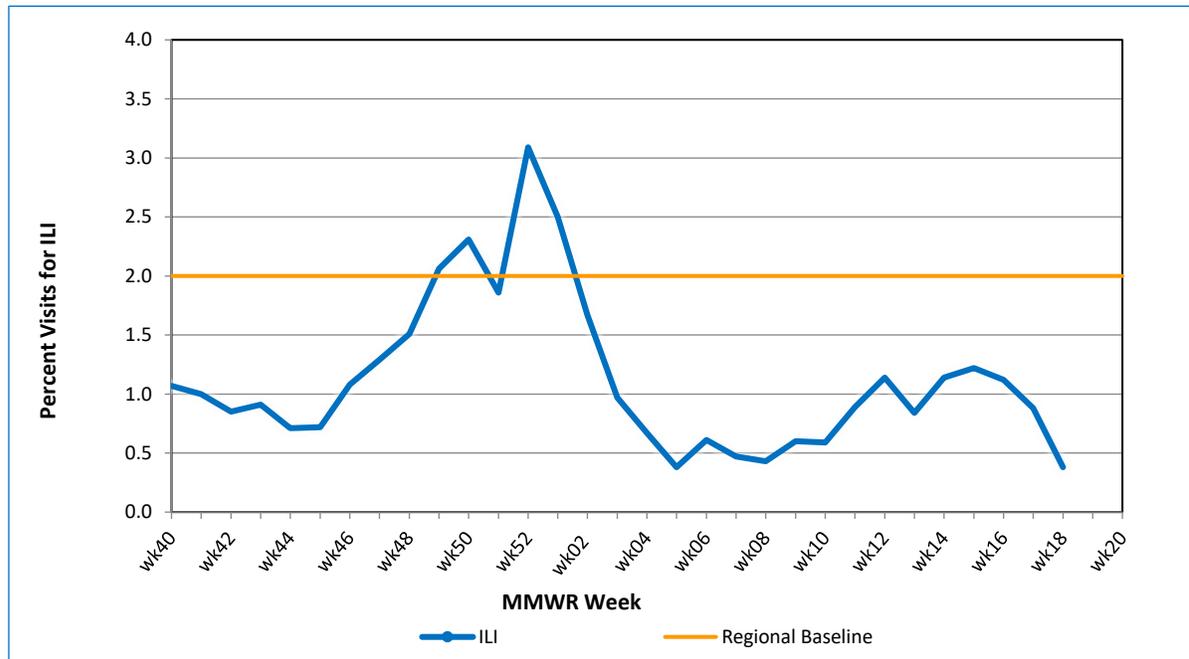
Table 4: Annual Number of Influenza Cases Reported by Flu Season, Delaware 2004-05 through 2021-22

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
2020-2021	26
2021-2022 (YTD)	2210

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

Figure 2: Percentage of Visits for Influenza-Like Illness Reported by Sentinel Providers¹ participating in the U.S. Outpatient ILI Surveillance Network (ILINet), Delaware 2021-2022

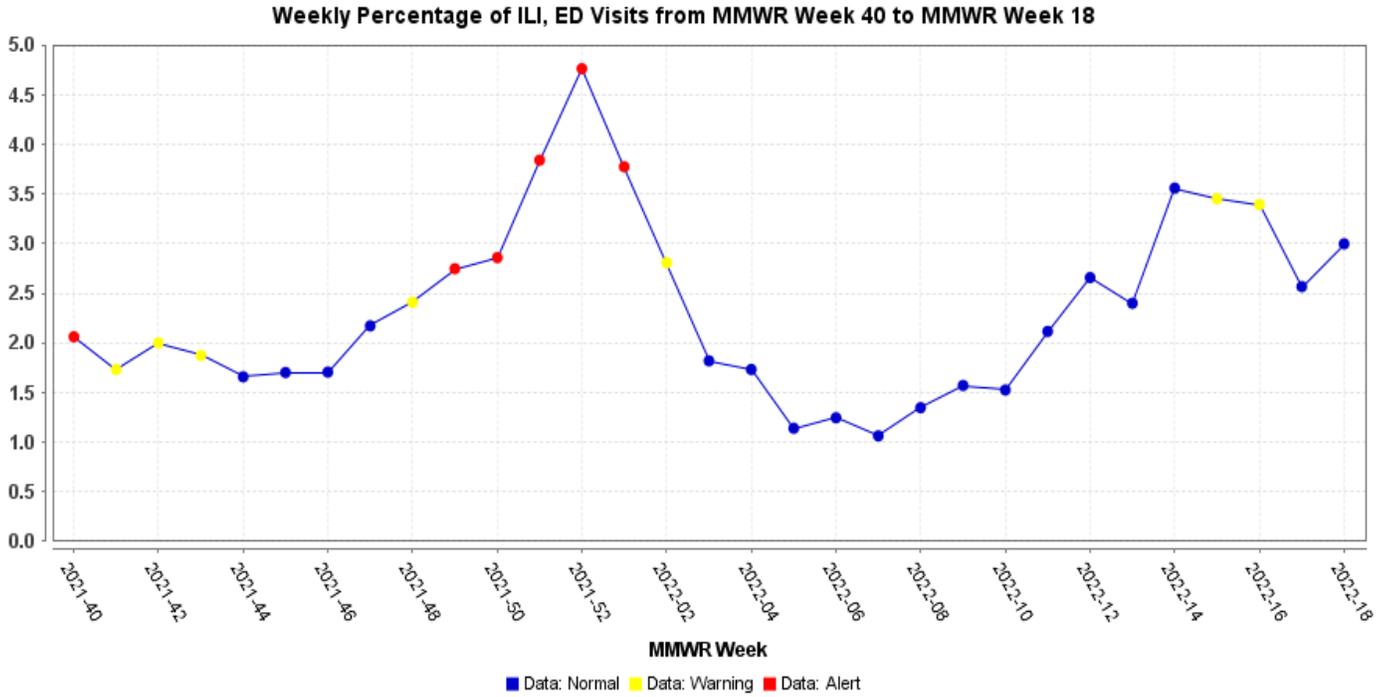


Delaware’s regional baseline¹ for healthcare visits relating to ILI symptoms in the 2021-2022 Influenza Season is 2.0 % and the national baseline² is 2.5%. In MMWR Week 18, the amount of ILI related visits reported by sentinel providers in Delaware is at **0.38%** and is below regional and national baselines.

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 (ILI)
MMWR Week 40- MMWR Week 18, Delaware 2021-2022**



Syndromic data collected from ESSENCE shows that from Week 40 through Week 18, the percentage of ED visits due to ILI symptoms has increased from past weeks and is significantly higher than last year’s season. The percentage of ED visits for ILI for Week 18 was highest in Sussex County (**4.27%**), followed by Kent County (**2.78%**), and New Castle County (**2.58%**).

Additional Respiratory Virus Surveillance

Table 5: Current 2021-2022 Respiratory syncytial virus (RSV) Season Confirmed¹ Influenza Cases Reported Statewide by County

Confirmed RSV Cases by County ³	Current 2021-2022 Respiratory syncytial virus (RSV) Cases		
	Week 18	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 2021-22¹Respiratory syncytial virus, respectively.

³There 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

RSV Cases by Age Group*	Current 2021-2022 Respiratory syncytial virus (RSV) Cases		
	YTD by Age Group	Total Count Week 18	YTD ²
STATEWIDE		0	25
0-4 years	16		
5-11 years	-		
12-17 years	-		
18-34 years	-		
35-49 years	-		
60-64 years	-		
65+years	-		

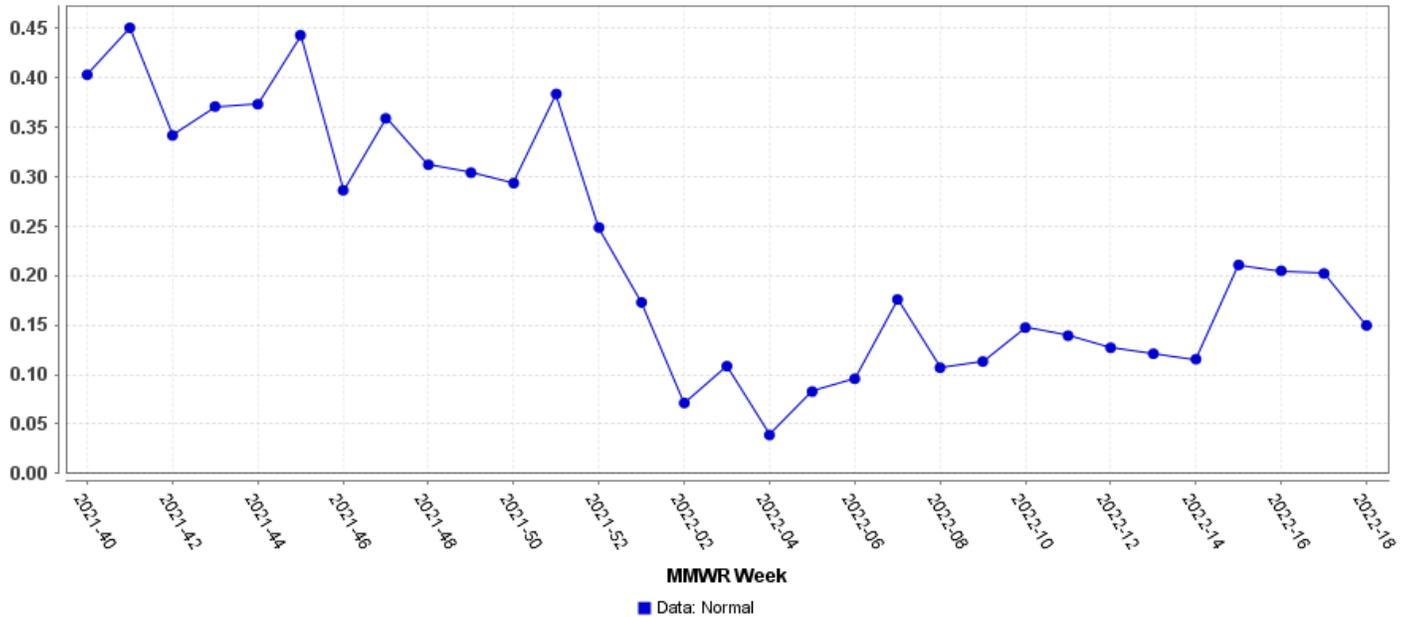
¹Respiratory syncytial virus, (RSV) Cases are confirmed via PCR testing

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.

**Figure 4: Percentage of Emergency Care Visits Due to Respiratory Syncytial Virus (RSV)
MMWR Week 40- MMWR Week 18, Delaware 2021-2022**

Weekly Percentage of RSV, ED Visits from MMWR Week 40 to MMWR Week 18



Syndromic data collected from ESSENCE shows that from Week 40 through Week 18, the percentage of ED visits due to RSV-related ED* visits has decreased from past weeks. The percentage of ED visits for RSV for Week 18 was highest in New Castle County (**0.35%**), followed by Kent County (**0.32%**), and Sussex County (**0.03%**).

*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 flu.delaware.gov or <http://dhss.delaware.gov/dhss/dph/dpc/immunize-flu.html>.
- For more information on Respiratory syncytial virus (RSV) visit: <https://www.cdc.gov/rsv/index.html>
- 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.