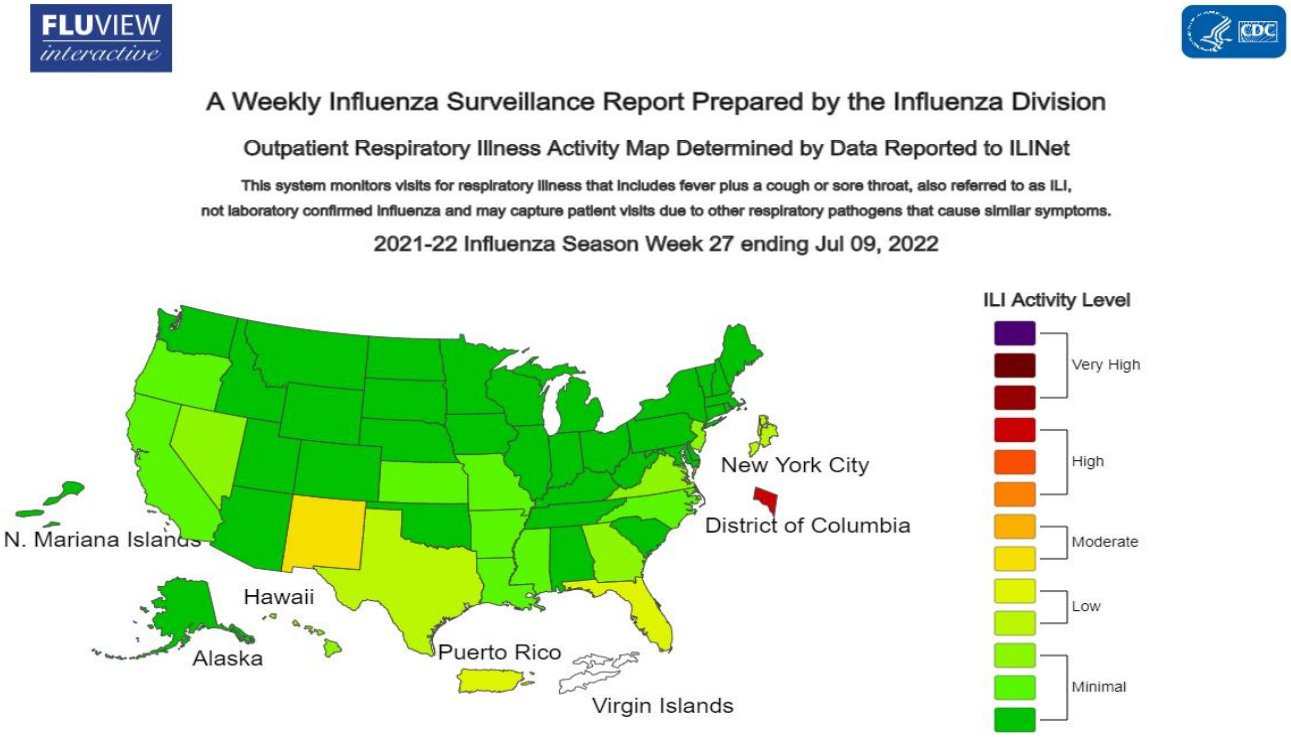
Delaware Weekly Influenza Report
MMWR Week 27 (July 03, 2022-July 09, 2022)
Delaware Division of Public Health

***Due to higher than usual springtime incidence Delaware Public Health will be releasing the flu report additional weeks and will continue to release reports as case count remains increased. ***

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 **.70%** this week. **No** new influenza-associated pediatric deaths were reported to the CDC this week. The total for the 2021-2022 season is **32** influenza associated pediatric deaths. This week, National Outpatient ILI data showed **one** jurisdiction experienced moderate influenza-like-illness activity and **one** jurisdiction experienced high or very high influenza-like-illness activity.



Summary of International Influenza Activity:

- Globally, influenza activity continued to decrease, following a peak in March 2022, but increasing activity in some areas of the temperate southern hemisphere has been reported.
- In the temperate zones of the southern hemisphere, overall influenza activity increased slightly in recent weeks.
- Detections of influenza A and respiratory syncytial virus (RSV) sharply increased in some regions of Australia.
- Influenza detections continued to increase in South Africa though the detections rate was at low levels.
- In temperate South America, influenza activity of predominately influenza A(H3N2) decreased in Argentina and Paraguay but increased in Chile and Uruguay.
- 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) most frequently detected followed by few influenza B viruses.
- In tropical Africa, influenza activity remained low with influenza A(H3N2) predominant.
- In Southern and South-East Asia, influenza virus detections were at low levels overall.
- In the countries of North America, influenza activity continued to gradually decrease compared to the previous period and influenza positivity was higher than usual for this time of year, compared to past seasonal influenza data reporting. Activity was predominantly due to influenza A viruses, with A(H3N2) predominant among the subtyped viruses. RSV activity remained low in Canada and the United States of America (USA).
- In Europe, overall influenza activity continues to decline with influenza A(H3N2) predominant among the subtyped viruses.
- In Central Asia, no influenza detections were reported.
- In Northern Africa, Tunisia reported a single influenza B detection.
- In Western Asia, increased influenza detections were reported in Qatar with influenza A(H3N2) most frequently detected.

Centers for Disease Control and Prevention (CDC) https://www.cdc.gov/flu/weekly/index.htm
WHO https://www.who.int/teams/global-influenza-programme/surveillance-and-monitoring/influenza-updates/current-influenza-update

Influenza Surveillance 2021-2022:

During MMWR Week 27, there were **10** 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 **.70%** which is below Delaware's 2021-2022 baseline rate of 2.0%. Nationally, **1.7%** 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:

*The 2020-2021 influenza season was not tracked beyond the standard MMWR week 20 end.

Past Influenza Surveillance from 2019-2020:

*The 2019-2020 influenza season was not tracked beyond the standard MMWR week 20 end.

Level of Influenza Activity in Delaware, MMWR Week 27

Sporadic
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 100º F or greater, cough and/or sore throat.*

[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.

Summary of Figures for the MMWR Week 27Report:

Table 1: Comparison the MMWR Week 27of the 2019-2020 Influenza Season, 2020-2021 Influenza Season, and current 2021-2022 Influenza Season Confirmed[1] 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 27	YTD[2]	YTD County Percentage (%)	Week 27	YTD[2]	YTD County Percentage (%)	Week 27	YTD[2]	YTD County Percentage (%)
STATEWIDE	-	7075	--	-	26	--	**10**	**2794**	--
New Castle County	-	3187	45.05%	-	6	23.08%	6	1337	47.85%
Kent County	-	1810	25.58%	-	15	57.69%	4	617	22.09%
Sussex County	-	2078	29.37%	-	5	19.23%	0	840	30.06%

[1]Influenza Cases are confirmed via PCR testing

[2]YTD 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 27of the 2019-2020 Influenza Season, 2020-2021 Influenza Season, and current 2021-2022 Influenza Season Confirmed[1] Influenza Cases Reported Statewide by Age

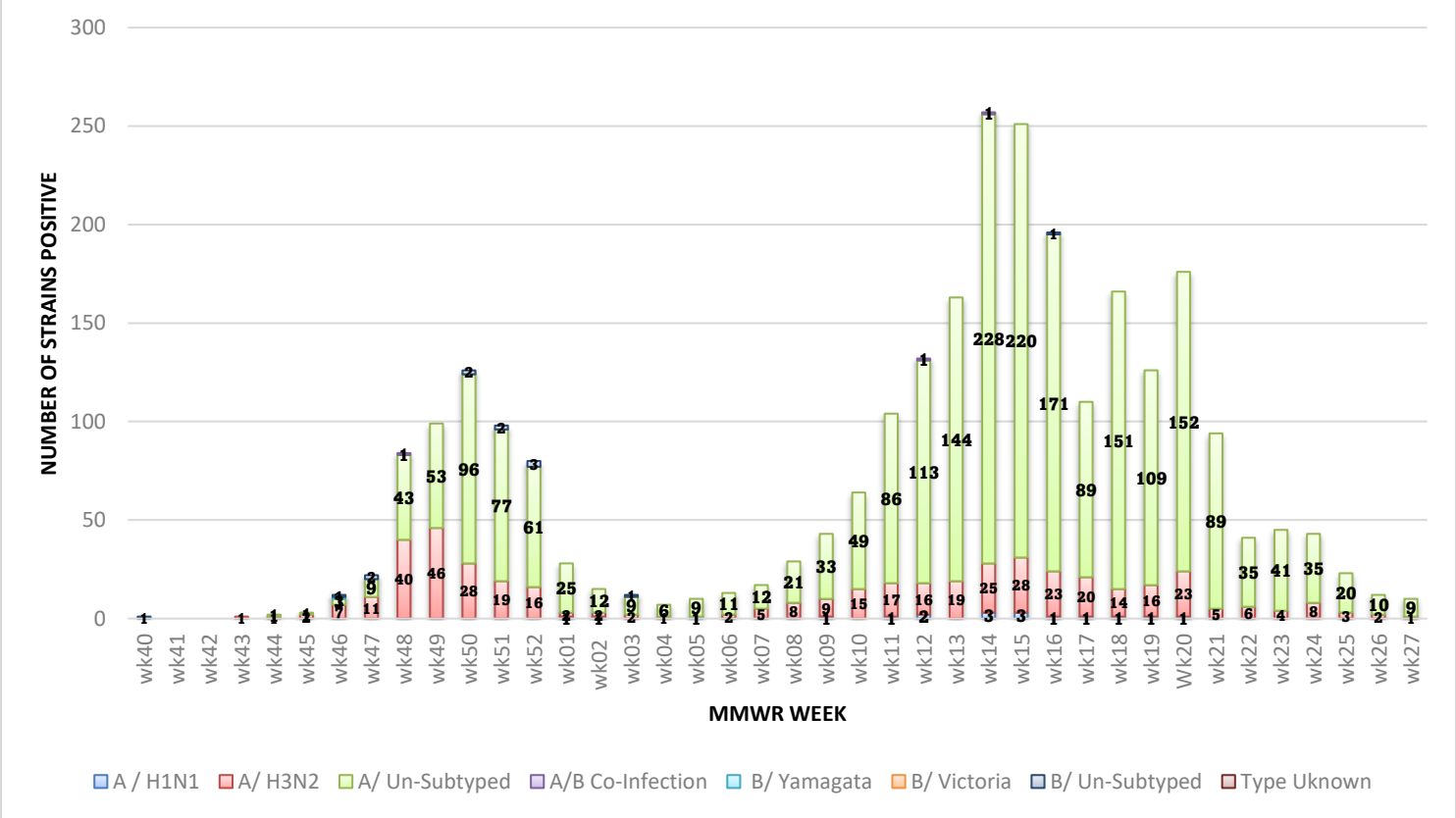
Confirmed Flu Cases by Age Group*		2019-2020 Influenza Season			2020-2021 Influenza Season			Current 2021-2022 Influenza Season		
		Week 27	Total Count	YTD[2]	Week 27	Total Count	YTD[2]	Week 27	Total Count	YTD[2]
STATEWIDE	0-4 years	-	-	7075	-	-	26	-	**10**	**2794**
	5-11 years	-			-			-		
	12-17 years	-			-			-		
	18-34 years	-			-			-		
	35-49 years	-			-			-		
	50-64 years	-			-			-		
	65+years	-			-			-		

[1]Influenza Cases are confirmed via PCR testing

[2]YTD 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 27for the 2021-2022 Delaware Influenza season, there were **10** 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 27and the 2010-2022 MMWR Week 27Influenza-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 27	YTD Totals[1]	Percentage of Confirmed Case (%)[2]	YTD Percentage of Confirmed Cases (%)[3]	Week 27	YTD Totals[1]	Percentage of Confirmed Case (%)[2]	YTD Percentage of Confirmed Cases (%)[3]	Week 27	YTD Totals[1]	Percentage of Confirmed Case (%)[2]	YTD Percentage of Confirmed Cases (%)[3]
Hospitalizations	-	362	0%	5.12%	0	1	0%	3.85%	**0**	**156**	**0%**	**5.58%**
Deaths	-	11	0%	.16%	0	1	0%	3.85%	**0**	**3**	**0%**	**.11%**

[1]YTD stands for "Year to Date" and represents the cumulative number of cases through the current MMWR Week that were hospitalized or died
[2]Percentage of cases confirmed during the single MMWR Week
[3]Percentage of cases for the cumulative count of confirmed cases through the influenza season to the current MMWR Week.

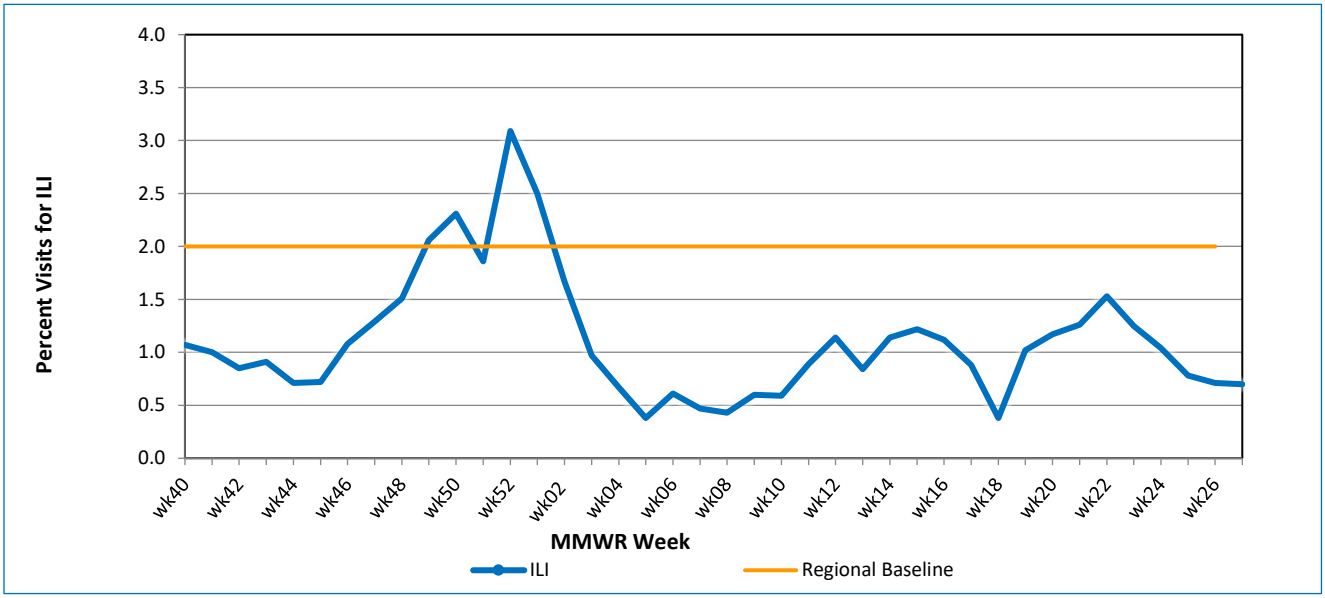
Table 4: Annual Number of Influenza Cases Reported by Flu Season, Delaware 2004-05 through 2021-22

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)	**2794**

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

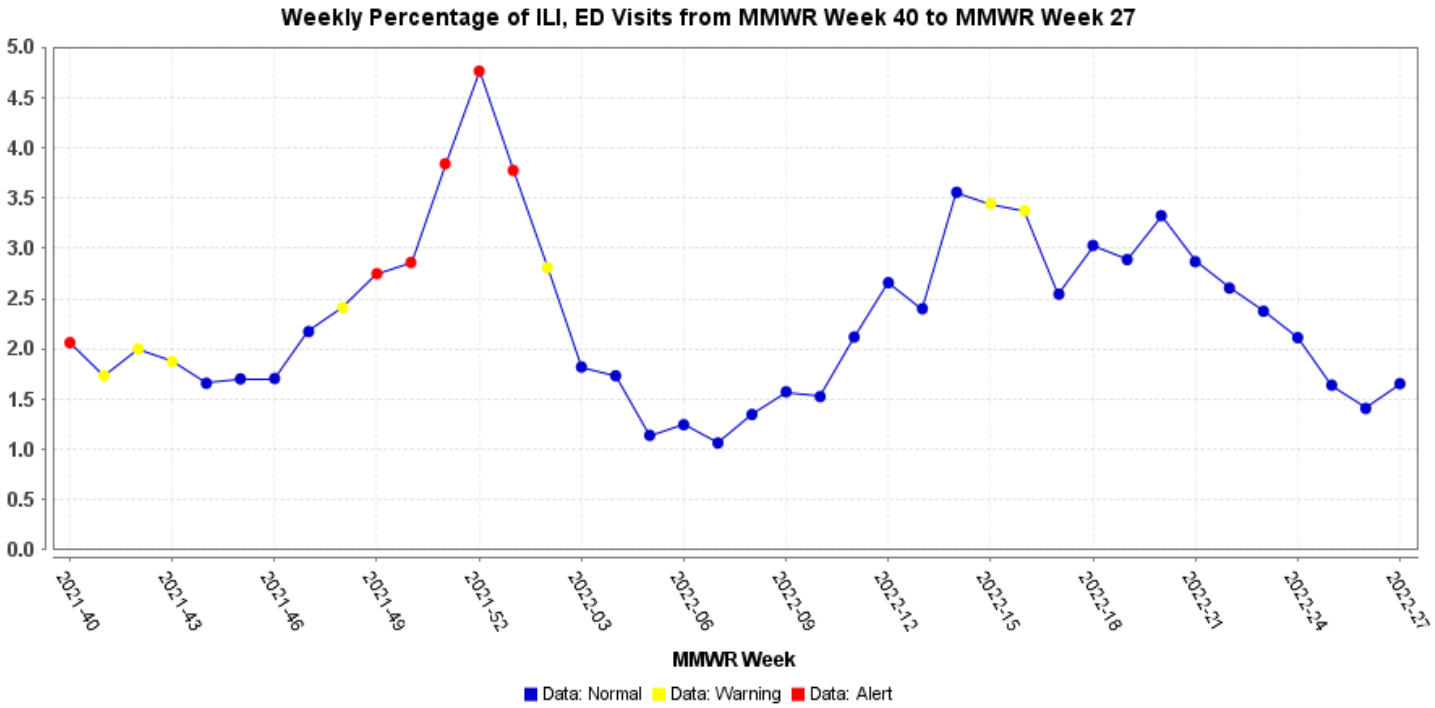
Figure 2: Percentage of Visits for Influenza-Like Illness Reported by Sentinel Providers[1] participating in the U.S. Outpatient ILI Surveillance Network (ILINet), Delaware 2021-2022



Delaware's regional baseline[1] for healthcare visits relating to ILI symptoms in the 2021-2022 Influenza Season is 2.0 % and the national baseline[2] is 2.5%. In MMWR Week 27, the amount of ILI related visits reported by sentinel providers in Delaware is at **.70%** and is below regional and national baselines.

[1]The 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.
[2]The 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 27, Delaware 2021-2022



Syndromic data collected from ESSENCE shows that from Week 40 through Week 27, 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 27 was highest in Sussex County (**2.28%**), followed by Kent County (**2.25%**), and New Castle County (**1.20%**).

Additional Respiratory Virus Surveillance

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

Confirmed RSV Cases by County[3]	Current 2021-2022 Respiratory syncytial virus (RSV) Cases		
	Week 27	YTD[2]	YTD County Percentage (%)
STATEWIDE	**0**	**31**	-
New Castle County	0	3	9.68%
Kent County	0	26	83.87%
Sussex County	0	1	3.23%

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

[2]YTD 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 [1]Respiratory 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) Confirmed[1] Influenza Cases Reported Statewide by Age

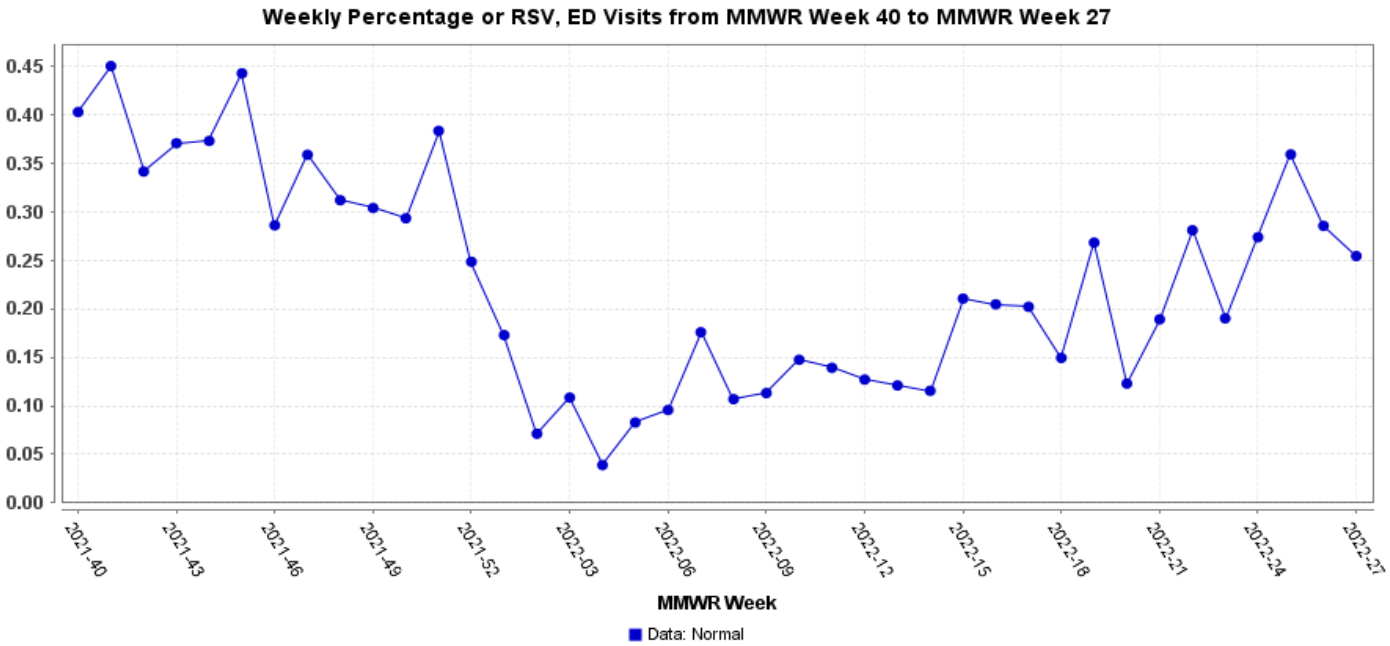
RSV Cases by Age Group*		Current 2021-2022 Respiratory syncytial virus (RSV) Cases		
		YTD by Age Group	Total Count Week 27	YTD[2]
STATEWIDE	0-4 years	21	**0**	**31**
	5-11 years	-		
	12-17 years	-		
	18-34 years	-		
	35-49 years	-		
	60-64 years	-		
	65+years	-		

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

[2]YTD 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 27, Delaware 2021-2022



Syndromic data collected from ESSENCE shows that from Week 40 through Week 27, 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 27was highest in Kent County (**.44%**), followed by New Castle County (**.42%**), and Sussex County (**.06%**).

*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.