

Iowa Influenza Surveillance Network (IISN) Influenza-like Illness (ILI) and Other Respiratory Viruses

Weekly Activity Report



For the week ending May 7, 2022 - MMWR Week 18

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All data presented in this re	eport are provisiona	i and may change	as additional re	eports are received

Quick Stats for Week 18						
Predominant Flu at SHL	Lab Survey Flu Positive %	Hospitalization Rate per 10,000	Outpatient ILI %	Cumulative Flu Deaths All Ages		
N/A	Antigen 8.0 % Molecular 1.9 %	39.29	1.48%	41		
Predominant Nonflu	Schools Reporting 10% Illness	Weekly School Illness %	Long Term Care Outbreaks	Cumulative Pediatric Flu Deaths		
Rhinovirus/Enterovirus PCR	2	2.6%	0	0		

Flu Death Note: Deaths are considered influenza-associated when influenza is listed on the death certificate. This is an underestimate of influenza-related deaths. Cumulative mortality totals are from 10/3/21 to the current week.

NOTE: School data for week 52-53 are limited due to holiday closings

Iowa Statewide Activity Summary

Overall Influenza Activity: Low

Flu tests at SHL: The State Hygienic Laboratory reported **0** influenza positive specimen(s) from specimens submitted.

Antigen Tests: There were **28** of **348** (**8.0%**) influenza antigen tests reported as positive on the lowa respiratory virus survey.

Molecular Tests: There were **100** of **5,144** (**1.9%**) influenza molecular tests reported as positive on the lowa respiratory virus survey.

Flu Hospitalizations: 6 influenza-related hospitalizations were reported from sentinel sites.

Outpatient Influenza-like-illness (ILI): The proportion of outpatient visits due to ILI was **1.48%**, which is **below** the regional baseline of 1.7%.

Flu Deaths: 0 influenza-associated deaths were reported this week.

Schools Reporting 10% Illness: 2 schools reported 10% of students absent due to illness at least once this week.

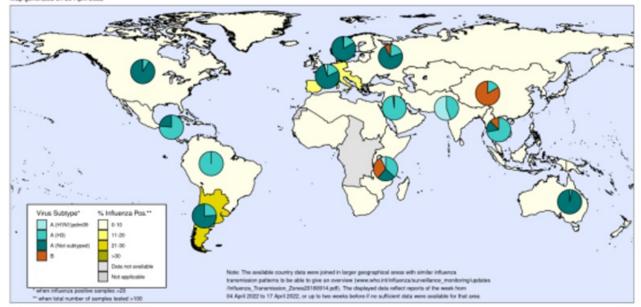
Outbreaks: 0 long-term care influenza outbreaks were reported this week.

Rhinovirus/Enterovirus PCR was the most frequently reported non-influenza and non-COVID 19 respiratory testing target reported on the lowa respiratory virus testing survey this week with **171** of **840** tests positive **(20.4%)**.

International Influenza Activity Summary - WHO







The boundaries and names shown and the designations used on this map do not imply the expression of any opinion whatsoever on the part of the World Health Organization concerning the legisl stable of any country, territory, territory or area or of its authorities, or encouning the delimitation of its frontiers or boundaries. Dutted and dashed lines on maps approximate border lines for which there one not be full appendent.

Data source: Global Influenza Surveillance and Response System (GISRS), FluNet (www.who.insflunet) Copyright WHO 2022: All rights reserved.



Data Source: Global Influenza and Response System (GISRS), FluNet (www.who.int/flunet). Visit https://www.who.int/teams/global-influenza-programme/surveillance-and-monitoring/influenza-updates/current-influenza-update for more information.

National Influenza Like Illness (ILI) Activity - CDC



This map shows influenza-like illness, which is determined by symptoms such as fever, cough, and sore throat that can be caused by a number of pathogens in addition to influenza (e.g., COVID-19). Detailed information can be found online at $\underline{www.cdc.gov/flu/weekly/}$.

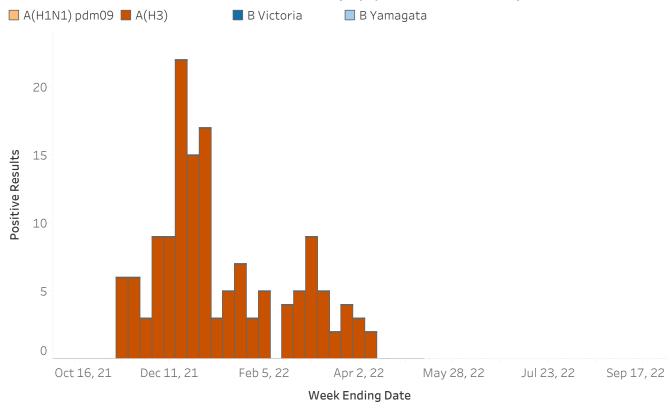
Influenza Testing at the State Hygienic Laboratory at the University of Iowa (SHL)

Cumulative Influenza Viruses Detected by SHL by Age Group (10/3/2021 - Current Week)

		Influe	enza A				Influenza B		
Age Group	A(H1N1) pdm09	A(H3)	A not subtyped	A Variant	Total	B Victoria	B Yamagata	B not subtyped	Total
0-4	0	18	0	0	18	0	0	0	0
5-17	0	29	0	0	29	0	0	0	0
18-24	0	50	1	0	51	0	0	0	0
25-49	0	13	0	0	13	0	0	0	0
50-64	0	12	0	0	12	0	0	0	0
65+	0	22	0	0	22	0	0	0	0
Total	0	144	1	0	145	0	0	0	0

Table Note: Cell counts of three or less are sometimes suppressed to protect confidentiality. Totals by age may not add up to totals by subtype/lineage due to missing age information. Only cases of lowa residents are included. Specimens listed as "not subtyped" may be pending or were not able to be subtyped due to weak positive lab results. This can be due to poor collection, timing of collection or stage of infection.

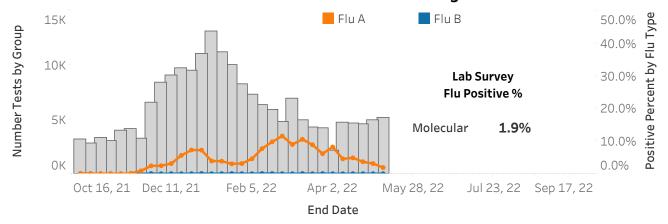
Influenza Viruses Detected by SHL by Week (10/3/21 - Current Week)



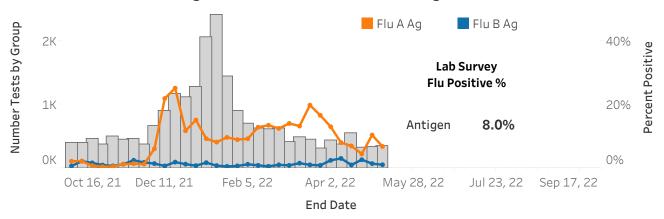
Graph Note: Only viruses that have been assigned a subtype or lineage are shown.

SHL Flu Testing Note: The State Hygienic Laboratory (SHL) is the primary laboratory in lowa characterizing specimens for influenza surveillance. SHL reports the number of tests performed and the type and subtype/lineage of positive tests to the influenza surveillance network daily. SHL also sends a portion of specimens to CDC for further characterization.

Number of Influenza Molecular Tests and Positive Percentage



Number of Influenza Antigen Tests and Positive Percentage



Iowa Respiratory Survey - Influenza

Flu Tests and Positivity by Region - Current Week

		Antig	jen		Molecular			
	Flu	Д	Flu	В	Flu	A	Flu	В
Elu Degian	Number	Positive	Number	Positive	Number	Positive	Number	Positive
Flu Region	Positives F	Percent by	Positives F	Percent by	Positives F	Percent by	Positives	Percent by
1-C	6	4.0%	2	1.3%	20	2.1%	0	0.0%
2-NE	0		0		2	1.0%	1	0.5%
3-NW	7	11.5%	1	1.6%	3	5.8%	0	0.0%
4-SW	0		0		1	2.4%	0	0.0%
5-SE	0	0.0%	0	0.0%	0		0	
6-E	11	13.1%	1	1.2%	73	1.9%	0	0.0%
Total	24	6.9%	4	1.1%	99	1.9%	1	0.0%

Table Note: Only tests with at least one positive this week are shown.

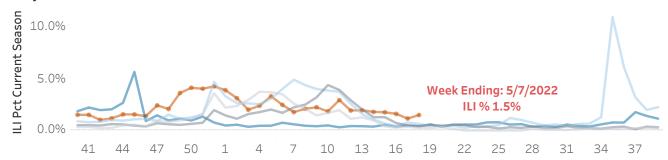
Respiratory Survey Note: IDPH and SHL run a weekly web-based survey program where laboratorians report the number of influenza and respiratory syncytial virus (RSV) rapid tests performed and the number of tests positive. Facilities reported the total number of tests and positive results, not individual-level information.

Outpatient Health Care Provider Surveillance Program (ILINet)

Percent Of Outpatient Visits Attributed to Influenza-like Illness (ILI) as Reported by ILINet Sites



ILI by Season



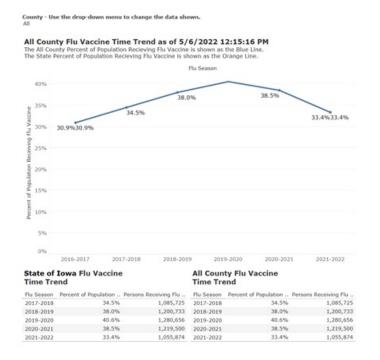
ILI Recent Weeks

MMWR Week	End Date	Age 0-4	Age 5-24	Age 25-49	Age 50-64	Age 65 and older	Total ILI	ILI Pct
16	4/23/2022	9	33	18	2	9	71	1.59%
17	4/30/2022	10	26	9	3	8	56	1.14%
18	5/7/2022	9	24	12	5	7	57	1.48%

Outpatient ILI Note: Outpatient health care providers who participate in the ILINet (a national influenza surveillance program) report the number of patients seen with influenza-like illness and the total number of patient visits each week. Iowa health care providers interested in joining this surveillance program should contact Andy Weigel at 515-322-1937 or andy.weigel@idph.iowa.gov for more information. The ILI Definition has changed for 20121-22 so that persons with ILI symptoms (cough, sore throat, fever) will be counted even if positive for other resperitory illness (e.g., COVID-19) which makes comparison across seasons difficult.

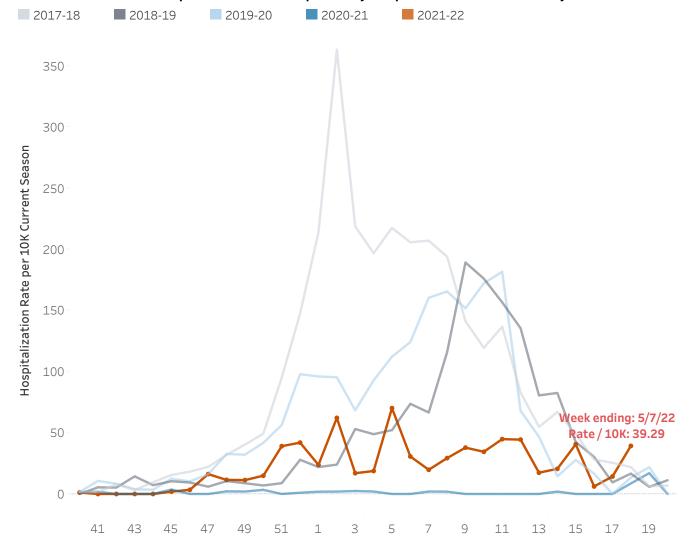
Iowa Department of Public Health Data Tracking Portal - Flu Vaccine

Visit the Iowa Public Health Tracking Portal Influenza Vaccine Data page for details on Iowa Flu Vaccine Coverage: https://tracking.idph.iowa.gov/Health/Immunization/Influenza-Vaccine/Influenza-Vaccine-Data



Influenza-associated Hospitalizations

Influenza-associated Hospitalization Rate Reported by Hospital Surveillance Sites - by Season



Number of Influenza-Associated Hospitalizations by Age Group

Age Group	Current Week Flu Hospitalizations	Cumulative Flu Hospitalizations
0-4	1	45
5-24	0	59
25-49	1	41
50-64	0	47
65+	4	119
Total	6	311

Hospital Surveillance Note: Sentinel hospitals that participate in IISN voluntarily track and report the number of influenza-associated hospitalizations and the total number of inpatients each week. Iowa hospitals interested in joining this surveillance program should contact Andy Weigel at 515-322-1937 or andy.weigel@idph.iowa.gov for more information.

Long Term Care Facility Influenza Outbreaks

Influenza Outbreaks by Week and Region



Long Term Care Facility Outbreaks Note: An outbreak in a care facility is defined as at least two residents with suspected influenza in the same area of a facility having an illness onset within 72 hours of each other. At least one of the resident with suspected influenza must also have a lab-confirmed influenza positive.

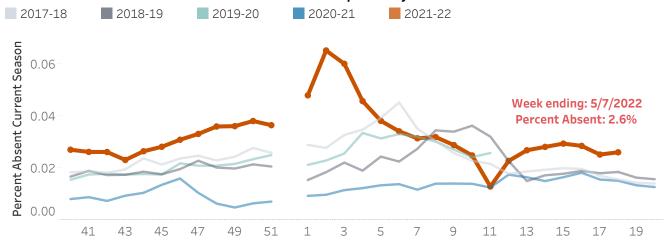
Long Term Care Influenza Outbreaks Investigated by Region

Flu Region Text	Current Week	Cumulative
1-C	0	1
2-NE	0	2
3-NW	0	1
4-SW	0	0
5-SE	0	2
6-E	0	3
Total	0	9

See the map in the school section for the counties in each flu region.

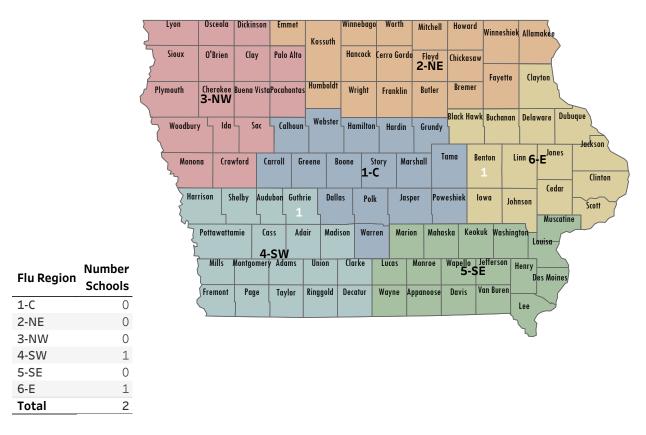
School Illness Surveillance Program

Percent of Enrolled Students Absent Due to Illness Reported by Sentinel Schools



NOTE: School data for week 52-53 are limited due to holiday closings

Counties with 10% School Illness 5/1/2022 - 5/7/2022



School Illness Note: IDPH monitors illnesses in schools from two different types of reporting: 10 percent school absence reports and weekly sentinel illness reporting. Iowa schools (K-12) track and report when the number of students absent with any illness reaches or exceeds 10 percent of total student enrollment. Iowa sentinel schools that participate in IISN voluntarily track and report absence due to all illness and the total enrollment each week.

Iowa Respiratory Virus Survey - Non-influenza

Number of Positive Non-influenza Respiratory Viruses by Pathogen and Week

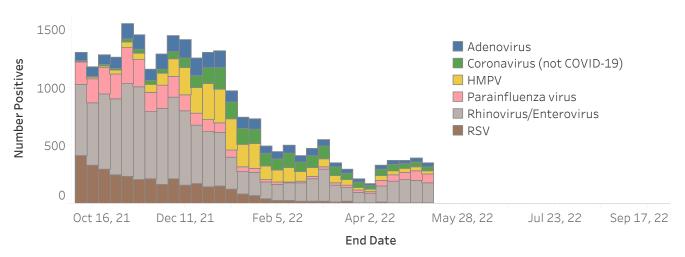


Table Note: Pathogens are grouped together if even if reported to IDPH as separate types or subtypes (e.g., Parainfluenza Viruses 1, 2, 3, and 4). Only pathogens with at least one positive result this season are shown.

Number of Non-infuenza Molecular Positive Results for Current Week and Cumulative

Pathogen (group)	Current Week Positives	Cumulative Positives
Rhinovirus/Enterovirus	171	11,126
Parainfluenza virus	75	2,981
Coronavirus (not COVID-19)	38	2,222
Adenovirus	31	2,463
HMPV	27	3,112
RSV	8	3,470

Table Note: Only pathogens with at least one positive result are shown.

Respiratory Survey note: IDPH and SHL run a weekly web-based survey program where laboratorians report the number of non-influenza respiratory virus tests performed and the number of positive results. Facilities reported the total number of tests and positive results not individual-level information.