

# **Iowa Respiratory Virus Surveillance Report**

MMWR Week 38 September 15, 2024 - September 21, 2024

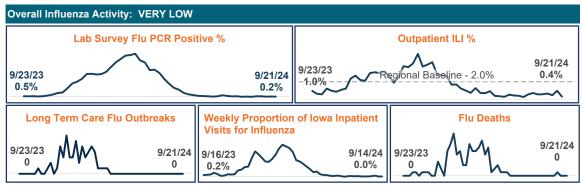
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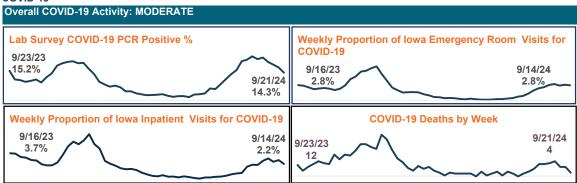
### Quick Stats for Week 38 (9/15/2024 - 9/21/2024)

#### Influenza



NOTE: Line graphs display current week, or most recent available week, and previous 52 weeks

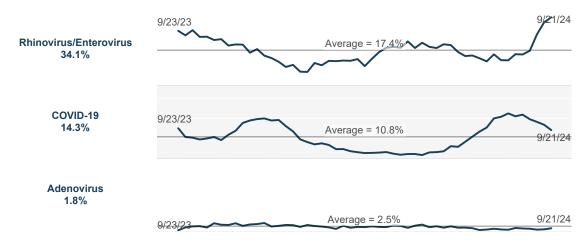
#### COVID-19



NOTE: Line graphs display current week, or most recent available week, and previous 52 weeks

#### **Other Respiratory Viruses**

Top 3 Pathogen Groups by Positive Percent on Respiratory Virus Survey - MOLECULAR ONLY Current Week and Previous 52 Weeks Trends



All data presented in this report are provisional and may change as additional reports are received .

See the **Survillance Methods** page for a detailed description of each component of the lowa respiratory virus surveillance system including methodology and definitions.

Visit <a href="https://hhs.iowa.gov/public-health/center-acute-disease-epidemiology/flu-report">https://hhs.iowa.gov/public-health/center-acute-disease-epidemiology/flu-report</a> to subscribe to weekly email reports



## **International Influenza Activity Summary**

### World Health Organization Influenza Update

Published 25 September 2024 | For reporting Week 37, ending 15 September 2024

#### Influenza

In the Northern hemisphere, influenza activity in temperate countries remained at interepidemic levels. Activity was elevated in Western Africa (due to A(H3N2) and B viruses), Middle Africa (due to A(H3N2) viruses), Western Asia (due to A(H1N1)pdm09 and B viruses), Southern Asia (due to A(H1N1)pdm09 viruses), South East Asia (due to A(H1N1)pdm09 viruses) and Central America and the Caribbean (due to A(H3N2) viruses). Activity continued to increase in a few countries in Central America, Western and Middle Africa, and Southern Asia.

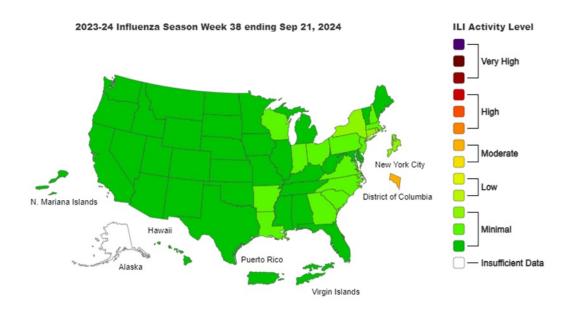
In the Southern hemisphere, influenza activity remained elevated in some countries in South America (due to B viruses), Eastern Africa (due to A and B viruses), and Oceania (due to A viruses). Activity declined or was similar compared with the prior report across the Southern hemisphere.

#### SARS-CoV-2

SARS-CoV-2 activity remained elevated in many countries in Europe and a few countries in Central America and the Caribbean, Western Asia, and Eastern Asia. Activity decreased or was similar compared with the prior report in Europe and increased in a few reporting countries in Central America and the Caribbean and Western Africa.

https://www.who.int/teams/global-influenza-programme/surveillance-and-monitoring/influenza-updates/current-influenza-update

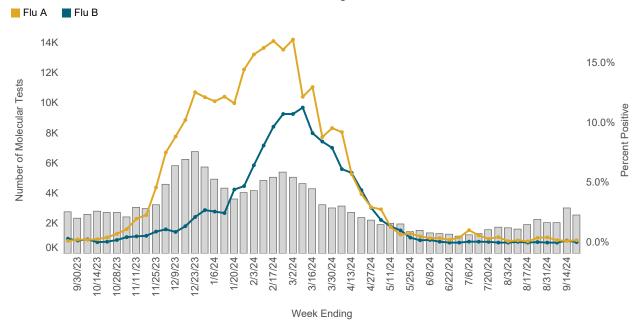
### NATIONAL INFLUENZA LIKE ILLNESS (ILI) - CDC



Weekly U.S. influenza surveillance report. Centers for Disease Control and Prevention. https://www.cdc.gov/flu/weekly/index.htm

## **Iowa Respiratory Survey - Influenza**

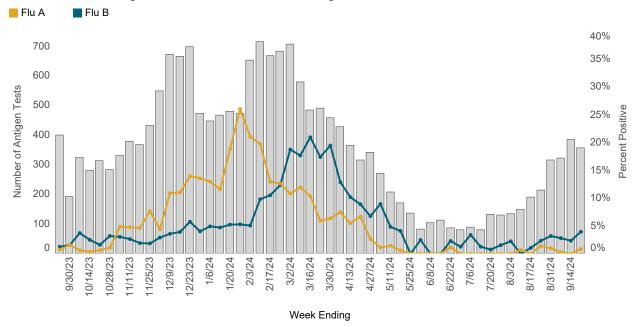
Number of Influenza Molecular Tests and Positive A and B Percentage - Current and Previous 52 Weeks



Flu Tests and Positivity by Method - Current Week

Test Method	Number Positives	Number Tests	Percent Positive		
Molecular	6	2,552	0.2%		
Antigen	17	355	4.8%		
Total	23	2,907	0.8%		

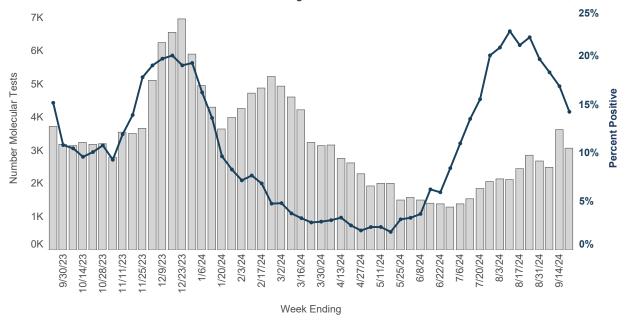
#### Number of Influenza Antigen Tests and Positive A and B Percentage - Current and Previous 52 Weeks





## **Iowa Respiratory Survey - COVID-19**

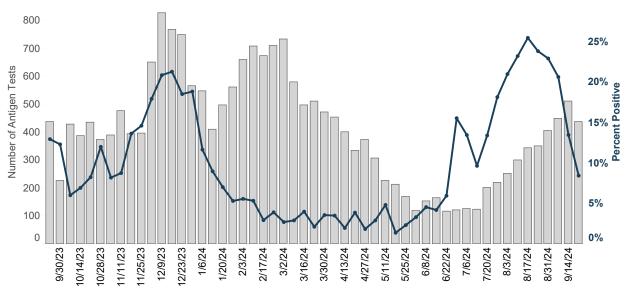




**COVID-19 Tests and Positivity by Method - Current Week** 

Test Method	Percent Positive
Molecular	14.3%
Antigen	8.5%
Total	13.5%

### Number of COVID-19 Antigen Tests and Positive Percentage - Current and Previous 52 Weeks



Week Ending



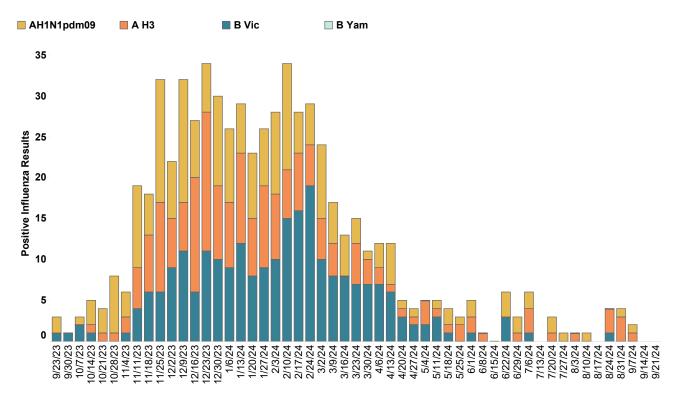
## Influenza Testing at the State Hygienic Laboratory (SHL)

Cumulative Influenza Viruses Detected by SHL (10/1/2023 - Current Week)

	Influen A H3	za A AH1N1pdm09	Total	Influer B Vic	nza B B Yam	Total
Current Week Positives	0	0	0	0	0	0
Cumulative Positives	187	208	395	235	0	235

Table Note: Only lowa residents are included.

### Influenza Viruses Detected by SHL by Week (Current Week and Previous 52 Weeks)



**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.

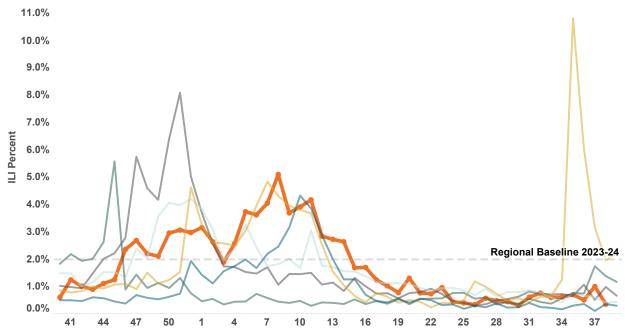


## **Outpatient Health Care Provider Surveillance Program (ILINET)**

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



### **ILI Percent by Season and Week**



### ILI by Age Group Past 4 Weeks

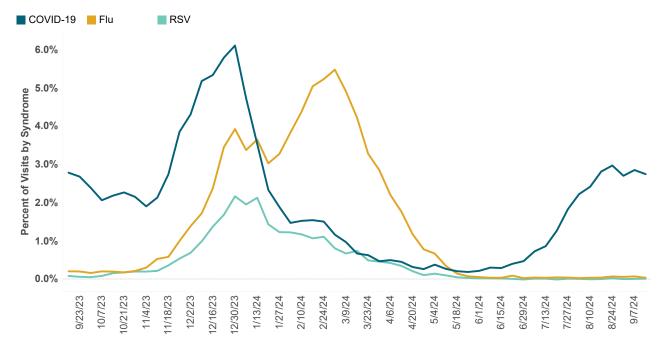
MMWR Week	End Date	Age 0-4	Age 5-24	Age 25-49	Age 50-64	Age 65 and older	Total ILI	ILI Pct
35	8/31/2024	7	9	7	6	5	34	0.71%
36	9/7/2024	2	10	4	2	3	21	0.52%
37	9/14/2024	0	10	5	3	4	22	1.01%
38	9/21/2024	0	6	1	0	0	7	0.36%

**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. The ILI Definition changed in 2021-22 so that persons with ILI symptoms (cough, sore throat, fever) will be counted even if positive for other respiratory illness (e.g., COVID-19) which makes comparison across seasons difficult.

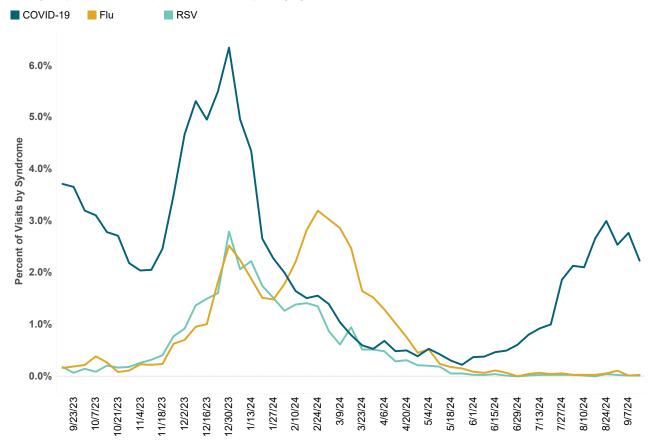


## **Iowa Syndromic Surveillance Program**

Weekly Proportion of Iowa Emergency Room Visits for Respiratory Syndromes - Current and Previous 52 Weeks



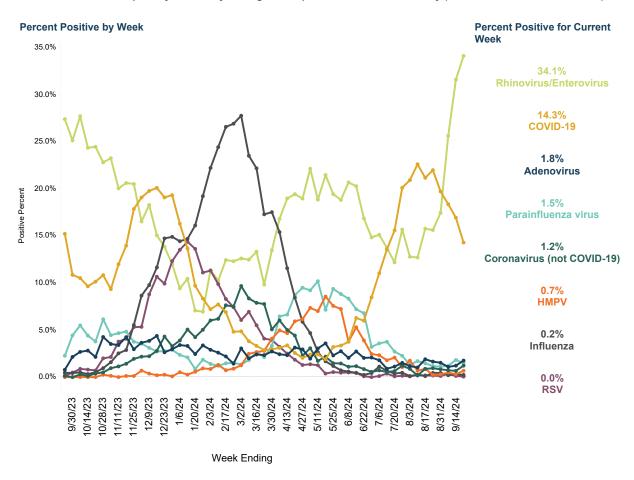
Weekly Proportion of Iowa Inpatient Visits for Respiratory Syndromes - Current and Previous 52 Weeks



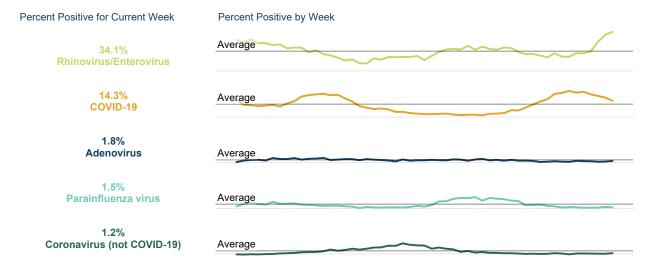


## **Iowa Respiratory Virus Survey**

Percent of Positive Respiratory Viruses by Pathogen Group and Week - Molecular Only (Current and Previous 52 Weeks)



Top 5 Pathogen Groups by Positive Percent on Respiratory Virus Survey - Molecular Only (Current and Previous 52 Weeks)





### **Report Methods, Definitions and Data Sources**

#### NATIONAL INFLUENZA LIKE ILLNESS (ILI) - CDC

The CDC national ILI 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 <a href="https://www.cdc.gov/flu/weekly/">www.cdc.gov/flu/weekly/</a>.

#### **IOWA RESPIRATORY SURVEY**

lowa HHS and SHL run a weekly web-based survey program where laboratorians report the number of influenza, COVID-19 and other respiratory virus tests performed, the testing method (molecular, antigen, or virus isolation) and the number of positive tests.

#### INFLUENZA TESTING AT THE STATE HYGIENIC LAB

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.

### **OUTPATIENT HEALTH CARE PROVIDER SURVEILLANCE PROGRAM (ILINET)**

Outpatient health care providers who participate in 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.

#### INFLUENZA AND COVID-19 DEATHS

The lowa HHS Center for Acute Disease Epidemiology works with the Bureau of Health Statistics to monitor mortality among Iowa residents related to Influenza and COVID-19. Deaths are considered to be influenza-associated when influenza is listed on the death certificate. COVID-associated deaths are determined by diagnosis codes listed on the death certificate.

Both Influenza and COVID-19 death totals are cumulative from the start of the fllu season (October 1, 2023 through the end or the current reporting week).

#### LONG TERM CARE FACILITY INFLUENZA OUTBREAKS

A confirmed influenza outbreak in a care facility is defined as at least two residents with lab-confirmed influenza in the same area of a facility having an illness onset within 72 hours of each other.

#### IOWA SYNDROMIC SURVEILLANCE

lowa HHS, CyncHealth lowa and CDC started implementing syndromic surveillance for the state of lowa in May 2021. lowa continues to enroll hospitals to participate and currently has over 90 hospitals participating. Syndromic surveillance provides public health with a near real time system for detecting, understanding, and monitoring health events based on symptoms and diagnoses of patients visiting participating hospitals.