

Michigan Flu Focus

Weekly Influenza Surveillance Report

April 1, 2022

Vol. 19; No. 25

Week Ending March 26, 2022 | WEEK 12

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Data provided in this report are preliminary and will be updated as additional data is received

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 12 ending Mar 26, 2022

Updates of Interest

Detections of HPAI A(H5) viruses in birds

continue to occur in a growing number of states including Michigan. CDC considers the risk to the public to be low.

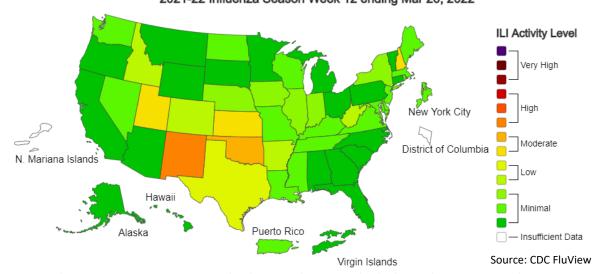
MDHHS has developed a set of guidelines and tools for health monitoring of potentially exposed people. Please visit www.michigan.gov/cdinfo, under "Communicable Diseases (A-Z)," Influenza topic.

Seasonal Flu Vaccination Coverage

Michigan's goal is to vaccinate **4 million** residents during the 2021-2022 flu season.

As of March 26, 2022 there have been 3,458,082 doses administered (82.0% towards goal) for the 2021-2022 flu season.

Please visit the Flu Vaccination Dashboard at www.michigan.gov/flu for more info.



Note: This map represents U.S. ILI activity levels reported to ILINet. The display used in past seasons showing Geographic spread of influenza has been suspended for the 2021-2022 influenza season

Influenza-associated Pediatric Mortality

Nationally, fourteen (14) influenza-associated pediatric deaths have been reported thus far for the 2021-2022 flu season.

No pediatric deaths have been confirmed by MDHHS for the 2021-2022 flu season to date.

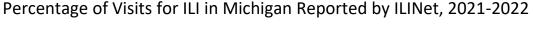
U.S. Outpatient Influenza-like Illness Surveillance Network (ILINet)

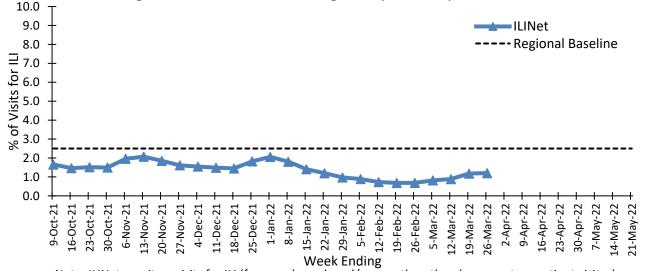
Michigan participates in ILINet, a collaborative effort between the CDC, state and local health departments, and volunteer sentinel clinicians as part of Michigan's influenza surveillance. ILINet provides data on the total number of outpatient visits to health care providers seen for any reason and the number of those patients with influenza-like illness (ILI[‡]). Participating Michigan emergency department and urgent care facilities send syndromic data voluntarily in near real-time to the Electronic Surveillance System for the Early Notification of Community Based Epidemics (ESSENCE). Discharge diagnosis and chief complaint data elements are used to determine whether visits meet the ILI case definition. One-hundred and forty-one (141) Michigan facilities contributing data to ESSENCE were validated and enrolled in ILINet for the 2021-2022 flu season.

[‡]ILI is defined as fever (>100°F) and a cough and/or a sore throat (new definition for the 2021-2022 season).

Number of Reports and ILI % by Region during this time period:

Region	С	N	SE	SW
No. of Reporters (152)	52	18	53	29
ILI %	1.3	1.3	1.2	0.9





Note: ILINet monitors visits for ILI (fever and cough and/or sore throat) and may capture patient visits due to other respiratory pathogens that cause similar symptoms.

Michigan Influenza Surveillance Regions

Michigan ILI Activity: 1.2%

(Last week: <u>1.2</u>%)
Regional Baseline*: 2.5%
A total of 886 patient visits due to ILI were reported out of 73,858 outpatient visits for Week 12.

*Regional baseline is determined by calculating the mean percentage of patient visits due to ILI during non-influenza weeks for the previous three seasons and adding two standard deviations.

National Surveillance

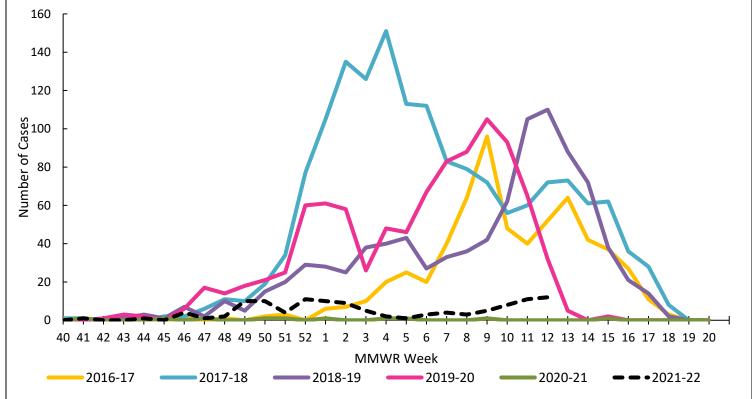
In the United States, <u>1.8</u>% of outpatient visits were due to ILI (Last week: <u>1.8</u>%)
This is **below** the national baseline of 2.5%

Influenza Hospitalization Surveillance Project (IHSP)

The CDC's Influenza Hospitalization Surveillance Network (FluSurv-NET) provides population-based rates of laboratory-confirmed influenza-associated hospitalizations from October 1st through April 30th each year. Michigan participates as an IHSP state in FluSurv-NET for Clinton, Eaton, Genesee, Ingham, and Washtenaw Counties.

There were $\underline{12}$ (2 pediatric, 10 adult) influenza-associated hospitalizations reported to MDHHS for the IHSP during this time period. Since October 1^{st} , $\underline{117}$ (29 pediatric, 88 adult) influenza-associated hospitalizations were reported in the catchment area for the 2021-2022 season.





Washtenaw County was added in the 2017-2018 season

Join the Influenza Sentinel Hospital Network (ISHN)!

What is it? ISHN is a group of hospitals in Michigan that voluntarily report weekly aggregate counts of influenza positive inpatients to assist MDHHS with statewide influenza surveillance.

How it works: As a participating hospital in the ISHN, you would complete a brief Survey Monkey every week containing:

- Number of hospitalizations with a positive influenza test by age group during that time period
- The total number of hospitalizations due to any condition during that time period (if available)

The data you provide will assist public health in recognizing changes in the age or geographic distribution of influenza in this population.

If your facility is interested in participating or would like more information, please contact
Sue Kim (KimS2@michigan.gov)

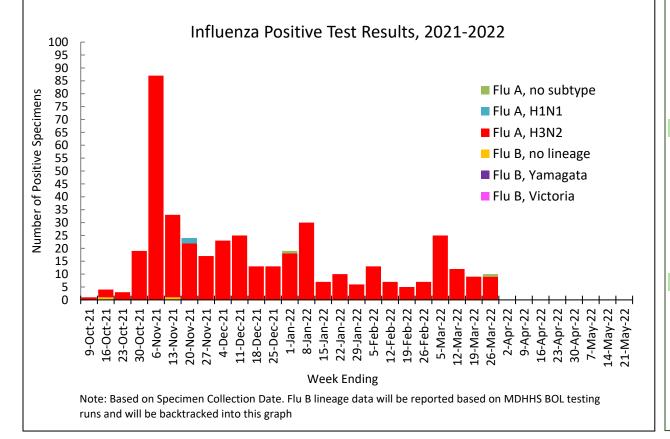
Laboratory (Virologic) Surveillance

MDHHS BOL Virology Laboratory Data

There were <u>10</u> (8C, 0N, 2SE, 0SW) positive influenza results reported by the MDHHS Bureau of Laboratories (BOL) during this time period. Positive flu results for the 2021-2022 season are summarized below.

of Positive Influenza Virus Results by Region

	С	N	SE	SW	Total
H1N1	0	0	2	0	2
H3N2	117	21	200	78	416
Infl B	0	0	2	0	2
Total	117	21	204	78	420



Michigan Sentinel Clinical Lab Network Respiratory Virus Data

Eight (8) sentinel clinical labs (1SE, 1SW, 5C, 1N) reported for the week ending 03/26/2022

for the week ending 03/26/2022				
	SE Region			
Influenza A:	moderate			
Influenza B:	sporadic			
Parainfluenza:	low			
RSV:	slightly elevated			
Adenovirus:	low			
hMPV:	elevated			
	Central Region			
Influenza A:	variable - high			
Influenza B:	sporadic – slightly elevated			
Parainfluenza:	low			
RSV:	sporadic – low			
Adenovirus:	low			
hMPV:	elevated			
SW Region				
Influenza A:	moderate			
Influenza B:	no activity			
Parainfluenza:	no activity			
RSV:	sporadic – low			
Adenovirus:	sporadic – low			
hMPV:	low			
North Region				
Influenza A:	low			
Influenza B:	sporadic			
Parainfluenza:	sporadic			
RSV:	no activity			
Adenovirus:	no activity			
hMPV:	low			

Congregate Setting Outbreaks

There were 4 (2C, 1N, 0SE, 1SW) influenza outbreaks reported to MDHHS during this time period. Influenza outbreaks for the 2021-2022 season are summarized below.

of Influenza Outbreaks by MI Region

Facility Type	С	N	SE	SW	Total
Schools: K-12 & College	3	2	1	2	8
Long-term Care / Assisted Living Facility	9	1	0	2	12
Healthcare Facility	0	0	0	0	0
Daycare	0	0	0	0	0
Homeless Shelter	0	0	0	0	0
Correctional Facility	0	0	0	0	0
Other	0	0	0	0	0
Total	12	3	1	4	20

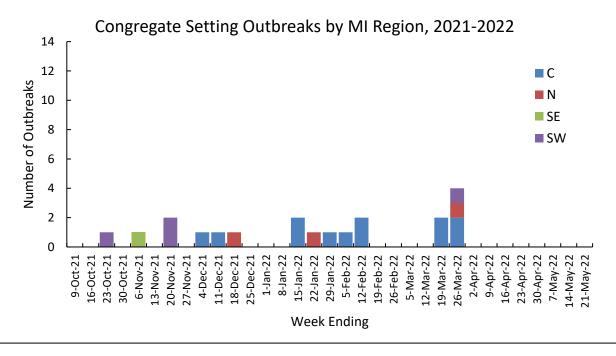
Did you know?

Congregate setting outbreaks of viral respiratory illness are required to be reported to your local health department? See:

- Influenza Guidance for Healthcare Providers
- Guideline for influenza and Respiratory Virus Outbreaks in Long-Term Care Facilities

Note: Data are reported on laboratory confirmed influenza outbreaks. For information on outbreaks exclusively associated with COVID-19, please visit the MDHHS Covid-19 webpage located under Additional Resources on the last page. Non-flu, non-COVID outbreaks and ILI outbreaks without confirmatory flu testing are not reported in the table and graph.

Mixed outbreaks with confirmed flu (including COVID) will be included in the table and graph. There were <u>0</u> mixed outbreaks reported during Week 12.



CDC Reports Flu Activity Increasing Throughout Country; Avian Flu Also Increasing Among Domestic and Wild Bird Flocks, Risk to Humans Remains Low

As of March 19, 2022, Centers for Disease Control and Prevention (CDC) shows influenza activity is increasing in most of the country, particularly in the central and south-central regions. The most common influenza virus detected is A(H3N2). CDC recommends annual influenza vaccination for everyone aged 6 months and older and urges providers to continue to offer vaccination while influenza remains present in local communities. Flu vaccines are widely available. Individuals can find a local vaccination location at: https://www.vaccines.gov/.

In addition to the country-wide increases in influenza A viruses, health officials are also tracking the spread of avian influenza. Avian influenza can be highly contagious and pathogenic among domestic and wild bird flocks and has the potential to spread to humans, with similar symptoms to other influenza viruses.

Highly Pathogenic Avian Influenza (HPAI) has been detected throughout the country and is now present in Michigan in backyard (non-commercial) flocks as well as among several separate wild flocks (Canada geese, snowy owls, and swans).

The risk of spread to humans remains low, and only 1 human case has been recently detected (in the U.K.; the U.S. remains free of documented human cases). Despite the low risk to humans and strong measures taken to contain the disease, CDC recommends vigilance, especially for those who are around bird flocks or when HPAI is rapidly spreading. Steps the public can take to prevent contracting avian influenza include proper hand washing, avoiding direct contact with wild birds, and disinfecting hands and clothing after contact with birds (domestic or wild). It is safe to eat properly handled and cooked poultry products. Information on avian influenza testing, reporting, infection control, and treatment can be found here.

Influenza News Blast

- H5N1 Bird Flu Virus in U.S. Wild Birds and Poultry Poses a Low Risk to Public
- Highly Contagious Bird Flu Reaches
 Michigan Wild Flocks
- CDC Provides Interim Estimates of Seasonal Influenza Vaccine Effectiveness
- CDC Study Shows Flu Vaccination Prevents Severe Flu Illness in U.S. Children
- World Health Organization (WHO)
 Influenza Update
- Meta-analysis Shows Low Incidence of Influenza and SARS-CoV-2 Coinfection
- Study Identifies Racial and Ethnic
 Disparities in Severe Flu Outcomes
- Mandatory Influenza Vaccination for Healthcare Personnel Honor Roll

Additional Resources

- MDHHS Influenza Webpage
- MDHHS Bureau of Laboratories (BOL)
 Webpage and Test Request Forms
- Influenza Surveillance in Michigan
- Immunization Action Coalition: Ask the Experts - Flu
- CDC Healthcare Professionals Flu Toolkit
- CDC FluView Weekly Report
- <u>USDA Animal and Plant Health Inspection</u>
 <u>Service</u>

Influenza Burden Estimates

The Centers for Disease Control and Prevention (CDC) have released <u>preliminary in-</u> <u>season burden estimates</u> for the 2021-2022 flu season.

CDC estimates that, from October 1, 2021 through March 26, 2022 there have been:

- 3.5 million 5.8 million flu illnesses
- 1.6 million 2.7 million flu medical visits
- **34,000 69,000** flu hospitalizations
- 2,000 5,800 flu deaths

Note: CDC was not able to calculate the cumulative burden of flu for the 2020-2021 flu season, due to historically low numbers of flu.

More information on the 2020-2021 flu season burden estimates is available here.

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