



Michigan Flu Focus

Weekly Influenza Surveillance Report

January 30, 2026

Vol. 23; No. 17

Week Ending January 24, 2026 | WEEK 3

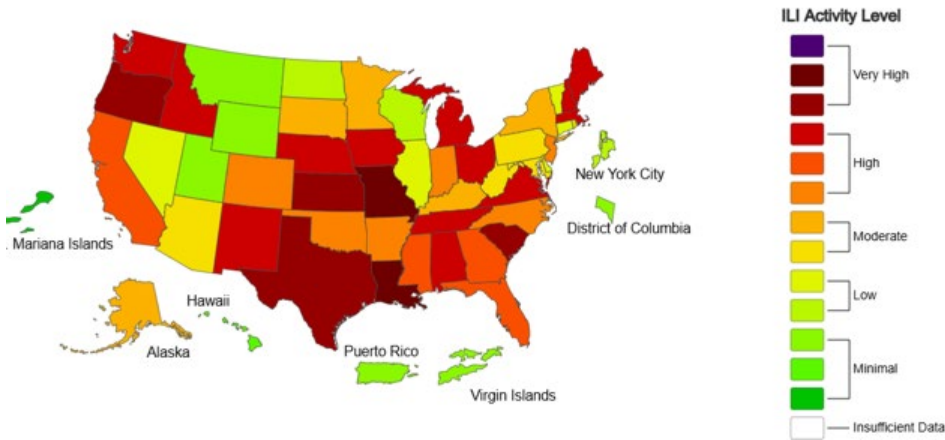
Editor: Sue Kim, MPH

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

Outpatient Respiratory Illness Activity Map Determined by Data Reported to ILINet

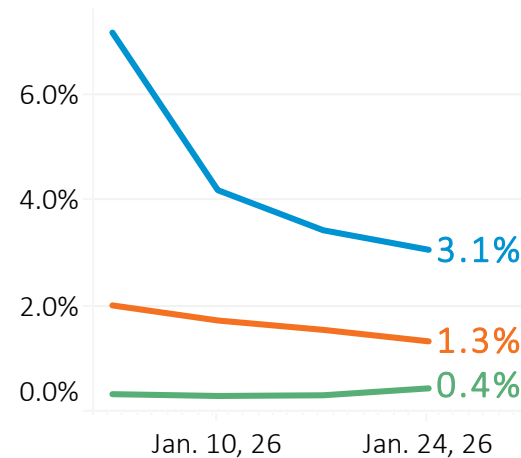
This system monitors visits for respiratory illness that includes fever plus a cough or sore throat, also referred to as ILI, not laboratory confirmed influenza and may capture patient visits due to other respiratory pathogens that cause similar symptoms.

2025-26 Influenza Season Week 3 ending Jan 24, 2026



Source: [CDC FluView](#) | [MDHHS Respiratory Disease Reports](#)

Percent of Emergency Department Visits Associated with COVID-19, Influenza, and RSV



For the 2025-26 respiratory season:

25.8% of Michiganders have received an Influenza vaccine	9.0% of Michiganders have received a COVID-19 vaccine
35.8% of Michiganders 0-7 months old have received an RSV antibody	43.8% of Michiganders +75 years old have received an RSV vaccine

Updates of Interest

Nationally, seasonal influenza activity remains elevated and increased during Week 3 after three weeks of decreasing trends. CDC [estimates](#) that there have been at least 20,000,000 illnesses, 270,000 hospitalizations, and 11,000 deaths from flu so far this season. Please see CDC's latest [FluView report](#) for more information.

Influenza-associated Pediatric Mortality

Nationally, fifty-two (52) influenza-associated pediatric deaths have been reported for the 2025-2026 flu season. No influenza-associated pediatric deaths in Michigan have been confirmed by MDHHS for the 2025-2026 season.

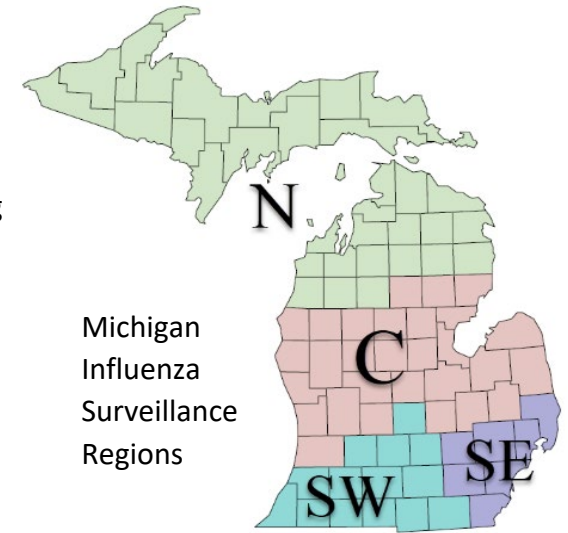
U.S. Outpatient Influenza-like Illness Surveillance Network (ILINet)

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[†]). ILINet data is collected from a range of healthcare settings, including family medicine, internal medicine, and student health clinics. It also incorporates syndromic surveillance data submitted by urgent care and emergency departments through the Electronic Surveillance System for the Early Notification of Community-based Epidemics (ESSENCE).

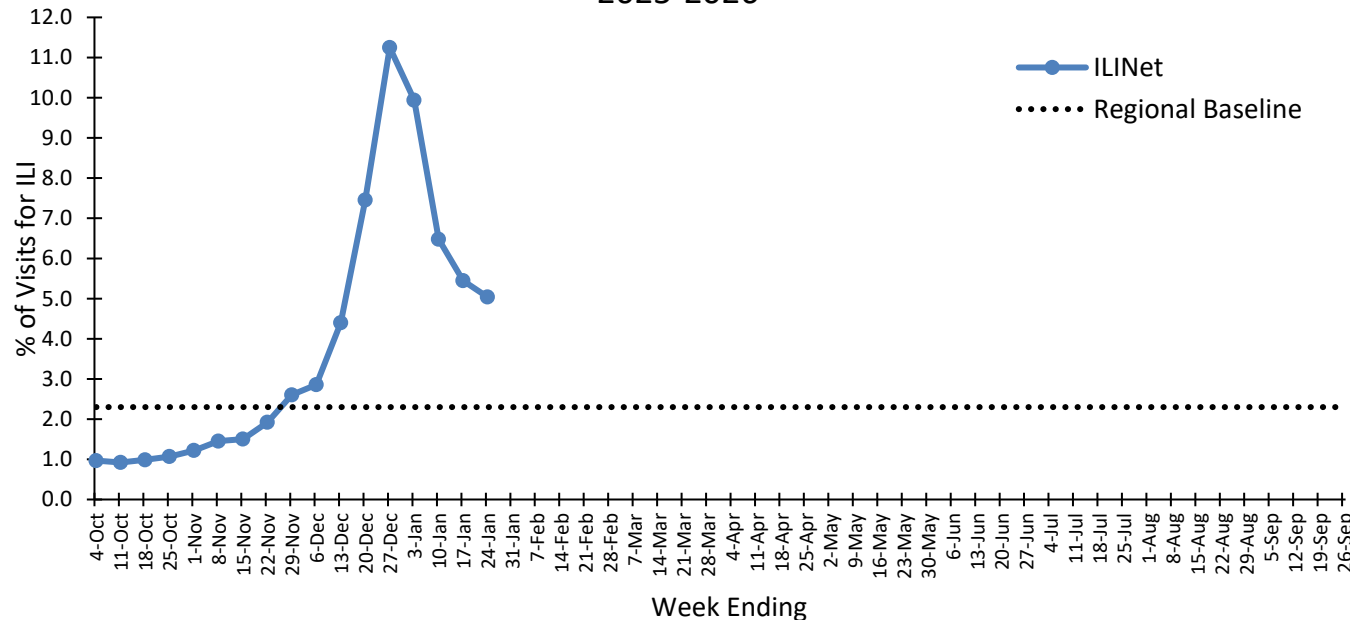
[†]ILI is defined as fever (>100°F) and a cough and/or a sore throat.

of Reports and ILI % by Region During this Time Period

	C	N	SE	SW
# of Reporters (258)	78	32	114	34
ILI %	5.2	6.6	4.7	5.2



Percentage of Visits for ILI in Michigan Reported by ILINet, 2025-2026



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 ILI Activity: 5.0% ↓

(Last week: 5.4%)

Regional Baseline: 2.3%

A total of **4,929** patient visits due to ILI were reported out of **97,800** outpatient visits.

National Surveillance

In the United States, **4.7%** of outpatient visits were due to ILI. This is **above** the national baseline of 3.1%

Become an ILINET provider!

Contact Arianna Eaton at eatona4@michigan.gov

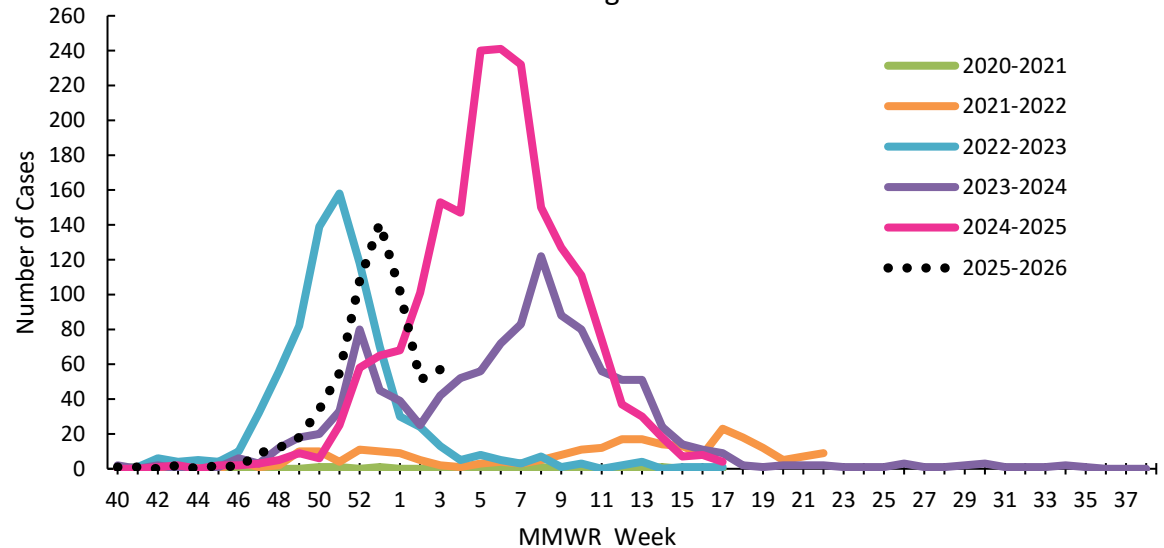
Influenza Hospitalization Surveillance Network (FluSurv-NET)

The CDC's Influenza Hospitalization Surveillance Network (FluSurv-NET) provides population-based rates of laboratory-confirmed influenza-associated hospitalizations beginning October 1st of each year. Michigan participates for Clinton, Eaton, Genesee, Ingham, Livingston and Washtenaw Counties.

of MI FluSurv-NET Cases Reported During this Time Period

	Pediatric	Adult	Total
Cases (Change from Previous Week)	8 (+0)	49 (+6)	57 (+6)
Cumulative Cases	75	519	594

MI FluSurv-NET Cases by Season, 2020-2021 Through 2025-2026



Michigan Influenza Hospitalizations

Starting October 2024, acute care hospitals and critical access hospitals (representing 90% of the state) began reporting confirmed influenza cases among hospitalized patients.

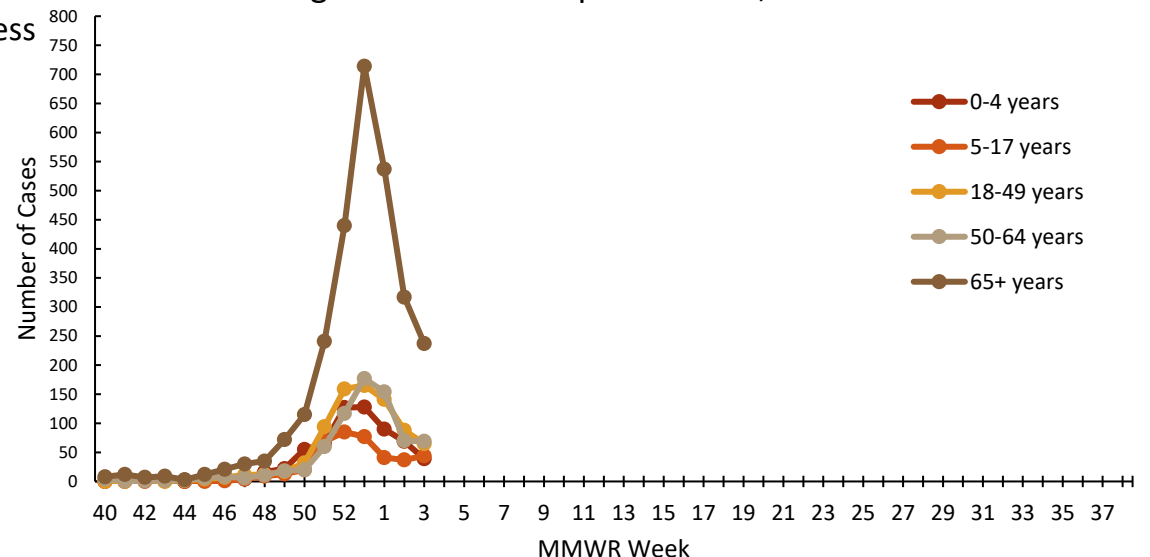
of Influenza Hospitalizations Reported During this Time Period

Region	C	N	SE	SW	Total
Hospitalizations	121	31	229	73	454

of Influenza Hospitalizations by Region

Age Group	C	N	SE	SW	Total
0-4 years	57	5	538	32	632
5-17 years	36	4	332	27	402
18-49 years	153	37	531	78	799
50-64 years	179	42	421	84	726
65+ years	764	178	1524	344	2810
Total	1192	266	3346	565	5369

Michigan Influenza Hospitalizations, 2025-2026



If you have any questions about this data, please contact

MDHHS-CHECC-EMResource@michigan.gov

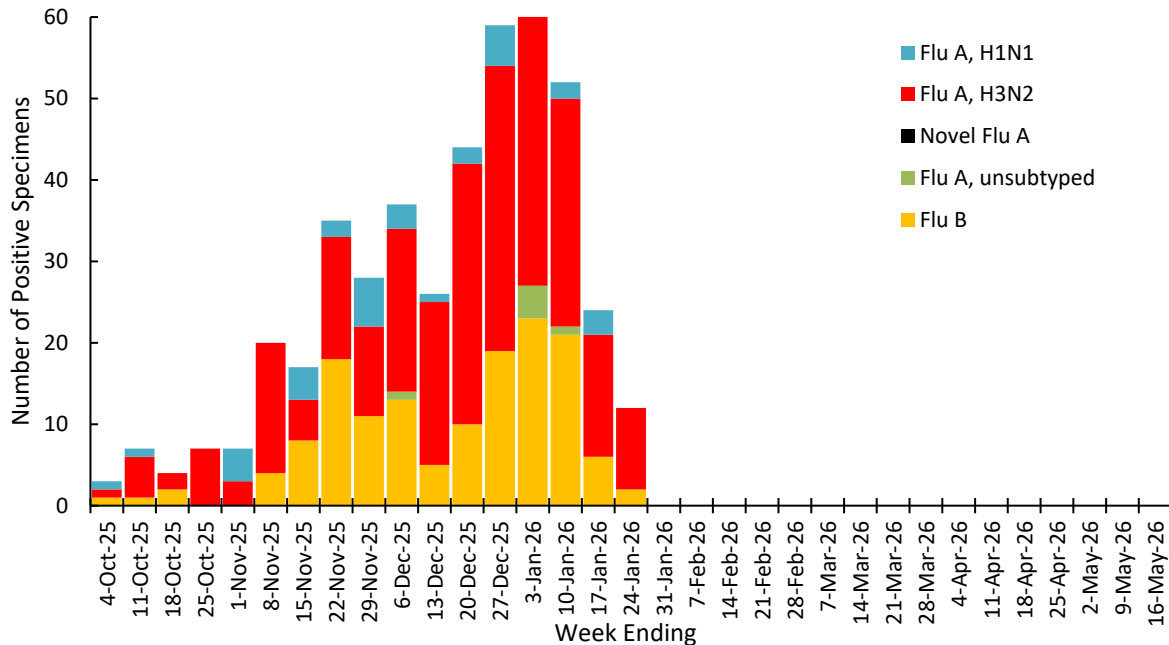
MDHHS Bureau of Laboratories (BOL) Virology Laboratory Data

There were **12** (3C, 0N, 2SE, 7SW) positive influenza results reported by the MDHHS Bureau of Laboratories (BOL) during this time period. Positive flu results for the 2025-2026 season are summarized below.

of Positive Influenza Virus Results by Region

	C	N	SE	SW	Total
Flu A H1N1	7	1	18	13	39
Flu A H3N2	75	18	98	82	273
Novel flu A*	0	0	0	0	0
Flu A unsubtype	0	1	1	4	6
Flu B**	17	1	92	34	144
Total	99	21	209	133	462

Influenza Positive Test Results, 2025-2026



Note: results are based on specimen collection date

*Novel influenza A results include: H5, H1N1v, H1N2v, H7N2v, H1v, H3v

**Flu B specimens will no longer be genotyped at MDHHS BOL but will continue being sent to CDC for surveillance.

Michigan Sentinel Clinical Lab Network

Respiratory Virus Data

Ten (10) sentinel clinical labs (1SE, 5SW, 3C, 1N) reported during this time period.

Southeast Region

Influenza A:	Moderate - high ↓	↑ = Increase from previous week ↓ = Decrease from previous week → = Similar to previous week
Influenza B:	Low - slightly elevated ↓	
SARS-CoV-2:	Slightly elevated →	
Parainfluenza:	Low →	
RSV:	Slightly elevated ↑	
Adenovirus:	Sporadic ↓	
hMPV:	Low ↓	

Central Region

Influenza A:	Moderate - high ↑
Influenza B:	Elevated ↑
SARS-CoV-2:	Elevated ↓
Parainfluenza:	Low ↓
RSV:	Low - slightly elevated →
Adenovirus:	Low ↓
hMPV:	Low - slightly elevated ↓

Southwest Region

Influenza A:	Moderate - high ↑
Influenza B:	Elevated - moderate ↑
SARS-CoV-2:	Moderate ↓
Parainfluenza:	Sporadic ↓
RSV:	Slightly elevated ↑
Adenovirus:	Sporadic →
hMPV:	Low ↑

North Region

Influenza A:	Low →
Influenza B:	Sporadic - low ↑
SARS-CoV-2:	Low →
Parainfluenza:	Sporadic ↑
RSV:	Sporadic ↓
Adenovirus:	Sporadic ↑
hMPV:	No activity ↓

Congregate Setting Influenza Outbreaks

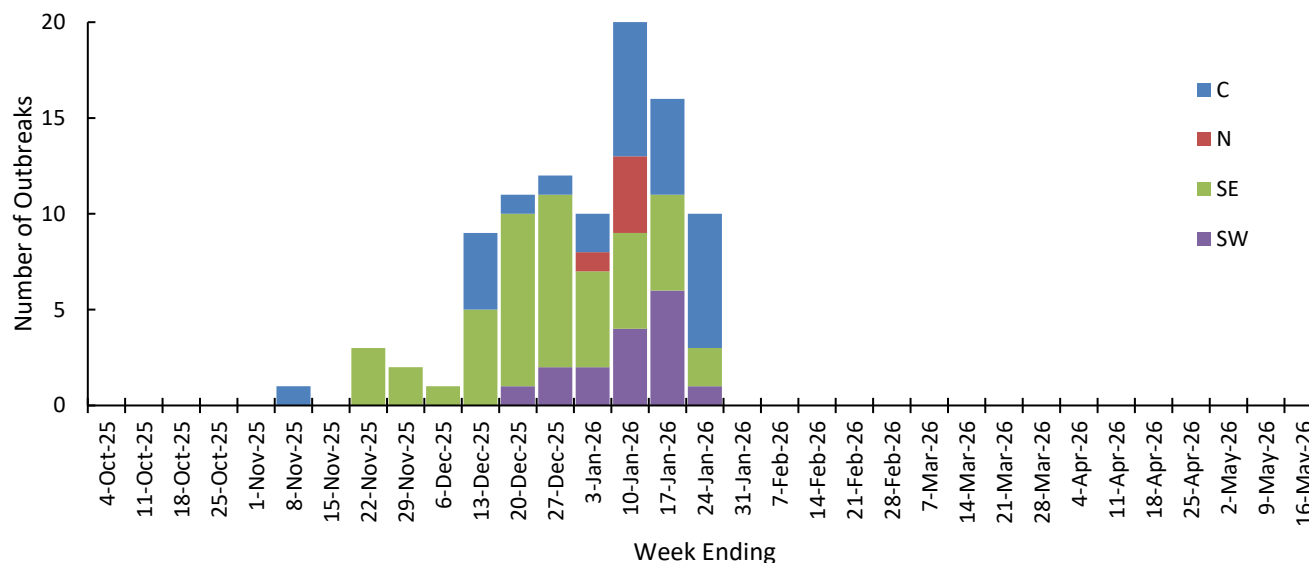
There were **10** (7C, 0N, 2SE, 1SW) confirmed influenza outbreaks reported to MDHHS during this time period. Influenza outbreaks for the 2025-2026 season are summarized below.

of Reported Influenza Outbreaks by Region

Facility Type	C	N	SE	SW	Total
Schools: K-12 & College	2	0	15	1	18
Long-term Care / Assisted Living Facility	23	5	25	15	68
Healthcare Facility	3	0	2	0	5
Daycare	0	0	3	0	3
Homeless Shelter	0	0	0	0	0
Correctional Facility	0	0	1	0	1
Other	1	0	0	0	1
Total	29	5	46	16	96

Note: Data are reported on outbreaks with laboratory-confirmed influenza.

Influenza Outbreaks in Congregate Settings by Region, 2025-2026



Did you know?

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

Outbreak Response Resources:

- [MDHHS Guidelines for Influenza and Respiratory Virus Outbreaks in Long-Term Care Facilities](#)
- [MDHHS Respiratory Illness Outbreak Response Tool for use in Skilled Nursing Facilities](#)
- [CDC Viral Respiratory Pathogens Toolkit for Nursing Homes](#)

For more information on outbreaks please visit the [Michigan Respiratory Virus Dashboard](#).

Flu vaccine may cut hospital, emergency visits in kids, even those with underlying conditions ([CIDRAP](#))

Vaccine effectiveness (VE) against flu-related ED visits or hospitalizations was 43% among children with underlying conditions, compared with 53% among children without underlying conditions.

VE varied by type of condition. Protection was lowest among children with respiratory conditions, at 31%. Higher VE estimates were observed among children with endocrine conditions (64%) and neurologic or neuromuscular conditions (53%). For children with oncologic and/or immunosuppressive conditions, VE was 48%. But “all demonstrated significant protection,” write the authors, “suggesting that influenza vaccination remains broadly effective for all children.”

Hear directly from the authors in the video abstract!

PEDIATRICS
An Official Journal of the American Academy of Pediatrics

Take home messages

- Influenza vaccination reduces illness in children including those with underlying medical conditions
- Protection varies, but benefit remains
- Vaccination and timely treatment matter
- It's not too late to vaccinate this season

Hayek, et al.; Influenza Vaccine Effectiveness Among Children With and Without Underlying Conditions. Pediatrics 2026; e2025072184. [10.1542/peds.2025-072184](https://doi.org/10.1542/peds.2025-072184)

Influenza News Blast

- Flu hospitalizations are decreasing, but still high in West Michigan ([WZZM](#))
- Bird flu confirmed in Ottawa County backyard flock ([WOOD](#))
- Ensuring Veterans stay protected during flu season ([VA News](#))
- ‘Nudging’ both patients and providers boosts flu vaccine numbers ([Penn Medicine](#))
- WHO withdrawal leaves U.S. more vulnerable to flu, expert says ([Harvard T.H. Chan](#))
- 8 Flu Facts That Could Help Keep You Out of the Hospital This Winter ([National Council on Aging](#))
- Flu Season Is a Stress Test. Our Healthcare System Keeps Failing. ([MedPage Today](#))
- Study suggests pre-existing immunity to H5N1 avian flu varies by age, prior exposure ([CIDRAP](#))
- Hotel experiment suggests air mixing can help curb flu transmission ([CIDRAP](#))

Additional Resources

- [MDHHS Influenza Webpage](#) and [Influenza Surveillance in MI](#)
- **NEW!** [MDHHS Seasonal Respiratory Viruses Surveillance and Immunizations Dashboard](#)
- [MDHHS Bureau of Laboratories \(BOL\) Webpage](#)
 - [Test Request Forms](#)
- [Immunization Action Coalition: Ask the Experts - Flu](#)
- [CDC FluView Report](#)

View Michigan Flu Focus Report archives [here](#).

MDHHS Contributors

Bureau of Infectious Disease Prevention: A. Eaton, MPH, S. Kim, MPH, L. Leegwater, MPH, V. Tellez Nunez, MPH, E. Urlaub, MPH

Bureau of Laboratories: K. Jacob, PhD, K. Margulieux, PhD