

West Virginia Weekly Influenza Surveillance Report

Prepared by the WV Bureau for Public Health's Division of Infectious Disease Epidemiology (DIDE)

Distributed September 9, 2022

Week Ending August 27, 2022 - MMWR Week 34

Recommendations & Resources

The Center for Disease Control and Prevention (CDC) recommends influenza vaccination for all persons aged ≥ 6 months without contraindications. The seasonal flu shot can be given at any time during the flu season and can be co-administered with the COVID-19 vaccine.

View the CDC's current recommendations:

- [Influenza \(ACIP\) Vaccine Recommendations](#)
- [Resources for Health Professionals](#)
- [Frequently Asked Influenza \(Flu\) Questions](#)
- [Testing Guidance for Clinicians When SC2 and Influenza Viruses are Co-Circulating](#)
- [Testing and Management Considerations for Nursing Home Residents with ARI when SC2 and Influenza are Co-Circulating](#)

Other influenza resources:

- West Virginia Immunization Network [Influenza Toolkit](#)
- National Adult and Influenza Immunization Summit [Influenza Workgroup](#)
- Immunization Action Coalition [Influenza Vaccine Page](#)

West Virginia Influenza Activity

Surveillance Summary: True influenza activity remains minimal.

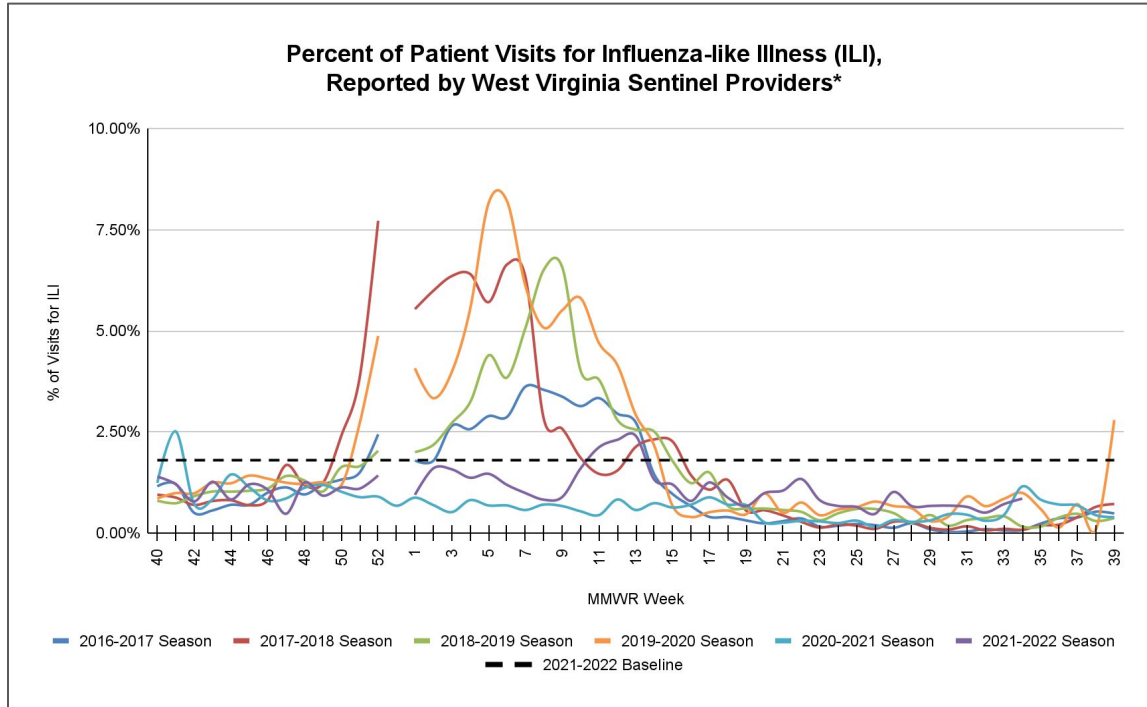
Reportable Influenza – Season to Date in West Virginia

- Positive laboratory tests: 5,261 (see page 5)
- Influenza outbreaks: 29 (see page 6)
- Novel influenza: 3
- Pediatric mortality: 1

More information on national and state respiratory disease surveillance:

- [Overview of Influenza Surveillance System in the U.S.](#)
- [Weekly U.S. Influenza Surveillance Report \(FluView\)](#)
- [Weekly U.S. COVID-19 Surveillance Report \(COVIDView\)](#)
- [West Virginia COVID-19 Surveillance Dashboard](#)
- [The National Respiratory and Enteric Virus Surveillance System \(NREVSS\)](#)

Questions about Influenza Surveillance? Need to report?
Interested in becoming part of the ILINet sentinel network?
Please contact Jillian.L.Jeffrey@wv.gov.



Influenza-Like Illness (ILI)

Sentinel Providers report via the U.S. Outpatient Influenza-Like Illness Surveillance Network, or ILINet. This system defines ILI as having a

1. fever (temperature of 100°F [37.8°C] or greater) AND
2. cough and/or a sore throat.

The case definition no longer includes “without a known cause other than influenza”. Since ILINet monitors visits for ILI and not just laboratory-confirmed influenza, it will capture visits due to any respiratory pathogen that presents with these ILI symptoms.

<https://www.cdc.gov/flu/weekly/overview.htm>

Statewide percent of visits for ILI remains below the state baseline of 1.8%.**

*Due to reporting delays, sentinel provider data is provisional and subject to change. Weekly ILINet data is reported directly to the CDC by 12pm the following Tuesday, so it's possible some ILINet reports may be excluded if they were not reported by the deadline.

**The WV state baseline and the Health & Human Services regional baselines used by the CDC are calculated the same. It is the average percent of patient visits for ILI during non-influenza weeks for the previous three seasons plus two standard deviations.

Sentinel Provider Surveillance (Cont'd)

Week Ending August 27, 2022

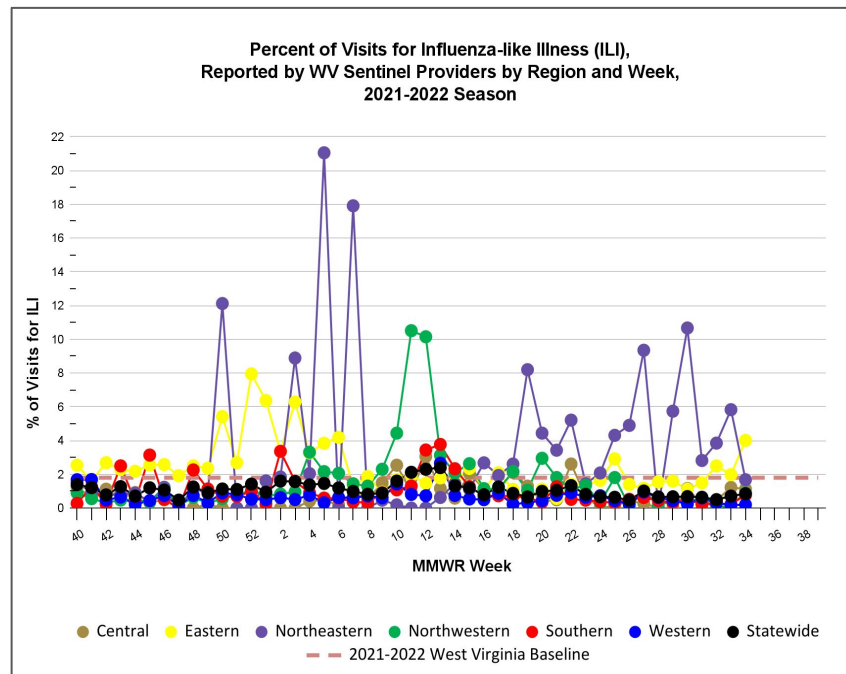
West Virginia Surveillance Regions



National Surveillance

This week, the national percent of visits for Influenza-Like Illness (ILI) was 1.8%, which is **below** the national ILI baseline of 2.5%.

For more information and data, check out the [Weekly U.S. Influenza Surveillance Report](#).



	WV Surveillance Region MMWR Weeks 31 - 34						
	State	C	E	NE	NW	S	W
% of visits for ILI [†]	0.67%	0.80%	1.92%	1.38%	0.36%	0.39%	0.37%
# of total visits [†]	222	2887	4692	1304	4412	5604	14,374
# of reporting providers [†]	30	5	5	3	7	4	6

Statewide percent of visits for ILI was below the state baseline of 1.8%.*

[†]Due to reporting delays, sentinel provider data is provisional and subject to change. Weekly ILINet data is reported directly to the CDC by 12pm the following Tuesday, so it's possible some ILINet reports may be excluded if they were not reported by the deadline.

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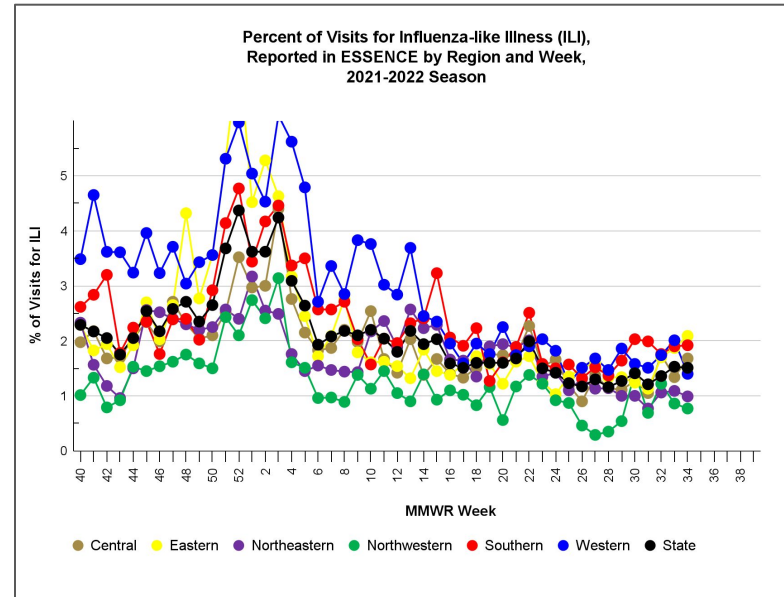
Electronic Surveillance System for the Early Notification of Community-Based Epidemics (ESSENCE)

Most hospitals report ILI in the ESSENCE surveillance system, which pulls data by ICD-10 and chief complaints. Like the sentinel provider data, this data can show the duration and severity of the current influenza season.

This week, the statewide percent of visits for ILI reported in ESSENCE was 1.51%, which is **below** the average ESSENCE baseline of 2.4%.

For more information on ESSENCE, contact Jessica.L.Hoffman@wv.gov.

Region	% of visits for ILI			
	Week 31	Week 32	Week 33	Week 34
Central	1.05%	1.75%	1.34%	1.68%
Eastern	1.13%	1.70%	1.87%	2.09%
Northeast	0.77%	1.06%	1.09%	0.99%
Northwest	0.69%	1.22%	0.86%	0.77%
Southern	1.99%	1.76%	1.90%	1.92%
Western	1.51%	1.74%	2.01%	1.40%
Statewide	1.21%	1.36%	1.53%	1.51%



Laboratory Surveillance

Week Ending August 27, 2022

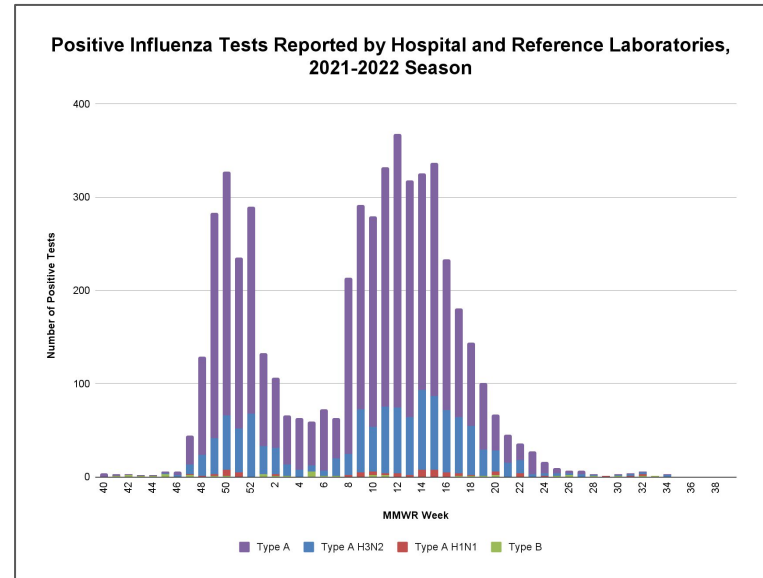
Per WV Code 16-3-1; 64CSR7, hospital and reference laboratories must report counts of positive influenza laboratory tests (PCR, viral culture, and IFA/DFA). For MMWR weeks 31 to 34, 14 positive influenza tests were reported across WV. The number of influenza tests ran and reported for MMWR week 34 was 3714*, which is lower than the current season's average of 4912 tests reported per week.

Reporting has transitioned to an online report mechanism via Google Forms. Please contact Jillian.L.Jeffrey@wv.gov if your hospital or reference laboratory needs more information on how to report.

If your laboratory cannot reporting electronically, you may complete and submit the old paper [Influenza laboratory Reporting Form](#) which can be found on the Office of Epidemiology and Prevention Services (OEPS) [Flu Page](#).

Region	Reported Positive Influenza Tests, by Type and Subtype* MMWR Weeks 31 - 34				
	A	A H3N2	A H1N1	B	% Positive
C	1	1	0	0	0.05%
E	0	2	0	2	0.16%
NE	1	0	0	0	0.05%
NW	1	0	3	0	0.10%
S	0	0	0	0	0.00%
W	0	3	0	0	0.14%
State	3	6	3	2	0.09%

*Due to possible delays in laboratory reporting, weekly data is provisional and subject to change.



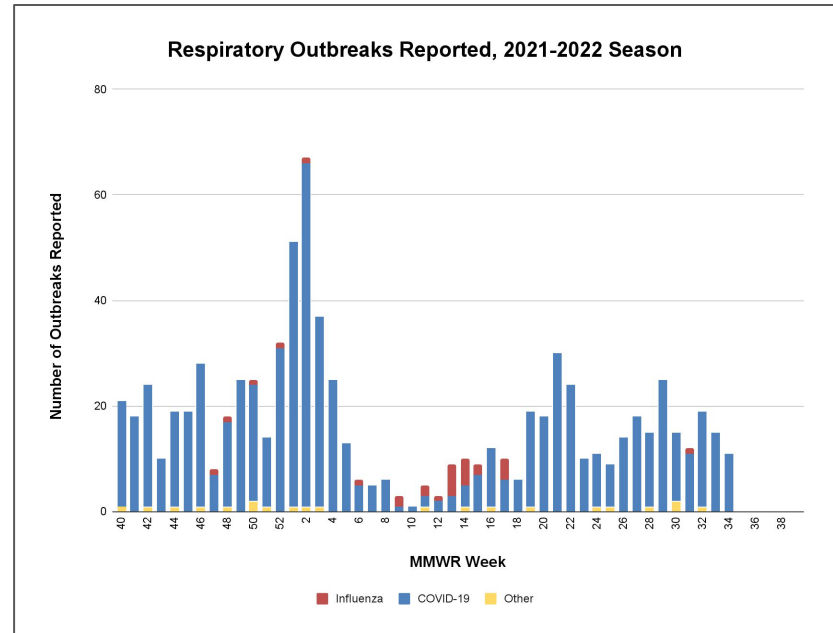
Outbreak Surveillance

Week Ending August 27, 2022

Per WV Code 16-3-1; 64CSR7, clusters and outbreaks of any illness and condition in any setting must be reported **immediately** to the Local Health Department (LHD). Contact Traci.D.Hudson@wv.gov for more information on outbreaks in West Virginia.

Guidelines for common respiratory outbreaks can be found on the OEPS [Outbreak Toolkit](#) webpage. The “other” category includes any pathogen apart from Influenza/COVID such as RSV, Rhinovirus, etc., or any Acute Respiratory Illness (ARI) without a known etiology.

Region	Reported Number of Outbreaks* MMWR Weeks 31 - 34					
	Influenza		COVID-19 [§]		Other	
	Report Week	Season to Date	Report Week	Season to Date	Report Week	Season to Date
C	0	8	5	131	0	3
E	0	3	13	110	0	0
NE	0	4	8	107	0	6
NW	0	4	9	131	1	6
S	0	5	9	107	0	5
W	1	5	11	111	0	1
State	1	29	55	697	1	21



*This data is provisional and subject to change based on timeliness of reporting.

§Updates to current COVID-19 outbreak definitions, as well as the state reporting processes, may be a factor in the fluctuation of COVID-19 outbreaks.