## **County of San Diego**

# **INFLUENZA WATCH**

Week 52 Ending 12/26/2020

Influenza Cases by Type

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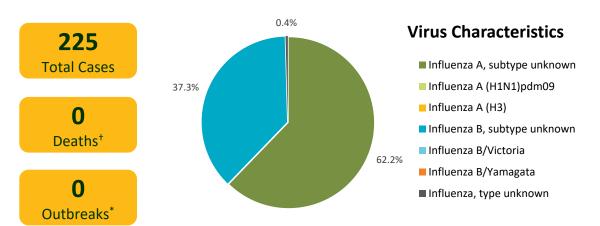
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Seasonal influenza activity had been very low in San Diego; however, the number of cumulative cases quadrupled from week 51 to week 52. The social distancing, hand washing, and mask wearing interventions instituted to reduce the transmission of SARS-CoV2, the virus that causes COVID-19, can prevent influenza. Anyone over six months of age who has not received the 2020-21 seasonal influenza vaccine should get it as soon as possible. Deaths due to COVID-19 pneumonia significantly increased in December, reflected in the increased percentage of deaths registered with pneumonia.

#### **Current Week 52 (ending 12/26/2020)**

- 171 new influenza detections reported
- No influenza-related deaths reported
- 4% influenza-like illness (ILI) among emergency department visits
- 17% of death certificates registered with pneumonia and/or influenza

Season Summar



- † Flu deaths less than 18 years of age are reportable to CDPH.
- \* In a congregate living setting, outbreaks are defined as at least one laboratory-confirmed influenza case in the setting of a cluster (≥2 cases) of influenza-like illness (ILI) within a 72-hour period.

#### Table 1. Influenza Surveillance Indicators.

	2020-21 Season			2019-20 Season			Prior 3-Year Average*		
Indicator	Week 52	Week 51	Total to Date	Week 52	Total To Date	Season Total	Week 52	Total To Date	Season Total
All influenza detections reported (rapid or PCR)	171	8	225	1,364	3,827	20,711	1,701	4,291	17,073
Percent of emergency department visits for ILI	4%	4%		10%			12%		
Percent of deaths registered with pneumonia and/or influenza	17%	18%		5%			6%		
Number of influenza-related outbreaks $^{\infty}$	0	0	0	4	12	62	10	21	69
Number of influenza-related deaths reported^	0	0	0	2	10	108	12	21	176

Influenza season is July 1 – June 30, Weeks 27-26. Previous weeks case counts or percentages may change due to delayed processing or reporting.

<sup>^</sup>Current FY deaths are shown by week of report; by week of death for prior FYs. Total deaths reported in prior seasons: 343 in 2017-18, 77 in 2018-19, and 108 in 2019-20.





<sup>\*</sup>Includes FYs 2017-18, 2018-19, and 2019-20.

<sup>∞</sup>At least one case of laboratory-confirmed influenza in a setting experiencing two or more cases of influenza like illness (ILI) within a 72-hour period.

Total confirmed influenza outbreaks in prior seasons: 119 in 2017-18, 25 in 2018-19, and 62 in 2019-20.

#### **People at High Risk for Influenza Complications**

Although everyone six months and older should get an annual influenza vaccine, some people are more likely to get influenza complications that can result in hospitalization and sometimes death. Influenza can also make chronic health problems worse. The groups of people who are more likely to get serious flu-related complications if they get sick with influenza are listed below.

- Children younger than 5, but especially children younger than 2 years old
- Adults 65 years of age and older
- Pregnant women (and women up to two weeks postpartum)
- Residents of nursing homes and other long-term care facilities
- American Indians and Alaskan Natives seem to be at higher risk of flucomplications
- Asthma
- <u>Children</u> and adults with neurological and neurodevelopmental conditions [including disorders of the brain, spinal cord, peripheral nerve, and muscle such as cerebral palsy, epilepsy (seizure disorders), stroke, intellectual disability (mental retardation), moderate to severe developmental delay, muscular dystrophy, or spinal cord injury].
- Chronic lung disease (such as chronic obstructive pulmonary disease [COPD] and cystic fibrosis)
- Heart disease (such as congenital heart disease, congestive heart failure and coronary artery disease)
- Blood disorders (such as sickle cell disease)
- Endocrine disorders (such as <u>diabetes</u>)
- Kidney disorders
- Liver disorders
- Metabolic disorders (such as inherited metabolic disordersand mitochondrial disorders)
- Weakened immune system due to disease or medication (such as people with <u>HIV or AIDS</u>, or <u>cancer</u>, or those on chronic steroids)
- People younger than 19 years of age who are receiving long-term aspirintherapy
- People with extreme obesity (body mass index [BMI] of 40 or more)

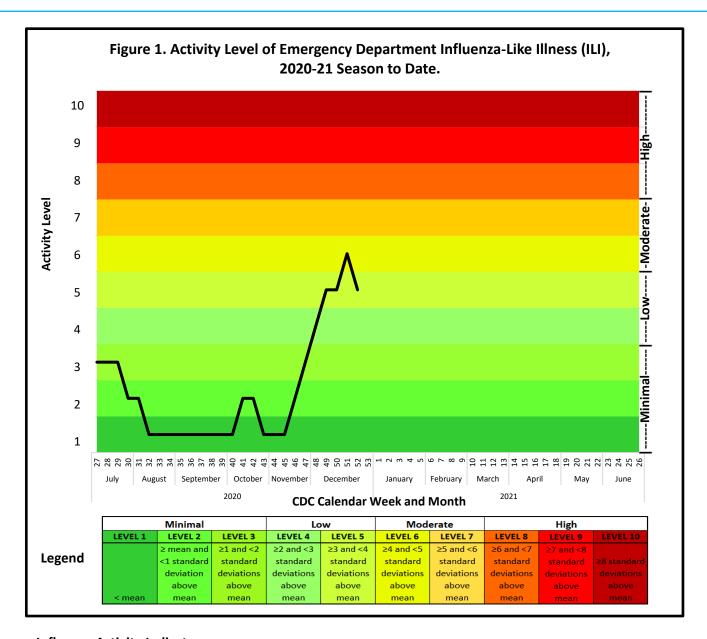
Each year, most influenza deaths occur among people who had no evidence of having received an annual influenza vaccine. Providers should make extra efforts to ensure that everyone at risk for influenza gets the annual influenza vaccine. More information is available at the <a href="CDC">CDC</a> influenza website.

## Table 2. Influenza Cases Reported, 2020-2021 Season\*

Positive Test Type/Subtype	Week 52	Week 51	Total to Date	Percent to Date
Influenza A, subtype unknown	105	6	140	62.2%
Influenza A (H1N1)pdm09	0	0	0	0.0%
Influenza A (H3)	0	0	0	0.0%
Influenza B, subtype unknown	66	2	84	37.3%
Influenza B/Victoria	0	0	0	0.0%
Influenza B/Yamagata	0	0	0	0.00%
Influenza, type unknown	0	0	1	0.4%
Total	171	8	225	100.0%

<sup>\*</sup>Season is July 1- June 30, Weeks 27-26.





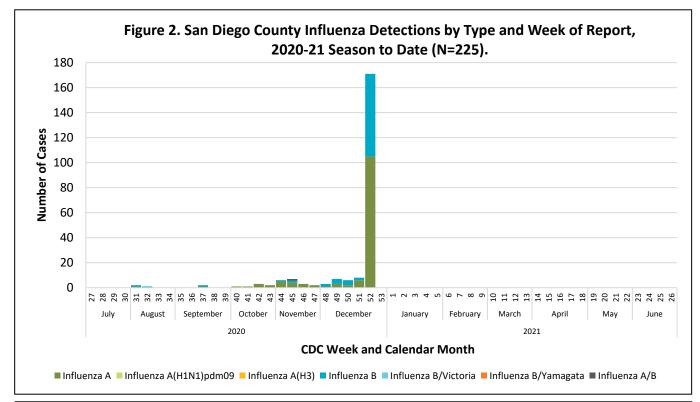
#### **Influenza Activity Indicator:**

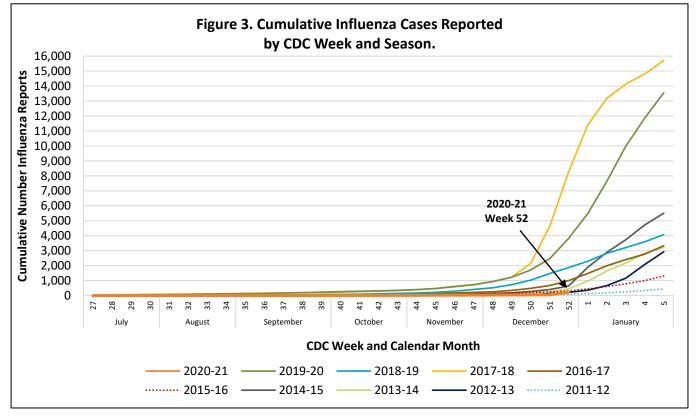
The activity level compares the current week's ED ILI% (emergency department influenza-like illness, percent of all visits) to the mean and number of standard deviations above of the mean of the ED ILI% in non-influenza season weeks (CDC disease weeks 27-39) from the current and prior four seasons.

There are 10 activity levels, classified as: Minimal (levels 1-3), Low (levels 4-5), Moderate (levels 6-7), and High (levels 8-10). An activity level of 1 corresponds to when the ED ILI% is below the mean; level 2 corresponds to when the ED ILI% is less than 1 standard deviation above the mean; level 3 corresponds to when the ED ILI% is more than 1 but less than 2 standard deviations above the mean, and so on, with an activity level of 10 corresponding to when the ED ILI% is at 8 or more standard deviations above the mean.



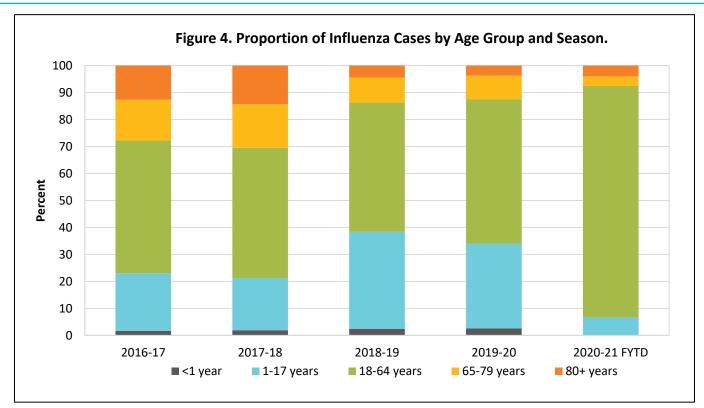


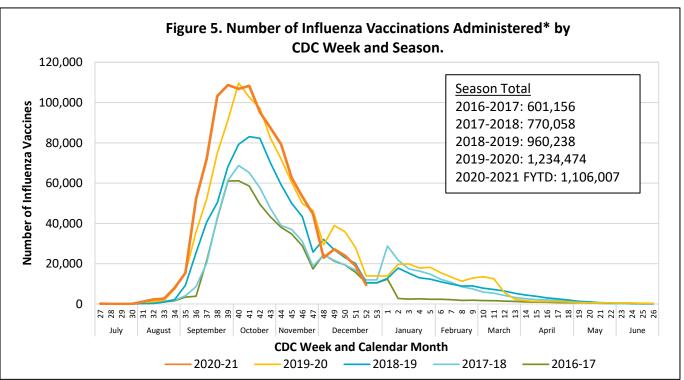








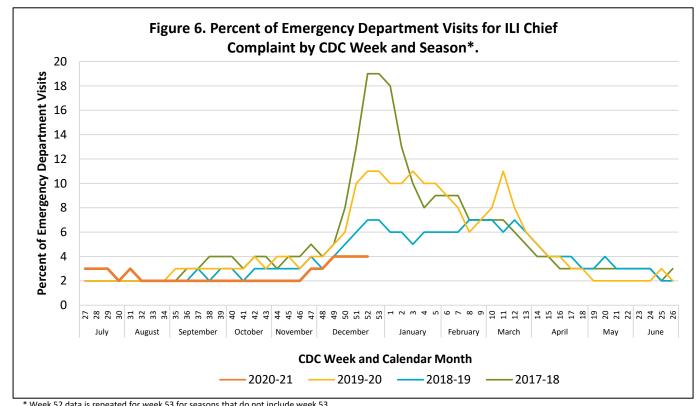




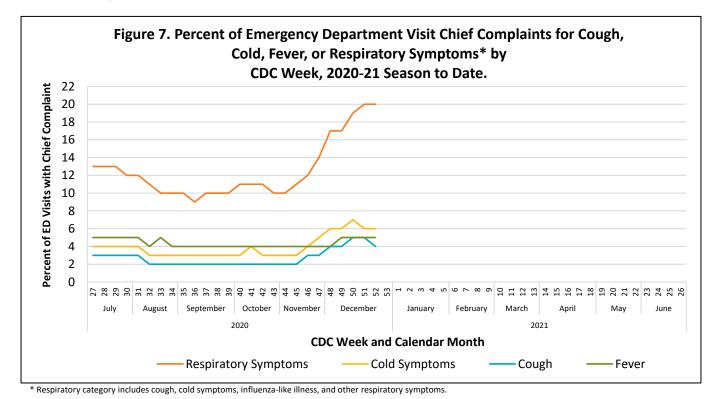
 Influenza vaccinations administered and entered into the San Diego Immunization Registry (<u>SDIR</u>). Week 52 data is repeated for week 53 for seasons that do not include week 53.





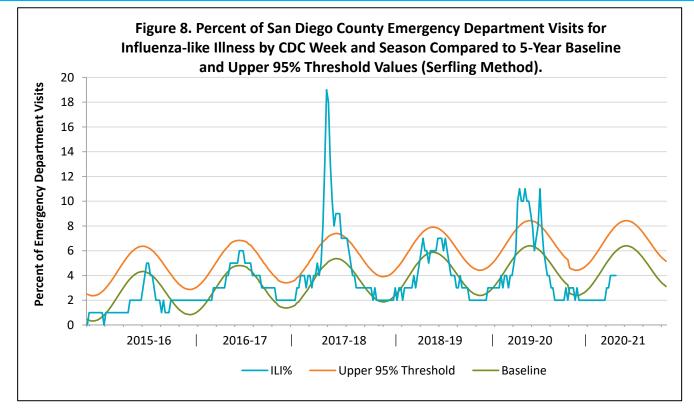


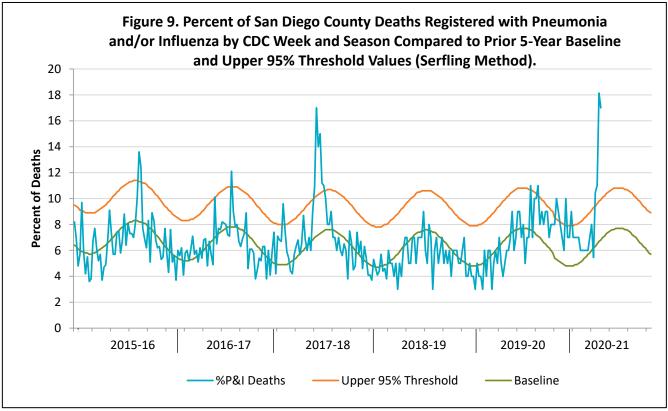
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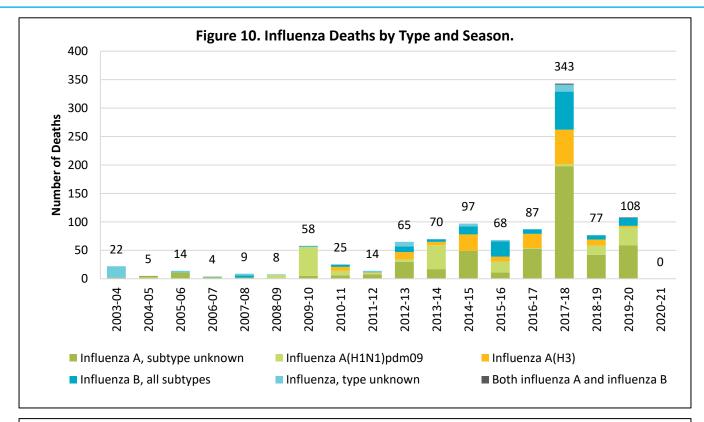


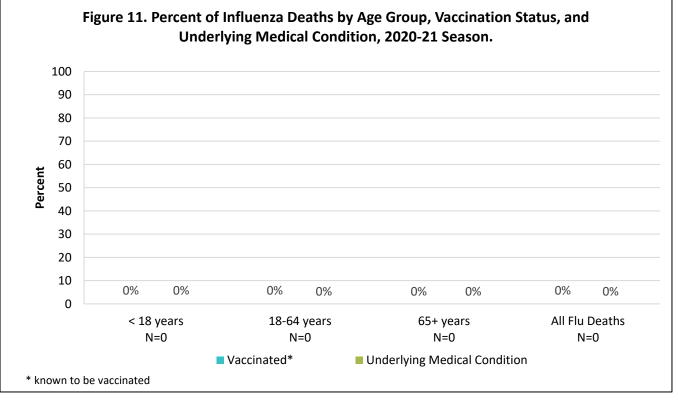
















## Influenza Reporting in San Diego County

Individual influenza cases are now reportable to Public Health as of October 1, 2019. Please report laboratory-positive influenza results to the County Epidemiology Unit by **FAX (858) 715-6458** using a <u>Confidential Morbidity Report Form</u>, or an <u>Influenza Case Report Form</u>, and/or a copy of the laboratory results. Also, please indicate if the patient died and/or is a resident of a congregate living facility (if known).

Influenza specimens may be sent to <u>Public Health Laboratory</u> (PHL) for confirmation and subtyping. Please contact PHL at **(619) 692-8500 before submitting** or for questions and use the current PHL Test Request Form found at

https://www.sandiegocounty.gov/hhsa/programs/phs/phs\_laboratory/. Contact the Epidemiology Unit by telephone (619) 692-8499 or email (EpiDiv.HHSA@sdcounty.ca.gov) with questions about influenza data. Influenza outbreaks should be reported by telephone to (619) 692-8499.

#### **Resource Links**

- County of San Diego Epidemiology Unit www.sdepi.org
- County of San Diego <u>2019-20 Influenza Season Summary</u>
- Influenza Watch <u>Slide Deck</u> A slide version of this report for presentations
- County of San Diego Immunization Unit (SDIZ) www.sdiz.org
- San Diego Regional Immunization Registry (SDIR) <a href="http://www.sdiz.org/CAIR-SDIR/index.html">http://www.sdiz.org/CAIR-SDIR/index.html</a>
- California Department of Public Health (CDPH) <u>Influenza Update</u>
- Centers for Disease Control and Prevention (CDC) Influenza Surveillance

#### Influenza Watch Data Sources

The following sources of data are used to produce this report:

- **Influenza case reports:** Medical providers and laboratories report individual cases of confirmed influenza via fax or electronic laboratory reporting (ELR) to Public Health Services Epidemiology Unit (Epidemiology).
- Influenza deaths: Hospital infection control professionals report influenza-related deaths. Pediatric flu deaths (under 18 years of age) are legally reportable in California; however, San Diego County requests that all influenza-related deaths be reported for surveillance purposes. Influenza-related deaths are also identified through death certificate registration. The County Office of Vital Records notifies Epidemiology when a new death is registered with influenza listed as a cause of death or underlying condition. In addition, influenza case reports are compared to death data for San Diego County, and matches are evaluated to determine if their influenza infection was related to the cause of death.
- **Percent pneumonia and influenza deaths:** The percentage of all deaths registered that had either pneumonia and/or influenza listed as a cause of death is obtained directly from the Vital Records VRIS data system on a weekly basis.
- Influenza-like illness (ILI): Electronic emergency department (ED) visit data is submitted to Epidemiology daily for 16 hospitals in San Diego County. The percent of ED visits for ILI or flu (based on chief complaints or diagnosis) is calculated for each week. Note: ILI is defined as fever (>100°F or 37.8°C) and cough and/or sore throat, in the absence of a known cause.
- Influenza outbreaks: In a congregate living setting, outbreaks are defined as at least one laboratory-confirmed
  influenza in the setting of a cluster (≥2 cases) of influenza-like illness (ILI) within a 72-hour period. Influenza outbreaks
  are reportable in California. Epidemiology identifies outbreaks when facilities call to report. Other potential outbreaks
  are identified when multiple cases share an address or have a residential address that matches a skilled nursing or
  long-term care facility.
- **Number of vaccines:** The San Diego Immunization Registry (SDIR) provides weekly updates on the number of flu vaccinations given based on the number of flu vaccinations registered by participating providers.

The purpose of the weekly *Influenza Watch* is to summarize current influenza surveillance in San Diego County.

Please note that reported weekly data are preliminary and may change due to delayed submissions and additional laboratory results.



