

Connecticut Department of Public Health

Weekly Influenza Update



2021-2022 Quick Notes for Week 13 (March 27 – April 2, 2022)

Influenza Geographic Activity = WIDESPREAD		
Influenza-associated Hospitalizations:	Reported This Week: 30	Season To date: 188
Influenza-associated Deaths:	Reported This Week: 0	Season To date: 5
	Pediatric New This Week: 0	Pediatric Season Total: 0
Outpatient Influenza-like Illness (ILINet) was 1.70%, higher than the 1.14% observed last week.		

2021-2022 Overview for Week 13 (March 27 – April 2, 2022)

Outpatient Influenza-like illness (ILI) activity was higher than the level observed the previous week. Influenza geographic activity is WIDESPREAD .	A total of 188 influenza-associated hospitalizations have been reported since the beginning of the 2021-2022 season.
Hospital Emergency Department (ED) Syndromic Surveillance data reveal a higher percentage of total ED visits for ILI than the percentage observed in the previous week, but a similar percentage of total ED visits for ILI observed in previous influenza seasons during this time of year.	No new influenza-associated deaths were reported in week 13. A total of 5 deaths have been reported since the beginning of the 2021-2022 season.
Of the 2,825 positive influenza tests reported to DPH this season, 2 (<1 %) were Influenza A 2009 (H1N1), 306 (10 %) were Influenza A (H3N2), 2,430 (87 %) were Influenza A (type unspecified), and 87 (3 %) were Influenza Type B.	No new influenza-associated pediatric deaths were reported in week 13. No influenza-associated pediatric deaths have been reported since the beginning of the 2021-2022 season. Annual vaccination is the best way to protect children from influenza.
Connecticut COVID data	CDC Flu View
ALL DATA ARE PRELIMINARY AND SUBJECT TO CHANGE.	

Annual vaccination is the best way to protect against severe illness due to influenza.

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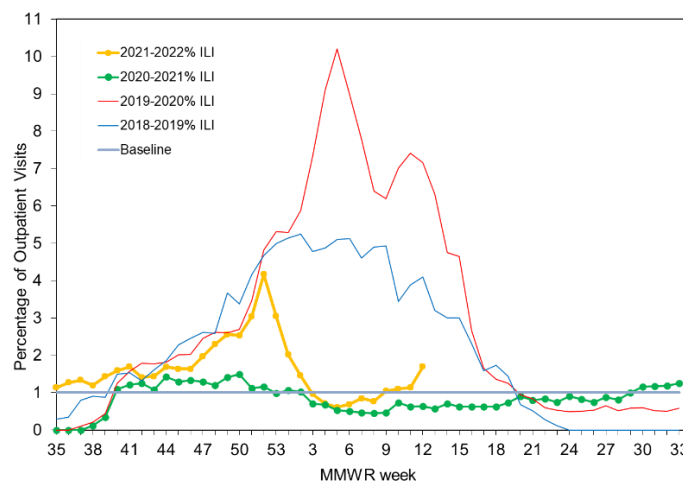
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ILINet Surveillance

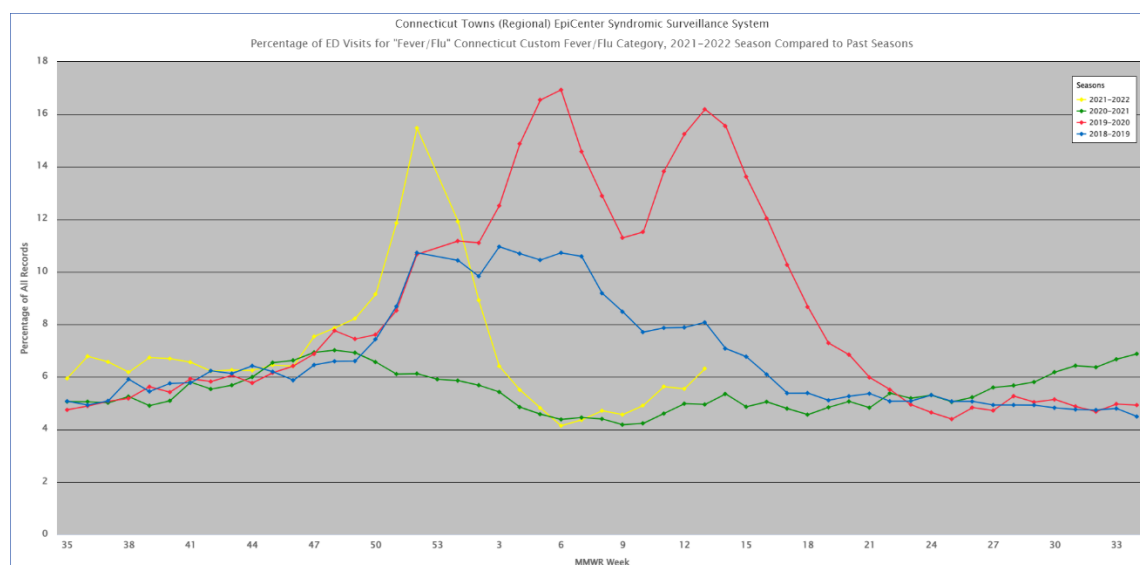
Each week a network of volunteer outpatient providers, including clinics, health centers, urgent care centers, and emergency departments, known as ILINet, report the percentage of patient visits with influenza-like illness (ILI), which consists of cough and/or sore throat and a fever $>100^{\circ}\text{F}$ in the absence of a known cause. Because of expansion of ILINet to additional providers and the effect of COVID-19, the current year should not be compared to previous years. As of April 2, 2022, outpatient ILI is at **1.70%**.

Percentage of outpatient patient visits associated with ILI per MMWR week.



Hospital Syndromic Surveillance

DPH EpiCenter receives near real-time information about emergency department (ED) visits from hospital EDs throughout Connecticut. Data from recent flu seasons were influenced by the of COVID-19 Pandemic and should not be compared with previous seasons. As of April 2, 2022, **6.32%** of week 13 ED patients had ILI, which is higher than the previous week but similar to that observed during previous flu seasons this time of year.



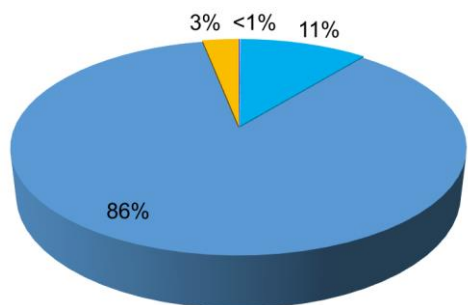
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Laboratory Surveillance

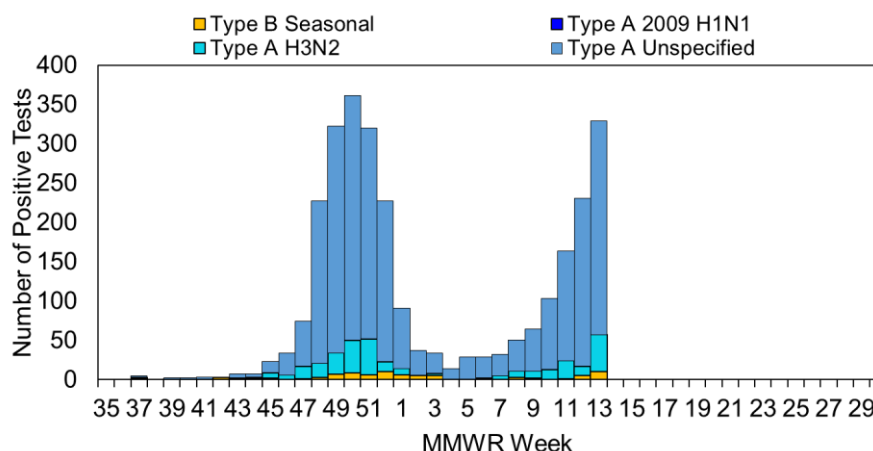
Laboratories report positive influenza tests to DPH. Test results may include the virus subtype (such as H3N2), which helps determine the specific virus strains circulating in CT. Other results only provide a general type (Type A Unspecified, Type B). As of April 2, 2022, **2,825** positive flu tests have been reported.



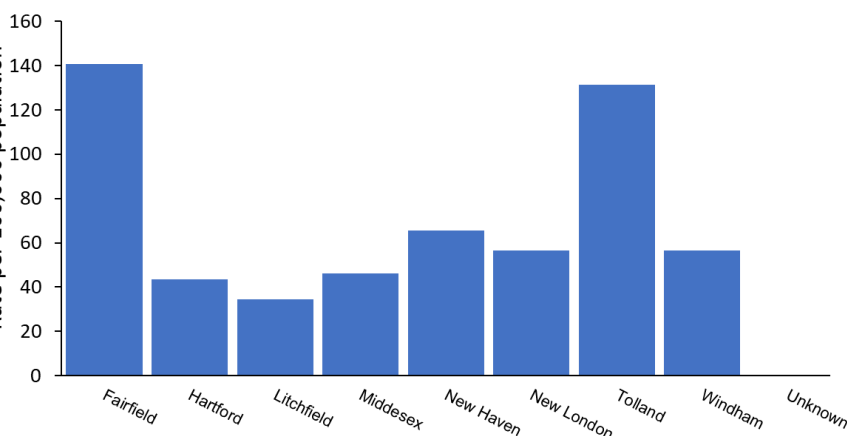
Percent of each influenza virus type reported to DPH during the current season.

■ Type A 2009 H1N1 ■ Type A H3N2
■ Type A Unspecified ■ Type B Seasonal

Total number of positive influenza tests and the number of each influenza virus type reported to DPH per MMWR week during the current season.



Rate of positive influenza tests per 100,000 persons reported from each county in Connecticut during the current season.



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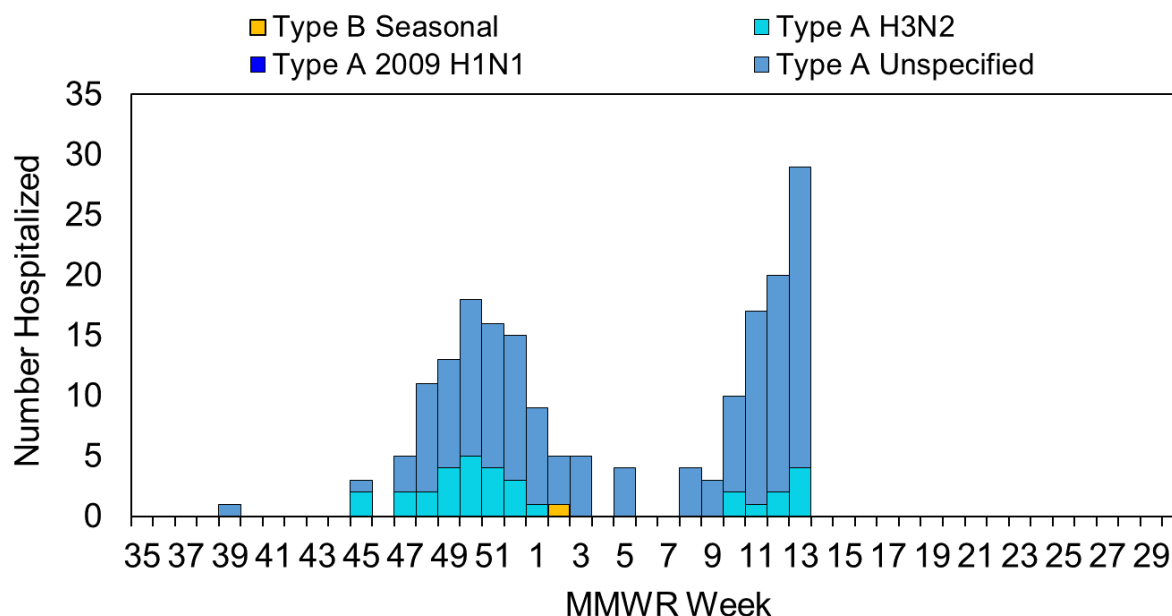
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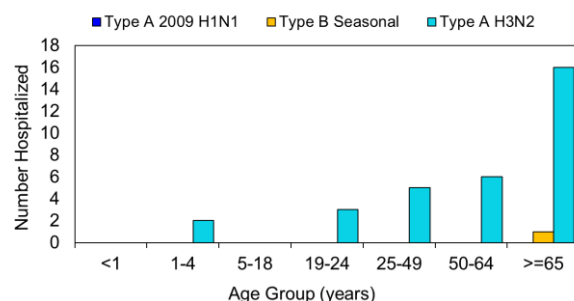
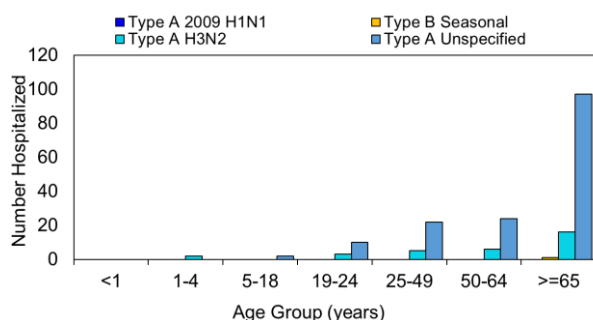
Hospital Surveillance

Hospitals report patients hospitalized with influenza to DPH. The Connecticut Hospital Association (CHA) also tracks basic hospitalization data. As of April 2, 2022, **188** patients have been hospitalized with influenza during the current season. **Four** hospitalized flu patients were also infected with COVID-19.

Total number of patients hospitalized with laboratory-confirmed influenza by virus type per MMWR week.



Total number of reported patients hospitalized with influenza by age and influenza virus type during the current season. NOTE: Type A Unspecified test results are not displayed in the second figure below so other results may be clearly seen.



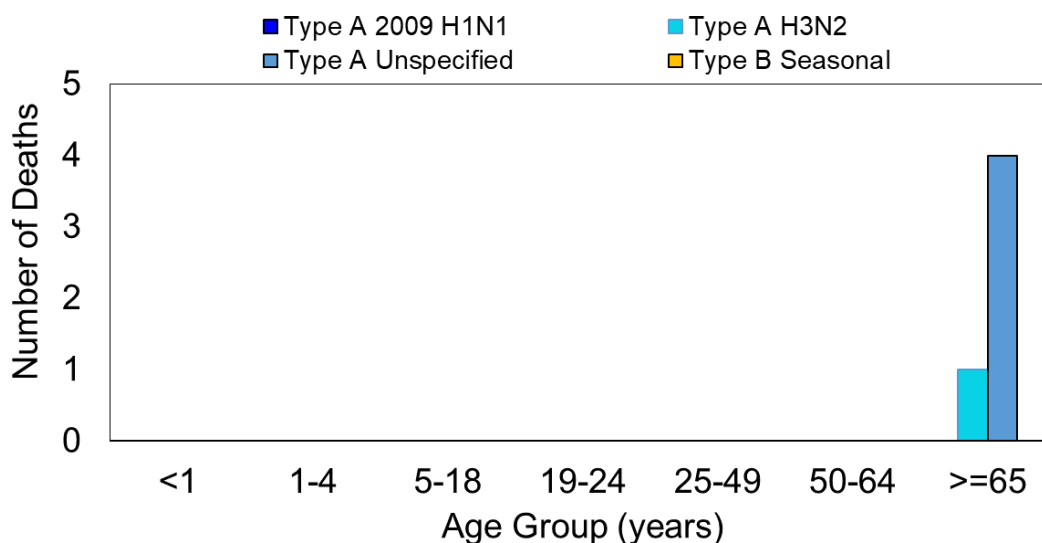
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Influenza-associated Deaths

Influenza-associated deaths are reported to DPH. The graph shows the number of deaths associated with influenza by age group. Comparisons to previous years are provided when new data are available. **Due to the need to confirm reports and reporting delays, consider the current week data preliminary. As of April 2, 2022, five influenza-associated deaths have been reported to DPH.**



Total number of influenza-associated deaths per month for the 2016-2017, 2017-2018, 2018-2019, 2019-2020, 2020-2021, and current influenza season.

