## 2021-2022 Quick Notes for Week 4 (January 23-29, 2022)

| Influenza |  |  |  |  |
| :--- | :--- | :--- | :---: | :---: |
| Geographic Activity = REGIONAL |  |  |  |  |
| Influenza-associated Hospitalizations: | Reported This Week: 3 | Season To date: 92 |  |  |
| Influenza-associated Deaths: | Reported This Week: 1 <br> Pediatric New This Week: 0 | Season To date: 5 <br> Pediatric Season Total: 0 |  |  |
| Outpatient Influenza-like Illness (ILINet) was 1.07\%, lower than the 1.47\% observed last week. |  |  |  |  |

## 2021-2022 Overview for Week 4 (January 23- 29, 2022)

Outpatient Influenza-like illness (ILI) activity was lower than the level observed the previous week. Influenza geographic activity is REGIONAL.

Hospital Emergency Department (ED) Syndromic Surveillance data reveal a lower percentage of total ED visits for ILI than the percentage observed in the previous week, and a similar percentage of total ED visits for ILI observed in previous influenza seasons during this time of year.

| Of the 1,752 positive influenza tests reported to | No new influenza-associated pediatric deaths |
| :--- | :--- |
| were reported in week 4. No influenza-associated |  |
| DPH this season, $4(<1 \%)$ were Influenza A 2009 |  |
| (H1N1), 185 ( $10 \%$ \%) was Influenza A (H3N2), 1,501 |  |
| (86 \%) were Influenza A (type unspecified), and 62 |  |
| $(4 \%)$ were Influenza Type B. |  |$\quad$| beginning of the 2021-2022 season. Annual |
| :--- |
| vaccination is the best way to protect children |
| from influenza. |

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

## Connecticut Department of Public Health

## Weekly Influenza Update

## 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 $>100^{\circ} \mathrm{F}$ 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 January 29,2022 , outpatient ILI is at $\mathbf{1 . 0 7 \%}$.

## 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 January 29, 2022, 5.52\% of week 4 ED patients had ILI, which is lower than the previous week but similar to that observed during previous flu seasons this time of year.


## 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 January 29, 2022, 1,752 positive flu tests have been reported.


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

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.


## Connecticut Department of Public Health

Weekly Influenza Update

## Hospital Surveillance

Hospitals report patients hospitalized with influenza to DPH. The Connecticut Hospital Association (CHA) also tracks basic hospitalization data. As of January 29, 2022, 92 patients have been hospitalized with influenza during the current season.

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.



## 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 January 29, 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.


