

Weekly Influenza & Respiratory Illness Activity Report

A summary of influenza surveillance indicators prepared by the Division of Infectious Disease Epidemiology Prevention & Control

Week Ending November 16, 2019 | WEEK 46

All data are preliminary and may change as more information is received

Minnesota Influenza Geographic Spread

No Activity

Sporadic

Local

Regional

Widespread

During the week ending November 16, 2019 (Week 46), surveillance indicators showed local geographic spread of influenza (based on CDC's Activity Estimates Definitions).

Since the start of the influenza season, no pediatric influenza-related deaths have been reported.

[Minnesota Influenza Surveillance \(www.health.state.mn.us/diseases/flu/stats/\)](http://www.health.state.mn.us/diseases/flu/stats/)

[Weekly U.S. Influenza Surveillance Report \(www.cdc.gov/flu/weekly/\)](http://www.cdc.gov/flu/weekly/)

[World Health Organization \(WHO\) Surveillance \(www.who.int/influenza/surveillance_monitoring/updates/en/\)](http://www.who.int/influenza/surveillance_monitoring/updates/en/)

Neighboring states' influenza information:

Iowa: [Iowa Flu Reports \(idph.iowa.gov/influenza/reports\)](http://idph.iowa.gov/influenza/reports)

Wisconsin: [Influenza \(Flu\) \(www.dhs.wisconsin.gov/communicable/influenza/\)](http://www.dhs.wisconsin.gov/communicable/influenza/)

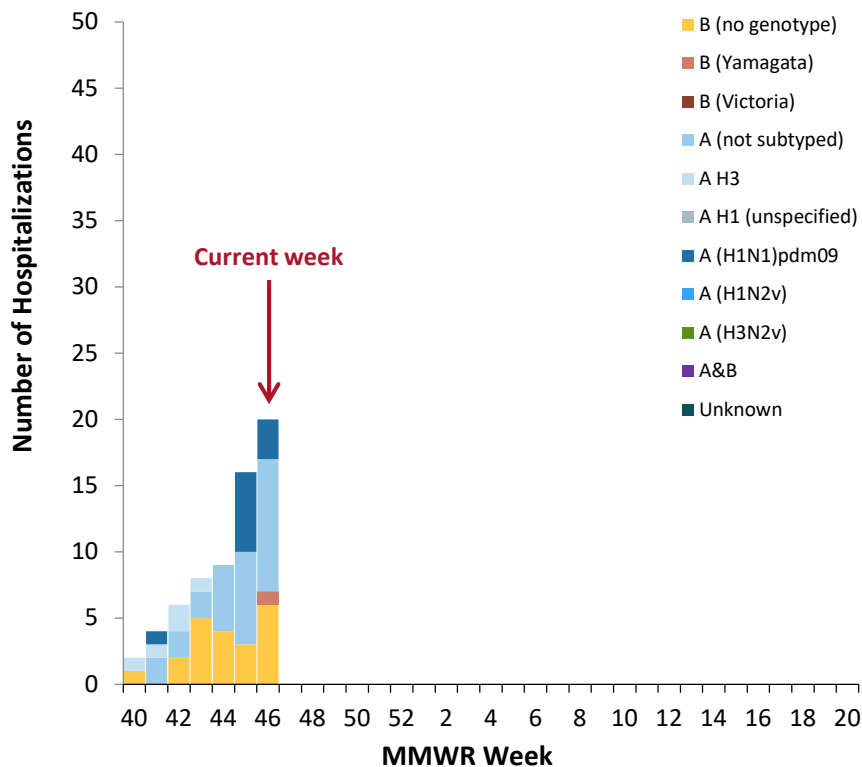
North Dakota: [Reported Seasonal Influenza Activity in North Dakota \(www.ndflu.com/default.aspx\)](http://www.ndflu.com/default.aspx)

South Dakota: [South Dakota Influenza Information \(doh.sd.gov/diseases/infectious/flu/\)](http://doh.sd.gov/diseases/infectious/flu/)

Hospitalized Influenza Surveillance

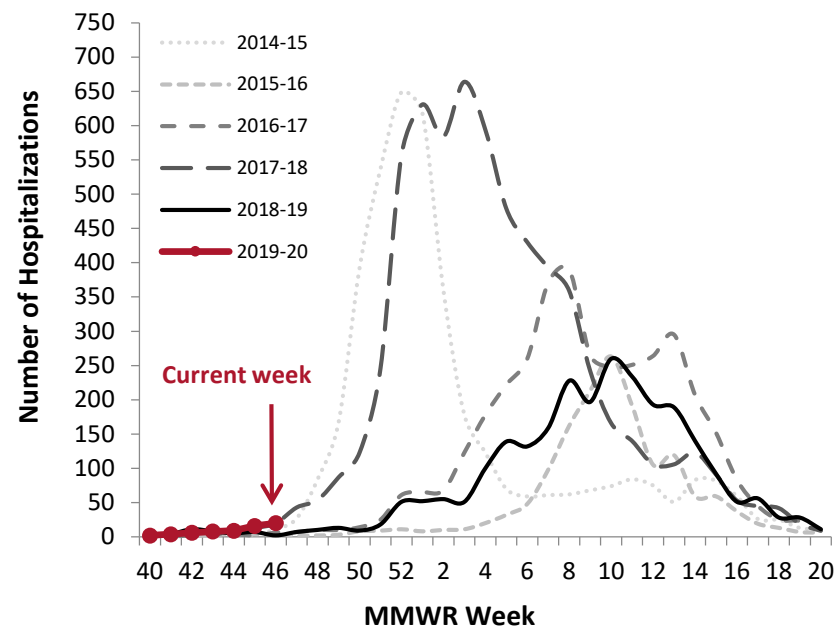
Hospitalized influenza cases are based on disease reports of laboratory-positive influenza (via DFA, IFA, viral culture, EIA, rapid test, paired serological tests or RT-PCR) and specimens from hospitalized patients with acute respiratory illness submitted to MDH-PHL by hospitals and laboratories. **Due to the need to confirm reports and reporting delays, consider current week data preliminary.**

Hospitalized Influenza Cases by Type Minnesota (FluSurv-NET*)



Hospitalizations this week	Hospitalizations last week	Total hospitalizations (to date)
20	16	65

Hospitalized Influenza Cases by Season, Minnesota (FluSurv-NET*)

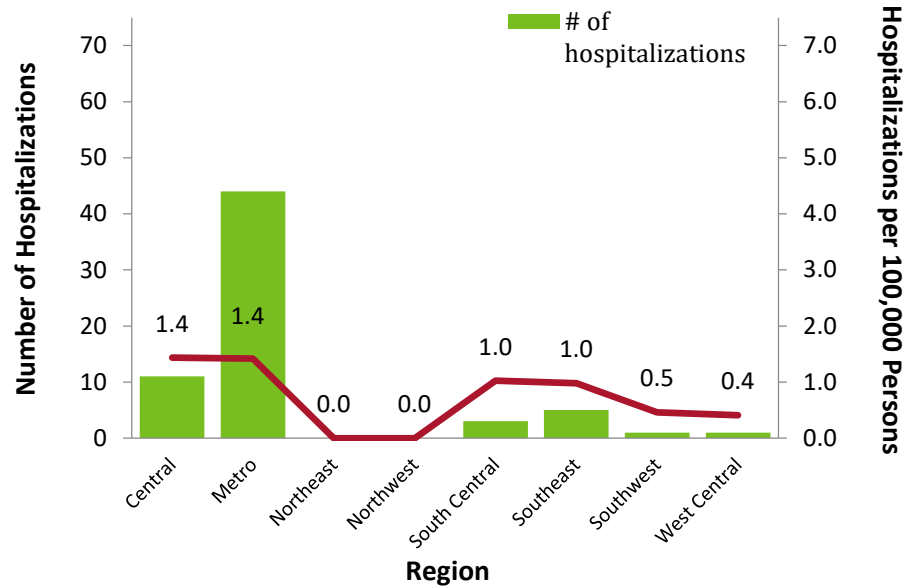


Season	Total hospitalizations (historic)
2014-2015	4,081
2015-2016	1,538
2016-2017	3,695
2017-2018	6,446
2018-2019	2,543
2019-2020	65 (to date)

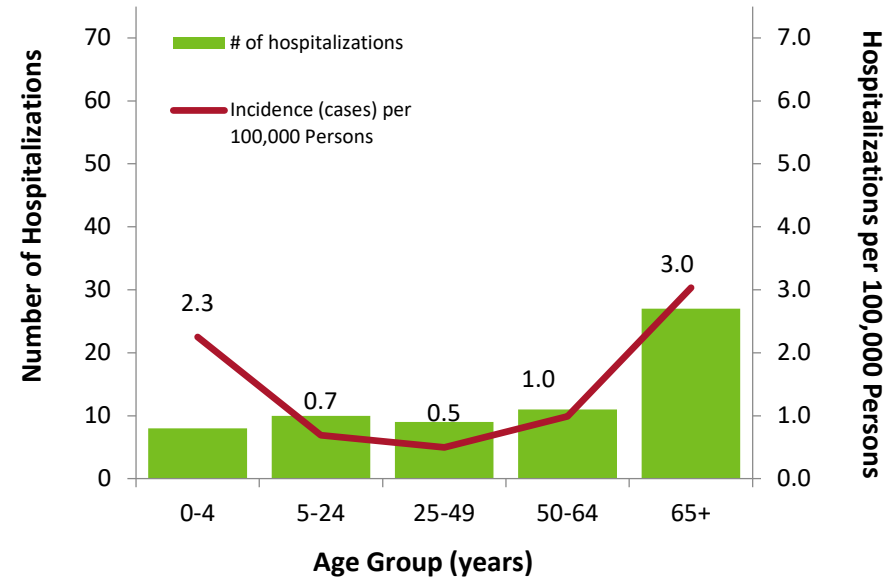
*Influenza Surveillance Network

Hospitalized Influenza Surveillance (continued)

Number of Influenza Hospitalizations and Incidence by Region, Minnesota
September 29, 2019 – November 16, 2019



Number of Influenza Hospitalizations and Incidence by Age, Minnesota
September 29, 2019 – November 16, 2019



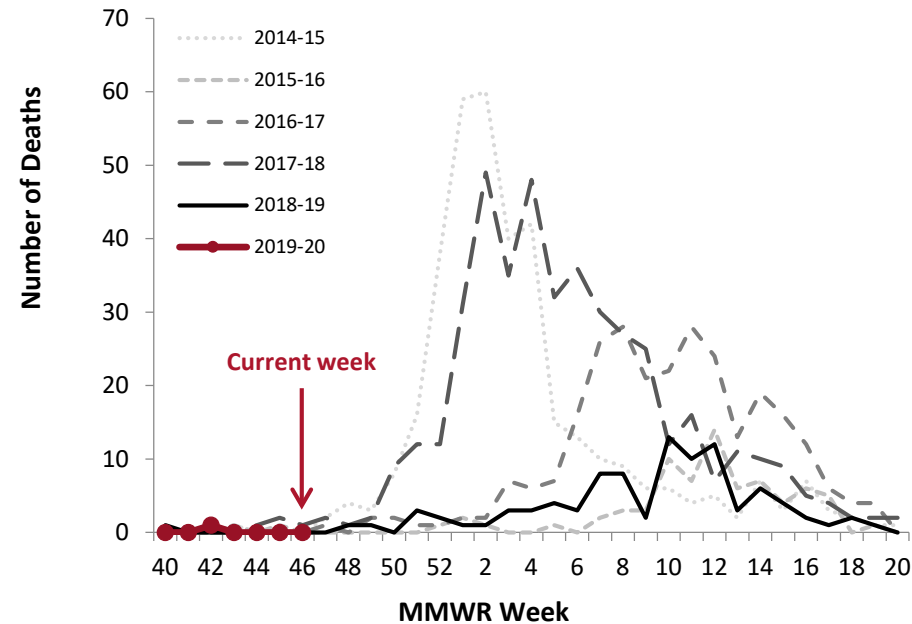
Region	Hospitalizations this week	Total (to date)
Central	2 (10%)	11 (17%)
Metro	15 (75%)	44 (68%)
Northeast	0 (0%)	0 (0%)
Northwest	0 (0%)	0 (0%)
South Central	0 (0%)	3 (5%)
Southeast	2 (10%)	5 (8%)
Southwest	0 (0%)	1 (2%)
West Central	1 (5%)	1 (2%)

Median age (years) at time of admission
60.0

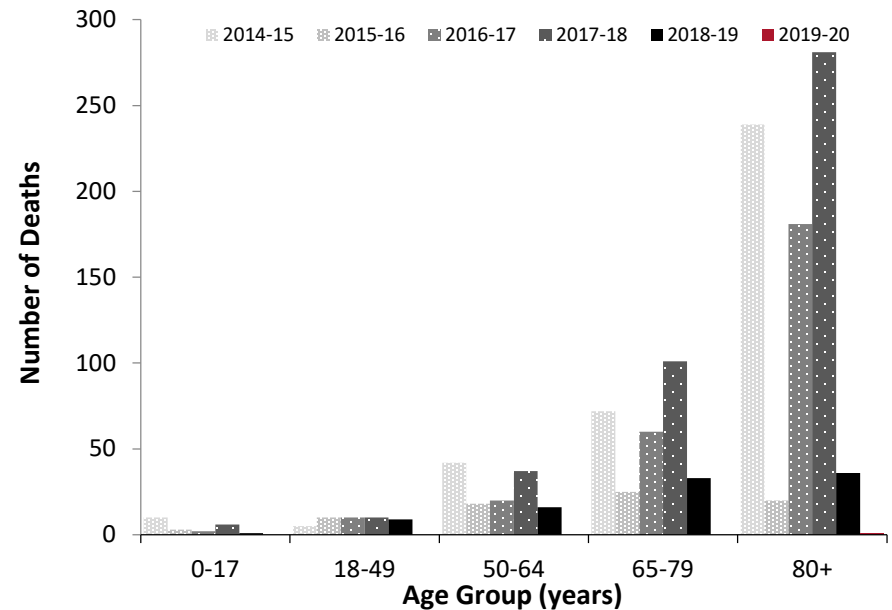
Influenza-Associated Death Surveillance

Influenza deaths are collected via reports from Minnesota's death certificate database, hospitals, and long-term care facilities. Decedents with influenza listed as a cause of or contributor to death, have recent laboratory confirmation of influenza, or are part of an ongoing influenza outbreak at a long-term care facility are reported to influenza surveillance. **Due to the need to confirm reports and reporting delays, consider current week data preliminary.**

Deaths Associated with Influenza by Season, Minnesota



Deaths Associated with Influenza by Age Group and Season, Minnesota



Season	Total deaths (historic)	Total pediatric (<18 years) deaths (historic)
2014-2015	368	10
2015-2016	76	3
2016-2017	273	2
2017-2018	440	6
2018-2019	95	1
2019-2020	1 (to date)	0 (to date)

Season	Median age (years) at time of death
2014-2015	85
2015-2016	68
2016-2017	86
2017-2018	85
2018-2019	75
2019-2020	--- (to date)

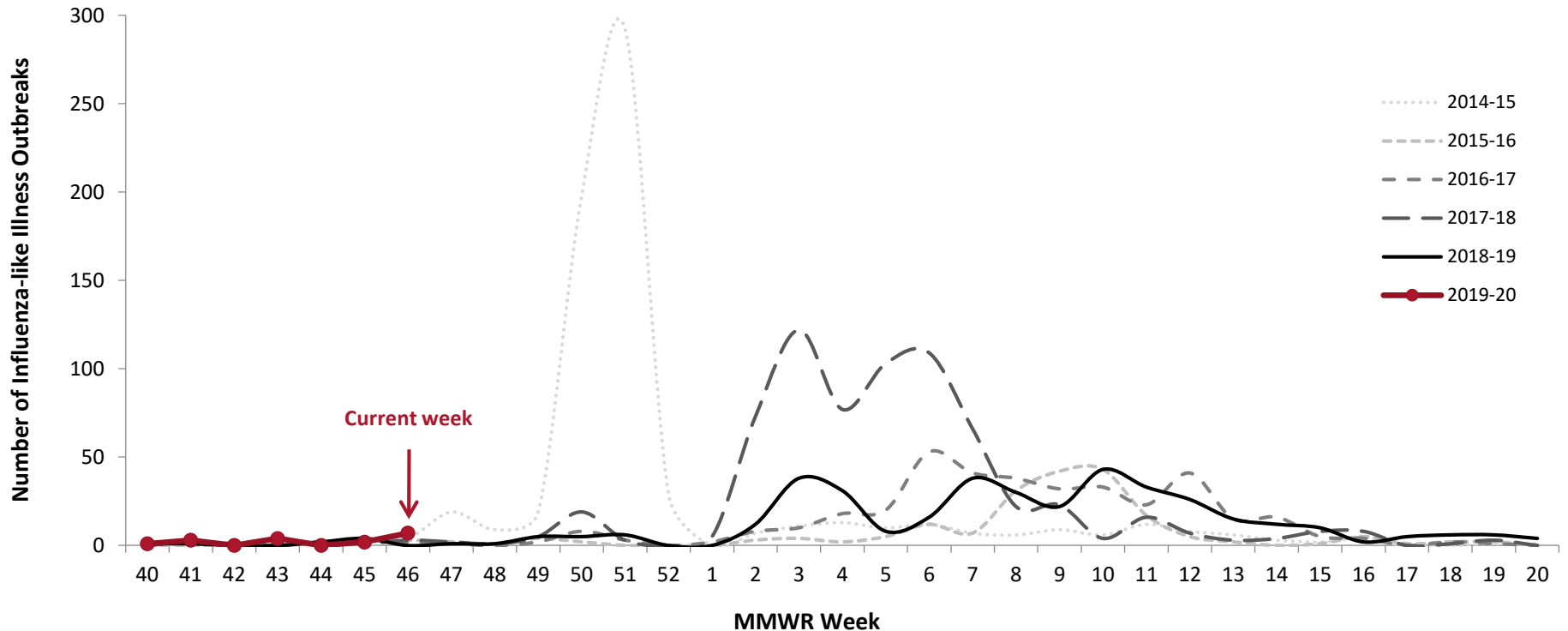
*Influenza Surveillance Network

Respiratory Disease Outbreak Surveillance

School Outbreaks

K-12 schools report an outbreak of influenza-like illness (ILI) when the number of students absent with ILI reaches 5% of total enrollment or three or more students with ILI are absent from the same elementary classroom.

Influenza-like Illness (ILI) in Schools by Season

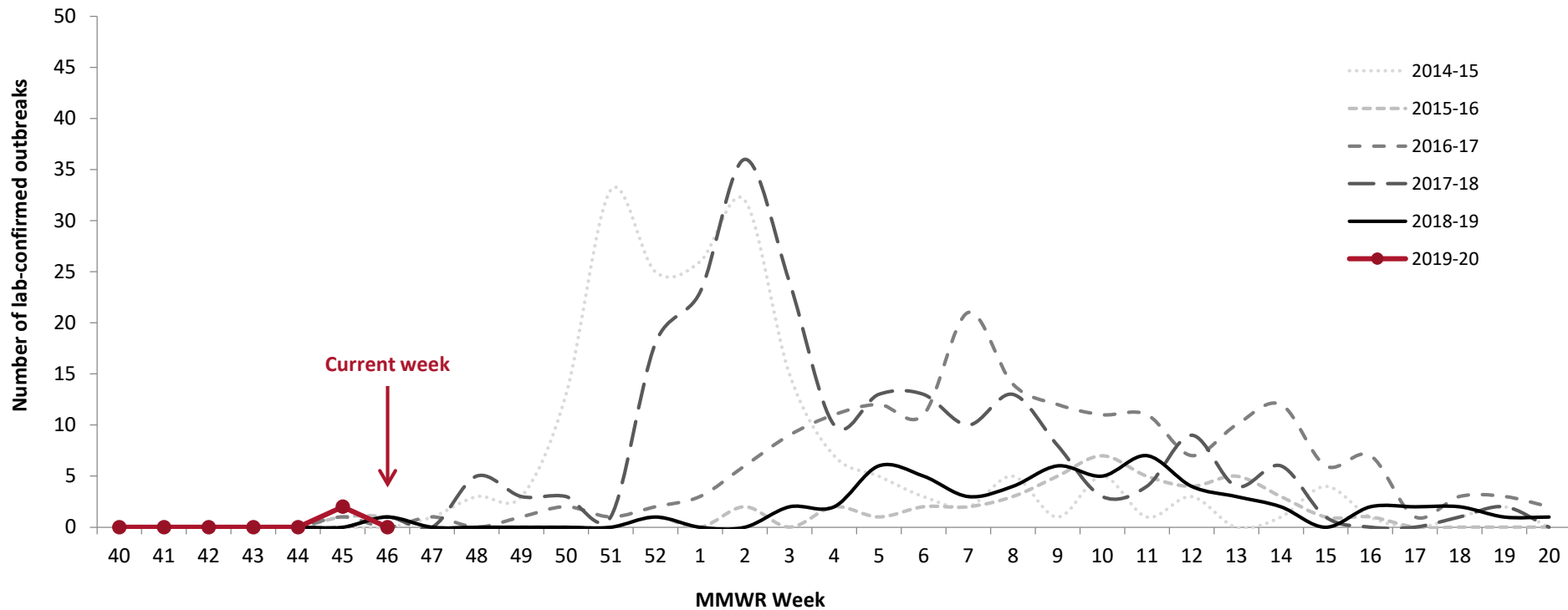


New school outbreaks this week	New school outbreaks last week	Total this season (to date)
7	2	17

Long-Term Care (LTC) Outbreaks

LTC facilities report to MDH when they suspect an outbreak of influenza in their facility. Laboratory-confirmed outbreaks are reported here.

Confirmed Influenza Outbreaks in LTC by Season

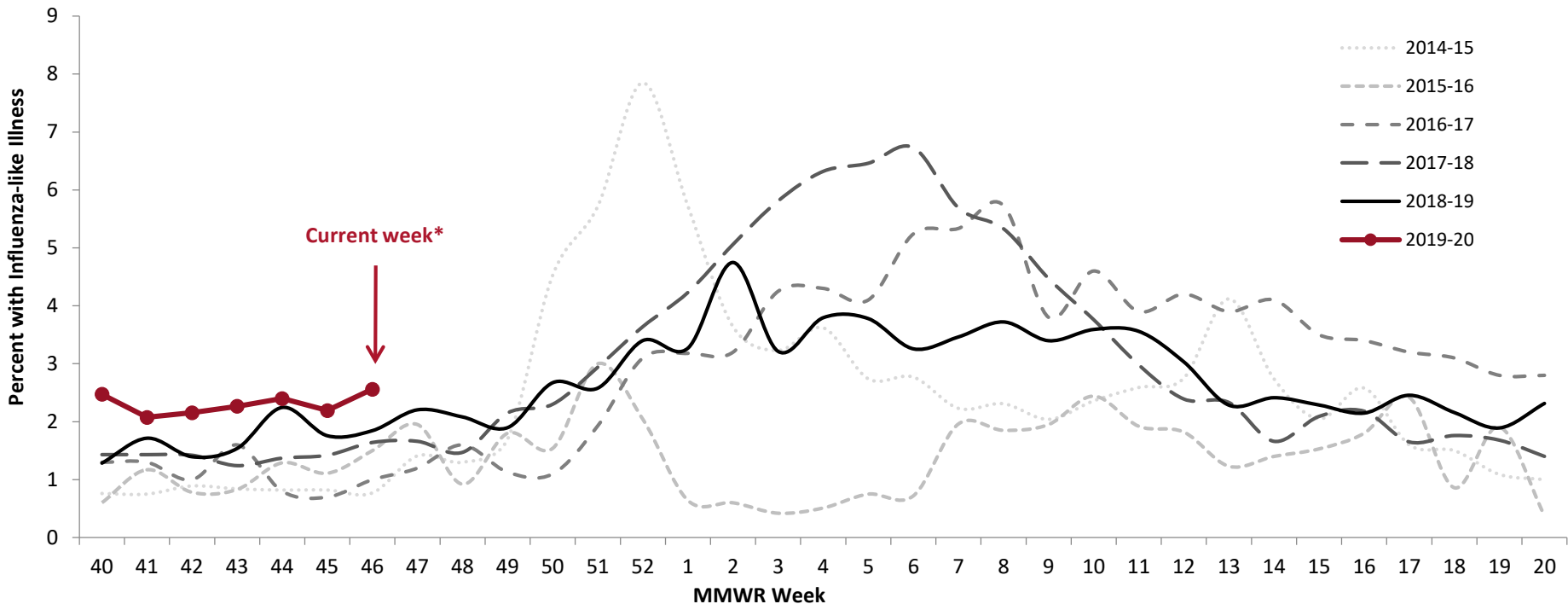


New LTC outbreaks this week	New LTC outbreaks last week	Total this season (to date)
0	2	2

Sentinel Provider Surveillance (Outpatients)

MDH collaborates with healthcare providers who report the total number of patients seen and the total number of those patients presenting to outpatient clinics with influenza-like illness.

Percentage of Persons Presenting to Outpatient Clinics with Influenza-Like Illness (ILI)



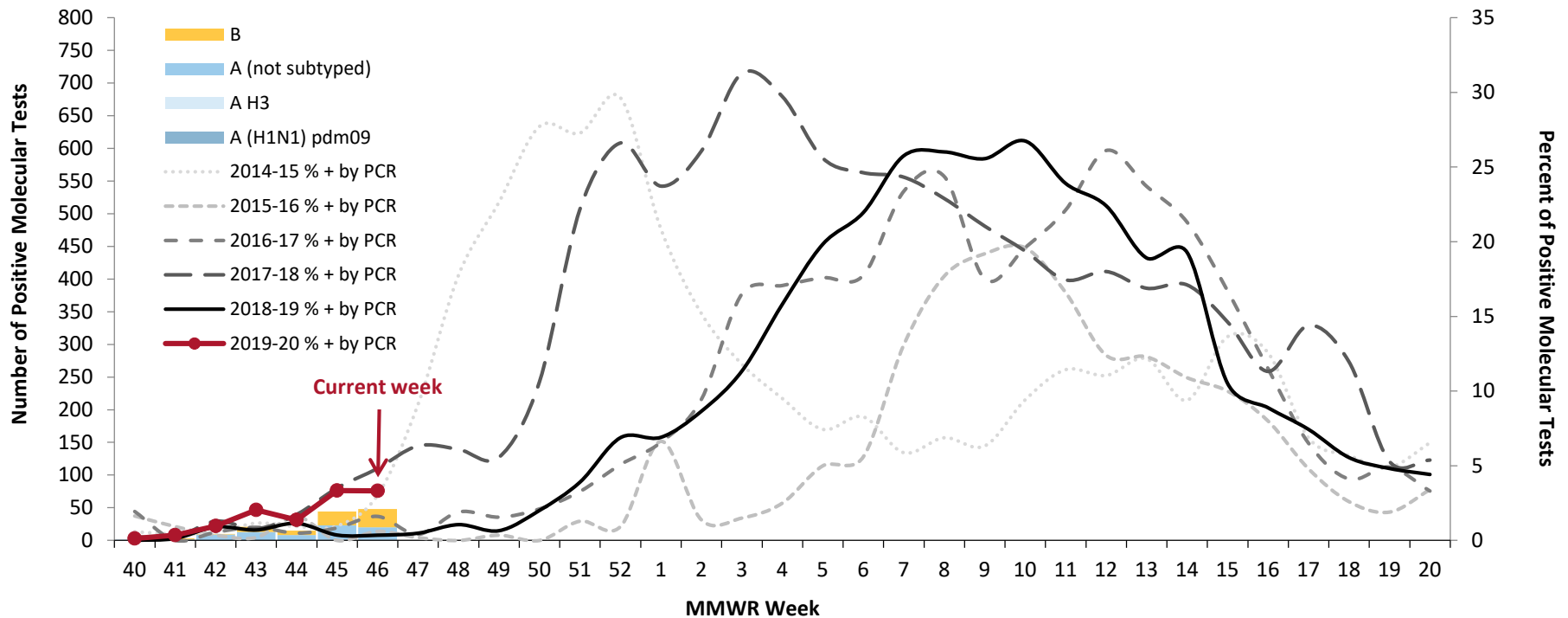
% of outpatients with ILI this week	% of outpatients with ILI last week
2.56%	2.19%

* Indicates current week-data may be delayed by 1 or more weeks

Laboratory Surveillance

The MN Lab System (MLS) Laboratory Influenza Surveillance Program is made up of more than 310 clinic- and hospital-based laboratories, voluntarily submitting testing data weekly. These laboratories perform rapid testing for influenza and Respiratory Syncytial Virus (RSV). Significantly fewer labs perform PCR testing for influenza and three also perform PCR testing for other respiratory viruses. MDH-PHL provides further characterization of submitted influenza isolates to determine the hemagglutinin serotype to indicate vaccine coverage. Tracking the laboratory results assists healthcare providers with patient diagnosis of influenza-like illness and provides an indicator of the progression of the influenza season as well as prevalence of disease in the community.

Specimens Positive for Influenza by Molecular Testing*, by Week



% molecular tests positive this week

3.31%

% molecular tests positive last week

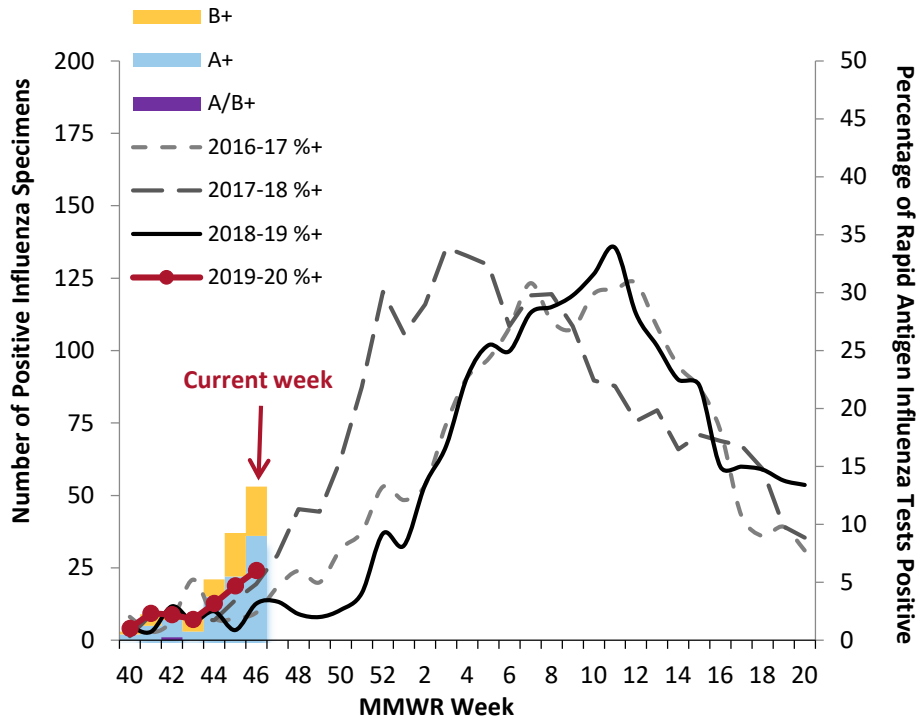
3.33%

* Beginning in 2016-17, laboratories report results for rapid molecular influenza tests in addition to RT-PCR results

Laboratory Surveillance (continued)

MLS Laboratories – Influenza Testing

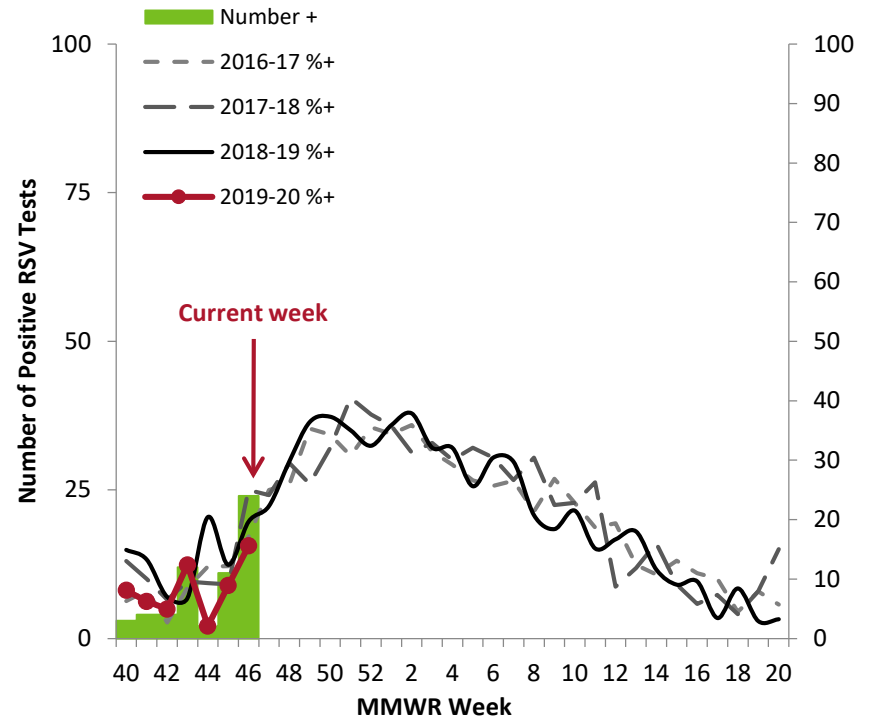
Specimens Positive by Influenza Rapid Antigen Test, by Week



Region	% rapid antigen influenza tests + (current week)
Central	6%
Metro	7%
Northeast	2%
Northwest	0%
South Central	0%
Southeast	----
Southwest	9%
West Central	0%
State (overall)	6%

MLS Laboratories – RSV Testing

Specimens Positive by RSV Rapid Antigen Test, by Week

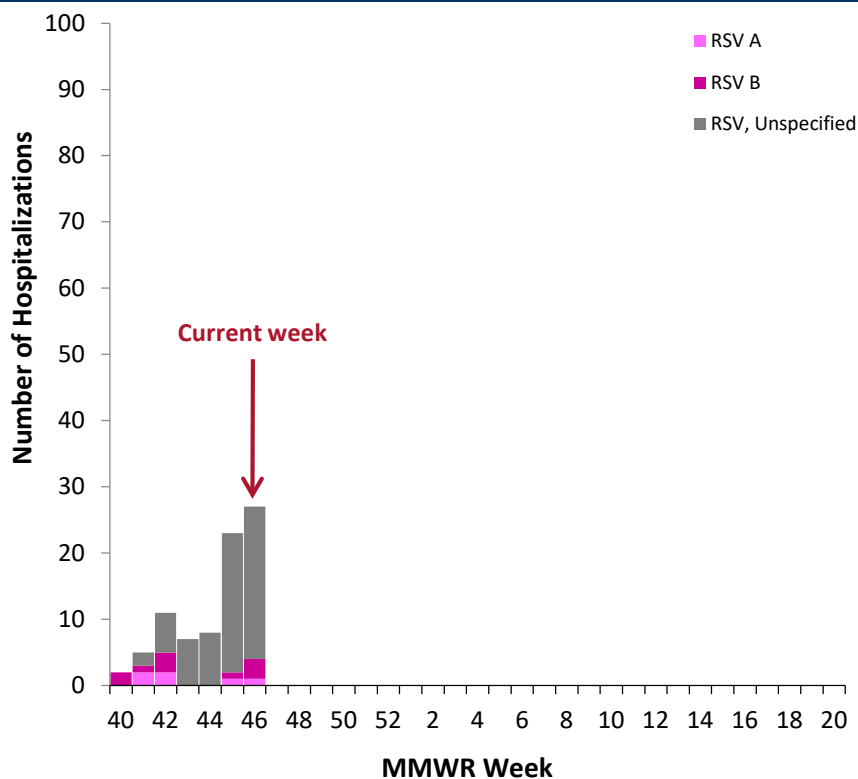


Region	% rapid antigen RSV tests + (current week)
Central	19%
Metro	17%
Northeast	16%
Northwest	0%
South Central	0%
Southeast	0%
Southwest	0%
West Central	----
State (overall)	16%

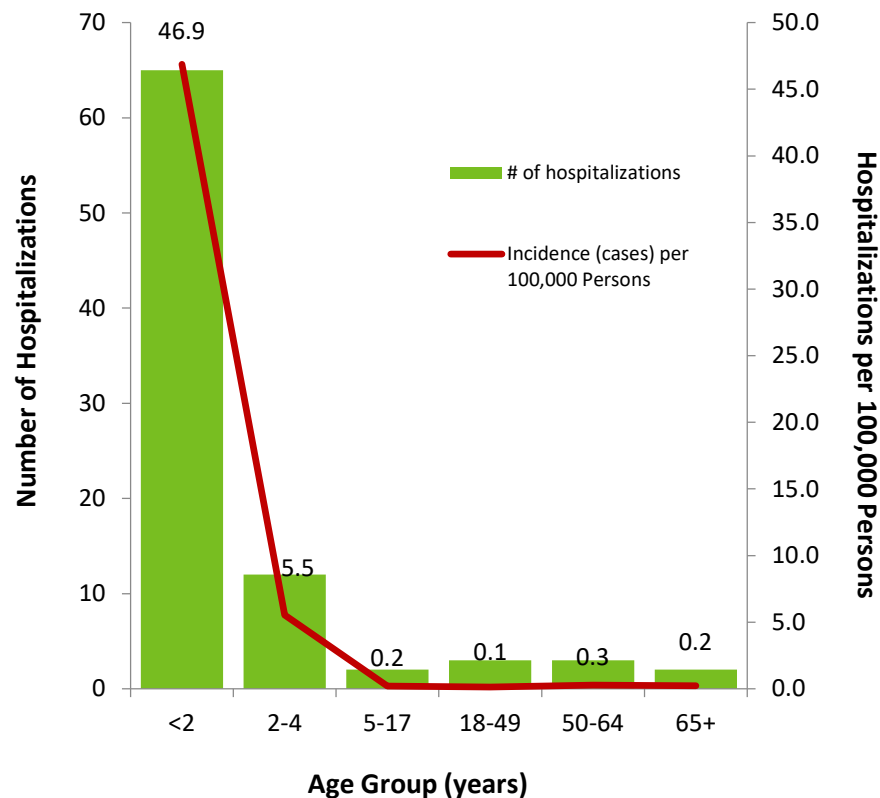
Hospitalized RSV Surveillance

Surveillance for respiratory syncytial virus (RSV) began in September 2016. Hospitalized inpatients of all ages who reside in the 7-county Twin Cities metropolitan area (Anoka, Carver, Dakota, Hennepin, Ramsey, Scott, and Washington) with laboratory-confirmed RSV are reportable. **Due to the need to confirm reports and reporting delays, consider current week data preliminary.**

Hospitalized RSV Cases by Subtype, Minnesota



Number of RSV Hospitalizations and Incidence by Age, Minnesota



Hospitalizations this week

27

Hospitalizations last week

23

Total hospitalizations

87

Median age at time of admission

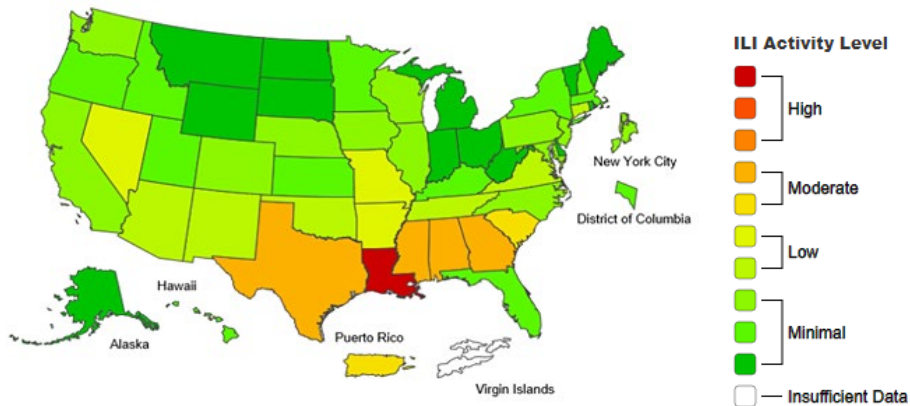
7 months

Weekly U.S. Influenza Surveillance Report

2019-2020 Influenza Season Week 45, ending November 9, 2019

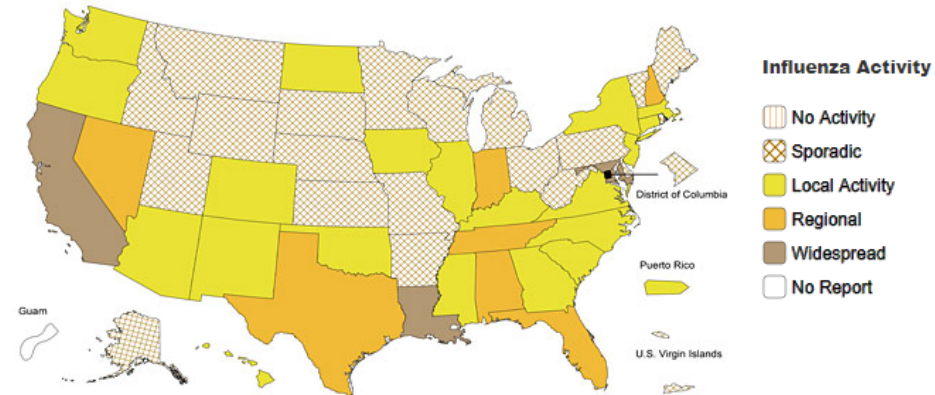
According to this week's FluView report, seasonal influenza activity in the United States is increasing.

Influenza-Like Illness (ILI) Activity: Outpatient Illness



The majority of jurisdictions experienced minimal ILI activity; however, Louisiana experienced high ILI activity and 14 jurisdictions experienced moderate or low ILI activity.

Geographic Spread of Influenza



The majority of jurisdictions reported sporadic or local activity. Ten states reported regional or widespread activity, and one state reported no activity.

Key Messages from CDC

- Nationally, ILI activity remains below baseline but parts of the country are seeing early increases in activity.
- There is significant cocirculation of influenza A(H3N2), A(H1N1)pdm09 and B/Victoria viruses with the predominant virus varying by region and age group.
- Flu vaccination is always the best way to prevent flu and its potentially serious complications. Most flu vaccines protect against 4 different flu viruses. Get vaccinated now.