

# Weekly U.S. Influenza Surveillance Report

A Weekly Influenza Surveillance Report Prepared by the Influenza Division

**Note:** CDC is tracking the COVID-19 pandemic in a weekly publication called COVID Data Tracker Weekly Review. (https://www.cdc.gov/coronavirus/2019-ncov/covid-data/covidview/)

### 2020-2021 Influenza Season for Week 26, ending July 3, 2021

All data are preliminary and may change as more reports are received.

A description of the CDC influenza surveillance system, including methodology and detailed descriptions of each data component is available on the surveillance methods (http://www.cdc.gov/flu/weekly/overview.htm) page.

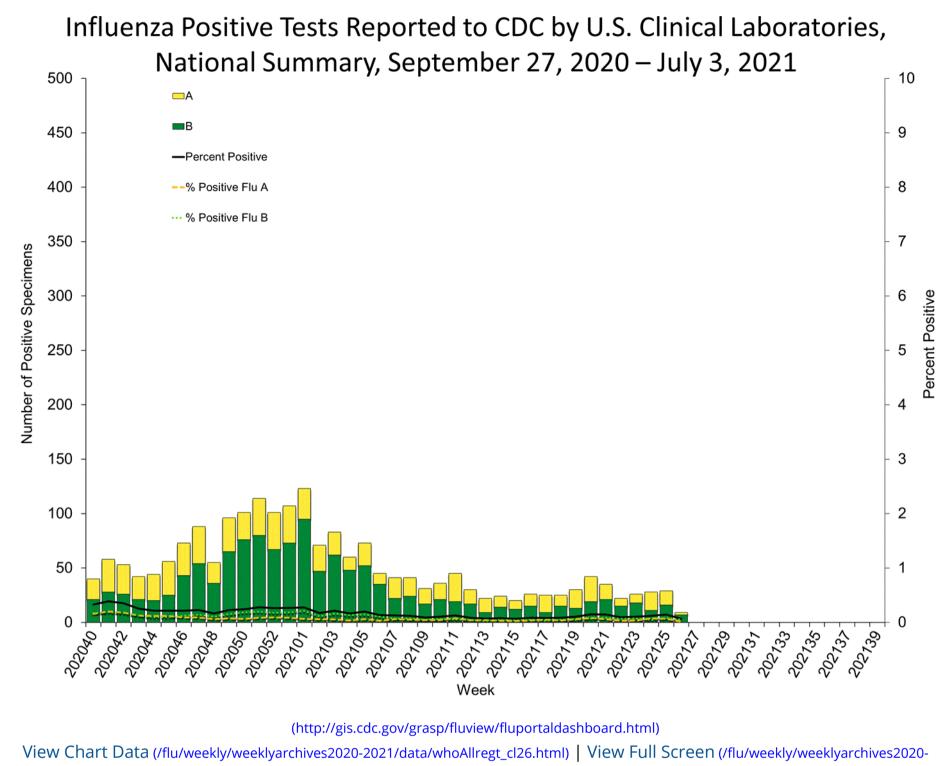
Additional information on the current and previous influenza seasons for each surveillance component are available on *FluView Interactive (https://www.cdc.gov/flu/weekly/fluviewinteractive.htm)*.

## U.S. Virologic Surveillance: (https://www.cdc.gov/flu/weekly/overview.htm#anchor\_1539281228772)

## **Clinical Laboratories**

Data from clinical laboratories (the percentage of specimens tested that are positive for influenza) are used to monitor whether influenza activity is increasing or decreasing.

https://www.cdc.gov/flu/weekly/

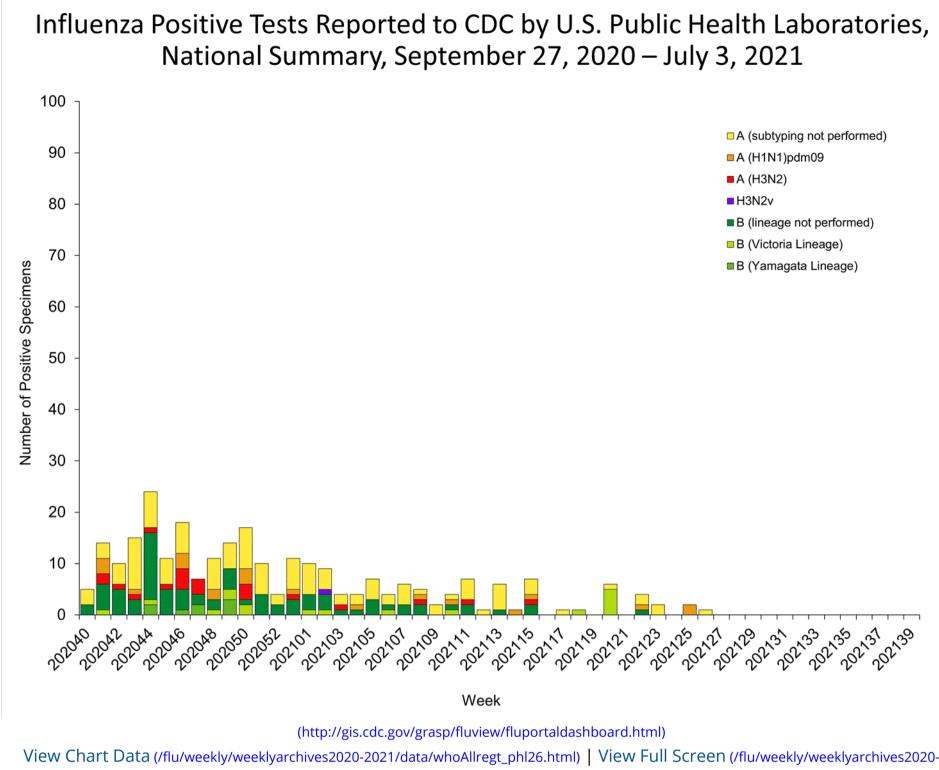


<sup>2021/</sup>WhoNPHL26.html)

## **Public Health Laboratories**

Data from public health laboratories are used to monitor the proportion of circulating viruses that belong to each influenza subtype/lineage.

https://www.cdc.gov/flu/weekly/



2021/WhoPHL26.html)

Additional virologic surveillance information for current and past seasons:

Surveillance Methods (https://www.cdc.gov/flu/weekly/overview.htm#anchor\_1539281228772) | FluView Interactive: National, Regional, and State Data (https://gis.cdc.gov/grasp/fluview/fluportaldashboard.html) or Age Data (https://gis.cdc.gov/grasp/fluview/flu\_by\_age\_virus.html)

## Outpatient Illness Surveillance (https://www.cdc.gov/flu/weekly/overview.htm#anchor\_1539281266932)

Please note, the U.S. Outpatient Influenza-like Illness Surveillance Network (ILINet) monitors outpatient visits for influenza-like illness (ILI), not laboratory-confirmed influenza, and will capture visits due to other respiratory pathogens, such as SARS-CoV-2, that present with similar symptoms. In addition, health care-seeking behaviors have changed dramatically during the COVID-19 pandemic. Many people are accessing the health care system in alternative settings, which may or may not be captured as a part of ILINet. Therefore, ILI data, including ILI activity levels, should be interpreted with caution. It is particularly important at this time to evaluate syndromic surveillance data, including that from ILINet, in the context of other sources of surveillance data to obtain a complete and accurate picture of both influenza and COVID-19 activity. CDC is tracking the COVID-19 pandemic in a weekly publication called COVID Data Tracker Weekly Review (https://www.cdc.gov/coronavirus/2019-ncov/covid-data/covidview.html).

### ILINet

Nationwide during week 26, 1.2% of patient visits reported through ILINet were due to ILI. This percentage is below the national baseline of 2.6%.

(http://gis.cdc.gov/grasp/fluview/fluportaldashboard.html)View Chart Data (current season only) (/flu/weekly/weeklyarchives2020-2021/data/senAllregt26.html) | View Full Screen (/flu/weekly/weeklyarchives2020-2021/ILI26.html)

### ILI Visits by Age Group

About 65% of ILINet participants provide both the number of patient visits for ILI and the total number of patient visits for the week broken out by age group. Data from this subset of providers are used to calculate the percentages of patient visits for ILI by age group. The percentages of visits for ILI reported in ILINet in week 26 remained stable (change of  $\leq 0.1\%$ ) for the all age groups (0–4 years, 5–24 years, 25–49 years, 50–64 years, and 65 years and older) compared with week 25.

https://www.cdc.gov/flu/weekly/

(http://gis.cdc.gov/grasp/fluview/fluportaldashboard.html)View Chart Data (/flu/weekly/weeklyarchives2020-2021/data/iliage26.html) | View Full Screen (/flu/weekly/weeklyarchives2020-2021/ILIAge26.html)

## ILI Activity Map

Data collected in ILINet are used to produce a measure of ILI activity\*

(https://www.cdc.gov/flu/weekly/overview.htm#anchor\_1571167821424) by state/jurisdiction and Core Based Statistical Areas (CBSA).

Activity Level	Number of Jurisdictions		Number of CBSAs	
	Week 26 (Week ending Jul. 3, 2021)	Week 25 (Week ending Jun. 26, 2021)	Week 26 (Week ending Jul. 3, 2021)	Week 25 (Week ending Jun. 26, 2021)
Very High	0	0	0	0
High	0	0	1	2
Moderate	0	0	2	1
Low	0	0	15	10
Minimal	54	54	533	582
Insufficient Data	1	1	378	334

\*Data collected in ILINet may disproportionally represent certain populations within a jurisdiction or CBSA, and therefore, may not accurately depict the full picture of influenza activity for the entire jurisdiction or CBSA. Differences in the data presented here by CDC and independently by some health departments likely represent differing levels of data completeness with data presented by the health department likely being the more complete.

Additional information about medically attended visits for ILI for current and past seasons:

Surveillance Methods (https://wcms-wp.cdc.gov/flu/weekly/overview.htm#anchor\_1539281266932) | FluView Interactive: National, Regional, and State Data (http://gis.cdc.gov/grasp/fluview/fluportaldashboard.html) or ILI Activity Map (https://gis.cdc.gov/grasp/fluview/main.html)

# Influenza-Associated Hospitalizations:

### (http://www.cdc.gov/flu/weekly/overview.htm#Hospitalization)

The Influenza Hospitalization Surveillance Network (FluSurv-NET) conducts population-based surveillance for laboratoryconfirmed influenza-related hospitalizations in select counties in 14 states and represents approximately 9% of the U.S. population. As in previous seasons, patients admitted for laboratory-confirmed influenza-related hospitalization after April 30, 2021, will not be included in FluSurv-NET. Data on patients admitted through April 30, 2021, will continue to be updated as additional information is received.

Additional hospitalization surveillance information for current and past seasons and additional age groups: Surveillance Methods (https://www.cdc.gov/flu/weekly/overview.htm#Hospitalization) | FluView Interactive: Rates by Age (https://gis.cdc.gov/GRASP/Fluview/FluHospRates.html) or Patient Characteristics (https://gis.cdc.gov/grasp/fluview/FluHospChars.html)

## National Center for Health Statistics (NCHS) Mortality Surveillance

### (https://www.cdc.gov/flu/weekly/overview.htm#anchor\_1539281356004)

Based on NCHS mortality surveillance data available on July 8, 2021, 6.2% of the deaths that occurred during the week ending July 3, 2021 (week 26), were due to pneumonia, influenza, and/or COVID-19 (PIC). This percentage is above the epidemic threshold of 5.7% for week 26. Among the 971 PIC deaths reported for this week (week 26), 333 had COVID-19 listed as an underlying or contributing cause of death on the death certificate, and none listed influenza, indicating that current PIC mortality is due primarily to COVID-19 and not influenza. The data presented are preliminary and may change as more data are received and processed.

(https://gis.cdc.gov/grasp/fluview/mortality.html)View Chart Data 🖾 (/flu/weekly/weeklyarchives2020-2021/data/NCHSData26.csv) | View Full Screen (/flu/weekly/weeklyarchives2020-2021/NCHS26.html)

Additional pneumonia and influenza mortality surveillance information for current and past seasons: Surveillance Methods (https://www.cdc.gov/flu/weekly/overview.htm#anchor\_1539281356004) | FluView Interactive (https://gis.cdc.gov/grasp/fluview/mortality.html)

# Influenza-Associated Pediatric Mortality

(https://www.cdc.gov/flu/weekly/overview.htm#anchor\_1571168571052)

No influenza-associated pediatric deaths were reported to CDC during week 26.

One influenza-associated pediatric death occurring during the 2020-2021 season has been reported to CDC.

(http://gis.cdc.gov/GRASP/Fluview/PedFluDeath.html) View Full Screen (/flu/weekly/weeklyarchives2020-2021/PedFlu26.html)

Additional pediatric mortality surveillance information for current and past seasons: Surveillance Methods (https://www.cdc.gov/flu/weekly/overview.htm#anchor\_1571168571052) | FluView Interactive (https://gis.cdc.gov/GRASP/Fluview/PedFluDeath.html)

## Additional National and International Influenza Surveillance Information

**FluView Interactive:** FluView includes enhanced web-based interactive applications that can provide dynamic visuals of the influenza data collected and analyzed by CDC. These FluView Interactive applications (http://www.cdc.gov/flu/weekly/fluviewinteractive.htm) allow people to create customized, visual interpretations of influenza data, as well as make comparisons across flu seasons, regions, age groups and a variety of other demographics.

National Institute for Occupational Safety and Health: Monthly surveillance data on the prevalence of health-related

workplace absenteeism among full-time workers in the United States are available from NIOSH

(https://www.cdc.gov/niosh/topics/absences/default.html).

**U.S. State and local influenza surveillance:** Select a jurisdiction below to access the latest local influenza information.

Alabama (http://adph.org/influenza/)

Alaska (http://dhss.alaska.gov/dph/Epi/id/Pages/influenza/flui

Colorado (https://www.colorado.gov/pacific/cdphe/influenza)

Connecticut (https://portal.ct.gov/DPH/Epidemiology-and-Err

Georgia (https://dph.georgia.gov/epidemiology/influenza/flu-activity-georgia)	Hawaii (http://health.hawaii.gov/docd/resources/reports/influ
lowa (http://idph.iowa.gov/influenza/surveillance)	Kansas (http://www.kdheks.gov/flu/surveillance.htm)
Maryland (https://phpa.health.maryland.gov/influenza/fluwatch/)	Massachusetts (https://www.mass.gov/influenza)
Missouri (http://health.mo.gov/living/healthcondiseases/communicable/influenza/reports.php)	Montana (http://dphhs.mt.gov/publichealth/cdepi/diseases/ir
New Jersey (http://www.nj.gov/health/cd/topics/flu.shtml)	New Mexico (https://nmhealth.org/about/erd/ideb/isp/)
Ohio (http://www.flu.ohio.gov)	Oklahoma (https://www.ok.gov/health/Prevention_and_Preparedness/Acu
South Carolina (http://www.scdhec.gov/Health/DiseasesandConditions/InfectiousDiseases/Flu/FluData/)	South Dakota (https://doh.sd.gov/diseases/infectious/flu/su
Vermont (http://www.healthvermont.gov/immunizations-infectious- disease/influenza/flu-activity-and-surveillance)	Virginia (http://www.vdh.virginia.gov/epidemiology/influenza-
Wyoming (https://health.wyo.gov/publichealth/infectious-disease-epidemiology- unit/disease/influenza/)	New York City (http://www1.nyc.gov/site/doh/providers/hea

#### World Health Organization:

Additional influenza surveillance information from participating WHO member nations is available through FluNet 🗹 (http://www.who.int/influenza/gisrs\_laboratory/flunet/en/index.html) and the Global Epidemiology Reports. 🗹 (http://www.who.int/influenza/surveillance\_monitoring/en/)

#### WHO Collaborating Centers for Influenza:

Australia 🗹 (http://www.influenzacentre.org/surveillance\_samplesreceived.htm), China 🗹 (http://www.chinaivdc.cn/cnic/), Japan 🗹 (http://idsc.nih.go.jp/index.html), the United Kingdom 🗹 (https://www.crick.ac.uk/research/worldwide-influenza-centre), and the United States (http://www.cdc.gov/flu/) (CDC in Atlanta, Georgia)

#### Europe:

The most up-to-date influenza information from Europe is available from WHO/Europe and the European Centre for Disease Prevention and Control 🖸 (http://www.flunewseurope.org/).

#### Public Health Agency of Canada:

The most up-to-date influenza information from Canada is available in Canada's weekly FluWatch report [] (http://www.phacaspc.gc.ca/fluwatch/).

#### Public Health England:

The most up-to-date influenza information from the United Kingdom is available from Public Health England 🗹 (http://www.hpa.org.uk/Topics/InfectiousDiseases/InfectionsAZ/SeasonalInfluenza/).

Any links provided to non-Federal organizations are provided solely as a service to our users. These links do not constitute an endorsement of these organizations or their programs by CDC or the Federal Government, and none should be inferred. CDC is not responsible for the content of the individual organization web pages found at these links.

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