

Stark County's Influenza Weekly Report

Week 14 (4/3/2022 — 4/9/2022)



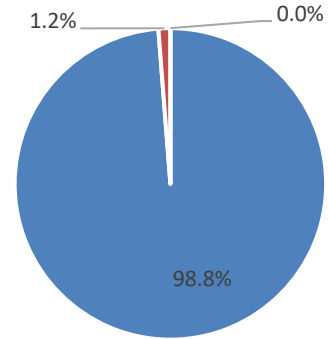
Public Health
Prevent. Promote. Protect.

During Week 14:

- Stark County had 7 influenza-associated hospitalizations.
- Nationally, 3 influenza-associated pediatric deaths were reported.
- During Week 14, the following specimens were collected nationally from public health laboratories:

Type/Subtype	Week 14	Week 14 %
Influenza A	362	100%
(H1N1) pdm09	0	0.0%
H3N2	264	100.0%
H3N2v	0	0.0%
The remainder were not subtyped		
Influenza B	0	0.0%
Yamagata	0	0.0%
Victoria	0	0.0%
The remainder were not subtyped		

% of Specimens by Type Among Stark County Reported Influenza Cases

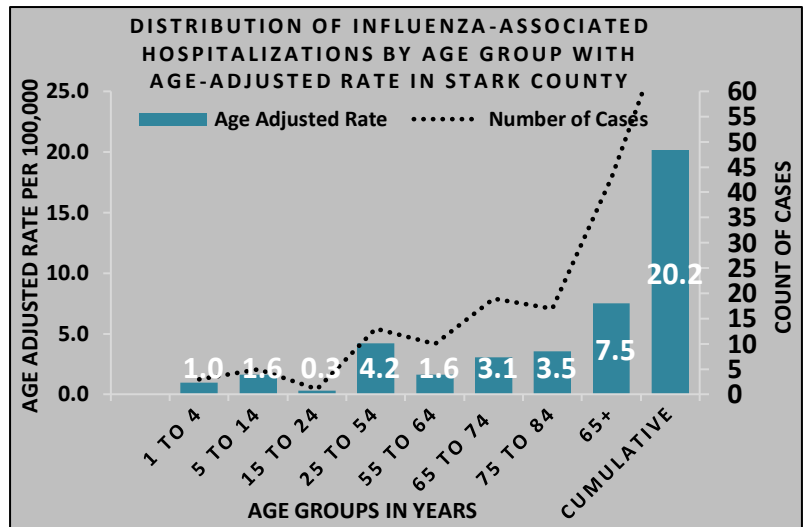


■ Influenza A % ■ Influenza B % ■ Influenza Unk %

So Far this Year:

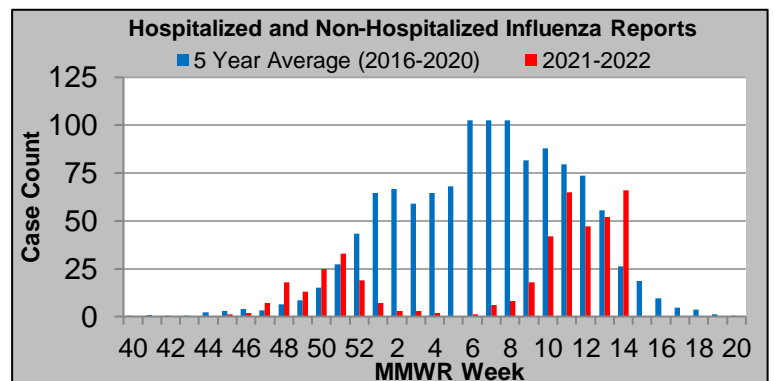
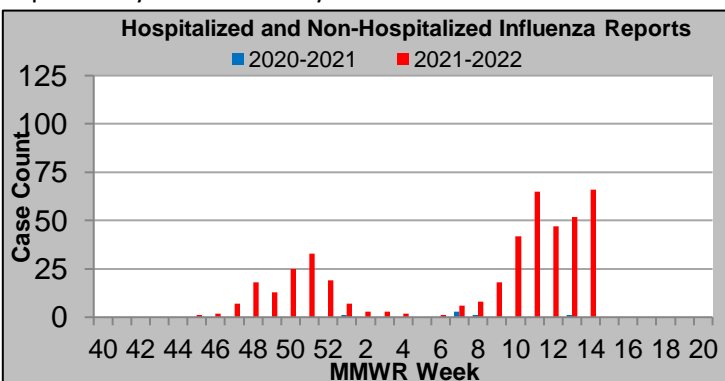
- There have been 84 influenza-associated hospitalizations in Stark County during this influenza season.
 - Hospitalizations range from 3 weeks to 100 years old with the median age being 68 years old.
- The national cumulative rate of influenza-associated hospitalizations is 8.9 per 100,000.
- Nationally, 19 influenza-associated pediatric deaths have been reported so far this year.
- Up to Week 14, the following specimens were collected nationally from public health laboratories:

Type/Subtype	YTD	YTD %
Influenza A	17,108	99.4%
(H1N1) pdm09	8	0.1%
H3N2	1	99.9%
H3N2v	1	<0.1%
The remainder were not subtyped		
Influenza B	103	0.6%
Yamagata	1	2.9%
Victoria	33	97.1%
The remainder were not subtyped		



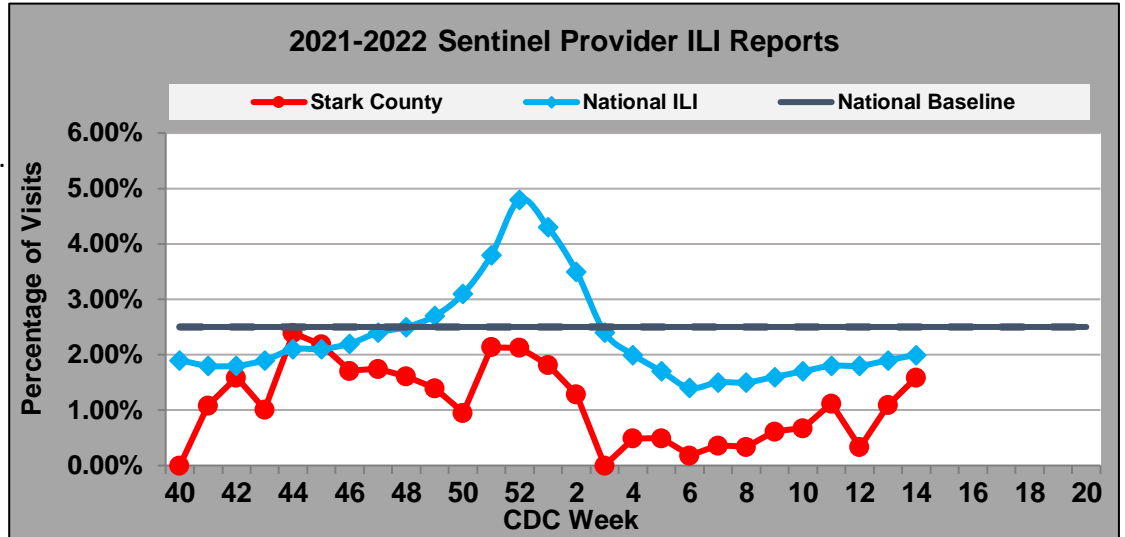
Graph 1A and 1B: Hospitalized and Non-Hospitalized Influenza Cases Reported to the Local Health Department.

There were 66 cases of hospitalized and non-hospitalized influenza reported for Week 14 in Stark County. Last year, there were 0 cases reported during this week. Stark County has reported 438 cases so far this year compared to the 6 cases reported by this time last year.



Graph 2: Sentinel Provider Reported Influenza Like Illness (ILI) in Stark County.

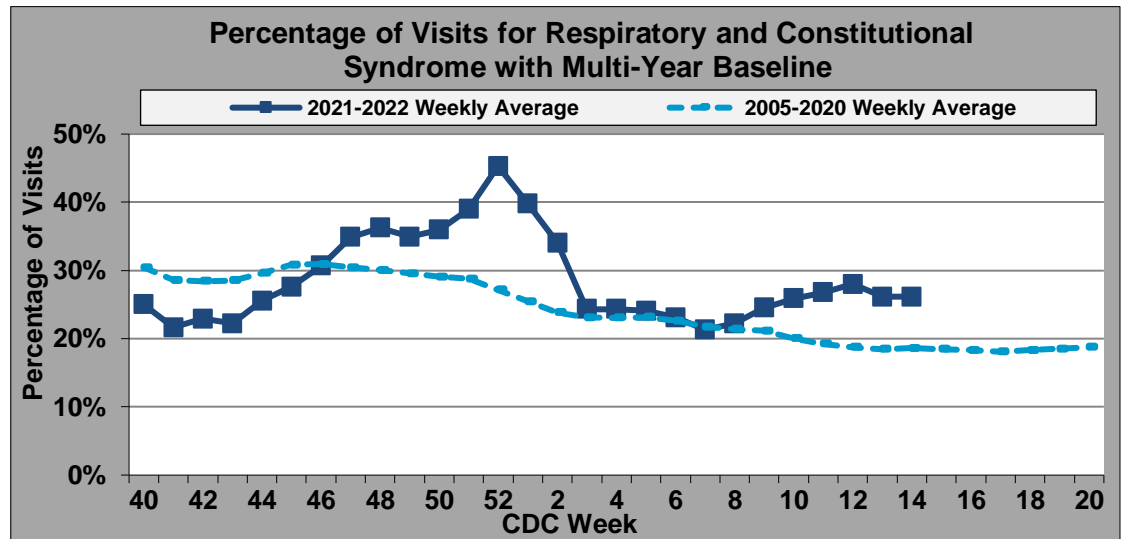
- ◆ During Week 14, Stark County Sentinel Providers reported that 1.59% of office visits were due to ILI. The national reports show that 2.0% of outpatient visits are due to ILI, which is below the national 2.5% baseline.



Graph 3: Emergency Department Visits for Respiratory and Constitutional Syndromes.

(Source: Health Monitoring Systems, EpiCenter, Hospital and Stat Care Patient Registration Surveillance System)

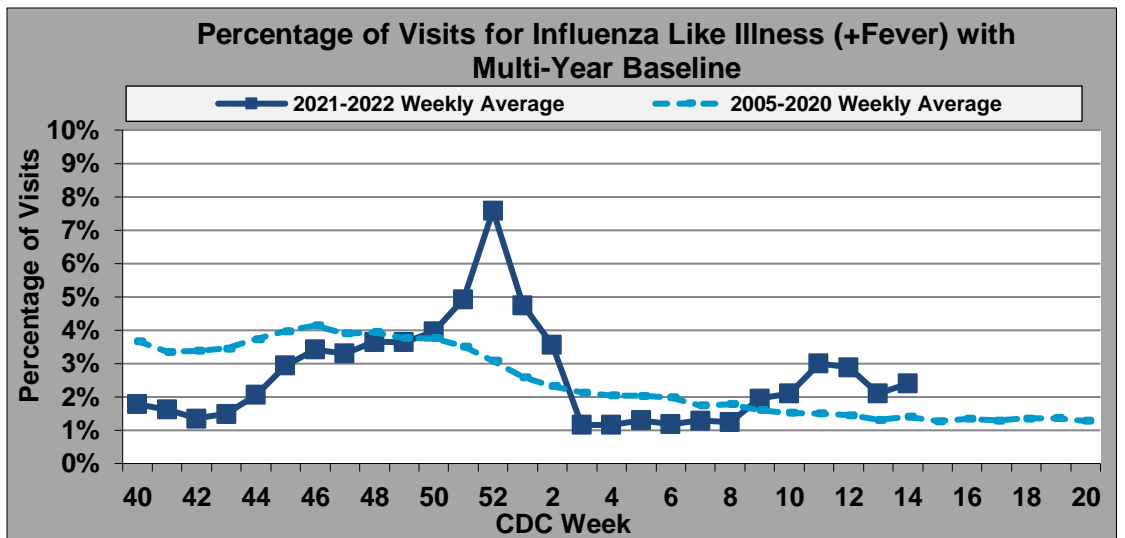
- ◆ ED and Stat Care visits for respiratory and constitutional syndrome were reported at 26.14% of ED visits, which was above the multi-year baseline average during Week 14.



Graph 4: Emergency Department (ED) Visits for Influenza Like Illness (+Fever).

(Source: Health Monitoring Systems, EpiCenter, Hospital and Stat Care Patient Registration Surveillance System)

- ◆ ED and Stat Care visits for ILI + Fever were reported at 2.40% of ED visits, which was above the multi-year baseline average during Week 14.

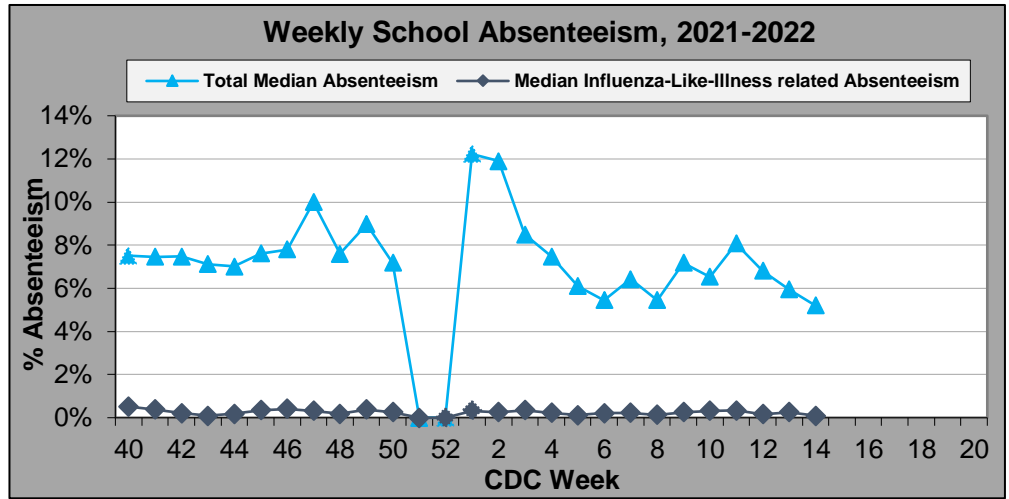


- All data presented in this weekly report are preliminary and may change as additional information is received.
- Multiyear averages included in this weekly report do not include the 2009/2010 H1N1 season.
- If you have any questions please contact Chelsea Sadinski 330.489.9914 or sadinskic@starkhealth.org or Amanda Archer at 330.438.4646 or aarcher@cantonhealth.org

Graph 5: Stark County School Absenteeism.

(Source: Voluntary reporting by multiple school districts throughout the county)

- ◆ During Week 14, Stark County schools reported a total median absenteeism of 5.20%. Absenteeism due to influenza-like-illness was reported at 0.08% of all absences.



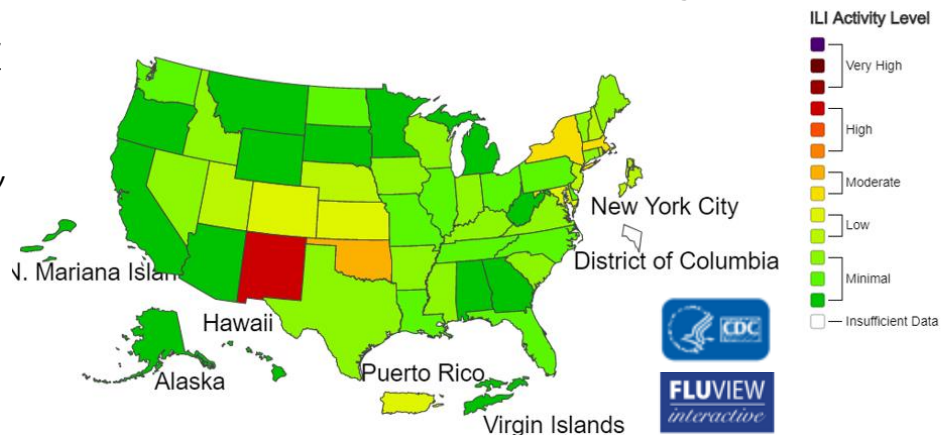
Map: ILI Activity Level Indicator Determined by Data Reported to ILINet.

(Data collected in ILINet may disproportionately 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.)

**A Weekly Influenza Surveillance Report Prepared by the Influenza Division
Influenza-Like Illness (ILI) Activity Level Indicator Determined by Data Reported to ILINet**

This system monitors visits for ILI (fever and cough or sore throat), not laboratory confirmed influenza and may capture patient visits due to other respiratory pathogens that cause similar symptoms.

2021-2022 Influenza Season Week 14 ending April 09, 2022



Viruses circulating vs. Viruses in 2021-2022 Influenza Season Vaccine:

According to an MMWR Report published on March 11th, 2022, this year’s influenza vaccine is 16% effective at preventing laboratory-confirmed, mild/moderate (outpatient) medically attended influenza (95% Confidence Interval [CI]= -16% to 39%). This is from data collected on 3,636 children and adults enrolled in the U.S Influenza Vaccine Effectiveness Network (U.S Flu VE Network) during October 4, 2021- February 12, 2022. The CDC routinely recommends that health care providers continue to administer influenza vaccines to persons ages 6 months and older as long as influenza viruses are circulating, as the vaccine can prevent serious outcomes (<https://www.cdc.gov/mmwr/volumes/71/wr/mm7110a1.htm>).



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