Quick facts are below. See full report on pages 1-10 for details.

**Flu activity in Washington is currently**

Low

**Number of reported lab-confirmed deaths**

2021-2022 season to date

3 deaths

**Most common type this week**

NA

**How do you stop the spread of flu?**

Get vaccinated! After getting vaccinated, also:

1. Wash your hands often
2. Cover your cough
3. Stay home when you’re sick

**More information:**

Learn about flu and flu activity in Washington:

[www.knockoutflu.org](http://www.knockoutflu.org)

[National flu report](https://www.cdc.gov/flu/weekly/summary.htm) from the CDC

Washington [flu resources for providers](https://www.wa.gov/washington-state-department-of-health/careers/)

Read detailed Washington weekly flu report following this page.


To request this document in another format, call 1-800-525-0127. Deaf or hard of hearing customers, please call 711 (Washington Relay) or email civil.rights@doh.wa.gov.
Washington State Influenza Update
Week 4: January 23 - January 29, 2022
Washington State Department of Health, Communicable Disease Epidemiology

Please note all data are preliminary and may change as data are updated.
Due to the COVID-19 pandemic, data reported from the various influenza surveillance systems may not represent an accurate reflection of influenza activity. Results should be interpreted with caution, especially where comparisons are made to previous influenza seasons.

State Summary: Flu activity is low
- Three lab-confirmed influenza deaths have been reported for the 2021-2022 season to date.
- One influenza-like illness outbreak in a long term care facility has been reported for the 2021-2022 season to date.
- During week 4, 2.1 percent of visits among Influenza-like illness Network participants were for influenza-like illness, above the baseline of 1.8 percent.
- During week 4, 0 percent of specimens tested by WHO/NREVSS collaborating laboratories in Washington were positive for influenza.
- Influenza was not reported to the ILINet surveillance system during week 4.

Influenza Laboratory Surveillance Data

Laboratory Data: World Health Organization (WHO) & National Respiratory and Enteric Virus Surveillance System (NREVSS) Data Reported to CDC

CDC has generated separate graphs of data reported to CDC by public health laboratories (Figure 1) and commercial laboratories (Figure 2). Table 1 combines the data from the public health and commercial laboratories.

<table>
<thead>
<tr>
<th>Week</th>
<th>A (H1)</th>
<th>A (2009 H1N1)</th>
<th>A (H3N2)</th>
<th>A (Unable to Subtype)</th>
<th>A (Subtyping not performed)</th>
<th>B</th>
<th>BYam</th>
<th>BVic</th>
<th>Total Tested</th>
<th>% Flu Positive</th>
</tr>
</thead>
<tbody>
<tr>
<td>01</td>
<td>0</td>
<td>0</td>
<td>3</td>
<td>0</td>
<td>14</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>5,333</td>
<td>0.3</td>
</tr>
<tr>
<td>02</td>
<td>0</td>
<td>0</td>
<td>2</td>
<td>0</td>
<td>11</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>4,806</td>
<td>0.3</td>
</tr>
<tr>
<td>03</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>2</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>3,618</td>
<td>0.1</td>
</tr>
<tr>
<td>04</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>2,846</td>
<td>0.0</td>
</tr>
</tbody>
</table>
Figure 1: Influenza Positive Tests Reported to CDC, WA Public Health Laboratories

Figure 2: Influenza Positive Tests Reported to CDC, WA Commercial Laboratories
Outpatient Influenza-like Illness Surveillance

Influenza-like Illness Surveillance By Region
ILI is defined as fever (temp 100°F/37.8°C or higher) plus cough and/or sore throat. During week 4, 69 sentinel providers in Washington reported data through the U.S. Outpatient Influenza-like Illness Surveillance Network (ILINet). Of 33,642 visits reported, 690 (2.1%) were due to ILI, above the baseline of 1.8%.

It should be noted that in addition to the overarching impacts of COVID-19 on influenza surveillance systems, interpretation of ILINet data for the 2021-2022 influenza season should take into account the following COVID-19 impacts: changes in the health seeking behavior at ILINet sentinel sites, changes to provider swabbing at ILINet sentinel sites due to the availability of telehealth and respiratory clinics, and limited ability to distinguish between ILI and COVID-19 symptoms.

Figure 3 shows the percent of Emergency Department visits for a chief complaint of ILI or a discharge diagnosis of Influenza for each geographic region in Washington state.

Regions:
West-Northwest: Clallam, Grays Harbor, Jefferson, Kitsap, Lewis, Mason, Pacific, Thurston
Southwest: Clark, Cowlitz, Skamania, Wahkiakum
Puget Sound: King, Pierce
North: Island, San Juan, Skagit, Snohomish, Whatcom
Central: Benton, Chelan, Douglas, Franklin, Grant, Kittitas, Klickitat, Okanogan, Walla Walla, Yakima
East: Adams, Asotin, Columbia, Ferry, Garfield, Lincoln, Pend Oreille, Spokane, Stevens, Whitman

Figure 3: Percent of Emergency Department Visits for ILI by Region, Washington
Outpatient Influenza-like Illness Surveillance Network (ILINet) Data

In Figure 4, the baseline is for Region 10 (Alaska, Idaho, Oregon, and Washington). For the 2021-2022 season, the baseline is calculated differently than in previous seasons.

http://www.cdc.gov/flu/weekly/overview.htm

Figure 4: Percentage of ILI Visits Reported by Sentinel Providers, Washington, 2021-2022

Table 2: Number of ILI Visits Reported by Sentinel Providers by Age Group, Washington

<table>
<thead>
<tr>
<th>Week</th>
<th>Sentinel Providers</th>
<th>Age 0-4</th>
<th>Age 5-24</th>
<th>Age 25-49</th>
<th>Age 50-64</th>
<th>Over 64</th>
<th>Total ILI</th>
<th>Total Patients</th>
<th>Percent ILI</th>
</tr>
</thead>
<tbody>
<tr>
<td>01</td>
<td>70</td>
<td>190</td>
<td>359</td>
<td>555</td>
<td>191</td>
<td>72</td>
<td>1,367</td>
<td>41,049</td>
<td>3.3</td>
</tr>
<tr>
<td>02</td>
<td>70</td>
<td>156</td>
<td>340</td>
<td>516</td>
<td>150</td>
<td>63</td>
<td>1,225</td>
<td>40,451</td>
<td>3.0</td>
</tr>
<tr>
<td>03</td>
<td>70</td>
<td>138</td>
<td>234</td>
<td>287</td>
<td>94</td>
<td>47</td>
<td>800</td>
<td>31,384</td>
<td>2.5</td>
</tr>
<tr>
<td>04</td>
<td>69</td>
<td>123</td>
<td>188</td>
<td>246</td>
<td>87</td>
<td>46</td>
<td>690</td>
<td>33,642</td>
<td>2.1</td>
</tr>
</tbody>
</table>
Influenza-like Illness Syndromic Surveillance Data

ESSENCE Syndromic Surveillance Data

Figure 5 shows the proportion of visits at a subset of emergency departments across Washington for a chief complaint of influenza-like illness, or discharge diagnosis of influenza, by CDC week. For this purpose, ILI is defined as “influenza” or fever with cough or fever with sore throat.

It should be noted that in addition to the overarching impacts of COVID-19 on influenza surveillance systems, interpretation of syndromic surveillance data for the 2021-2022 influenza season should take into account the following COVID-19 impacts: changes in the health seeking behavior at syndromic surveillance sites and limited ability to distinguish between ILI and COVID-19 symptoms.


Figure 5: Syndromic Surveillance, Percentage of Hospital Visits for a Chief Complaint of ILI, or Discharge Diagnosis of Influenza, by CDC Week, Washington, 2018-2022
Influenza-like Illness Outbreaks in Long Term Care Facilities

Long term care facilities are required to report all suspected and confirmed outbreaks to their local health jurisdiction per Washington Administrative Code (WAC) 246-101-305. Long-term care facilities are required to report the following:

• A sudden increase in acute febrile respiratory illness over the normal background rate (e.g., 2 or more cases of acute respiratory illness occurring within 72 hours of each other) OR

• Any resident who tests positive for influenza


Recommendations for prevention and control of influenza outbreaks in long-term care facilities are available at: http://www.doh.wa.gov/Portals/1/Documents/5100/fluoutbrk-LTCF.pdf

Local health jurisdictions in turn report long-term care facility influenza-like illness outbreaks to the Washington State Department of Health.

Since Week 40 of 2021, 1 influenza-like illness outbreaks in long-term care facilities have been reported to the Washington State Department of Health.
Other Causes of Respiratory Infections

During the 2021-2022 season, the following respiratory viruses were reported to the National Respiratory and Enteric Surveillance System (NREVSS). NREVSS does not capture COVID-19 testing data. For more information on COVID-19, see https://www.doh.wa.gov/Emergencies/Coronavirus.

For more information about NREVSS, see https://www.cdc.gov/surveillance/nrevss/index.html.

Figure 6: Respiratory and Enteric Viruses, Washington, 2021-2022 Season to Date

![Graph showing the number of positive specimens for various respiratory and enteric viruses over CDC weeks from 40 to 38.]

Table 3: Respiratory and Enteric Viruses, 2021-2022 Season to Date

<table>
<thead>
<tr>
<th>Week</th>
<th>Reporters</th>
<th>Respiratory Syncytial Virus</th>
<th>Human Parainfluenza Virus</th>
<th>Enteric Adenovirus</th>
<th>Human Metapneumovirus</th>
<th>Rhinovirus</th>
<th>Enterovirus</th>
<th>Influenza</th>
</tr>
</thead>
<tbody>
<tr>
<td>01</td>
<td>14</td>
<td>161</td>
<td>39</td>
<td>28</td>
<td>11</td>
<td>4</td>
<td>0</td>
<td>23</td>
</tr>
<tr>
<td>02</td>
<td>14</td>
<td>95</td>
<td>21</td>
<td>31</td>
<td>8</td>
<td>0</td>
<td>0</td>
<td>9</td>
</tr>
<tr>
<td>03</td>
<td>14</td>
<td>62</td>
<td>9</td>
<td>21</td>
<td>4</td>
<td>2</td>
<td>0</td>
<td>7</td>
</tr>
<tr>
<td>04</td>
<td>12</td>
<td>49</td>
<td>8</td>
<td>15</td>
<td>1</td>
<td>2</td>
<td>0</td>
<td>12</td>
</tr>
</tbody>
</table>

00   14  161  39  28  11  4  0  23  114  0  18
02   14  95   21  31  8  0  0  9  74   0  17
03   14  62   9  21  4  2  0  7  46   0  1
04   12  49   8  15  1  2  0  12  41   0  2
Laboratory Confirmed Influenza-Associated Deaths

Reported Laboratory-Confirmed Influenza Associated Deaths

Note that these counts reflect only deaths officially reported to the Washington State Department of Health. Each influenza season is reported as week 40 through week 39 of the following year.

Three laboratory-confirmed influenza deaths have been reported since week 40 of 2021, 3 influenza A, 0 influenza B, and 0 type unknown. Most deaths have occurred in people with underlying health conditions, or in people with no pre-existing conditions but who were elderly. No deaths have occurred in children.

Table 4: Count and rate of reported laboratory-confirmed influenza-associated deaths by age group, Washington, 2021-2022 season to date

<table>
<thead>
<tr>
<th>Age Group (in years)</th>
<th>Count of Deaths</th>
<th>Death Rate (per 100,000 population)</th>
</tr>
</thead>
<tbody>
<tr>
<td>0-4</td>
<td>0</td>
<td>0.00</td>
</tr>
<tr>
<td>5-17</td>
<td>0</td>
<td>0.00</td>
</tr>
<tr>
<td>18-29</td>
<td>0</td>
<td>0.00</td>
</tr>
<tr>
<td>30-49</td>
<td>0</td>
<td>0.00</td>
</tr>
<tr>
<td>50-64</td>
<td>0</td>
<td>0.00</td>
</tr>
<tr>
<td>65+</td>
<td>3</td>
<td>0.26</td>
</tr>
<tr>
<td>Total</td>
<td>3</td>
<td>0.04</td>
</tr>
</tbody>
</table>

Reported Laboratory-Confirmed Influenza-Associated Deaths, Past Seasons

For reference, lab-confirmed influenza death totals reported to the Department of Health for past seasons are presented below in Table 5. Note that for the purposes of tables 4 and 5, each influenza season runs from week 40 of one year to week 39 of the next (roughly October to October).

Past season summaries are available: http://www.doh.wa.gov/DataandStatisticalReports/DiseasesandChronicConditions/CommunicableDiseaseSurveillanceData/InfluenzaSurveillanceData

Note that influenza deaths are likely under-reported. The reasons for this under-reporting vary. Influenza may not be listed as a cause of death, influenza testing may not have occurred in a timely fashion to identify the virus, or may not have been performed at all, and lab-confirmed influenza deaths may not have been appropriately reported to public health.

CDC has published information about estimating seasonal influenza-associated deaths: http://www.cdc.gov/flu/about/disease/us_flu-related_deaths.htm?mobile=nocontent

Table 5: Count of Reported Laboratory-Confirmed Influenza-Associated Deaths, Past Seasons to Week 4 and Total

<table>
<thead>
<tr>
<th>Season</th>
<th>Count of Deaths as of Week 4 of Season</th>
<th>Count of Deaths Reported for the Entire Season (week 40 to week 39)</th>
</tr>
</thead>
<tbody>
<tr>
<td>2021-2022, to date</td>
<td>3</td>
<td>3</td>
</tr>
<tr>
<td>2020-2021</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>2019-2020</td>
<td>52</td>
<td>114</td>
</tr>
<tr>
<td>2018-2019</td>
<td>27</td>
<td>245</td>
</tr>
<tr>
<td>2017-2018</td>
<td>132</td>
<td>296</td>
</tr>
<tr>
<td>2016-2017</td>
<td>177</td>
<td>278</td>
</tr>
<tr>
<td>2015-2016</td>
<td>11</td>
<td>67</td>
</tr>
<tr>
<td>2014-2015</td>
<td>118</td>
<td>156</td>
</tr>
<tr>
<td>2013-2014</td>
<td>48</td>
<td>81</td>
</tr>
</tbody>
</table>
Additional Resources


Washington DOH Influenza Information for Public Health and Healthcare Providers: http://www.doh.wa.gov/ForPublicHealthAndHealthcareProviders/PublicHealthSystemResourcesAndServices/Immunization/InfluenzaFluInformation

Washington Local Health Department Influenza Surveillance Reports:
Clark County: https://clark.wa.gov/sites/default/files/media/document/2021-05/Clark%20County%20Weekly%20Influenza%20Update.pdf
King County: https://kingcounty.gov/depts/health/communicable-diseases/disease-control/influenza.aspx
Kitsap County: https://kitsappublichealth.org/Respiratory.pdf
Pierce County: https://www.tpchd.org/healthy-people/provider-resources/disease-information-for-providers/influenza/influenza-reports
Whatcom County: http://www.co.whatcom.wa.us/967/Influenza
Yakima County: http://www.yakimacounty.us/365/RSV-Flu-Stats