Timeframe: 11/14/2021 – 11/20/2021

- The Influenza-like Illness (ILI) activity level is minimal in Vermont. For a description of national influenza activity levels, please click here.

- The COVID-19 pandemic may influence influenza surveillance through changes to health seeking behaviors, influenza testing capacity, implemented hygiene and physical distancing measures, and staffing/routines in sentinel sites. Current influenza surveillance data should be interpreted with consideration of these factors. Follow these links for up-to-date Vermont and national COVID-19 data.

- On 11/24/2021, CDC released a Health Advisory regarding increasing Seasonal Influenza A (H3N2) Activity especially affecting young adults and institutions of higher education.

- From December 5-11, 2021 CDC will be observing National Influenza Vaccination Week, reminding everyone 6 months and older that there’s still time to get a flu vaccine.

Syndromic Surveillance

Vermont Emergency Room and Urgent Care Visits for Influenza-like Illness or Diagnosed Influenza

†The definition of Influenza-like Illness (ILI) was updated in September 2021 to no longer exclude patients with another diagnosed non-influenza illness. The 2021-22 season’s ILI data are not directly comparable to previous seasons due to this change.
Illness Definitions

Influenza-like Illness (ILI): determined using the patient’s chief complaint and/or discharge diagnosis. ILI is the presence of a fever equal to or exceeding 100°F with the addition of cough or sore throat. As of 2021, the ILI definition no longer excludes patients with another diagnosed non-influenza illness.

Influenza (Flu): determined by the patient’s chief complaint of a fever with the addition of cough or sore throat and a discharge diagnosis of influenza.

ILINet Sentinel Provider Data

This surveillance data is based upon reports submitted by ILINet, a nationwide group of medical offices that act as influenza sentinels. Sentinel providers report the number of patients with an influenza-like illness (ILI) seen by their practices each week.

Laboratory Data

The Health Department Lab performs subtype testing to determine the type of flu, for example H3, H1N1, etc. This information helps determine the circulating virus strains.

<table>
<thead>
<tr>
<th>Type and Subtype</th>
<th>This week: 11/14/21-11/20/21</th>
<th>Season so far: 10/03/20-11/20/21</th>
</tr>
</thead>
<tbody>
<tr>
<td>Flu A H3</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Flu A H1N1</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Flu B</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>
The National Respiratory and Enteric Virus Surveillance System (NREVSS) collects data on the number of PCR flu tests performed by participating Vermont labs and how many were positive. This helps determine flu activity in the community.

2% of PCR tests run this week were positive, an increase compared to 1.27% the previous week. During the 2021-22 season, 0.64% of flu PCR tests reported through NREVSS have been positive. Both Influenza A and B have been reported through NREVSS.

Reported Outbreaks
Institutional outbreaks of flu or influenza-like illness (excluding outbreaks of respiratory illnesses not caused by influenza viruses, e.g. COVID-19) are reportable to the Health Department.

Number of Influenza-like Illness and Influenza Lab Confirmed Outbreaks, 11/14/2021 – 11/20/2021

For more information: Hilary Fannin hilary.fannin@vermont.com