



Dallas County Health and Human Services 2022–2023 Influenza Surveillance Report

Week 45 ending November 12, 2022

Epidemiologic Summary

- Influenza activity is increasing in Dallas County with 15.6% of tests returning positive during week 45.
- One hundred six Influenza-associated hospitalizations were reported during week 45.
- No influenza-associated deaths were reported in week 45. No influenza-associated pediatric deaths have been reported during the 2022-2023 season in Dallas County.
- RSV activity is increased with 19.2% of tests from the surveillance site reported as positive.

Table 1. Summary of Influenza Surveillance from Dallas County Hospitals and Hospital Laboratories

Week Ending	10/1	10/8	10/15	10/22	10/29	11/5	11/12	9/25/22– Present
CDC Week	39	40	41	42*	43*	44*	45*	
Total Influenza PCR Tests	1,489	1,525	2,542	2,744	4,085	4,516	5,493	22,394
Number of positive PCR tests	13	15	36	60	166	367	514	1,171
Percent of positive PCR tests	0.9	1.0	1.4	2.2	4.1	8.1	9.4	
Total Rapid Influenza Diagnostic Tests	666	786	759	587	1,249	2,180	2,769	8,996
Number of positive RIDTs	51	67	66	51	248	541	771	1,795
Percent of positive RIDTs	7.7	8.5	8.7	8.7	19.9	24.8	27.8	
Total Influenza Tests Performed	2,155	2,311	3,301	3,331	5,334	6,696	8,262	31,390
Total positive influenza tests ¹	64	82	102	111	414	908	1,285	2,966
Percent positive influenza tests	3.0	3.5	3.1	3.3	7.8	13.6	15.6	
Positive influenza A tests ²	24	40	59	84	342	816	1,155	2,520
Positive influenza B tests	40	42	43	27	72	92	130	446
Non-differentiated influenza tests ³	0	0	0	0	0	0	0	0

¹ Includes positive rapid antigen, PCR, DFA, or culture results

² Further subtyping is performed only by select hospital laboratories for specimens referred to DCHHS by institutions for PCR-testing

³ Non-differentiated refers to rapid test results which did not differentiate between influenza A and B

Table 2. Summary of Influenza Hospitalizations and Deaths from Dallas County Hospitals, Vital Statistics and Medical Examiner's Office

Week Ending	10/1	10/8	10/15	10/22	10/29	11/5	11/12	9/25/22– Present
CDC Week	39	40	41	42*	43*	44*	45*	
Influenza hospitalizations ⁴	3	9	3	20	51	79	106	271
Influenza ICU admissions ⁴	0	2	1	3	5	11	20	42
Confirmed pediatric deaths ⁵	0	0	0	0	0	0	0	0
Confirmed adult deaths ⁶	0	0	0	0	0	0	0	0
Possible influenza-associated deaths ⁷	0	0	0	0	0	0	0	0

⁴ Reflects all influenza-associated hospitalizations reported from 10 hospitals located within Dallas County by week of any positive influenza tests.

⁵ Confirmed influenza-associated deaths of Dallas County residents <18 years of age

⁶ Confirmed influenza-associated deaths as defined by a positive laboratory test and any of the following: (1) death certificate denotation, (2) medical record documentation of compatible symptoms and clear progression from illness to death, or (3) determination by the County Medical Examiner's office (ME) of no alternate cause of death. Deaths occurring outside of influenza season require a positive PCR result in order to meet laboratory criteria. Positive RIDT will meet laboratory criteria after the start of flu season.

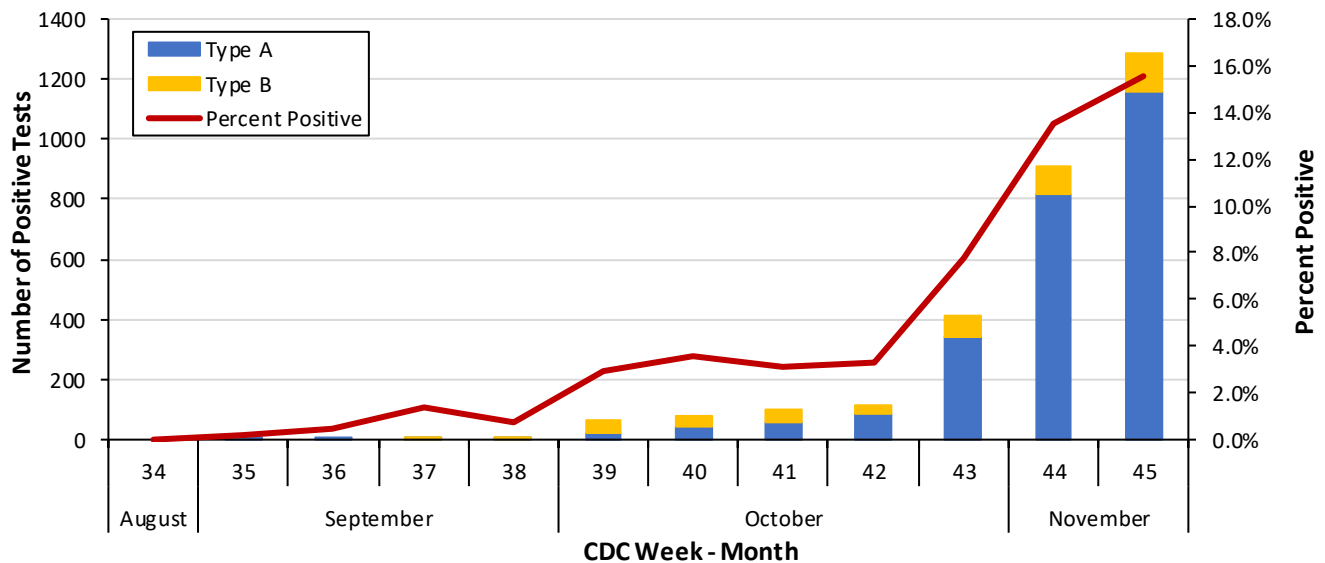
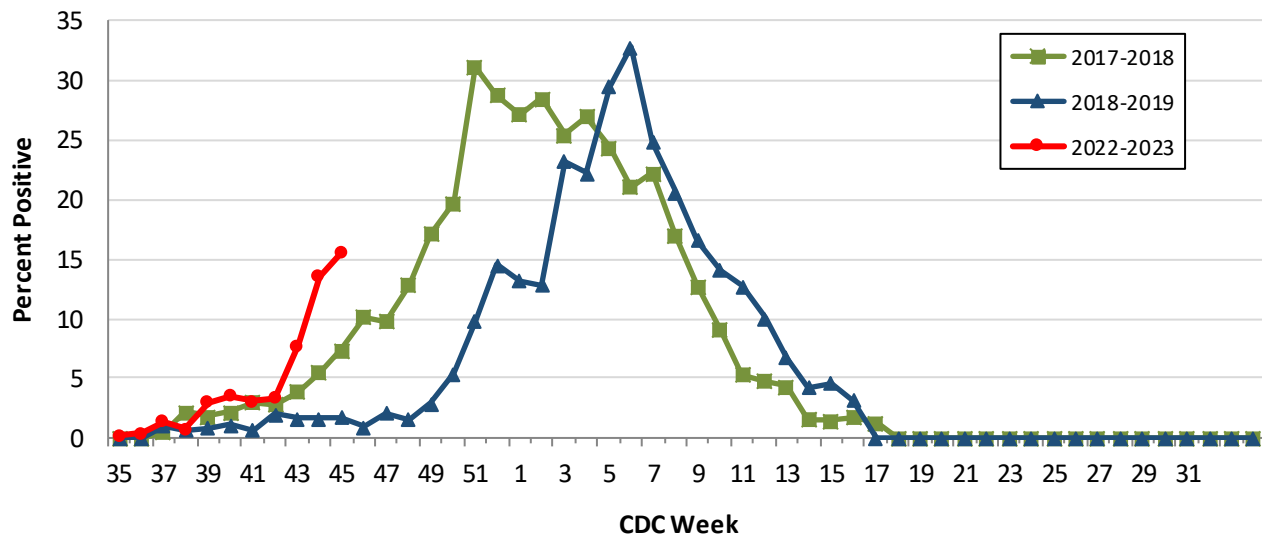
⁷ Possible influenza-associated deaths are defined as cases with laboratory-confirmed influenza, but pending final autopsy results for determination of primary cause of death. Data updated as of October 22, 2022.

Table 3. Confirmed Influenza-associated Pediatric and Adult Deaths, Dallas County: 2014–2023 Seasons

	2016–2017	2017–2018	2018–2019	2019–2020	2021–2022	2022–2023
Pediatric	1	4	1	3	0	0
Adult	16	79	21	22	2	0

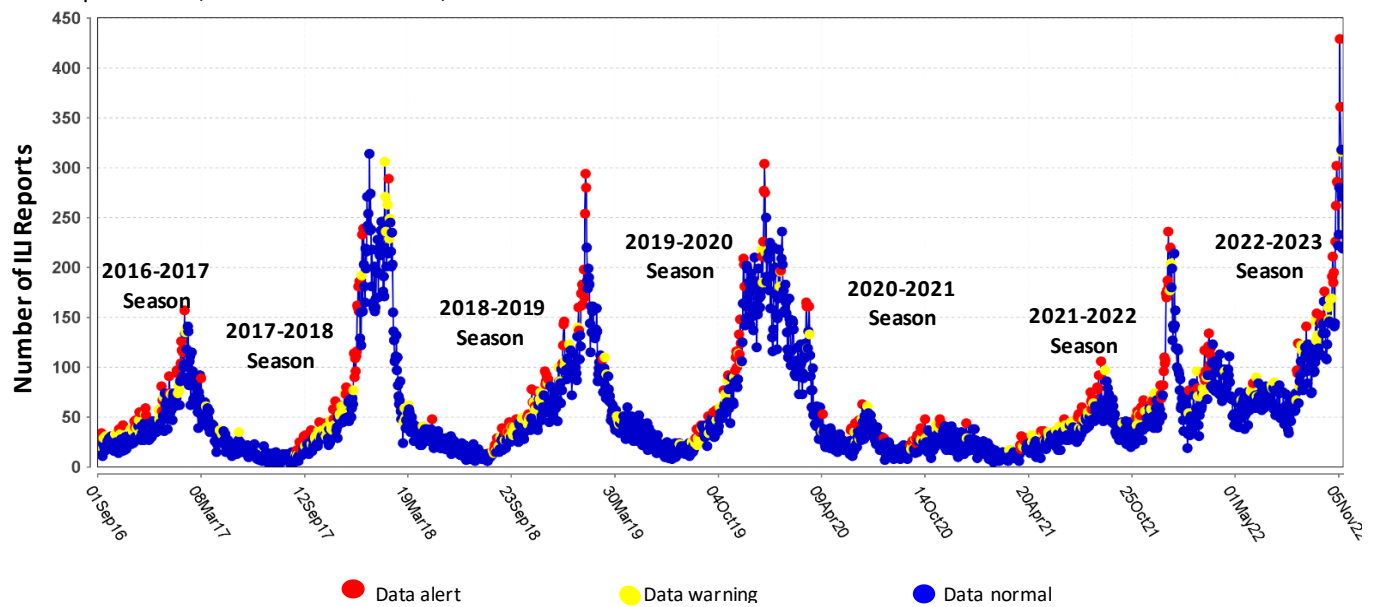
Data source(s): Reports of confirmed influenza-associated deaths, as defined in Table 2.

*Indicates preliminary results which are subject to change with late-arriving data from surveillance sites designated for DCHHS' seasonal influenza program

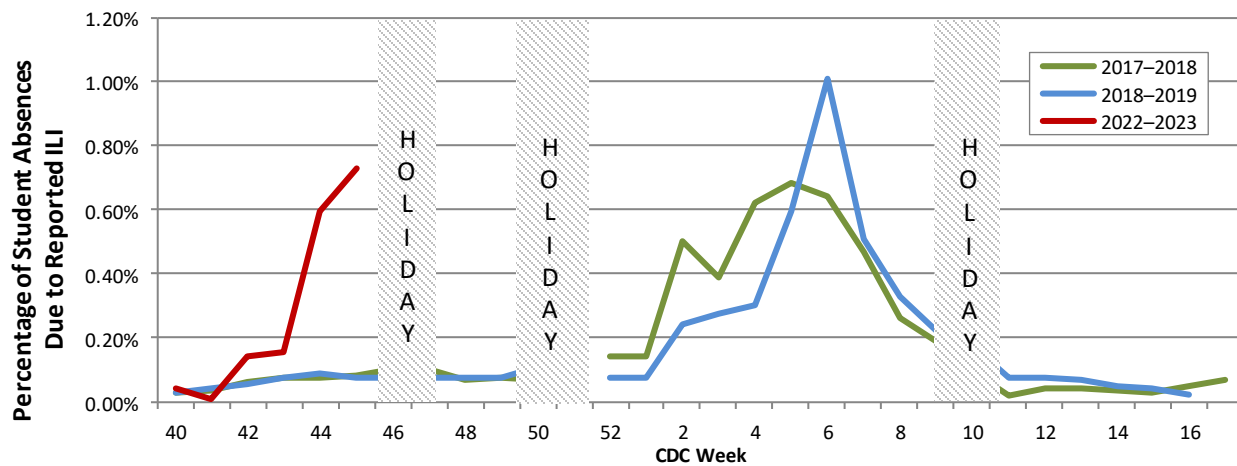
Figure 1. Influenza Positive Tests Reported to DCHHS by Hospital Laboratories: 2022—2023 Season**Figure 2.** Influenza Positive Tests Reported to DCHHS by Hospital Laboratories: 2017—2019 and 2022–2023 Seasons**Table 4.** Influenza Typing and Subtyping from Cumulative Dallas County, Texas, and U.S. Laboratory Surveillance Data: 2022—2023 Season

	Dallas ¹ (n=53)	Texas ² (n=607)	U.S. ³ (n=44,656)
Influenza A	0 (0.0%)	118 (98.3%)	4,459 (99.2%)
H1N1 2009 subtype	0 (0.0%)	19 (19.4%)	807 (22.8%)
H3N2 subtype	0 (0.0%)	79 (80.6%)	2,733 (77.2%)
Not subtyped	1	20	918
Influenza B	0 (0.0%)	2 (1.7%)	34 (0.8%)
Yamagata strain	0 (0.0%)	0 (0.0%)	0 (0.0%)

¹ DCHHS LRN laboratory PCR testing of designated Dallas County surveillance site isolates; counts may not sum to total as samples can test positive for multiple subtypes² DSHS 2022–2023 Texas Influenza Surveillance Information Activity Report available at <https://www.dshs.state.tx.us/idcu/disease/influenza/surveillance/>³ CDC FluView Weekly Influenza Surveillance Report available at <http://www.cdc.gov/flu/weekly/> *Only a subset of influenza B had lineage testing performed.

Figure 3. Syndromic Surveillance of Emergency Department Visits for Influenza-like Illness (ILI), Dallas County: September 1, 2016 – November 12, 2022

Data source: 18 emergency departments in Dallas County hospitals participating in the Electronic Surveillance System for the Early Notification of Community-based Epidemics (ESSENCE) voluntarily reporting the numbers of persons presenting with self-reported chief complaints of ILI.

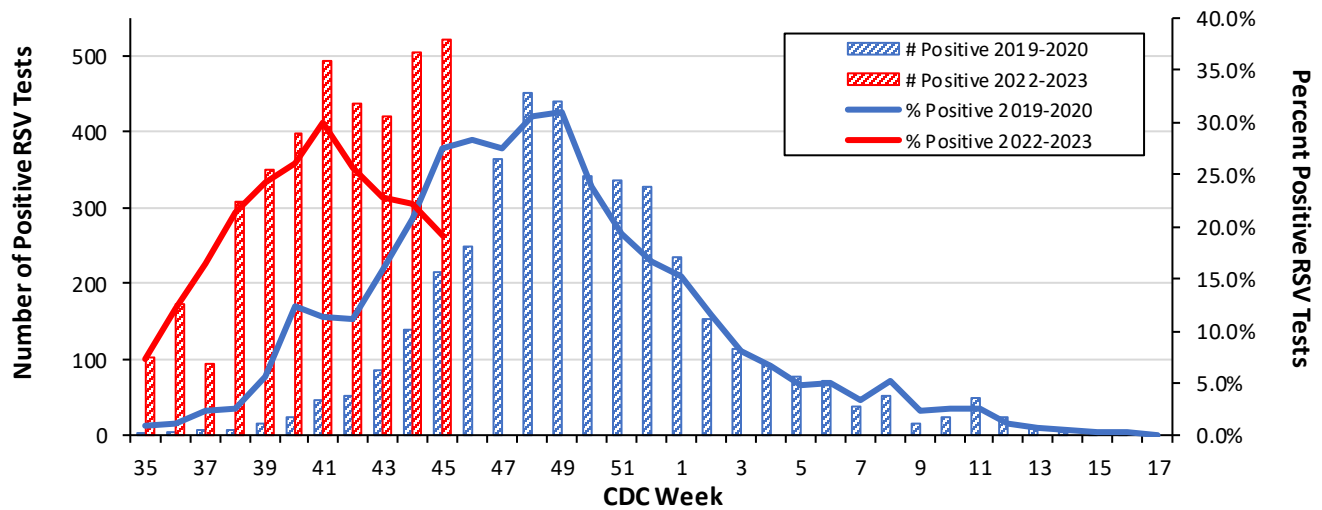
Figure 4. Percentage of Student Absences Due to ILI by Week, Dallas County: 2017-2018, 2018-2019, and 2022-2023

Data source: Voluntary reporting from Independent School Districts, private, and charter School representing over 600 elementary, middle, and secondary schools and over 345,000 students in Dallas County

Table 5. Non-Influenza Respiratory Virus Testing by North Texas Laboratories Reported to NREVSS, Week 45.

Virus	Number of Laboratories Reporting*	Tests Performed	Total Positive Tests	Percentage of Tests Positive
Adenovirus (respiratory)	2	941	117	12.4
HMPV	2	941	39	4.1
Parainfluenza virus	2	941	116	12.3
Rhinovirus/Enterovirus	2	941	256	27.2
RSV	2	2,713	521	19.2

Data source: National Respiratory and Enteric Virus Surveillance System (NREVSS) and hospitals reporting directly to DCHHS

Figure 5. Number and Percent Positive RSV Rapid Antigen and PCR Tests by Week, NREVSS Surveillance Data, North Texas: 2019–2020 and 2022–2023 Seasons

Data source: National Respiratory and Enteric Virus Surveillance System (NREVSS) and hospitals reporting directly to DCHHS

Table 6. Number and Percent Positive RSV Rapid Antigen and PCR Tests by Week, NREVSS Surveillance Data, North Texas: September 24, 2022 – November 12, 2022

Week Ending	9/24	10/1	10/8	10/15	10/22	10/29	11/5	11/12	9/18/21– Present
CDC Week	38	39	40	41	42*	43*	44*	45*	
RSV tests performed weekly	1,451	1,453	1,532	1,648	1,706	1,843	2,281	2,713	14,627
Total positive RSV tests	309	351	398	494	437	420	504	521	3,434
Percent positive RSV tests	21.3	24.2	26.0	30.0	25.6	22.8	22.1	19.2	

*Indicates preliminary results which are subject to change as adjustments are made for late-arriving data

Data source: National Respiratory and Enteric Virus Surveillance System (NREVSS)

Please report any of the following patients to DCHHS within 1 working day:

- **Hospitalized patients with influenza** (any subtype). Confirmation can be by any laboratory test, rapid antigen, culture, PCR, DFA/IFA, or performed in an outpatient or inpatient laboratory.
- **Deaths of persons with confirmed influenza** (any subtype). We are requesting all pediatric influenza-associated deaths to be reported *immediately* to facilitate specimen procurement and testing.
- Suspected influenza infections involving institutional outbreaks or a resident of any **Long Term Care facility** (please report *immediately*).

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