



# Dallas County Health and Human Services 2021–2022 Influenza Surveillance Report

Week 11 ending March 19, 2022

## Epidemiologic Summary

- Influenza activity is increasing in Dallas County with 16.1 % of tests returning positive during week 11.
- Sixty-six Influenza-associated hospitalizations were reported during week 11.
- One influenza-associated death of an adult was reported in week 44. No influenza-associated pediatric deaths have been reported during the 2021-2022 season in Dallas County.
- RSV continues to circulate locally, although activity has declined.

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

Week Ending	2/5	2/12	2/19	2/26	3/5	3/12	3/19	9/26/21 – Present
CDC Week	5	6	7	8*	9*	10*	11*	
<b>Total Influenza PCR Tests</b>	1,297	980	1,838	1,412	2,062	2,579	2,133	51,201
Number of positive PCR tests	15	27	72	80	127	159	223	1170
Percent of positive PCR tests	1.2	2.8	3.9	5.7	6.2	6.2	10.5	
<b>Total Rapid Influenza Diagnostic Tests</b>	757	769	908	759	1,041	1,236	1,231	14,03
Number of positive RIDTs	53	83	135	159	222	294	320	1,621
Percent of positive RIDTs	7.0	10.8	14.9	20.9	21.3	23.8	26.0	
<b>Total Influenza Tests Performed</b>	2,054	1,749	2,746	2171	3,103	3,815	3,364	65,904
Total positive influenza tests <sup>1</sup>	68	110	207	239	349	453	543	2,791
Percent positive influenza tests	3.3	6.3	7.5	11.0	11.2	11.9	16.1	
Positive influenza A tests <sup>2</sup>	59	102	196	226	341	441	527	1,499
Positive influenza B tests	9	8	11	13	8	12	16	292
Non-differentiated influenza tests <sup>3</sup>	0	0	0	0	0	0	0	0

<sup>1</sup> Includes positive rapid antigen, PCR, DFA, or culture results

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

<sup>3</sup> 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	2/5	2/12	2/19	2/26	3/5	3/12	3/19	9/26/21 – Present
CDC Week	5	6	7	8*	9*	10*	11*	
Influenza hospitalizations <sup>4</sup>	10	10	27	32	47	49	66	449
Influenza ICU admissions <sup>4</sup>	1	1	1	3	2	2	9	30
Confirmed pediatric deaths <sup>5</sup>	0	0	0	0	0	0	0	0
Confirmed adult deaths <sup>6</sup>	0	0	0	0	0	0	0	1
Possible influenza-associated deaths <sup>7</sup>	0	0	0	0	0	0	0	0

<sup>4</sup> Reflects all influenza-associated hospitalizations reported from 14 hospitals located within Dallas County by week of any positive influenza tests.

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

<sup>6</sup> 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.

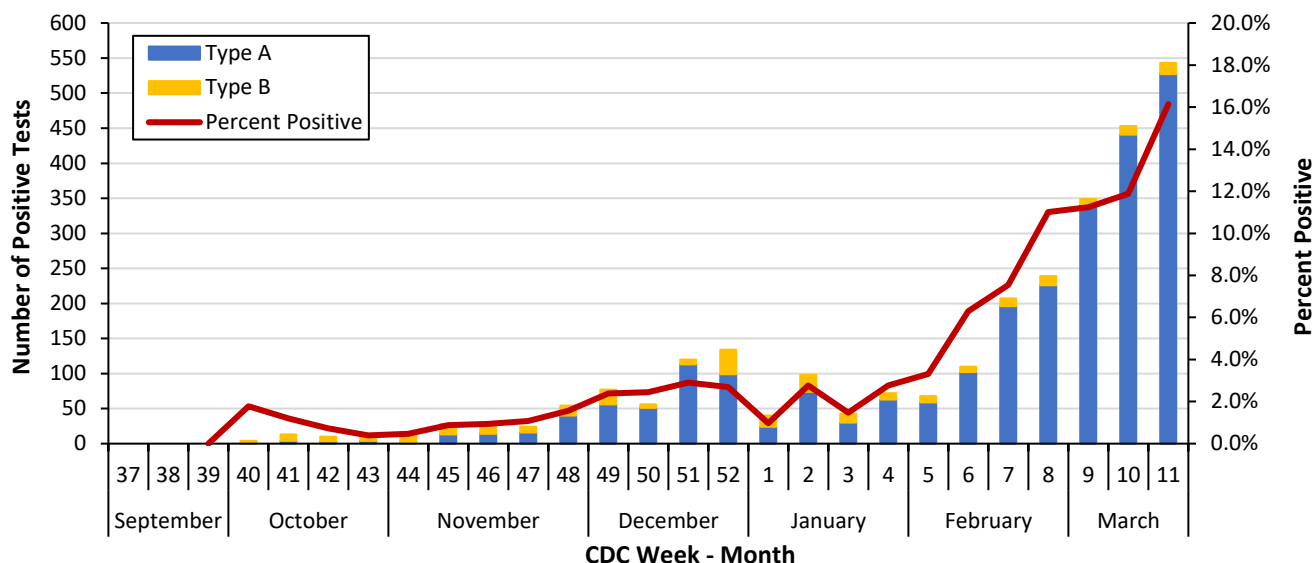
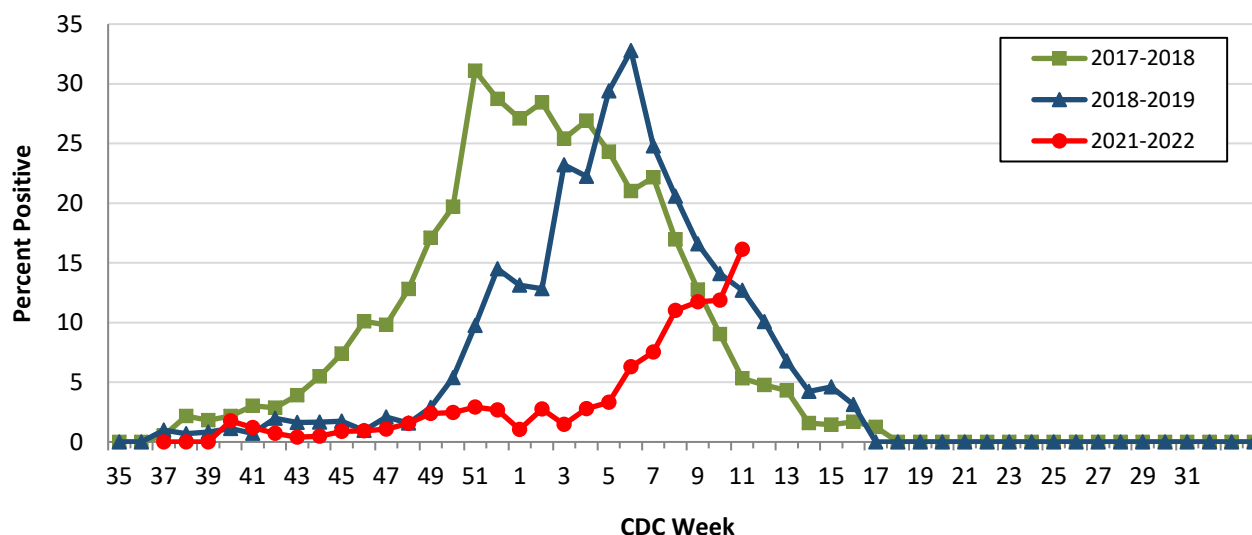
<sup>7</sup> Possible influenza-associated deaths are defined as cases with laboratory-confirmed influenza, but pending final autopsy results for determination of primary cause of death. Data updated as of March 19, 2022.

**Table 3.** Confirmed Influenza-associated Pediatric and Adult Deaths, Dallas County: 2014–2022 Seasons

	2015–2016	2016–2017	2017–2018	2018–2019	2019–2020	2021–2022
Pediatric	1	1	4	1	3	0
Adult	14	16	79	21	22	1

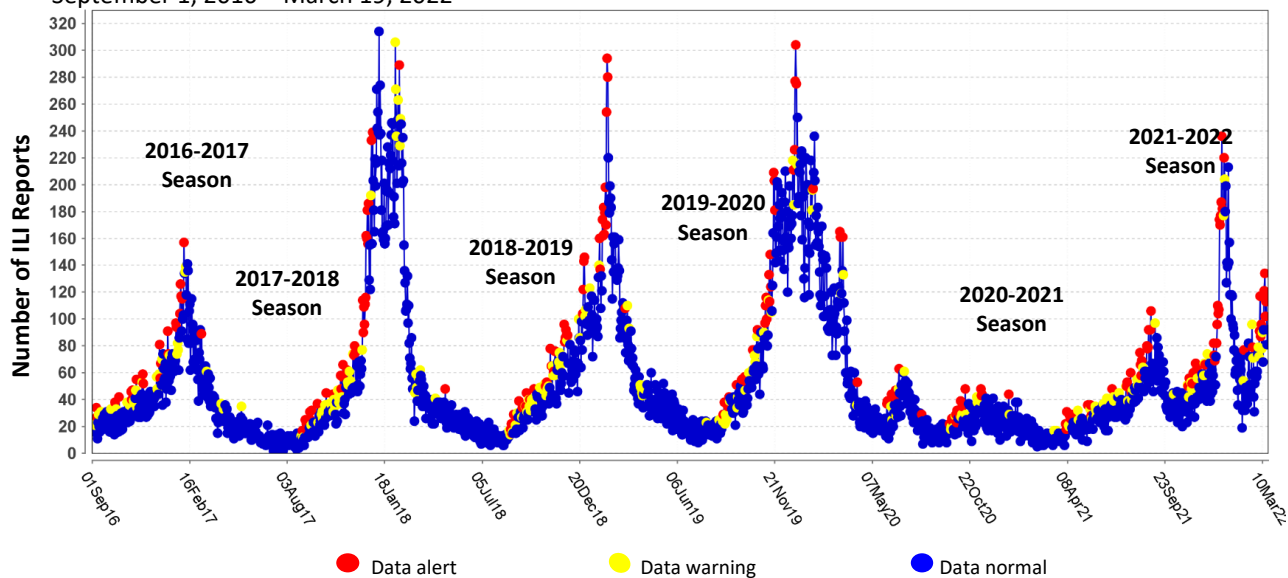
Data source(s): Reports of confirmed influenza-associated deaths, as defined in Table 2.

\*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: 2021—2022 Season**Figure 2.** Influenza Positive Tests Reported to DCHHS by Hospital Laboratories: 2017—2022 Seasons**Table 4.** Influenza Typing and Subtyping from Cumulative Dallas County, Texas, and U.S. Laboratory Surveillance Data: 2021—2022 Season

	Dallas <sup>1</sup> (n=547)	Texas <sup>2</sup> (n=13,279)	U.S. <sup>3</sup> (n=697,940)
Influenza A	170 (100.0%)	642 (99.5%)	15,076 (99.3%)
H1N1 2009 subtype	0 (0.0%)	0 (0.0%)	5 (<0.1%)
H3N2 subtype	170 (100.0%)	583 (100.0%)	10,180 (99.9%)
Not subtyped	0	59	4,890
Influenza B	0 (0.0%)	3 (0.5%)	102 (0.7%)
Yamagata strain	0 (0.0%)	0 (0.0%)	1 (2.9%)

<sup>1</sup> 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 subtypes<sup>2</sup> DSHS 2019–2020 Texas Influenza Surveillance Information Activity Report available at <https://www.dshs.state.tx.us/idcu/disease/influenza/surveillance/><sup>3</sup> CDC FluView Weekly Influenza Surveillance Report available at <http://www.cdc.gov/flu/weekly/> \*Only a subset of influenza B had lineage testing performed.

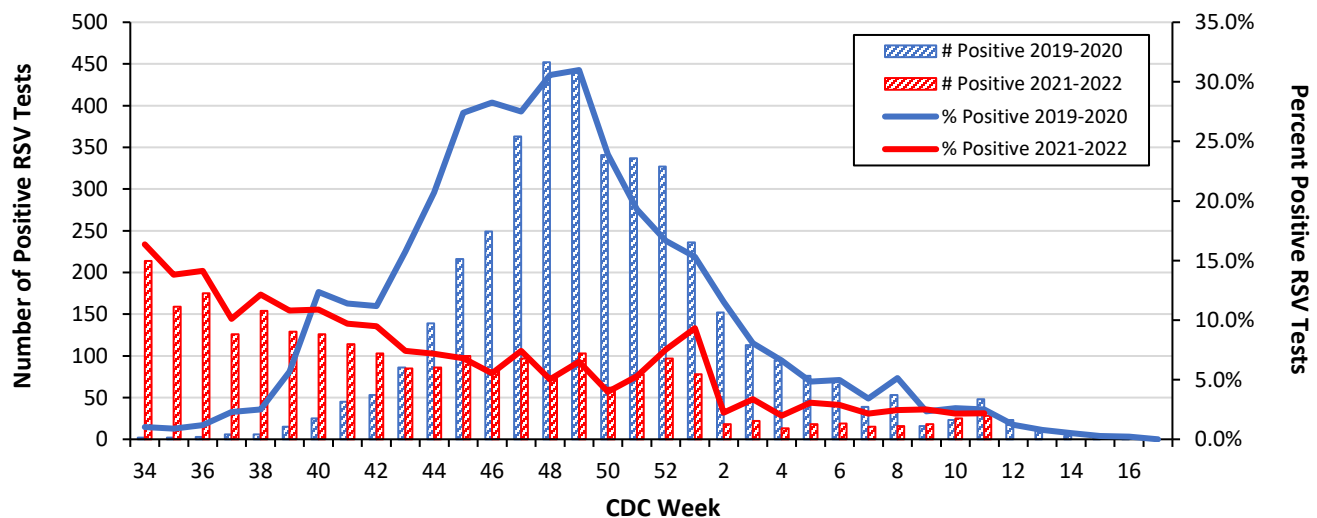
**Figure 3.** Syndromic Surveillance of Emergency Department Visits for Influenza-like Illness (ILI), Dallas County: September 1, 2016 – March 19, 2022

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.

**Table 5.** Non-Influenza Respiratory Virus Testing by North Texas Laboratories Reported to NREVSS, Week 11

Virus	Number of Laboratories Reporting*	Tests Performed	Total Positive Tests	Percentage of Tests Positive
Adenovirus (respiratory)	3	536	32	6.0
HMPV	3	536	6	1.1
Parainfluenza virus	3	536	20	3.7
Rhinovirus/Enterovirus	3	536	174	32.5
RSV	3	1285	28	2.2

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

**Figure 4.** Number and Percent Positive RSV Rapid Antigen and PCR Tests by Week, NREVSS Surveillance Data, North Texas: 2019-2020 and 2021-2022 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: August 22, 2021 – March 19, 2022

Week Ending	1/29	2/5	2/12	2/19	2/26	3/5	3/12	3/19	8/22/21– Present
CDC Week	4	5	6	7	8*	9*	10*	11*	
RSV tests performed weekly	655	584	658	691	651	719	1157	1285	33,515
Total positive RSV tests	13	18	19	15	16	18	25	28	2,441
Percent positive RSV tests	2.0	3.1	2.9	2.2	2.5	2.5	2.2	2.2	

\*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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