Iowa Influenza Surveillance Network (IISN)
Influenza-like Illness (ILI) and Other Respiratory Viruses
Weekly Activity Report
For the week ending February 15, 2020 - Week 7

All data presented in this report are provisional and may change as additional reports are received.

Iowa Influenza Geographic Spread

<table>
<thead>
<tr>
<th>No Activity</th>
<th>Sporadic</th>
<th>Local</th>
<th>Regional</th>
<th>Widespread</th>
</tr>
</thead>
</table>

Note: See CDC activity estimates for definition [www.cdc.gov/flu/weekly/overview.htm](http://www.cdc.gov/flu/weekly/overview.htm)

Quick Stats

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Predominate influenza subtype</td>
<td>A(H1N1)pdm09</td>
</tr>
<tr>
<td>Percent of influenza rapid test positive</td>
<td>35% (1728/4902)</td>
</tr>
<tr>
<td>Percent of RSV rapid tests positive</td>
<td>16% (100/609)</td>
</tr>
<tr>
<td>Influenza-associated hospitalizations</td>
<td>86/3172 inpatients surveyed</td>
</tr>
<tr>
<td>Percent of outpatient visits for ILI</td>
<td>5.16% (baseline 1.7%)</td>
</tr>
<tr>
<td>Number of long-term care outbreaks</td>
<td>5</td>
</tr>
<tr>
<td>Percent school absence due to illness</td>
<td>3.20%</td>
</tr>
<tr>
<td>Number of schools with ≥10% absence due to illness</td>
<td>76</td>
</tr>
<tr>
<td>Influenza-associated mortality -all ages (Cumulative)</td>
<td>29</td>
</tr>
<tr>
<td>Influenza-associated pediatric mortality (Cumulative)</td>
<td>1</td>
</tr>
<tr>
<td>Predominate non-influenza virus</td>
<td>Coronavirus (see note)</td>
</tr>
</tbody>
</table>

Note: Deaths are considered influenza-associated when influenza is listed on the death certificate. This is an underestimate of influenza-related deaths. Cumulative mortality totals are from 9/29/2019 to the current week.

*School data not reported due to holiday closings*

**Iowa statewide activity summary:**
Influenza activity is still elevated. The geographic spread of influenza is widespread. For this reporting week, the State Hygienic Laboratory identified 40 influenza A(H1N1)pdm09, five influenza A(H3), 34 influenza B(Victoria lineage) and 1 influenza B(Yamagata lineage) viruses from submitted samples as well as seven influenza A and three influenza B positive specimens with no subtype reported. Eight-six influenza-related hospitalizations were reported. The proportion of outpatient visits due to influenza-like illness (ILI) was 5.16%, which is above the regional baseline of 1.7%. Five long-term care influenza outbreaks were reported and 76 schools reported at least one day with 10% illness. Three influenza-associated deaths were reported. Surveillance sites reported detecting the following non-influenza respiratory illnesses with the most frequency: 128 coronavirus, 125 rhinovirus/enterovirus, 88 RSV, 60 hMPV and 51 adenovirus.

**NOTE:** The coronaviruses mentioned in this report are common and NOT the 2019 novel coronavirus.

**International activity summary - (WHO):**
National activity summary - (CDC)-Last Updated in Week 7:

Detailed information can be found online at [www.cdc.gov/flu/weekly/](http://www.cdc.gov/flu/weekly/).

**Laboratory surveillance program:**
The State Hygienic Laboratory (SHL) is the primary laboratory in Iowa characterizing specimens for influenza surveillance. SHL reports the number of tests performed and the type and subtype/lineage of positive tests to the influenza surveillance network daily. SHL also sends a portion of specimens to CDC for further characterization.

**Influenza viruses detected by SHL by week**

![Influenza viruses detected by SHL by week](image)

**Cumulative Influenza viruses detected by SHL by age group (9/29/19 – Current Week)**

<table>
<thead>
<tr>
<th>Age Group</th>
<th>A(H1N1)pdm09</th>
<th>A(H3)</th>
<th>Not Subtyped</th>
<th>Total</th>
<th>Victoria Lineage</th>
<th>Yamagata Lineage</th>
<th>Not subtyped</th>
<th>Total B</th>
<th>Total</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>0-4</td>
<td>37</td>
<td>7</td>
<td>0</td>
<td>44</td>
<td>85</td>
<td>0</td>
<td>2</td>
<td>87</td>
<td>131</td>
<td>14%</td>
</tr>
<tr>
<td>5-17</td>
<td>57</td>
<td>6</td>
<td>1</td>
<td>64</td>
<td>179</td>
<td>2</td>
<td>2</td>
<td>183</td>
<td>247</td>
<td>26%</td>
</tr>
<tr>
<td>18-24</td>
<td>31</td>
<td>5</td>
<td>2</td>
<td>38</td>
<td>135</td>
<td>0</td>
<td>1</td>
<td>136</td>
<td>174</td>
<td>18%</td>
</tr>
<tr>
<td>25-49</td>
<td>69</td>
<td>7</td>
<td>0</td>
<td>76</td>
<td>94</td>
<td>0</td>
<td>1</td>
<td>95</td>
<td>171</td>
<td>18%</td>
</tr>
<tr>
<td>50-64</td>
<td>59</td>
<td>7</td>
<td>4</td>
<td>70</td>
<td>29</td>
<td>0</td>
<td>0</td>
<td>29</td>
<td>99</td>
<td>10%</td>
</tr>
<tr>
<td>&gt;64</td>
<td>80</td>
<td>18</td>
<td>6</td>
<td>104</td>
<td>16</td>
<td>2</td>
<td>4</td>
<td>22</td>
<td>126</td>
<td>13%</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>333</strong></td>
<td><strong>50</strong></td>
<td><strong>13</strong></td>
<td><strong>396</strong></td>
<td><strong>538</strong></td>
<td><strong>4</strong></td>
<td><strong>10</strong></td>
<td><strong>552</strong></td>
<td><strong>948</strong></td>
<td></td>
</tr>
</tbody>
</table>

Totals by age may not add up to totals by subtype/lineage due to missing age information. Only cases of Iowa residents are included. Specimens listed as “not subtyped” may be pending or were not able to be subtyped due to weak positive lab results. This can be due to poor collection, timing of collection or stage of infection.
Rapid influenza and RSV test surveillance:
The State Hygienic Laboratory (SHL) runs a weekly web-based survey program where laboratorians report the number of influenza and respiratory syncytial virus (RSV) rapid tests performed and the number of tests positive. This table includes only the number of patients tested for influenza or RSV at laboratory surveillance sites throughout the state. This table does not provide case counts.

Percent of influenza rapid tests positive and number of tests performed, 2019-2020

<table>
<thead>
<tr>
<th>REGION</th>
<th>RAPID INFLUENZA TESTS</th>
<th>RAPID RSV TESTS</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Tested</td>
<td>Flu A</td>
</tr>
<tr>
<td>Region 1 (Central)</td>
<td>1560</td>
<td>344</td>
</tr>
<tr>
<td>Region 2 (NE)</td>
<td>429</td>
<td>106</td>
</tr>
<tr>
<td>Region 3 (NW)</td>
<td>819</td>
<td>154</td>
</tr>
<tr>
<td>Region 4 (SW)</td>
<td>176</td>
<td>34</td>
</tr>
<tr>
<td>Region 5 (SE)</td>
<td>405</td>
<td>53</td>
</tr>
<tr>
<td>Region 6 (Eastern)</td>
<td>1513</td>
<td>195</td>
</tr>
<tr>
<td>Total</td>
<td>4902</td>
<td>886</td>
</tr>
</tbody>
</table>

Note: see map in the school section for the counties in each region.
**Influenza-associated hospitalizations:**
Sentinel hospitals that participate in IISN voluntarily track and report the number of influenza-associated hospitalizations and the total number of inpatients each week. Iowa hospitals interested in joining this surveillance program should contact Andy Weigel at 515-322-1937 or andy.weigel@idph.iowa.gov for more information.

**Number of influenza-associated hospitalizations reported by age group and week**

![Number of influenza-associated hospitalizations reported by age group and week](image)

**Rate of influenza-associated hospitalizations by season and week**

![Rate of influenza-associated hospitalizations by season and week](image)

**Number of influenza-associated hospitalizations reported by age group**

<table>
<thead>
<tr>
<th>AGE</th>
<th>CURRENT WEEK</th>
<th>CUMULATIVE (9/29/19–CURRENT WEEK)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age 0-4</td>
<td>11</td>
<td>91</td>
</tr>
<tr>
<td>Age 5-24</td>
<td>16</td>
<td>107</td>
</tr>
<tr>
<td>Age 25-49</td>
<td>11</td>
<td>120</td>
</tr>
<tr>
<td>Age 50-64</td>
<td>17</td>
<td>154</td>
</tr>
<tr>
<td>Age &gt;64</td>
<td>31</td>
<td>225</td>
</tr>
<tr>
<td>Total</td>
<td>86</td>
<td>697</td>
</tr>
</tbody>
</table>
Outpatient health care provider surveillance program (ILINet):
Outpatient health care providers who participate in the ILINet (a national influenza surveillance program) report the number of patients seen with influenza-like illness and the total number of patient visits each week. This system is a key part of Iowa’s influenza surveillance. Iowa health care providers interested in joining this surveillance program should contact Andy Weigel at 515-322-1937 or andy.weigel@idph.iowa.gov for more information.

Percent of outpatient visits attributed to ILI as reported by ILINet sites

<table>
<thead>
<tr>
<th>Week, End Date</th>
<th>Age 0-4</th>
<th>Age 5-24</th>
<th>Age 25-49</th>
<th>Age 50-64</th>
<th>Age &gt;64</th>
<th>Total ILI</th>
<th>%ILI</th>
</tr>
</thead>
<tbody>
<tr>
<td>Week 5, February 1</td>
<td>33</td>
<td>125</td>
<td>31</td>
<td>6</td>
<td>3</td>
<td>198</td>
<td>3.04</td>
</tr>
<tr>
<td>Week 6, February 8</td>
<td>53</td>
<td>182</td>
<td>24</td>
<td>8</td>
<td>5</td>
<td>272</td>
<td>3.96</td>
</tr>
<tr>
<td>Week 7, February 15</td>
<td>62</td>
<td>142</td>
<td>39</td>
<td>10</td>
<td>12</td>
<td>265</td>
<td>5.16</td>
</tr>
</tbody>
</table>

Note: Influenza-like Illness is defined as a fever of ≥100° F as well as cough and/or sore throat.

Seasonal influenza vaccination:
Seasonal influenza vaccination data in Iowa is based on doses reported to the Iowa Immunization Registry Information System (IRIS). IRIS is a confidential, computerized, population-based system that tracks immunization for children, adolescents and adults who are seen in a variety of public and private healthcare provider sites throughout the state of Iowa. For more information on the immunization data, contact Kim Tichy, IRIS coordinator, at 515-281-4288 or kimberly.tichy@idph.iowa.gov.

Administered doses of seasonal influenza vaccine reported to IRIS, year to date by season

Note: The data for the 2019-2020 season is only up to the current week and there is a lag between the vaccine administration date and the date reported to the IRIS. The current season’s data will be adjusted as additional data is received.
Long-term Care Outbreaks:

Number of long-term outbreaks investigated

<table>
<thead>
<tr>
<th>REGION</th>
<th>CURRENT WEEK</th>
<th>CUMULATIVE (9/29/19–CURRENT WEEK)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Region 1 (Central)</td>
<td>1</td>
<td>5</td>
</tr>
<tr>
<td>Region 2 (NE)</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>Region 3 (NW)</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Region 4 (SW)</td>
<td>0</td>
<td>2</td>
</tr>
<tr>
<td>Region 5 (SE)</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>Region 6 (Eastern)</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>5</strong></td>
<td><strong>14</strong></td>
</tr>
</tbody>
</table>

Note: see map in the school section for the counties in each region.

Number of long-term care facility influenza outbreaks investigated by week, 2019-2020

School surveillance program
IDPH monitors illnesses in schools from two different types of reporting: 10% school absence reports and weekly sentinel illness reporting. Iowa schools (K-12) track and report (including non-influenza illnesses) when the number of students absent with illness reaches or exceeds 10% of total student enrollment. Iowa sentinel schools that participate in IISN voluntarily track and report absence due to all illness and the total enrollment each week. This data provides excellent trends for influenza activity as well as age-specific information used to target vaccination efforts and messages.

Percent of enrolled students absent due to illness reported by sentinel schools

*School absences data not reported for week 52 due to holiday break*
Number of schools reporting >10% absenteeism due to any illness by Flu Region and County

<table>
<thead>
<tr>
<th>REGION</th>
<th>CURRENT WEEK</th>
<th>CUMULATIVE (9/29/19–CURRENT WEEK)*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Region 1 (Central)</td>
<td>17</td>
<td>57</td>
</tr>
<tr>
<td>Region 2 (NE)</td>
<td>7</td>
<td>22</td>
</tr>
<tr>
<td>Region 3 (NW)</td>
<td>11</td>
<td>40</td>
</tr>
<tr>
<td>Region 4 (SW)</td>
<td>6</td>
<td>21</td>
</tr>
<tr>
<td>Region 5 (SE)</td>
<td>23</td>
<td>37</td>
</tr>
<tr>
<td>Region 6 (Eastern)</td>
<td>12</td>
<td>45</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>76</strong></td>
<td><strong>222</strong></td>
</tr>
</tbody>
</table>

Note: see map in the school section for the counties in each region. Each school that reports 10 percent illness is counted only once per week for weekly numbers and only once per season for the cumulative reports.

*School data not reported for week 52 due to holiday closings

Common Coronavirus vs. 2019 Novel Coronavirus

There are seven different coronaviruses known to infect humans. Four of the seven coronaviruses are very common, more mild (similar to the common cold) and most people will be infected with at least one of them in their lifetime. These common coronaviruses are the ones reported by Iowa labs mentioned in this report. People infected with the common coronaviruses, influenza and many other respiratory infections can avoid passing them to others by covering their coughs and sneezes, cleaning their hands frequently and containing germs by staying home when ill.

Three of the seven coronaviruses are rare and can cause more severe illness; this includes the 2019 Novel Coronavirus. These three rare coronaviruses can be associated with more severe symptoms that may lead to pneumonia and life-threatening illness.
Non-influenza respiratory viruses:
The State Hygienic Laboratory (SHL) runs a weekly web-based survey program where laboratorians report the number of positive tests for non-influenza respiratory viruses. This table also includes the positive non-influenza virus tests reported from the Dunes Medical Laboratories at Mercy Medical Center in Sioux City. The table includes only the number of positive tests at laboratory surveillance sites throughout the state. The table does not provide case counts.

Comparison of respiratory illnesses by type

![Comparison of respiratory illnesses by type chart]

Number of positive results for non-influenza respiratory virus reported by clinical laboratories

<table>
<thead>
<tr>
<th>Viruses</th>
<th>CURRENT WEEK</th>
<th>CUMULATIVE (9/29/19–CURRENT WEEK)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adenovirus</td>
<td>51</td>
<td>772</td>
</tr>
<tr>
<td>Parainfluenza Virus Type 1</td>
<td>7</td>
<td>431</td>
</tr>
<tr>
<td>Parainfluenza Virus Type 2</td>
<td>1</td>
<td>13</td>
</tr>
<tr>
<td>Parainfluenza Virus Type 3</td>
<td>2</td>
<td>21</td>
</tr>
<tr>
<td>Parainfluenza Virus Type 4</td>
<td>6</td>
<td>127</td>
</tr>
<tr>
<td>Rhinovirus/Enterovirus</td>
<td>125</td>
<td>2648</td>
</tr>
<tr>
<td>Respiratory syncytial virus (RSV)</td>
<td>88</td>
<td>1594</td>
</tr>
<tr>
<td>Human metapneumovirus (hMPV)</td>
<td>60</td>
<td>661</td>
</tr>
<tr>
<td>Coronavirus*</td>
<td>128</td>
<td>728</td>
</tr>
</tbody>
</table>

* The coronaviruses mentioned in this report are common and NOT the 2019 novel coronavirus.

Other resources:

Vaccine:
Influenza vaccine recommendation: [idph.iowa.gov/immtb/immunization/influenza/recommendations](http://idph.iowa.gov/immtb/immunization/influenza/recommendations)
CDC vaccine information: [www.cdc.gov/flu/prevent/keyfacts.htm](http://www.cdc.gov/flu/prevent/keyfacts.htm)
Vaccine finder: [http://vaccinefinder.org/](http://vaccinefinder.org/)

Neighboring states' influenza information:
Minnesota: [www.health.state.mn.us/divs/idepc/diseases/flu/stats/index.html](http://www.health.state.mn.us/divs/idepc/diseases/flu/stats/index.html)