



2022-2023 Influenza Surveillance Report

Week 44

Oct. 30 – Nov. 5, 2022

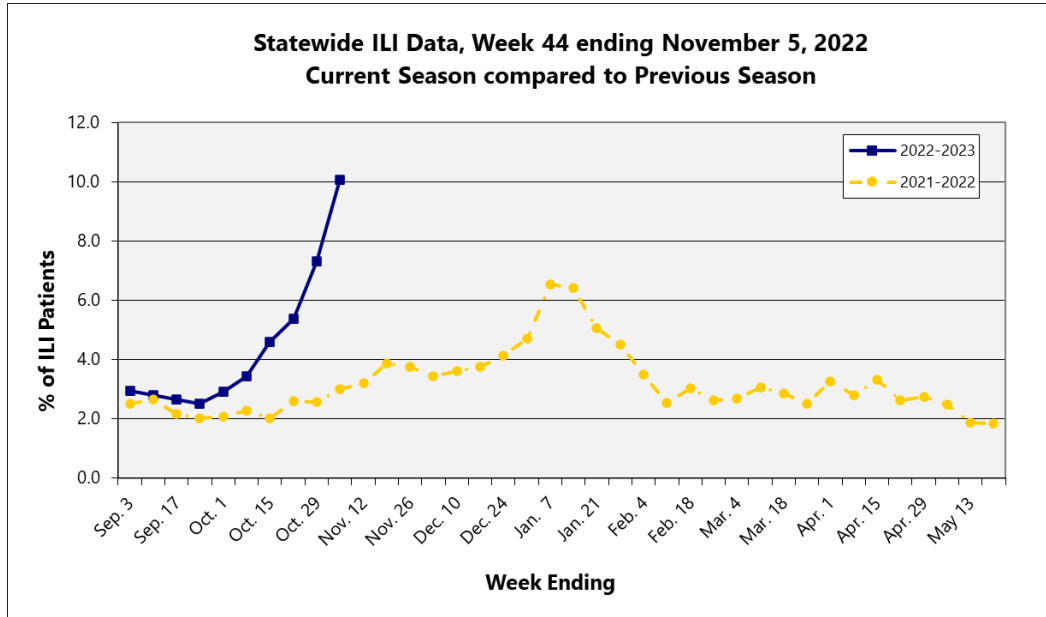
About our flu activity reporting

MSDH relies upon selected sentinel health practitioners across the state to report the percentage of total patient visits consistent with an influenza-like illness (ILI: fever of 100°F or higher AND cough and/or sore throat). Also, providers are supplied with specimen collection kits. Samples are submitted to the Mississippi Public Health Laboratory for influenza PCR testing. Reports are used to estimate the state's ILI rate and the magnitude of the state's influenza activity. Reports represent only the distribution of flu in the state, not an actual count of all flu cases statewide. **Information is provisional only and may change depending on additional reporting from sentinel providers.**

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State ILI Surveillance



During week **44** (10/30/22-11/05/22), the overall state ILI rate (**10.1%**) **increased** from the previous week (**7.3%**) and was higher than this time last year (**3.0%**). The state ILI began trending

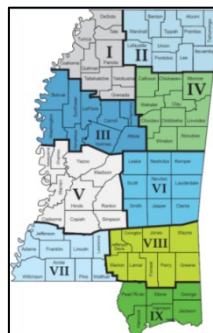
upward during week 40 (ending Oct. 8, 2022). | [Figure 1](#)

Total number of patients treated by sentinel providers in the last three weeks. | **Table 1**

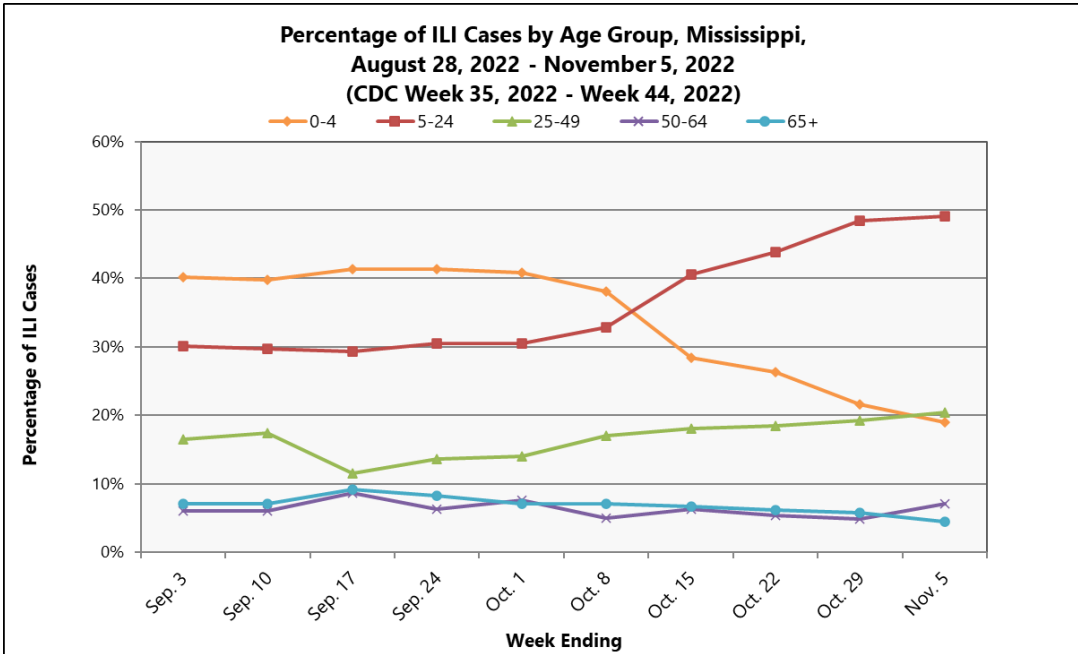
2022-2023 Influenza Season					
CDC Week	Week Ending	Number of reports received from Sentinel Providers	Total patients	ILI symptoms	ILI Rate (%)
44	Nov. 5	93	15146	1524	10.1
43	Oct. 29	98	15044	1101	7.3
42	Oct. 22	102	13314	716	5.4

During week **44**, all nine districts had an increase in ILI activity. *Information is provisional only and may change depending on additional reporting from sentinel providers.* | **Table**

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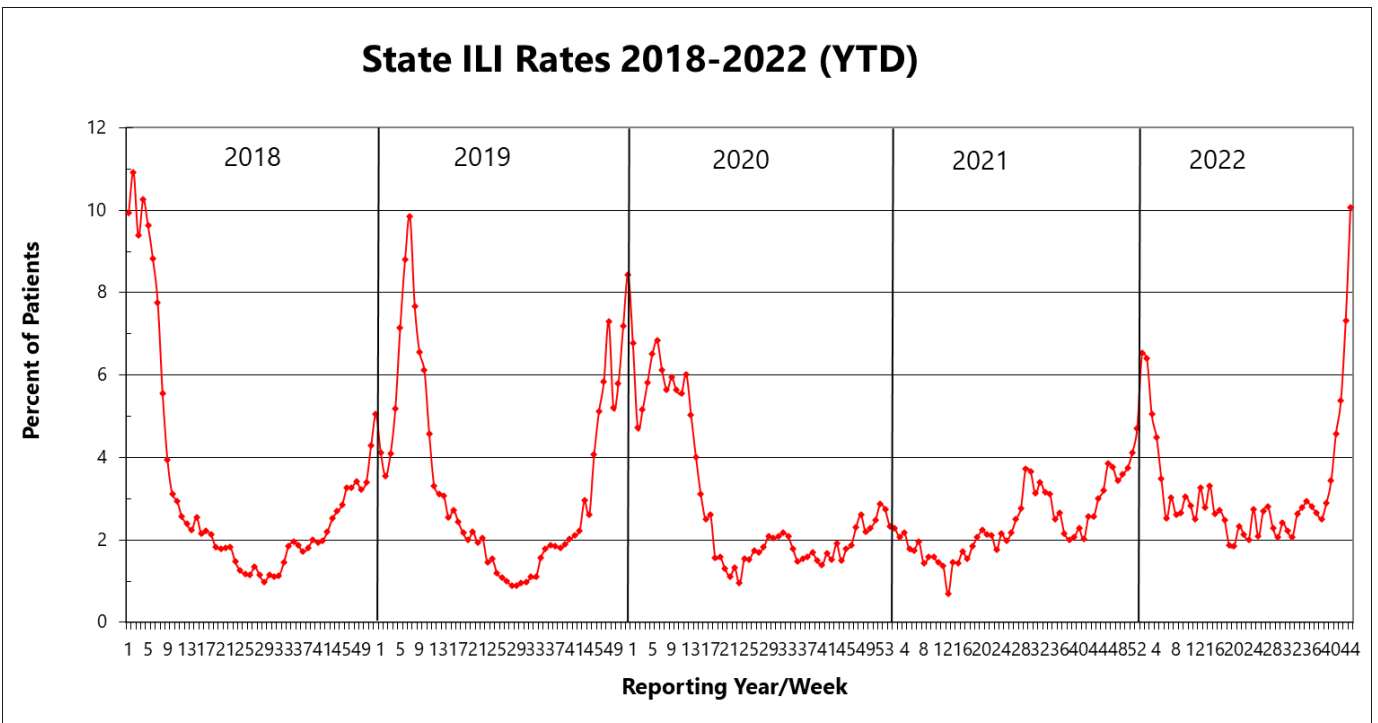
MSDH District ILI Rates (%) 2022-2023		
District	Week 43	Week 44
State	7.3	10.1
I	6.2	7.1
II	17.6	19.3
III	24.4	37.1
IV	17.1	27.6
V	1.5	2.1
VI	4.4	8.4
VII	13.4	14.7
VIII	4.1	6.9
IX	5.0	7.3



Overall, the percentage of reported ILI cases has been highest among those in the **5-24 years** of age group. This trend continued into week **44**. The percentage of ILI cases in

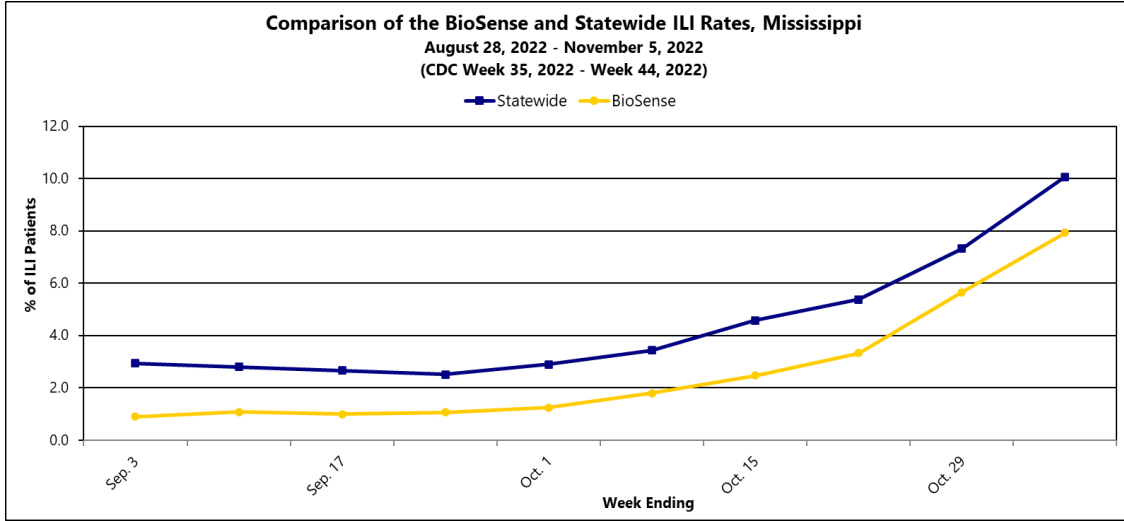
the 0-4 and 65+ years of age groups decreased while the percentage in the 25-49 and 50-64 years of age groups increased when compared to the previous week. | [Figure 2](#)

Mississippi ILI Rates 2018-2022 | [Figure 3](#)



Syndromic ILI Surveillance

The Mississippi State Department of Health also collects influenza syndromic surveillance data through the CDC BioSense Platform. This data is comprised of chief complaints and diagnosis codes and is submitted electronically by participating hospitals and clinics throughout the state in near real-time. The BioSense data is an additional tool to monitor influenza activity in Mississippi.



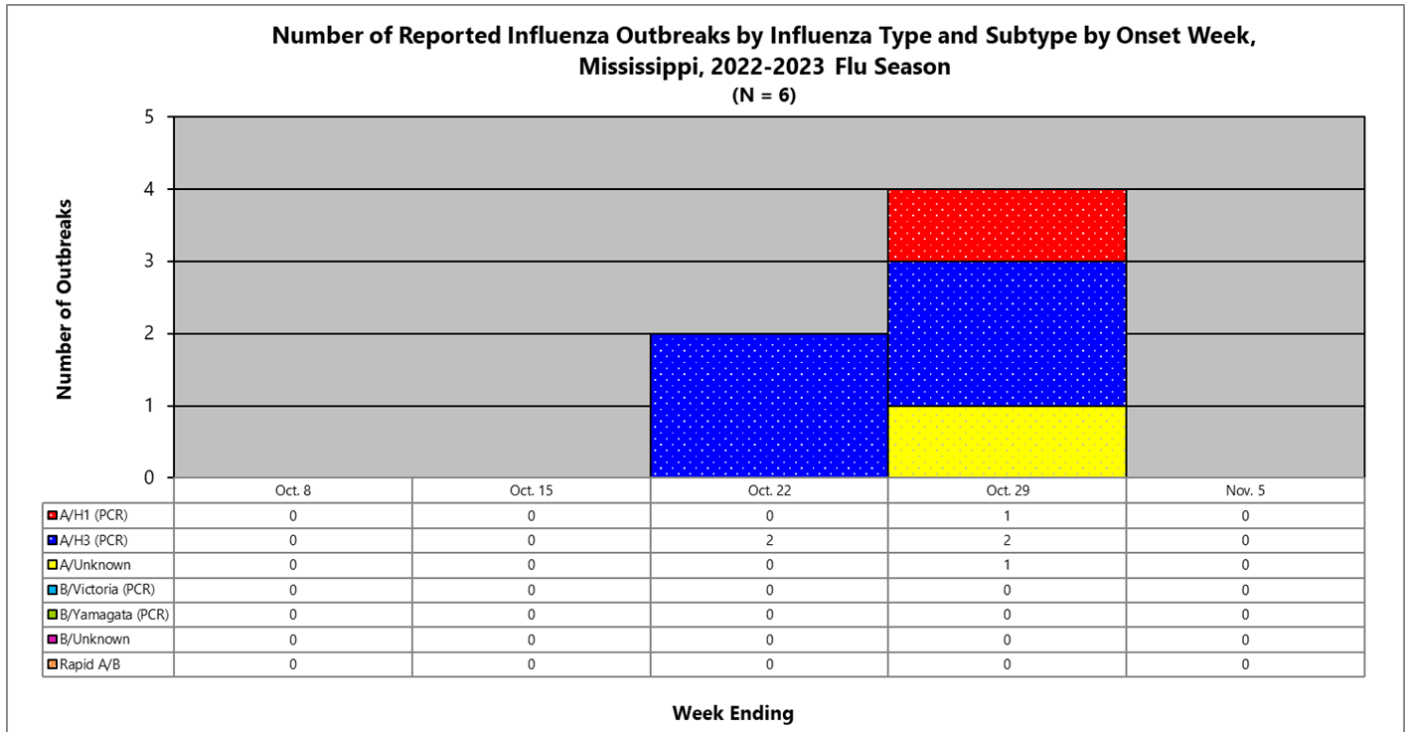
The percentage of patients with a chief complaint or diagnosis of influenza-like illness during week

44 increased from the previous week, as did the statewide ILI rate. The BioSense ILI rate appears to be following the same trend as the statewide ILI rate. | [Figure 4](#)

Influenza Outbreaks

Outbreaks are reportable in Mississippi as a Class 1A event and must be reported by telephone within **24 hours** of first knowledge or suspicion to the Mississippi State Department of Health. For more information on reportable diseases and conditions, please refer to the [MSDH List of Reportable Diseases and Conditions](#).

Between week 40 (ending October 8, 2022) and week 44 (week ending November 5, 2022), 11 outbreaks were reported to MSDH. MSDH investigates all reported outbreaks, and of the 11 reported outbreaks, complete information was available for six of them. One (17%) of the outbreaks was attributed to influenza A/H1, four (67%) were attributed to influenza A/H3, and one (17%) was attributed to an influenza A virus, unknown subtype. | [Figure 5](#)



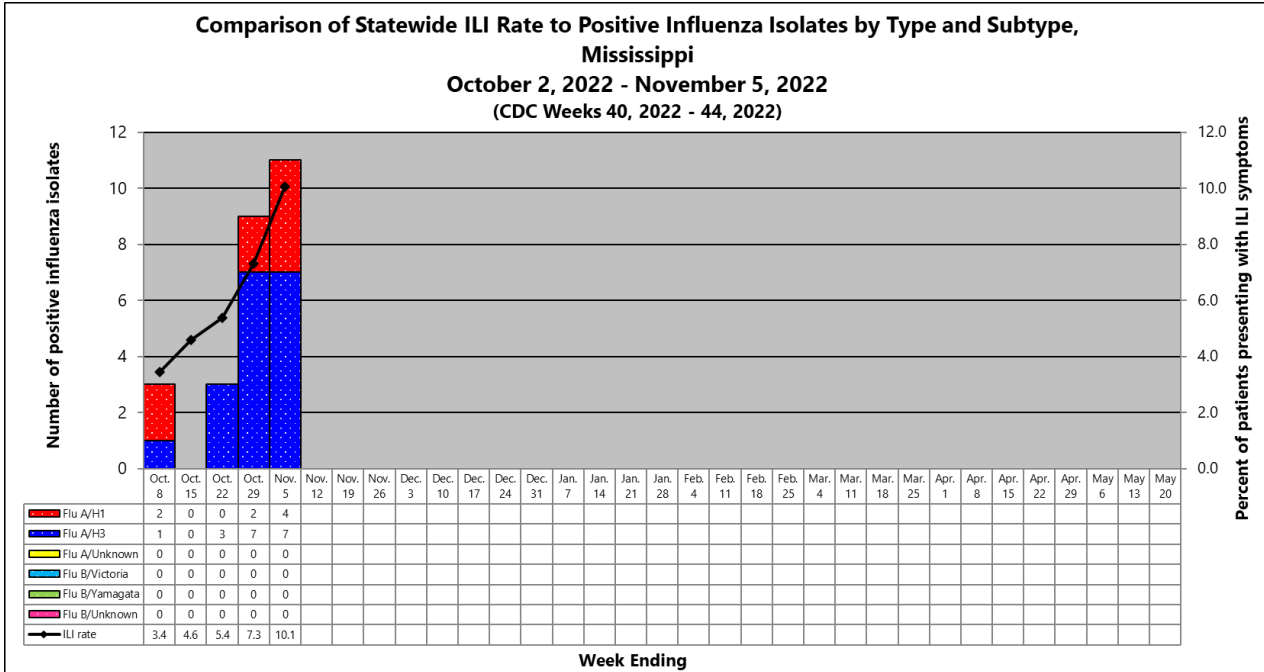
The influenza outbreaks have occurred in the following counties: Attala (1), Forrest (3), Franklin (1), Hinds (1), Holmes (1), Lafayette (1), Simpson (1), Walthall (1), and Washington (1).

For additional information on infection control measures in health care facilities and managing influenza outbreaks in long-term care facilities, please refer to the CDC’s webpages:

<https://www.cdc.gov/flu/professionals/infectioncontrol/index.htm> and <https://www.cdc.gov/flu/professionals/infectioncontrol/ltc-facility-guidance.htm>, respectively.

Flu Testing Reports

Since week 40 (week ending October 8th), **26** laboratory confirmed influenza samples have been identified by the MSDH Public Health Laboratory. Eight (31%) were identified as influenza A/H1 and 18 (69%) were identified as influenza A/H3. | [Figure 6](#)



The influenza cases were identified from the following counties: Forrest (7), Franklin (2), Hinds (2), Holmes (3), Lafayette (2), Lincoln (2), Marion (1), Marshall (3), Pontotoc (1), Walthall (1), and Washington (2).

National and Mississippi Pediatric Mortality Surveillance

Nationally, **five** influenza-associated pediatric deaths have been reported to CDC for the 2022-2023 season. Three deaths have been associated with an influenza A/H3 virus, while one was associated with an influenza A/H1 virus. The remaining death was associated with an influenza A virus (not subtyped).

Mississippi has had **no** influenza-associated pediatric deaths reported during this influenza season.

For additional information on influenza-associated pediatric deaths, please refer to the [CDC's FluView](#).

National ILI Surveillance

During week **44**, influenza activity **continued to increase** in the United States. 5.5% of patients reported through ILINet presented with ILI symptoms. This was an increase when compared to week 43 (4.4%) and was above the national baseline (2.5%).

Regions 4 (Southeast) and 6 (South-Central) reported the highest levels of flu activity, followed by regions 3 (Mid-Atlantic) and 9 (south-central West Coast). Mississippi is included in Region 4.

For additional information on flu activity nationwide, please refer to the CDC's website: <http://www.cdc.gov/flu/weekly/fluactivitysurv.htm>.

Additional influenza information:

Centers for Disease Control and Prevention	http://cdc.gov/flu/
Centers for Disease Control and Prevention FluView	http://www.cdc.gov/flu/weekly/
MSDH Flu	http://msdh.ms.gov/msdhsite/_static/14,0,199.html
World Health Organization FluNet	https://www.who.int/tools/flunet/flunet-summary

Appendix

Figure 1

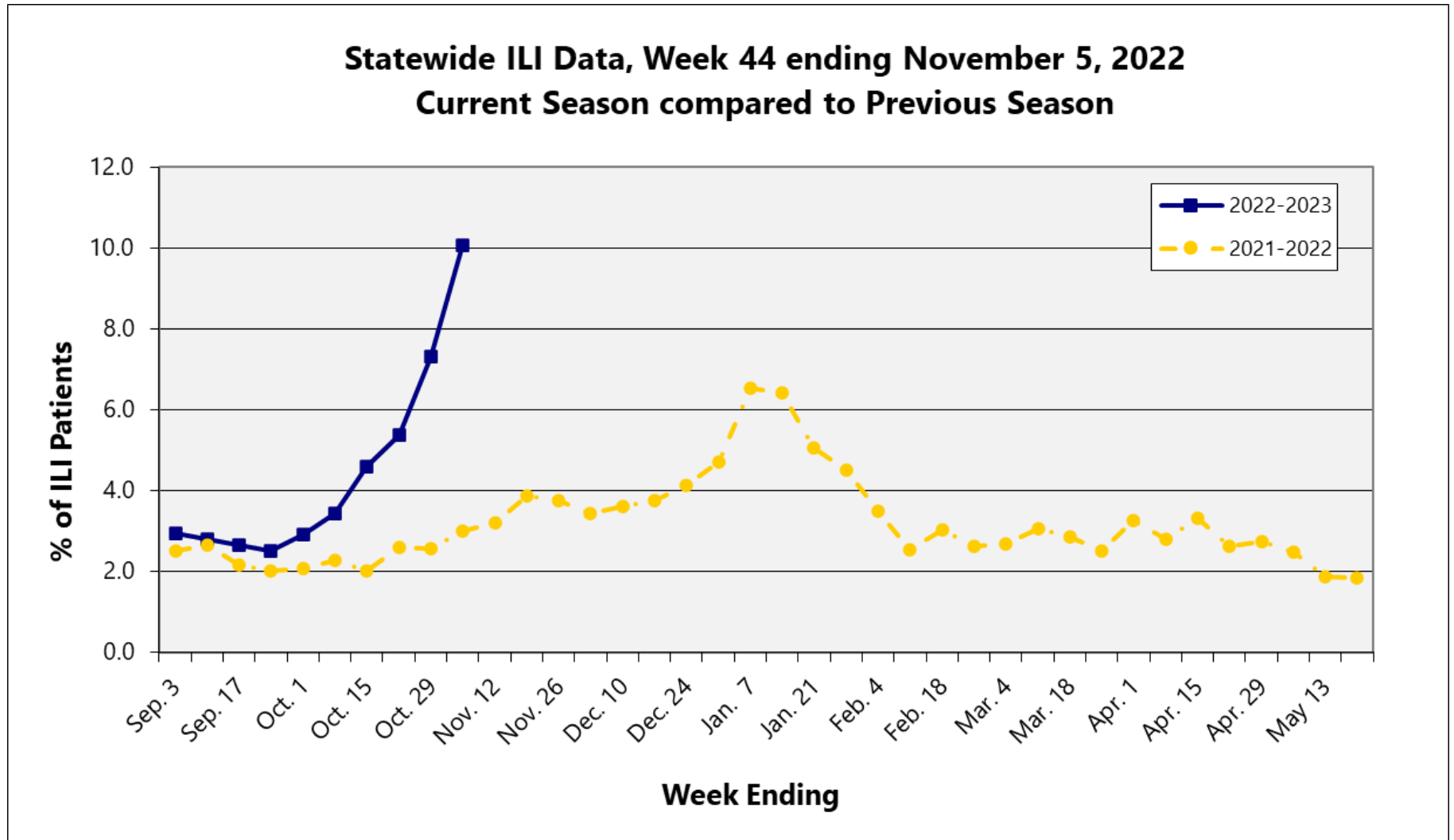


Figure 2

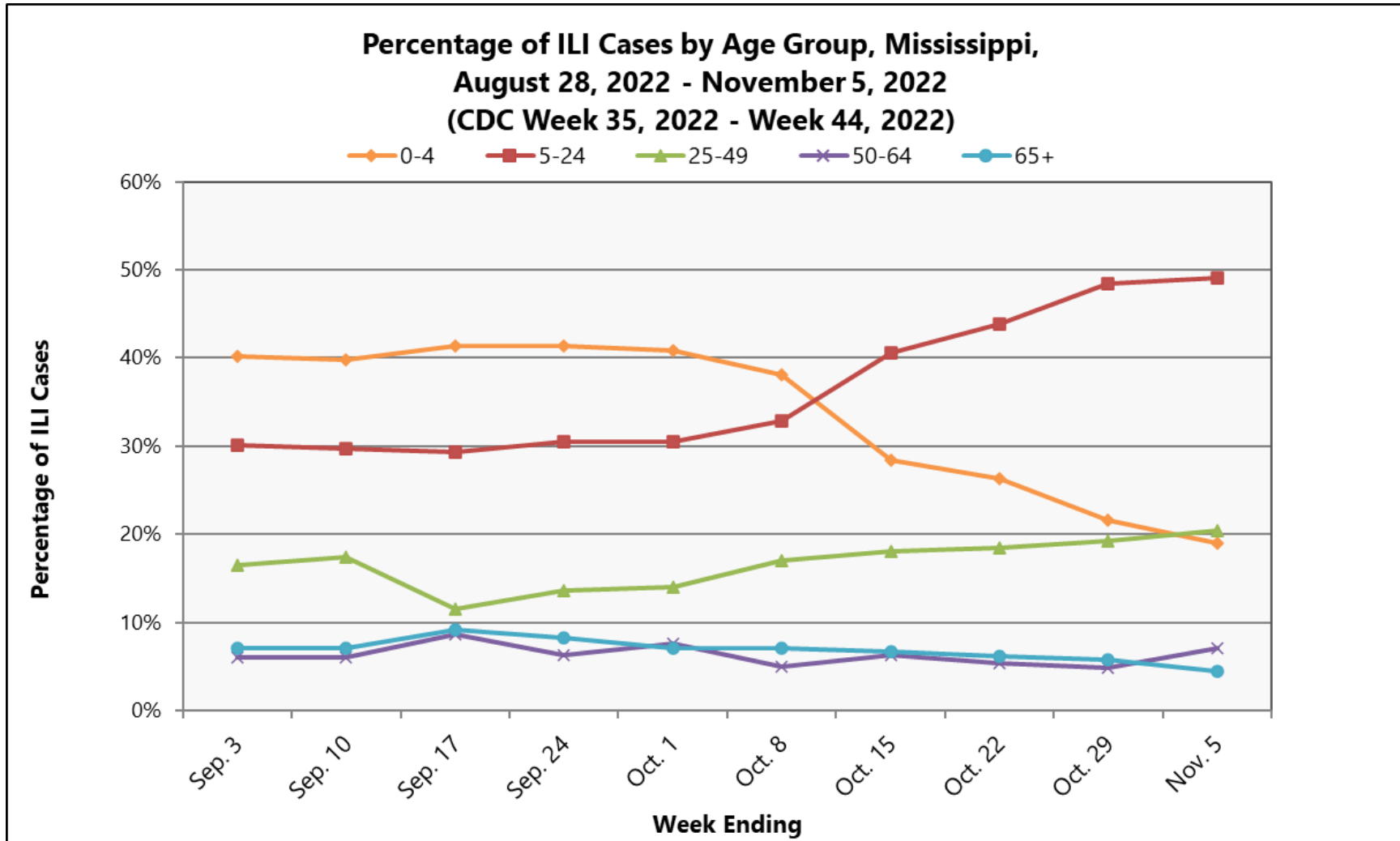


Figure 3

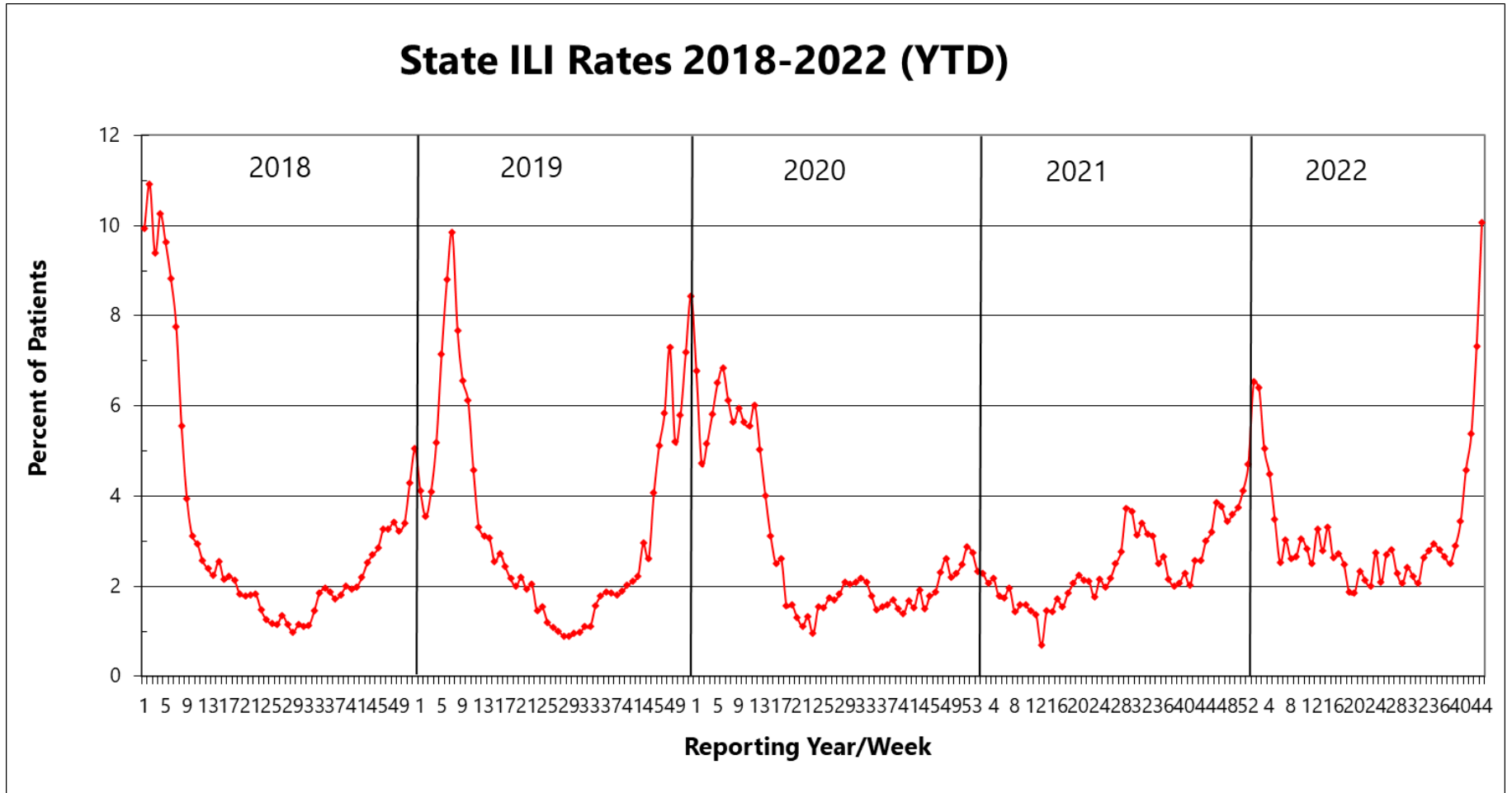


Figure 4

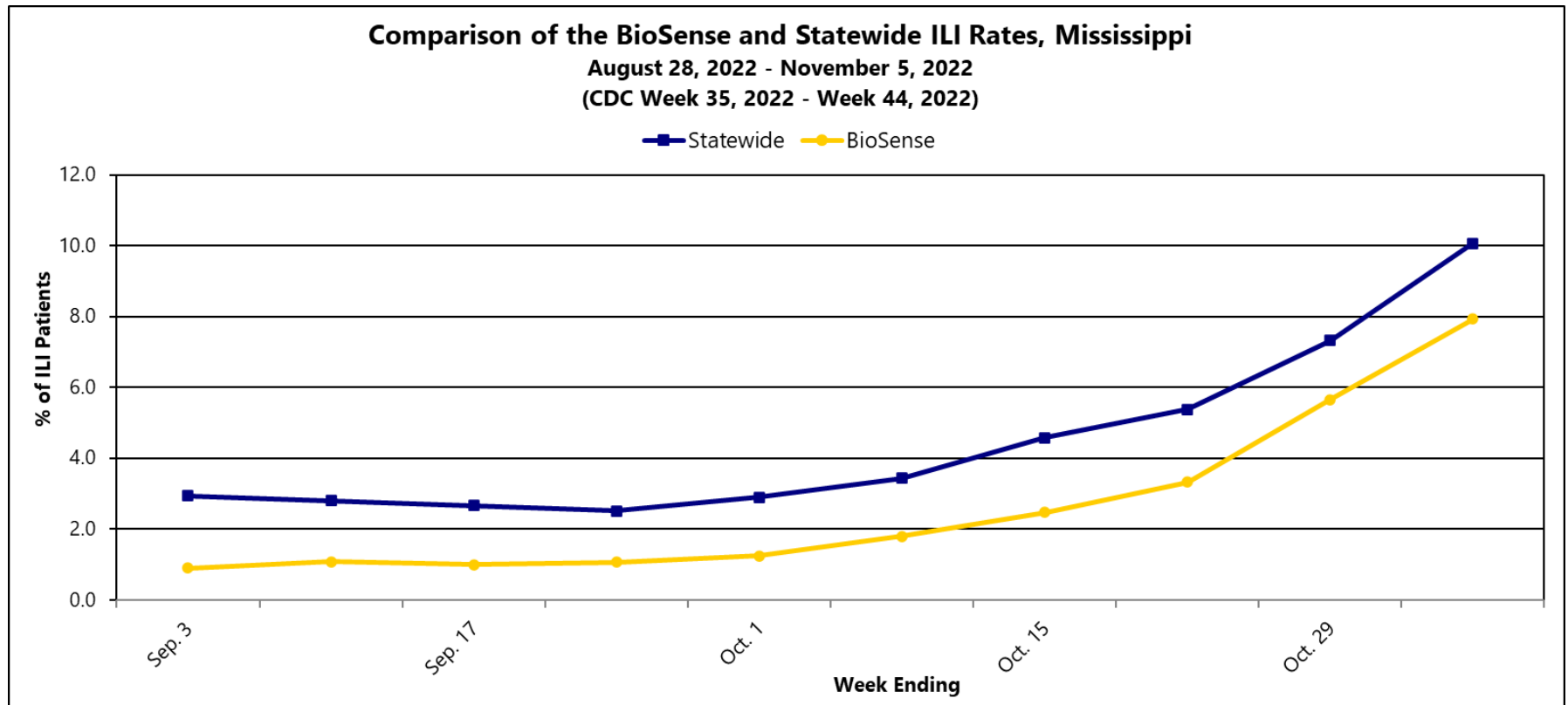


Figure 5

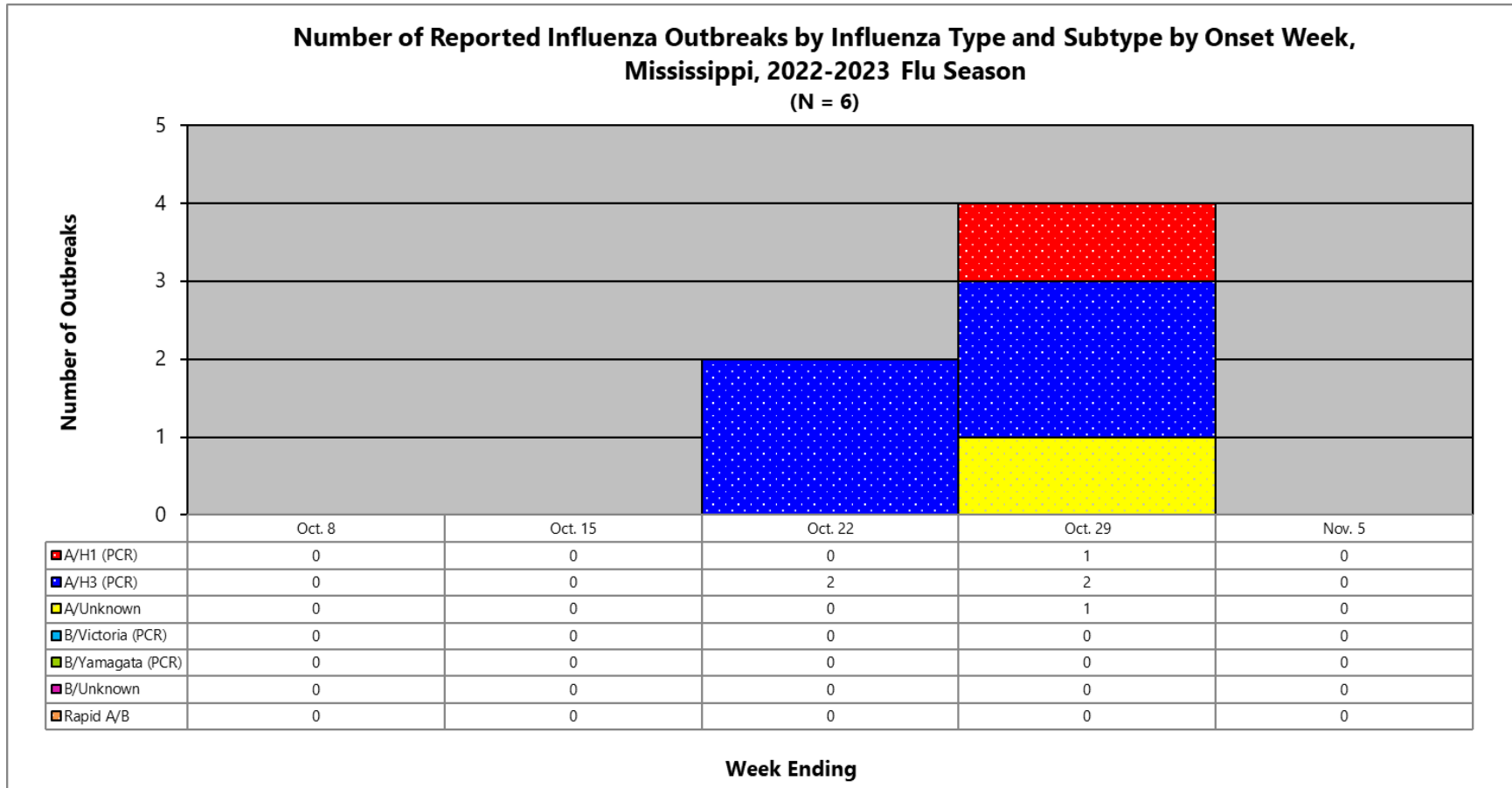


Figure 6

