

Summit County Public Health Influenza Surveillance Report

2024 - 2025 Season





Flu Surveillance Weeks 9 & 10 (12/1/2024 to 12/14/2024) Centers for Disease Control and Prevention MMWR Weeks 49 & 50

Summit County Surveillance Data:

In Weeks 9 & 10 of influenza surveillance, influenza-related activity was High¹ in Summit County.

Table 1: Overall Influenza Activity Indicators in Summit County by week				
	Week 9 MMWR 49 N (%)¹	Week 10 MMWR 50 N (%)¹	Percent change from previous week	Number of weeks increasing or decreasing
Lab Reports: Influenza				
<u>Test Performed</u>	927	961	3.7%	2↑
Positive Tests (Number and %)	18 (1.9%)	39 (4.1%)	109.0%	2↑
Influenza A (Number and %)	17 (1.8%)	37 (3.9%)	109.9%	2个
Influenza B (Number and %)	1 (0.1%)	2 (0.2%)	92.9%	1↑
Acute care hospitalizations for Influenza:	3	5	66.7%	2↑
Schools absenteeism ²	10.5	8.8	-16.5%	1↓
Deaths (occurred in Summit County)				
Pneumonia associated	8	5	-37.5	1↓
Influenza associated	0	0	-	-
COVID-19 associated	1	1	0.0%	-
Emergency room visits (EpiCenter) ³ (F	igure 3)**			
Total ED Visits	6375	6597	3.5 %	2↑
Constitutional Complaints	674	743	6.5%	2↑
Fever and ILI	138	161	12.7%	1↑

¹⁾ School Absence is for any reason. Percent is from total number of students enrolled. Data was collected from approx. 6 schools or school districts throughout Summit County (n = approx. 30,000 students)

Note: Data is provisional and may be updated as more information is received. Percentages should be interpreted with caution. Small changes in number can result in large changes in percent. When a percentage, or prevalence, is available in this table, the percent change will be calculated from those values

Lab reports:

During week 9 and 10 of influenza surveillance, reporting Summit County facilities performed 1,888 tests, of which 57 had positive results.

(Figure 4) Note:
Influenza data are
collected from selected
reporting partners and
do not represent
positivity rates for the
entire county.

Acute Care Hospitalizations:

There were 8 reported admissions during week 9 and 10. **Figure 2** displays hospitalizations in Summit County.

School absenteeism:

includes absences regardless of reasoning. There was a 16.5% decrease in school absences from week 8 to 9.

0 deaths related to influenza, 2 COVID-19 related death and 13 pneumonia related deaths occurred in Summit County during week 9 & 10.

²⁾ Notable changes in Epicenter data are the result of a change in reporting practices from at least one of the reporting facilities. **These figures should not be compared to previous year's reports** Notable decrease/ elimination of ER Related data may be the result of a reporting delay and not reflective of actual trends. This will be revised in future reports.

¹The measure of 'influenza-related activity in Summit County' will be determined based on week to week comparison of table 1 indicators. The scale is as follows: 1/5 indicators increase (very low), 2/5 indicators increase (low), 3/5 indicators increase (moderate), 4/5 indicators increase (high), 5/5 indicators increase (very high).

Figure 1 displays weekly counts of deaths occurring in Summit County associated with pneumonia, COVID-19 and influenza. There have been 0 reported influenza associated deaths in Summit County this surveillance period.

deaths due to pneumonia deaths due to COVID-19 deaths due to influenza 15 Count of Deaths

Figure 1. Weekly Summit County death counts associated with pneumonia, COVID-19 and influenza during 2024-2025 season

Hospitalizations: In Week 9, Summit County hospitals reported 3 influenza-associated hospitalizations. In Week 10 there were 5 new influenza-associated hospitalizations. Figure 2 displays weekly confirmed hospitalization counts for Summit County.

Reporting Week

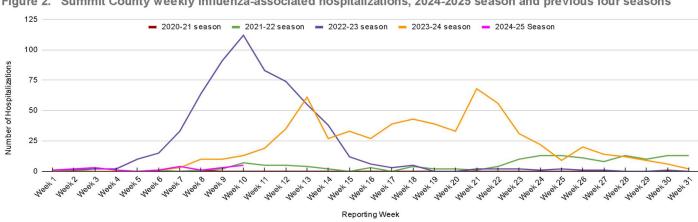


Figure 2. Summit County weekly influenza-associated hospitalizations, 2024-2025 season and previous four seasons

EpiCenter collects and analyzes health related data in real time to provide information about the health of the community. This system tracks ER visits related to constitutional complaints and fever and ILI. Figure 3 displays the weekly ER visits related to ILI and flu symptoms in Summit County by age group. **These figures should not be compared to previous year reports. **

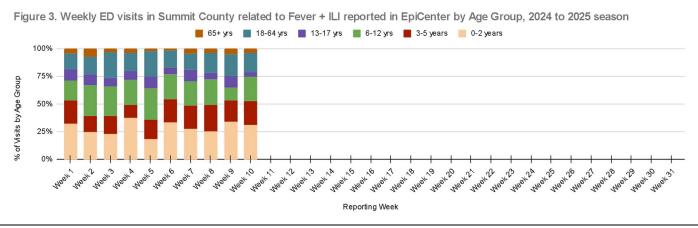
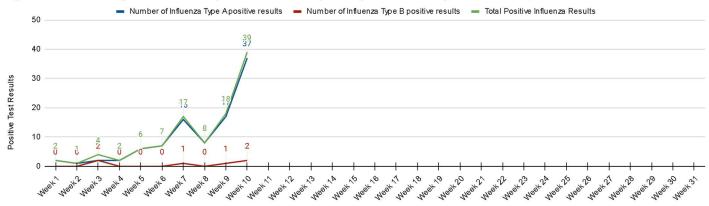
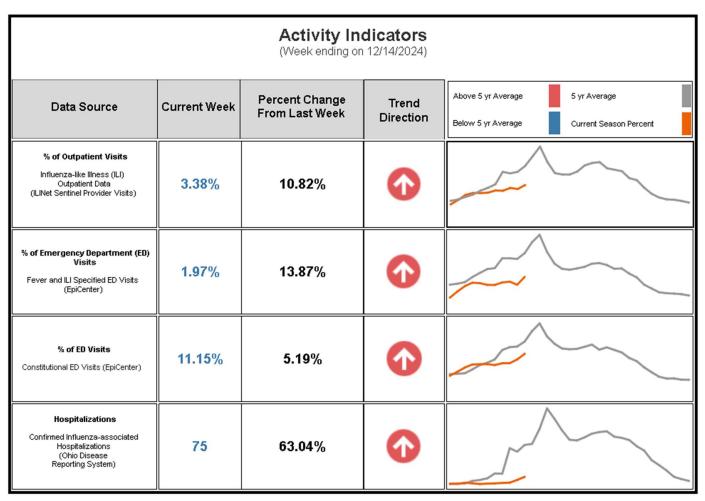


Figure 4. Influenza diagnostic tests with positive results completed by Summit County health facilities, 2024 to 2025 season



Ohio Influenza Activity: from the Ohio Department of Health:

Current Ohio Activity Level (Geographic Spread) - Moderate



Footnotes:

Ohio Department of Health Seasonal Influenza Activity Summary

 $\textbf{Source:} \ \underline{\text{https://odh.ohio.gov/know-our-programs/seasonal-influenza/influenza-dashboard}$

⁻ Emergency Department Visits (EpiCenter): A five-year average, which includes data from the 2017-2018 and 2018-2019 seasons in addition to data from the 2021-2022 through 2023-2024 seasons is displayed in the figure above. EpiCenter data from the 2019-2020 and 2020-2021 influenza seasons have been omitted from the five-year baseline average due to data instability and the effects of the COVID-19 pandemic.

⁻ Sentinel Providers (ILINet): A five-year average, which includes data from the 2017-2018 and 2018-2019 seasons in addition to data from the 2021-2022 through 2023-2024 seasons is displayed in the figure above. ILINet data from the 2019-2020 and 2020-2021 influenza seasons have been omitted from the five-year baseline average due to data instability and the effects of the COVID-19 pandemic.

⁻ Influenza-associated Hospitalizations (ODRS): A five-year average, which includes data from the 2017-2018 and 2018-2019 seasons in addition to data from the 2021-2022 through 2023-2024 seasons is displayed in the figure above. Influenza-associated hospitalization data from the 2019-2020 and 2020-2021 influenza seasons have been omitted from the five-year baseline average due to data instability and the effects of the COVID-19 pandemic.

National Surveillance: from Centers for Disease Control and Prevention (CDC):

National Outpatient Illness Surveillance:

Nationally, during Week 50, 3.8% of patient visits reported through ILINet were due to respiratory illness that included fever plus a cough or sore throat, also referred to as ILI. This week's percentage increased (change of > 0.1 percentage points) compared to Week 49 and is above the national baseline of 3.0% for the third consecutive week. The percentage of visits for ILI increased (change of > 0.1 percentage points) in all HHS regions except Region 3, which remained stable (change of ≤0.1 percentage points) compared to Week 49 but has been increasing over the past several weeks. All HHS regions are above their respective baselines, except Region 8, which is still below its baseline. Multiple respiratory viruses are co-circulating, and the relative contribution of influenza virus infections to ILI varies by location.

Figure 5. Percentage of Outpatient Visits for Respiratory Illness reported By the U.S. Outpatient Influenza-like Illness Surveillance Network (ILINet), Weekly National Summary, 2024-2025 and Selected Previous Seasons.

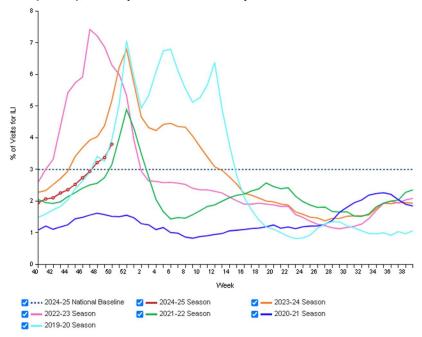
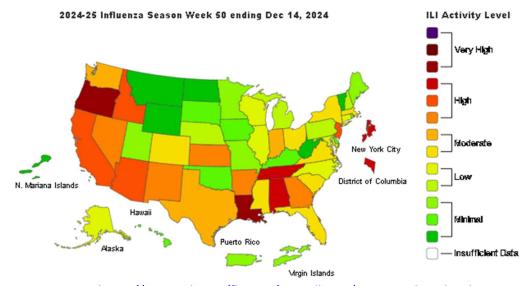


Figure 6. Influenza-like illness (ILI) activity level indicator determined by data reported to ILINet



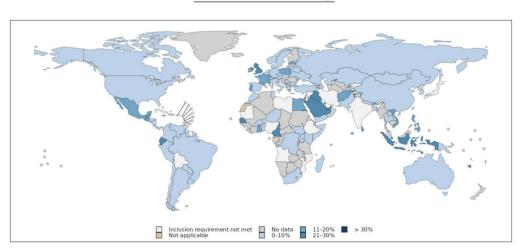
Source: https://www.cdc.gov/fluview/surveillance/2024-week-50.html

Global Surveillance:

Influenza Update N° 506 Published 18 December 2024 | For reporting Week 49, ending 08 December 2024 | Summary

Influenza

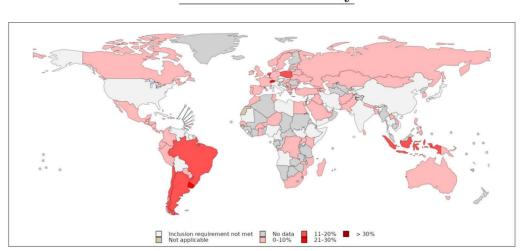
- In the Northern hemisphere, influenza activity was elevated in Northern Europe (mostly A(H1N1)pdm09 detected), South West Europe (mostly A(H1N1)pdm09 and B), Eastern Europe (due to co-circulation of influenza viruses), Central America and the Caribbean (mostly A(H3N2)), Western Africa (mostly A(H3N2) and B), Middle Africa (mostly A(H1N1)pdm09 and A(H3N2)), Northern Africa (mostly A(H3N2)), Western Asia (due to co-circulation of influenza viruses), Southern Asia (mostly A(H1N1)pdm09), and South East Asia (mostly A(H1N1)pdm09 and B). Activity increased in several countries in Europe and Asia.
- In the Southern hemisphere, influenza activity was elevated and increased in a single country in Tropical South America (due mostly to B viruses) but was similar or declined in all other reporting countries.



Influenza activity

SARS-CoV-2

SARS-CoV-2 activity remained elevated in countries in South America and a few countries in Europe and South
East Asia. Increased activity was reported from parts of Eastern Europe and South America but was similar or
declined in all other reporting countries.



SARS-CoV-2 activity

Source: https://www.who.int/publications/m/item/influenza-update-n--506

About this report: Reporting agencies include labs, hospitals, and schools. Agencies are distributed throughout Summit County and report different indicators of flu activity including total lab tests, numbers of positive tests and type, school absences, and influenza like illness (ILI). Number of deaths associated with influenza and pneumonia are gathered from the Summit County Office of Vital Records death listings. Emergency room visits for complaints related to influenza are obtained by syndromic surveillance system (Epicenter).

Special thanks to all agencies who report Influenza related data weekly.

Reporting from participants may not be complete each week. Numbers may change as updated reports are received. For questions, please contact Julie Zidones at the Summit County Public Health Communicable Disease Unit (330-375-2662 or cdu@schd.org). This report was issued on December 20, 2024.