



Summit County Public Health Influenza Surveillance Report 2024 – 2025 Season



Public Health
Prevent. Promote. Protect.

Report #1 Flu Surveillance Weeks 1 & 2 (10/6/2024 to 10/19/2024) Centers for Disease Control and Prevention MMWR Weeks 41 & 42

Summit County Surveillance Data:

In Weeks 1 & 2 of influenza surveillance, influenza-related activity was moderate¹ in Summit County.

Table 1: Overall Influenza Activity Indicators in Summit County by week				
	Week 1 MMWR 41 N (%) ¹	Week 2 MMWR 42 N (%) ¹	Percent change from previous week	Number of weeks increasing or decreasing
Lab Reports: Influenza				
Test Performed	873	882	1.0%	1↑
Positive Tests (Number and %)	2 (0.2%)	1 (0.1%)	-50.5%	1↓
Influenza A (Number and %)	2 (0.2%)	1 (0.1%)	-50.5%	1↓
Influenza B (Number and %)	0 (0.0%)	0 (0.0%)	-	-
Acute care hospitalizations for Influenza:	1	2	100.0%	1↑
Schools absenteeism²	7.8	8.7	11.7%	1↑
Deaths (occurred in Summit County)				
Pneumonia associated	3	6	100.0%	1↑
Influenza associated	0	0	0	-
COVID-19 associated	2	1	-50.0%	1↓
Emergency room visits (EpiCenter)³ (Figure 3)**				
Total ED Visits	5753	6900	19.9%	1↑
Constitutional Complaints	611	653	-10.9%	1↓
Fever and ILI	118	150	6.0%	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)				
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.				
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 1 and 2 of influenza surveillance, reporting Summit County facilities performed 1,755 tests, of which 3 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 3 reported admissions during week 1 and 2. **Figure 2** displays hospitalizations in Summit County.

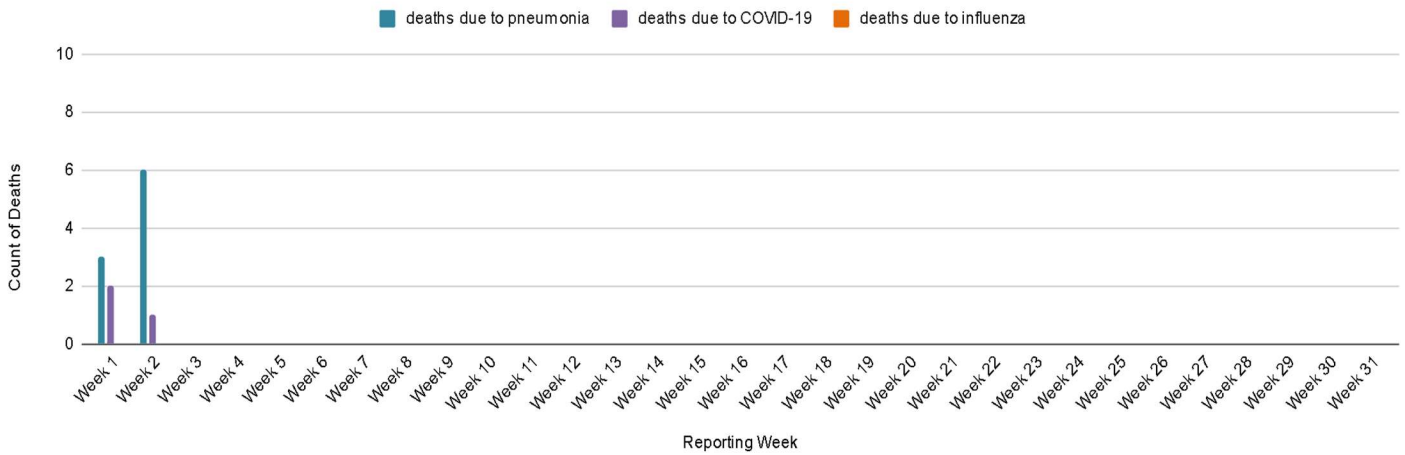
School absenteeism includes absences regardless of reasoning. There was an 11.7% increase in school absences from week 1 to 2.

0 deaths related to influenza, 3 COVID-19 related deaths and 9 pneumonia related deaths occurred in Summit County during week 1 & 2. Pneumonia associated deaths increased and COVID-19 associated deaths decreased in week 2.

Figure 1 displays weekly counts of deaths occurring in Summit County associated with pneumonia, COVID-19 and influenza.

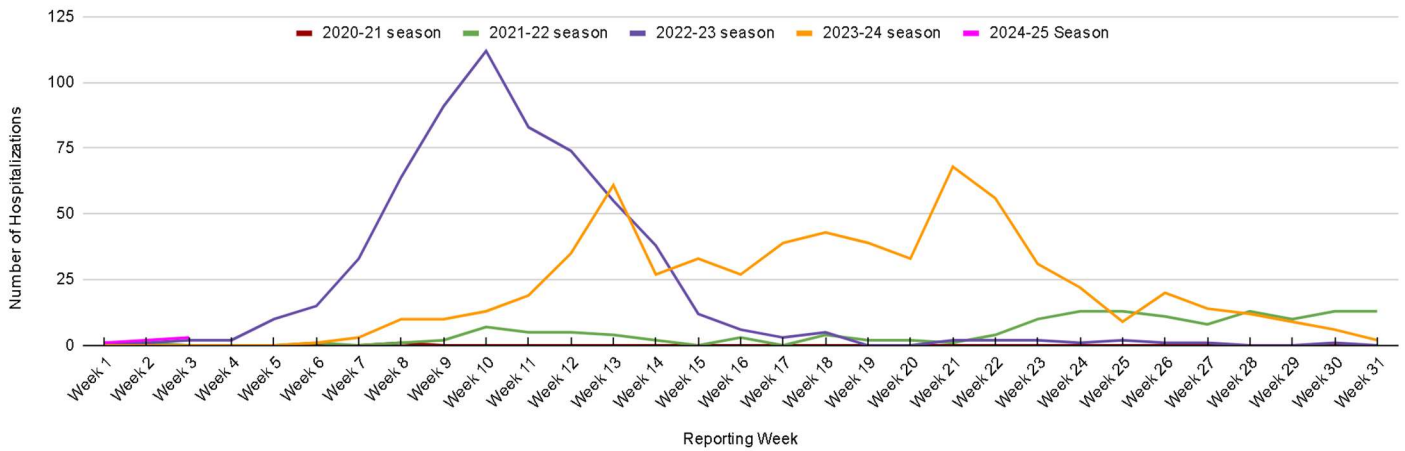
¹The measure of 'influenza-related activity in Summit County' will be determined based on week to week comparison of table 1 indicators. The scale is as follows: 1/5 indicators increase (very low), 2/5 indicators increase (low), 3/5 indicators increase (moderate), 4/5 indicators increase (high), 5/5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

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



Hospitalizations: In Week 1, Summit County hospitals reported 1 influenza-associated hospitalization. In Week 2 there were 2 new influenza-associated hospitalizations. **Figure 2** displays weekly confirmed hospitalization counts for Summit County

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 3. Weekly ED visits in Summit County related to Fever + ILI reported in EpiCenter by Age Group, 2024 to 2025 season

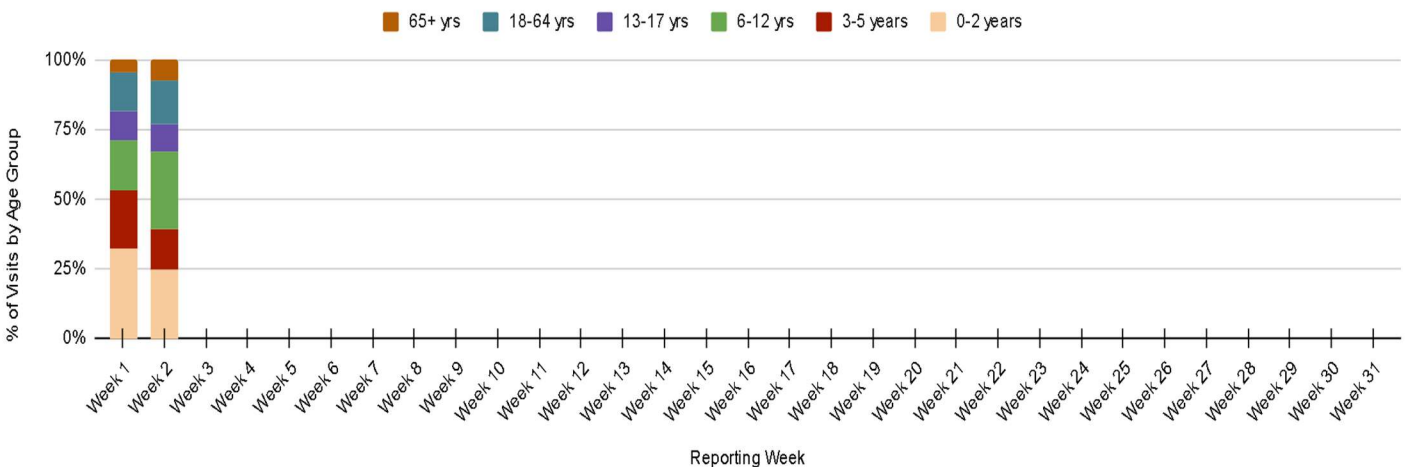
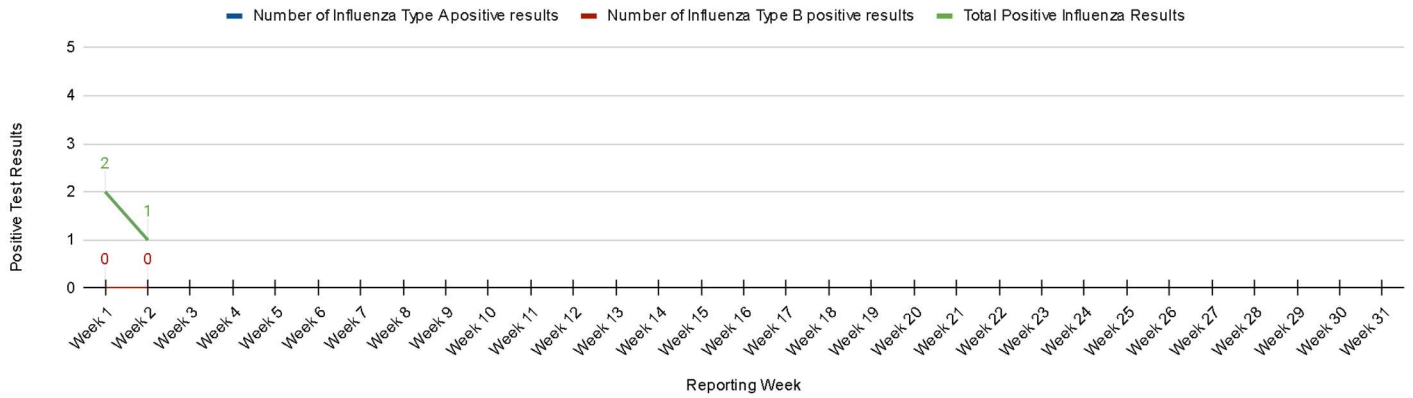
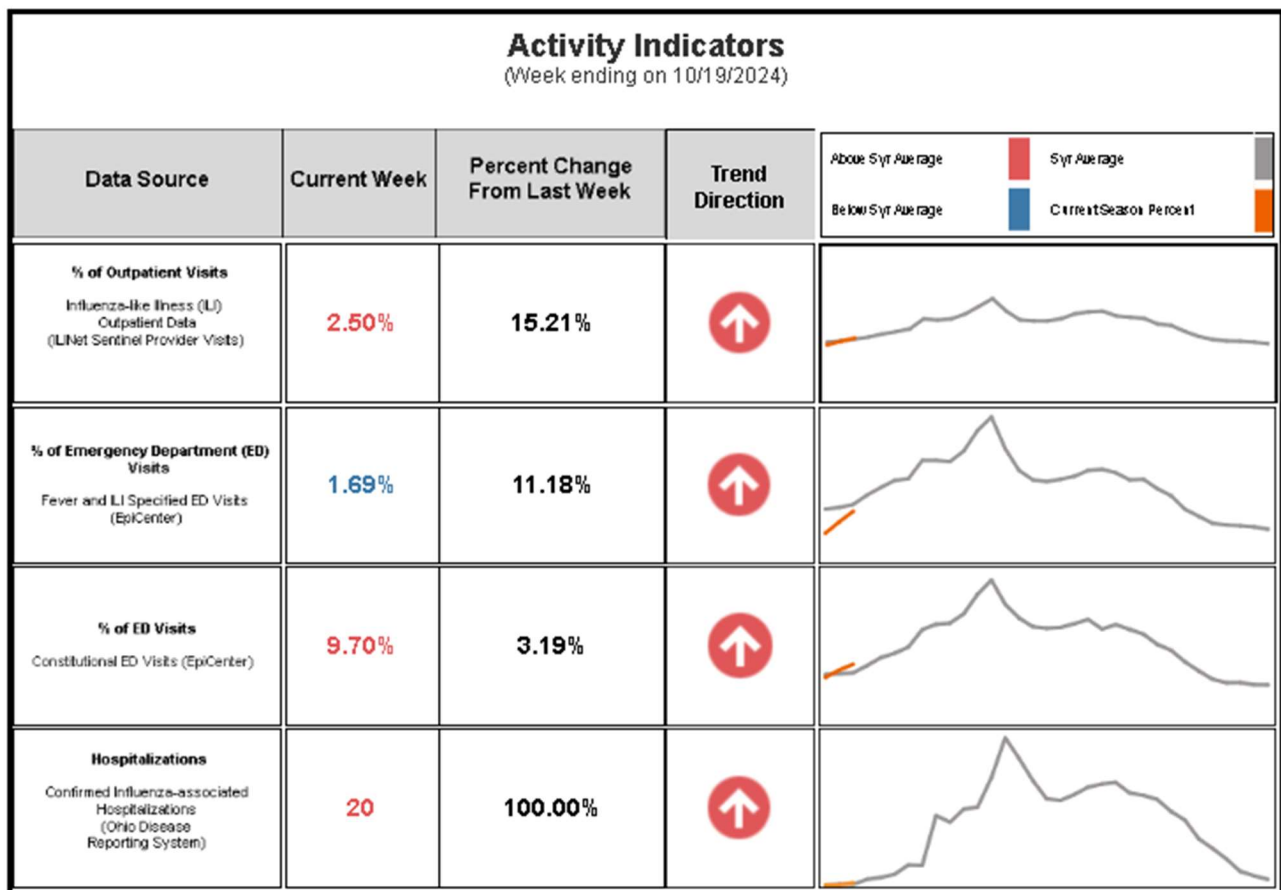


Figure 4. Influenza diagnostic tests with positive results completed by Summit County health facilities, 2024 to 2025 season



Ohio Influenza Activity: from the Ohio Department of Health:

Current Ohio Activity Level (Geographic Spread) –Low



Footnotes:

- **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 (ILNet):** 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. ILNet 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.

Ohio Department of Health Seasonal Influenza Activity Summary

Source: <https://odh.ohio.gov/know-our-programs/seasonal-influenza/influenza-dashboard>

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

National Outpatient Illness Surveillance:

Nationally, during Week 42, 2.1% 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 remained stable (change of ≤ 0.1 percentage points) compared to Week 41 and is below the national baseline of 3.0%. All 10 HHS regions are below their respective baselines. The percentage of visits for ILI increased slightly in regions 1 and 3, decreased slightly in regions 6 and 8, and remained stable in all other regions (2, 4, 5, 7, 9, and 10) in Week 42 compared to Week 41. Multiple respiratory viruses are co-circulating, and the relative contribution of influenza virus infection 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.

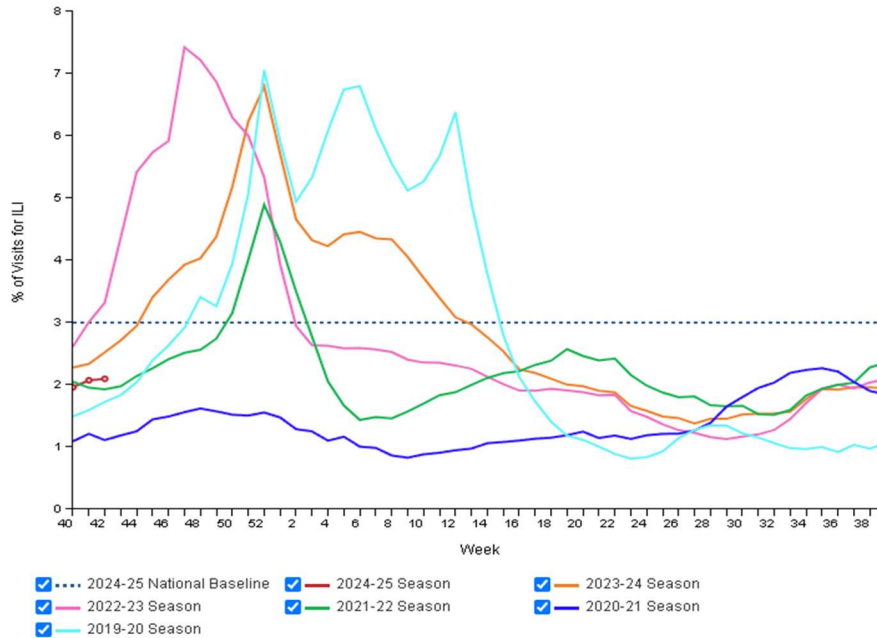
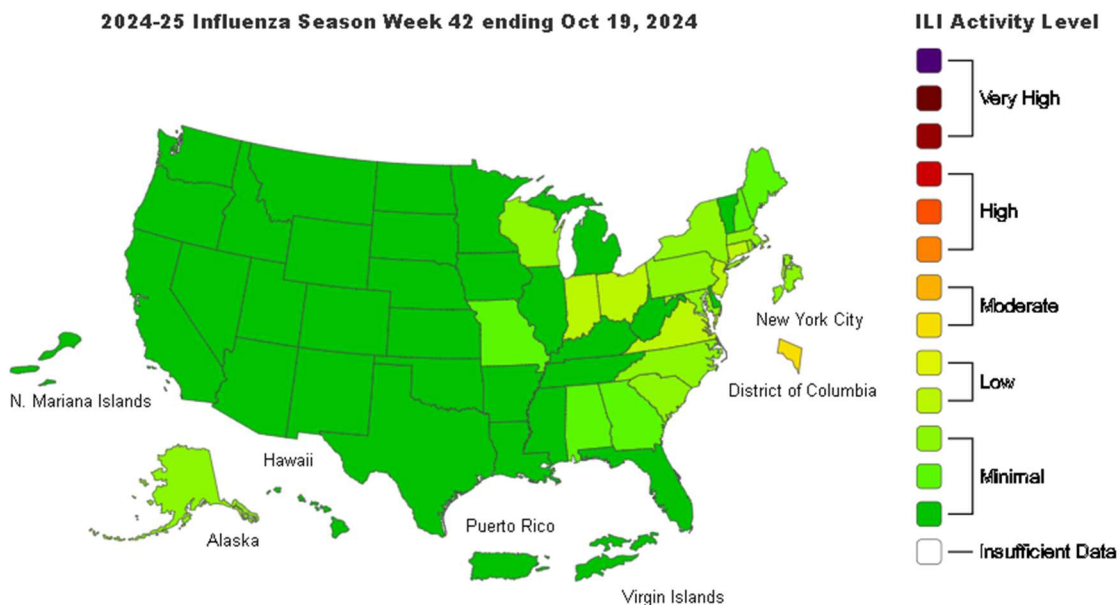


Figure 6. Influenza-like illness (ILI) activity level indicator determined by data reported to ILINet



Source: <https://www.cdc.gov/fluview/surveillance/2024-week-42.html>

Global Surveillance:

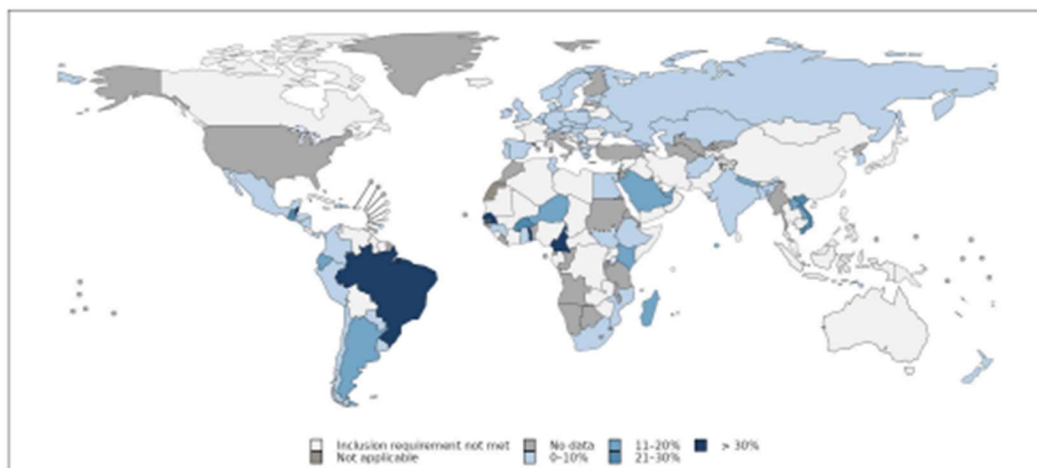
Influenza Update N° 498 23 October 2024, based on data up to 13 October 2024

Summary

Influenza

- In the Northern hemisphere, influenza activity in temperate countries remained at inter-epidemic levels. Activity was elevated in some countries in Western Africa (due mostly to A(H3N2) and B viruses), Middle Africa (due mostly to A(H3N2) viruses), Western Asia (due mostly to A(H1N1)pdm09 viruses), Southern Asia (due mostly to A(H1N1)pdm09 viruses), South East Asia (due mostly to A(H1N1)pdm09 viruses) and Central America and the Caribbean (due mostly to A(H3N2) viruses). Activity increased in some countries in Western Africa, Middle Africa and Southern Asia.
- In the Southern hemisphere, influenza activity remained elevated in some countries in South America (due to B viruses), Eastern Africa (due to A and B viruses) and Oceania Melanesia Polynesia (due to influenza A). Increased activity was reported in one country in Oceania Melanesia Polynesia and Eastern Africa. SARS-CoV-2

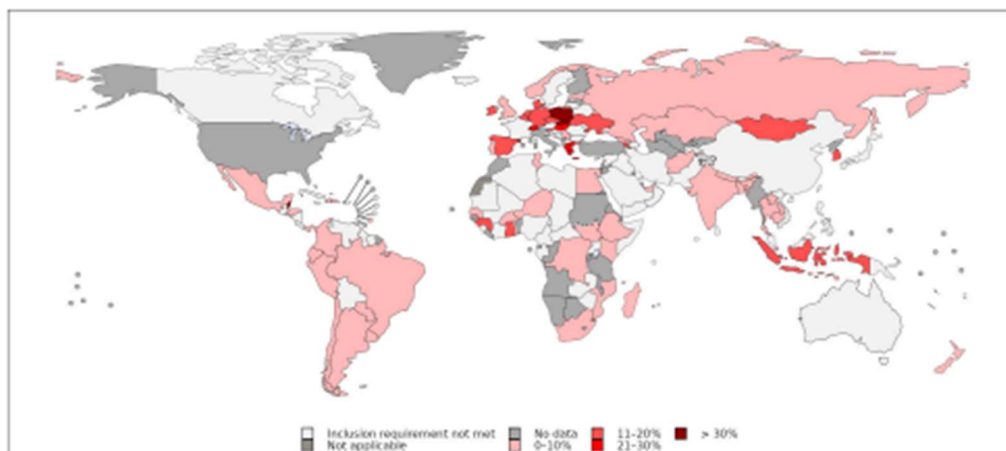
Influenza activity



SARS-CoV-2

- Activity remained elevated in many countries in Europe and in a few countries in Eastern Asia and Western Africa. Increased activity was reported in a few countries in Europe, Eastern Asia and Western Africa but declined or was similar in all other reporting countries.

SARS-CoV-2 activity



Source: <https://www.who.int/publications/m/item/influenza-update-n--498>

About this report: Reporting agencies include labs, hospitals, long-term care and community-based care providers, physician offices, university clinic, pharmacies, 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, antiviral prescriptions filled, school absences, and influenza like illness (ILI). Hospitalizations are lab confirmed for influenza and are obtained from the Ohio Disease Reporting System. 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 November 1, 2024.