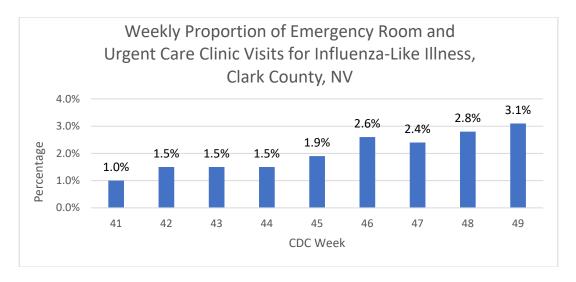


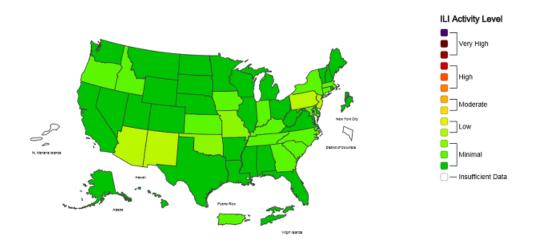
Southern Nevada Weekly Influenza Surveillance Snapshot CDC Week 49, November 29, 2020 to December 5, 2020

Summary: The Southern Nevada Health District (SNHD) Office of Epidemiology and Disease Surveillance (OEDS) began surveillance for the 2020–2021 influenza season on September 27, 2020 and will continue through May 22, 2021. Influenza surveillance for Clark County, Nevada includes data collected from local acute care hospitals and other healthcare providers. As of December 5, 2020, four hospitalized cases and zero deaths associated with influenza had been reported to SNHD for Clark County. During week 49, the percentage of emergency room (ER) and urgent care clinic visits for influenza-like illness (ILI) in Clark County was 3.1% which was higher than week 48 (2.8%). Nationwide, seasonal influenza activity in the United States remains lower than usual for this time of the year. According to the U.S. Outpatient Influenza-like Illness Surveillance Network (ILINet), 1.6% of reported patient visits were due to ILI, which was similar to the previous week (1.6%). The US ILI activity remains below the national baseline of 2.6%. Among 54 states/jurisdictions, the ILI activity level in the state of Nevada is minimal. ILI surveillance may be impacted by Covid-19 pandemic and should be interpreted with caution.

Weekly Percentage of Emergency Room and Urgent Care Clinic Visits for ILI, Clark County, NV



National ILI Activity Level – 2020-2021 Influenza Season CDC Week 49 ending December 5, 2020



Each flu season, the CDC tracks a few important metrics that help tell the story of how severe the current flu season is compared to previous seasons. Here are a few numbers to track.

PIC Mortality - The PIC mortality rate is the rate of deaths attributed to pneumonia, influenza, or COVID-19. In a non-COVID year, this is called P&I (pneumonia and influenza). Based on National Center for Health Statistics (NCHS) mortality surveillance data available on December 10, 2020, 14.3% of the deaths occurring during the week ending on December 5, 2020 (week 49) in the United States were due to pneumonia, influenza, and COVID-19 (PIC). This percentage is above the epidemic threshold of 6.5% for week 49. Among the 3,052 PIC deaths reported for week 49, 2,113 (69.2%) had COVID-19 listed as an underlying or contributing cause of death on the death certificate and five listed influenza, indicating that the current increase in PIC mortality is due primarily to COVID-19 and not influenza.

Influenza-Associated Hospitalizations - The Influenza Hospitalization Surveillance Network (FluSurv-NET) conducts population-based surveillance for laboratory-confirmed influenza-related hospitalizations in select counties in the Emerging Infections Program (EIP) states and Influenza Hospitalization Surveillance Project (IHSP) states. A total of 61 laboratory-confirmed influenza-associated hospitalizations were reported by nationwide FluSurv-NET sites between October 1, 2020 and December 5, 2020 which is lower than average for this point in the season. Hospitalization rates will be presented once case counts increase to a level that produces stable rates.

Influenza-Associated Pediatric Deaths - Pediatric deaths are the number of deaths of people under the age of 18. In the 2019-2020 influenza season, there were 195 pediatric deaths in the US. As of December 5, 2020, a total of one influenza-associated pediatric death occurring during the 2020-2021 season has been reported to CDC.

Key Points:

- 1. Flu activity is unusually low at this time but may increase in the coming months.
- 2. An annual flu vaccine is the best way to protect against flu and its potentially serious complications.
- 3. If you haven't gotten your flu vaccine yet, get vaccinated now.

If you have any questions on influenza or influenza surveillance, please contact OEDS at (702) 759-1300.

Office of Epidemiology and Disease Surveillance (OEDS)