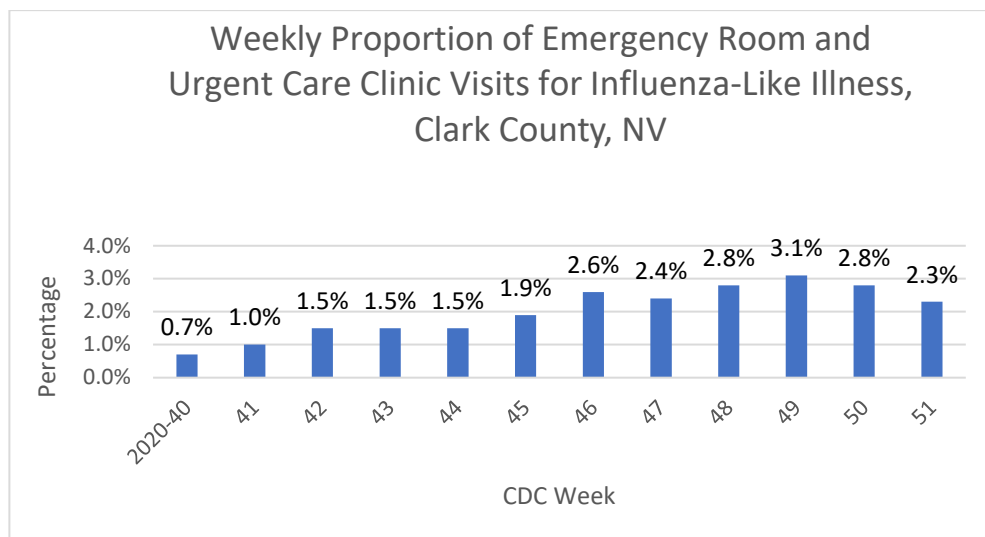




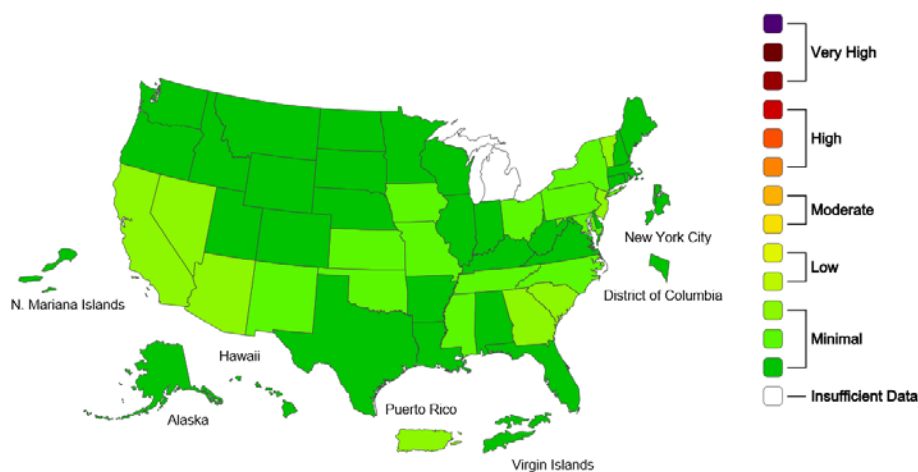
**Southern Nevada Weekly Influenza  
Surveillance Snapshot  
CDC Week 51, December 13, 2020 to December 19, 2020**

**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 19, 2020, five hospitalized cases (same as week 49) and zero deaths associated with influenza had been reported to SNHD for Clark County. During week 51, the percentage of emergency room (ER) and urgent care clinic visits for influenza-like illness (ILI) in Clark County was 2.3% which was lower than week 50 (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), 1.5% 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 51 ending December 19, 2020**



## **Influenza-associated Complications**

Flu is a respiratory disease, but people hospitalized from flu often have respiratory complications and non-respiratory complications. Respiratory complications, such as pneumonia, are the most common reason for people (36% of patients) to be hospitalized from flu. Recently, a cross-sectional study analyzed data captured by FluSurv-NET including 89,999 adults with laboratory-confirmed influenza in the US during 2010-2011 through 2017-2018 influenza seasons. The result showed that nearly half hospitalized patients also had a non-respiratory complication, and 5% of patients only experienced a non-respiratory complication from their flu infection. The most common acute non-respiratory complications reported were sepsis (23%), acute kidney injury (20%), and acute cardiovascular events (12%).

Patients with pneumonia, sepsis and acute kidney injury, had a high frequency of severe hospital outcomes, including intensive care unit (ICU) admission and in-hospital mortality, underscoring the fact that non-respiratory complications can be just as severe as respiratory complications.

### **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)