

Texas Influenza Surveillance Report 2020-2021 Season/2021 MMWR Week 21

(May 23, 2021 – May 29, 2021)
Report produced on 6/4/2021

Summary

*Please note, some aspects of influenza surveillance may be affected by current COVID-19 response activities. For information about COVID-19 in Texas, please visit www.dshs.texas.gov/coronavirus.

Compared to the previous week, the percentage of specimens testing positive for influenza reported by hospital laboratories has increased. The percentage of patient visits due to influenza-like illness (ILI) has decreased. No influenza-associated pediatric deaths were reported. No influenza-associated institutional outbreaks or school closures were reported.

Table 1: Summary of Texas Influenza (Flu) and Influenza-like Illness (ILI) Activity for the Current Week

Texas Surveillance Component	Change from Previous Week	Current Week	Previous Week†	Page of Report
Statewide ILINet Activity Indicator assigned by CDC (intensity of influenza-like illness)	No Change	Minimal	Minimal	--
Percentage of specimens positive for influenza by hospital laboratories	▲0.44%	0.61%	0.17%	1
Percentage of visits due to ILI (ILINet)	▼0.18%	1.52%	1.70%	3
Number of regions reporting increased flu/ILI activity	▼1	0	1	5
Number of regions reporting decreased flu/ILI activity	No change	3	3	5
Number of variant/novel influenza infections	No cases reported	0	0	5
Number of ILI/influenza outbreaks	Decrease	0	1	5
Number of pediatric influenza deaths	No change	0	0	7

Laboratory Results

Influenza

*In response to the COVID-19, influenza testing at Texas Public Health Laboratories has significantly decreased to increase capacity for SARS-CoV-2 testing. Please note, this will affect data in Table 3 and Figure 2.

Hospital laboratories across Texas voluntarily report influenza tests (antigen, culture, and PCR) to the National Respiratory and Enteric Virus Surveillance System (NREVSS). Providers throughout Texas also submit specimens for influenza testing (PCR) to Texas public health laboratories, including the Texas Department of State Health Services (DSHS) state laboratory in Austin and the nine Texas Laboratory Response Network (LRN) laboratories. The results reported by Texas NREVSS participants and public health laboratories for the current week are summarized in the two tables below. Additional influenza test results (rapid tests, culture, PCR) and ILI activity were reported from providers and public health departments throughout the state (see county map at the end of this report).

Table 2: Influenza Testing Performed by Texas Hospital Laboratories for the Current Week

	Week 21	Season to Date Week Ending: May 29, 2021
Number of labs reporting flu tests	16	
Number of specimens tested	1318	81447
Number of positive specimens (%)†	8 (0.61%)	868 (1.07%)
Percentage of total tests that were antigen detection tests		
Positive specimens by type/subtype [n (%)]		
Influenza A	7 (87.50%)	212 (24.42%)
Subtyping performed	0 (0.00%)	7 (3.30%)
A (H1N1)	0 (0.00%)	3 (42.86%)
A (H3N2)	0 (0.00%)	4 (57.14%)
Subtyping not performed	7 (100.00%)	205 (96.70%)
Influenza B	1 (12.50%)	656 (75.58%)

Table 3: Influenza Testing Performed by Texas Public Health Laboratories for the Current Week

	Week 21	Season to Date Week Ending: May 29, 2021
Number of labs reporting flu tests	3	
Number of specimens tested	18	8499
Number of positive specimens (%)†	0 (0.00%)	5 (0.06%)
Positive specimens by type/subtype/lineage [n (%)]		
Influenza A	0 (0.00%)	0 (0.00%)
Subtyping performed	0 (0.00%)	0 (0.00%)
A (H1N1)	0 (0.00%)	0 (0.00%)
A (H3N2)	0 (0.00%)	0 (0.00%)
Subtyping not performed	0 (0.00%)	0 (0.00%)
Influenza B	0 (0.00%)	5 (100.00%)
Lineage testing performed	0 (0.00%)	5 (100.00%)
B/Victoria	0 (0.00%)	5 (100.00%)
B/Yamagata	0 (0.00%)	0 (0.00%)
Lineage testing not performed	0 (0.00%)	0 (0.00%)
Other	0 (0.00%)	0 (0.00%)

†Other denotes specimens with coinfections (i.e. one specimen was positive for both influenza A (H1N1) and influenza A (H3N2))

Other Respiratory Viruses

The NREVSS system collects information on a variety of respiratory viruses in addition to influenza including parainfluenza virus, respiratory syncytial virus (RSV), rhinovirus, human metapneumovirus (HMPV), seasonal coronavirus, and respiratory adenovirus. The results for the current week are summarized below.

Table 4: Non-Influenza Respiratory Virus Testing Performed by Texas NREVSS Laboratories for the Current Week

Virus	Number of Laboratories Testing	Tests Performed	Positive Tests	Percentage of Tests Positive
Adenovirus (respiratory)	11	896	39	4.35%
HMPV	10	885	2	0.23%
Parainfluenza virus	12	897	204	22.74%
Rhino/enterovirus	9	871	243	27.90%
RSV†^	12	1082	59	5.45%
Seasonal coronavirus (does not include MERS-CoV or COVID-19)	7	595	49	8.24%

†RSV tests displayed in the table are a combination of antigen detection, PCR, and culture tests. Some non-NREVSS reporters also contribute to the RSV data.

^Numbers and percentage may differ from the weekly RSV report. The weekly RSV report may be accessed at <https://www.dshs.state.tx.us/RSV/disease/rsv-Data.aspx>.

U.S. Outpatient Influenza-like Illness Surveillance Network (ILINet)

* Please note, the COVID-19 pandemic is affecting healthcare seeking behavior. The number of persons and their reasons for seeking care in the outpatient and ED settings is changing. These changes impact data from ILINet in ways that are difficult to differentiate from changes in illness levels, therefore ILINet data should be interpreted with caution.

Table 5: Texas ILINet Reporting and Patient Visit Summary for the Current Week

Week 21	
Number of providers reporting	56
Number of providers reporting patient visits	55
Number (%) of providers with at least one ILI case	40 (72.73%)
Percentage of all visits due to ILI	1.52%
Texas ILINet baseline [‡] , 2020-2021	5.26%

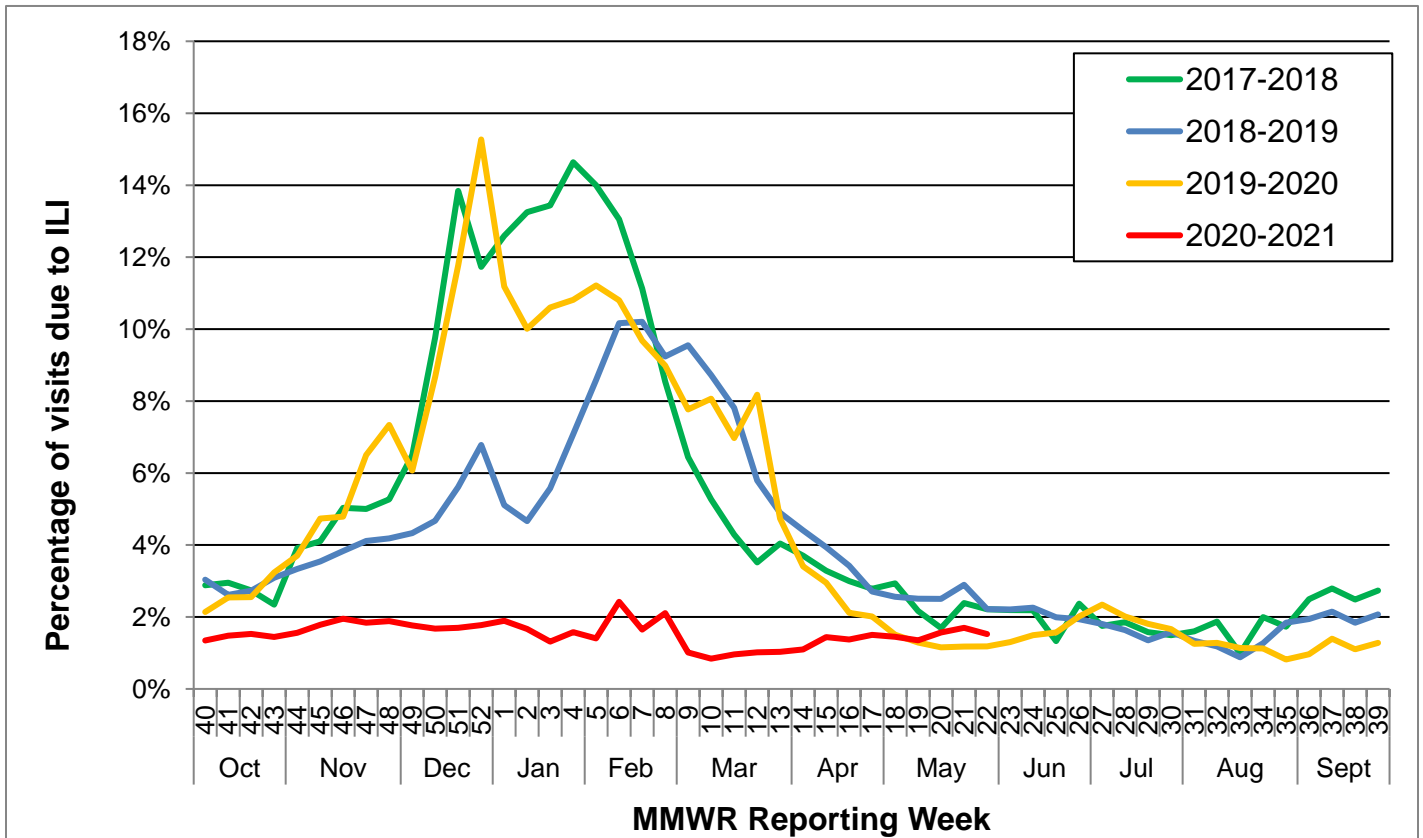
[‡]The baseline is the mean percentage of patient visits for ILI during non-influenza weeks for the previous three seasons plus two standard deviations. A “non-influenza week” is defined as a week that accounted for less than 2% of the season’s total number of specimens that tested positive for influenza

Table 6: Percentage of Visits for Influenza-like Illness Reported by Texas ILINet Providers (as of 6/3/2021 3.10 PM)

Week	Providers Reporting	Number of ILI Cases by Age Group (Years)					Total ILI (all ages)	Total Patients	ILI
		0-4	5-24	25-49	50-64	65+			
202040	65	97	203	158	69	38	565	41933	1.35%
202041	79	108	220	231	116	68	743	50142	1.48%
202042	74	138	218	227	104	58	745	48710	1.53%
202043	64	107	203	183	75	46	614	42505	1.44%
202044	76	120	204	244	99	53	720	46159	1.56%
202045	82	141	270	320	109	65	905	50804	1.78%
202046	79	154	286	353	146	99	1038	53139	1.95%
202047	77	140	256	328	130	82	936	50833	1.84%
202048	79	96	206	281	145	73	801	42465	1.89%
202049	70	127	208	284	108	67	794	45041	1.76%
202050	80	123	201	290	122	98	834	49791	1.68%
202051	65	122	166	204	87	59	638	37525	1.70%
202052	75	114	143	256	122	87	722	40748	1.77%
202053	65	116	146	258	115	104	739	39032	1.89%
202101	79	125	194	303	178	72	872	52244	1.67%
202102	66	111	124	159	82	63	539	40913	1.32%
202103	77	112	203	258	126	67	766	48554	1.58%
202104	75	87	175	199	86	47	594	42326	1.40%
202105	80	147	372	441	180	56	1196	49396	2.42%
202106	40	38	68	40	27	10	183	11091	1.65%
202107	39	11	6	14	6	7	44	2088	2.11%
202108	61	117	133	112	47	41	450	44415	1.01%
202109	77	89	129	100	45	28	391	46484	0.84%

Week	Providers Reporting	Number of ILI Cases by Age Group (Years)					Total ILI (all ages)	Total Patients	ILI
		0-4	5-24	25-49	50-64	65+			
202110	59	97	114	80	34	23	348	36299	0.96%
202111	72	130	137	114	52	26	459	45051	1.02%
202112	72	110	125	119	52	27	433	41977	1.03%
202113	75	153	222	106	46	19	546	49660	1.10%
202114	74	208	280	175	67	23	753	52299	1.44%
202115	73	192	251	212	56	24	735	53575	1.37%
202116	58	200	238	150	37	32	657	43677	1.50%
202117	71	238	252	195	64	27	776	53602	1.45%
202118	72	257	246	160	50	30	743	55025	1.35%
202119	71	302	247	171	72	21	813	51787	1.57%
202120	55	369	211	143	45	23	791	46557	1.70%
202121	56	272	192	160	52	30	706	46354	1.52%

Figure 1: Percentage of Visits Due to Influenza-like Illness Reported by Texas ILINet Participants, 2017–2021 Seasons



Reports from Health Service Regions

Reports were received from five Health Service Regions (HSRs) during week 21.

Table 7: Influenza Activity Compared to week 20 by Health Service Region (HSR)

Influenza Activity Comparison	Health Service Region (HSR)
Increased	
Same	2/3
Decreased	7, 8, and 11
Unsure	1

Variant Influenza Viruses

No variant or novel influenza viruses have been detected in Texas during the 2020-2021 season.

Institutional Outbreaks and School Closures

No institutional outbreaks or school closures were reported in week 21 during the 2020-2021 season.

P&I Mortality Surveillance Data

***Deaths due to COVID-19 may be classified as pneumonia deaths or influenza deaths (deaths due to “flu” or “flu-like illness”) in the absence of positive SARS-CoV-2 test results.**

Pneumonia and influenza (P&I) death data are obtained from death certificates of Texas residents whose underlying or contributing cause(s) of death is reported as pneumonia or influenza. P&I deaths are identified based on ICD-10 multiple cause of death codes. P&I deaths are based on ICD-10 pneumonia and influenza mortality codes.

Six thousand four hundred fifty-four (6,454) P&I deaths have been reported in Texas during the 2020-2021 influenza season.

Table 8: Texas P&I Deaths Occurring Sept. 27, 2020 – May 25, 2021* by Age

Age Category (years)	Number of P&I Deaths ⁺	Mortality Rate (per 100,000)
0 - 4	15	0.69
5 - 17	<10	0.16
18 - 49	408	3.02
50 - 64	1180	22.39
65 +	4842	120.63
Overall	6454	21.13

*NOTE: Data are provisional and subject to change, errors, and duplicates

⁺ If the cell count is less than 10, the number of P&I deaths is suppressed and <10 is written in the cell.

Table 9: Texas P&I Deaths Occurring Sept. 27, 2020 – May 25, 2021* by Health Service Region (HSR)

HSR	Number of P&I Deaths	Mortality Rate (per 100,000)
1	239	25.36
2/3	1873	21.18
4/5N	562	33.94
6/5S	1536	19.18
7	668	17.77
8	644	20.45
9/10	339	20.89
11	593	23.16
Unknown	0	0
Overall	6454	21.13

*NOTE: Data are provisional and subject to change, errors, and duplicates

Influenza-Associated Pediatric Mortality

No influenza-associated pediatric deaths were reported during week 21.

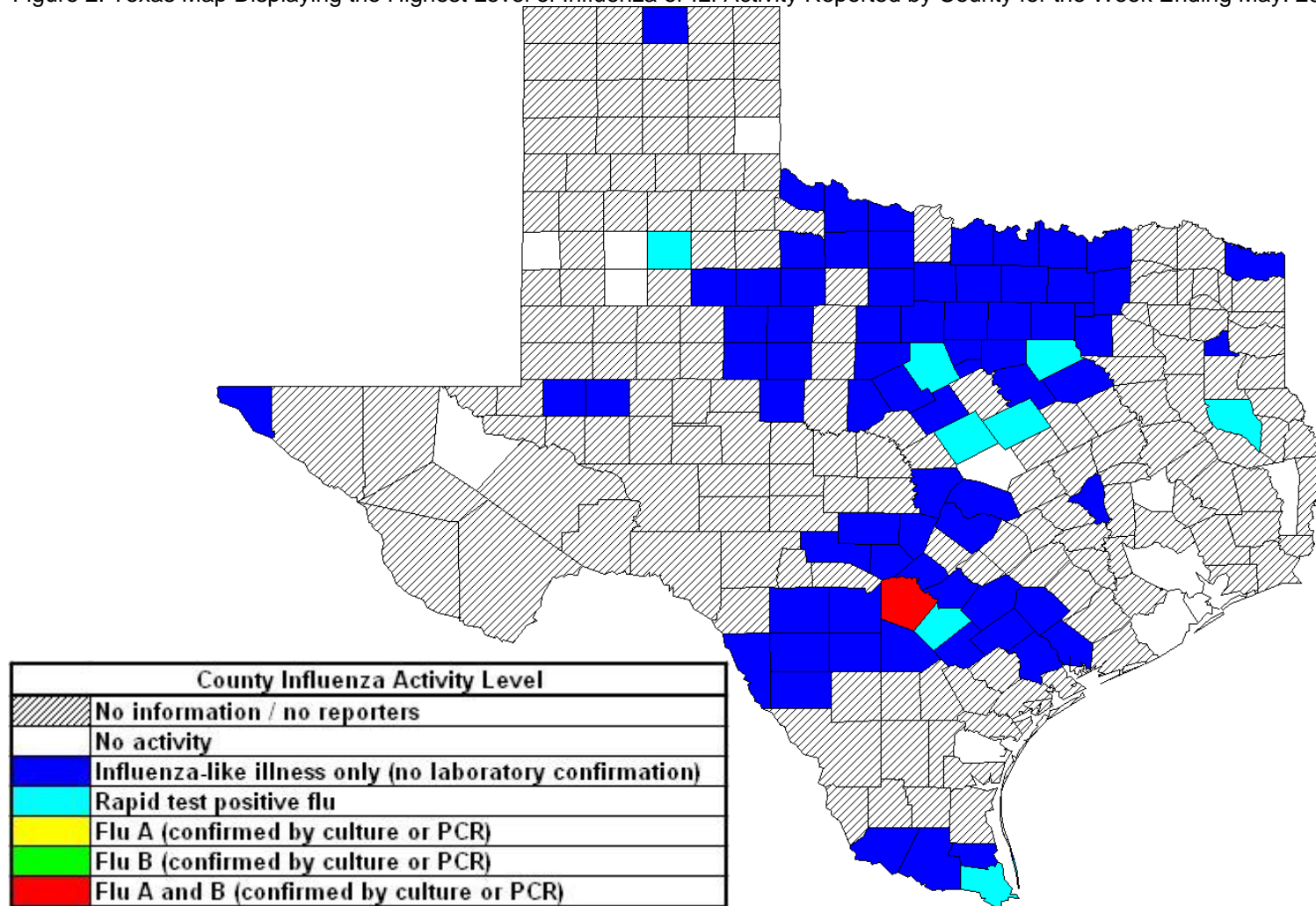
No influenza-associated pediatric mortalities have been reported in Texas during the 2020-2021 influenza season. Cases of influenza-associated pediatric mortality (children <18 years of age) are reportable year-round by law in Texas.

Table 10: Influenza-Associated Pediatric Deaths Reported in Texas during the 2020-2021 Season

Month of Pediatric Death	Influenza A (H1N1)	Influenza A (H3N2)	Influenza A (Not Subtyped)	Influenza B	Influenza, Not Typed / Not Differentiated	Influenza virus co-infection: A (not subtyped) and B	Total, All Influenza Types / Subtypes
2020							
October	0	0	0	0	0	0	0
November	0	0	0	0	0	0	0
December	0	0	0	0	0	0	0
2021							
January	0	0	0	0	0	0	0
February	0	0	0	0	0	0	0
March	0	0	0	0	0	0	0
April	0	0	0	0	0	0	0
May	0	0	0	0	0	0	0
Total	0	0	0	0	0	0	0

Statewide Influenza Activity Map

Figure 2: Texas Map Displaying the Highest Level of Influenza or ILI Activity Reported by County for the Week Ending May. 29, 2021 (MMWR Week 21)



Please note: The majority of influenza cases are not reportable by law in Texas. This map contains data from sentinel sites and only displays influenza and ILI cases that were reported to public health. Positive laboratory results are reported according to specimen collection date, or date received in the laboratory if the former is unknown.

Texas Influenza Surveillance Components and Measures

Activity codes (see <http://www.cdc.gov/flu/weekly/overview.htm>)

Statewide influenza activity level

A code reported weekly by states and territories to CDC indicating the geographic spread of influenza in the state. Levels are no activity, sporadic, local, regional, and widespread.

ILINet Activity Indicator

A statewide level of influenza-like illness intensity (on a scale of 1-10, with 1 being the lowest level) assigned to each state weekly by CDC based on data reported through ILINet.

Morbidity

Novel/variant influenza

Thorough investigations are performed on all cases of novel/variant influenza. *This condition is reportable by law in Texas.*

Texas ILINet

Providers voluntarily report weekly to CDC's ILINet system on the number of outpatient visits for ILI and total outpatient visits. Providers may submit up to 5 specimens per month for influenza testing. See <http://www.dshs.state.tx.us/idcu/disease/influenza/surveillance/ILINet/> for information on how to become an ILINet provider.

ILI activity

Non-ILINet providers report ILI or influenza data weekly to local or regional health departments.

Outbreaks

Healthcare, schools, childcare, and correctional facilities report ILI and influenza outbreaks to health departments in Texas. *This condition is reportable by law in Texas.*

Mortality

Pneumonia and Influenza (P&I) Mortality Surveillance

The DSHS Vital Statistics Unit collects death certificate information for all deaths on Texas residents from various partners such as funeral homes and local registrars around the state. The death certificates are then sent to the National Center for Health Statistics (NCHS) where the cause of death and underlying causes of death on the death certificates are coded with ICD-10 mortality codes. Once death certificates are coded, the information is sent back to DSHS Center for Health Statistics (CHS). CHS produces a Weekly Pneumonia and Influenza (P&I) Death Report and sends it to the State Influenza Surveillance Coordinator for inclusion in the Texas Weekly Flu Report. P&I deaths are identified based on ICD-10 multiple cause of death codes, and in particular, pneumonia and influenza mortality codes. Delays inherent in death reporting and coding practices may cause the number of reported P&I deaths to vary considerably each week.

Influenza-associated pediatric deaths

Deaths that are associated with influenza in children < 18 years of age are reported to health departments in Texas. *This condition is reportable by law in Texas.* <http://www.dshs.state.tx.us/idcu/disease/IAPM/>

Laboratory

DSHS Austin laboratory

Providers voluntarily submit specimens to the DSHS Austin laboratory for influenza PCR testing throughout the season. Providers sign up for this program through their local health departments.

Laboratory Response Network (LRN) laboratories

Providers voluntarily submit specimens to one of the 9 Texas LRNs for influenza PCR testing throughout the season. Providers sign up for this program through their local health departments.

NREVSS

Laboratories voluntarily report influenza and other respiratory virus data weekly through the CDC's online NREVSS reporting system. **Laboratories sign up for this program by contacting DSHS.** <http://www.cdc.gov/surveillance/nrevss/>

Recommended Resources

Texas Department of State Health Services

DSHS influenza page: <http://www.texasflu.org/>

Influenza surveillance data and reports: <http://www.dshs.state.tx.us/idcu/disease/influenza/surveillance/>

Map of Texas Health Service Regions: <http://www.dshs.state.tx.us/regions/state.shtm>

Centers for Disease Control and Prevention

National FluView weekly flu report: <http://www.cdc.gov/flu/weekly/>

Variant influenza viruses: <http://www.cdc.gov/flu/swineflu/variant.htm>

Avian influenza viruses: <http://www.cdc.gov/flu/avianflu/index.htm>

Swine influenza viruses: <http://www.cdc.gov/flu/swineflu/index.htm>

Infection Control in Healthcare Facilities: <http://www.cdc.gov/flu/professionals/infectioncontrol/>

Seasonal Flu Information for Schools and Childcare Providers: <http://www.cdc.gov/flu/school/index.htm>

World Health Organization

Influenza page: <http://www.who.int/topics/influenza/en/>

Disease Outbreak News: <http://www.who.int/csr/don/en/>