

# Milwaukee Respiratory Virus Surveillance Update

## MMWR Week 7, Ending February 17, 2024

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## Overview

### County

- There were 0 influenza-associated hospitalizations reported in Milwaukee County during the week ending on February 17, 2024. From October 1, 2023 through February 17, 2024, there have been 413 reported influenza-associated hospitalizations in Milwaukee County (302 City of Milwaukee residents).

### State

- Influenza-like illness (ILI) activity is at moderate or high levels in every region of Wisconsin.
- Influenza is the predominant virus of the week and activity is increasing among school-aged children. RSV and COVID-19 are also circulating.
- Influenza A and B are co-circulating, but the proportion of influenza infections due to influenza B is increasing.

### National

- Seasonal influenza activity remains elevated nationally with increases in some parts of the country. This week 11 jurisdictions experienced moderate activity and 27 jurisdictions experienced high or very high activity.
- 9 influenza-associated pediatric deaths occurred during this week.
- Influenza A viruses were the most frequently reported this week.

**Influenza Vaccine Composition 2022-2023 Influenza Season** All standard-dose flu shots will be quadrivalent (no trivalent standard-dose flu shots will be available this season). The quadrivalent vaccines for use in the 2023-2024 influenza season contain the following:

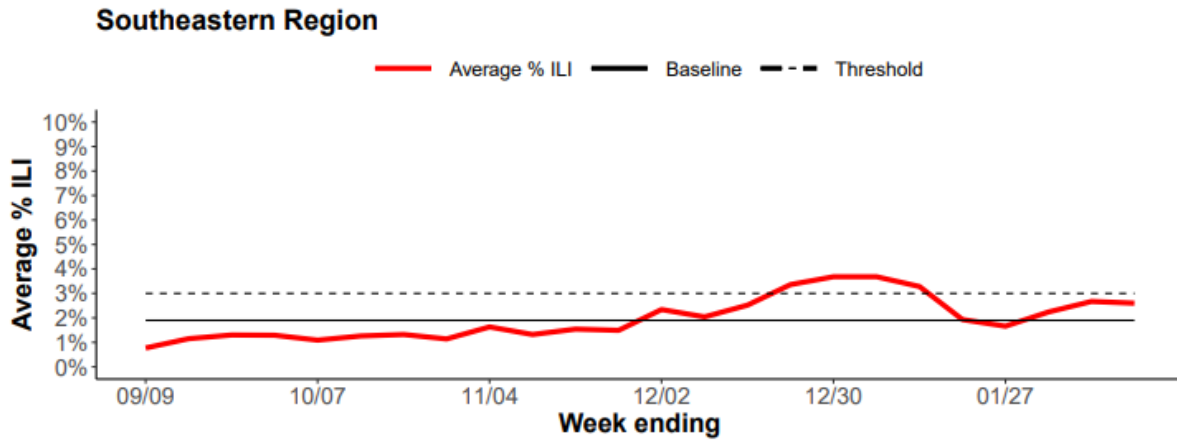
- an A/Victoria/4897/2022 (H1N1)pdm09-like virus;
- an A/Darwin/9/2021 (H3N2)-like virus;
- a B/Austria/1359417/2021 (B/Victoria lineage)-like virus; and
- a B/Phuket/3073/2013 (B/Yamagata lineage)-like virus

### CDC Pediatric Data (Since Week 40)

2023-24 To Date: Total Deaths	2022-23 To Date: Total Deaths	Pediatric Deaths This Week	Notes on Deaths
91	182	9	Nine influenza-associated pediatric deaths occurring during the 2023-2024 season were reported to CDC during Week 7. The deaths occurred during Week 46 of 2023 (the week ending November 18, 2023) and between Weeks 4 and 6 of 2024 (the weeks ending January 27, 2024, and February 10, 2024). Five deaths were associated with influenza A(H1N1) viruses and four deaths were associated with influenza B viruses. One of the influenza B viruses had lineage determined and it was a B/Victoria virus. A total of 91 influenza-associated pediatric deaths occurring during the 2023-2024 season have been reported to CDC.

## Statewide and Regional Influenza Activity

Influenza-like illness levels were above baseline statewide and above baseline in the southeastern region of the state.

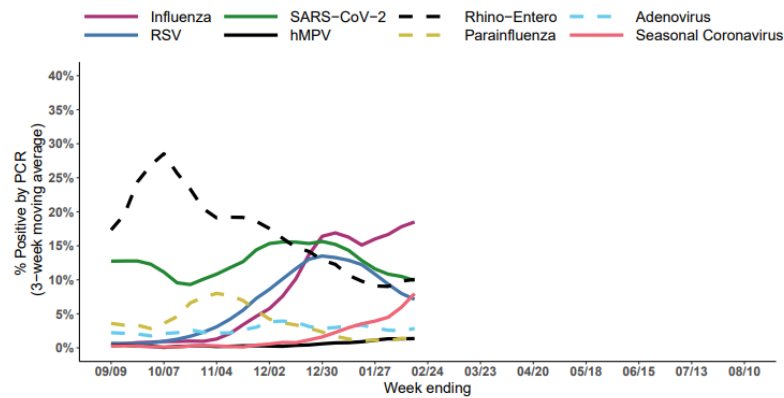


Wisconsin Department of Health Services Respiratory Virus Surveillance Report, February 17, 2024

## Respiratory Virus Laboratory Surveillance

### Wisconsin Laboratory Surveillance for Respiratory Viruses

Percent positivity of respiratory viruses tested by PCR, NREVSS



Number and percent positivity of respiratory viruses tested by PCR, NREVSS  
Week 7, Ending on February 17, 2024

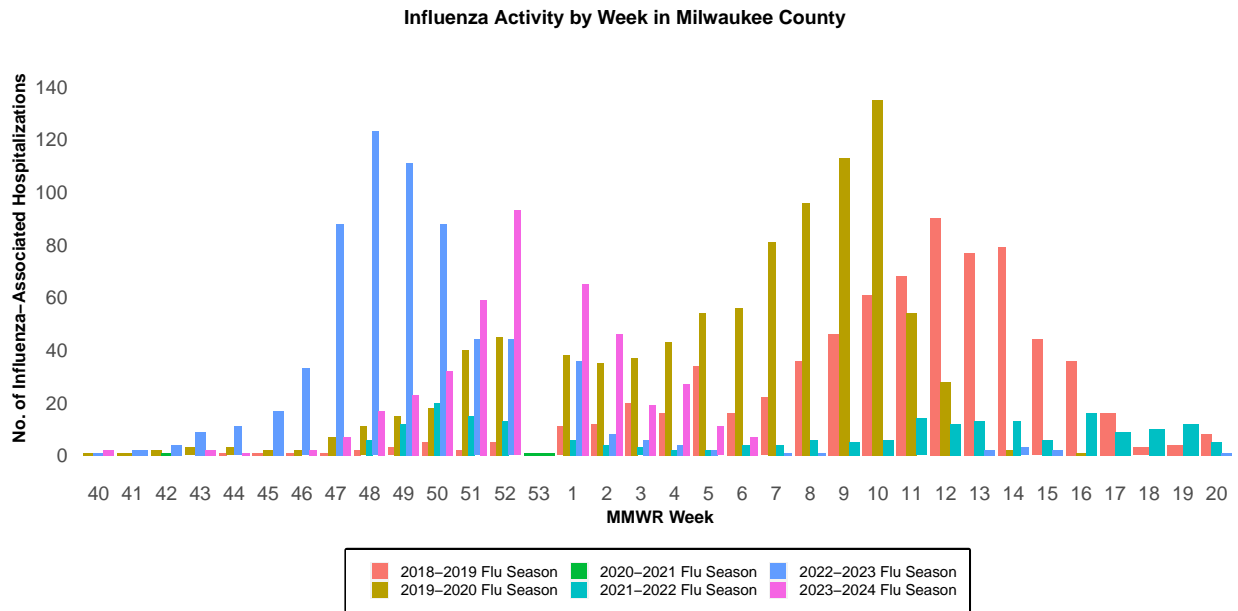
RSV = respiratory syncytial virus, hMPV = human metapneumovirus

Wisconsin Department of Health Services Respiratory Virus Surveillance Report, February 17, 2024

## Milwaukee County Influenza Activity

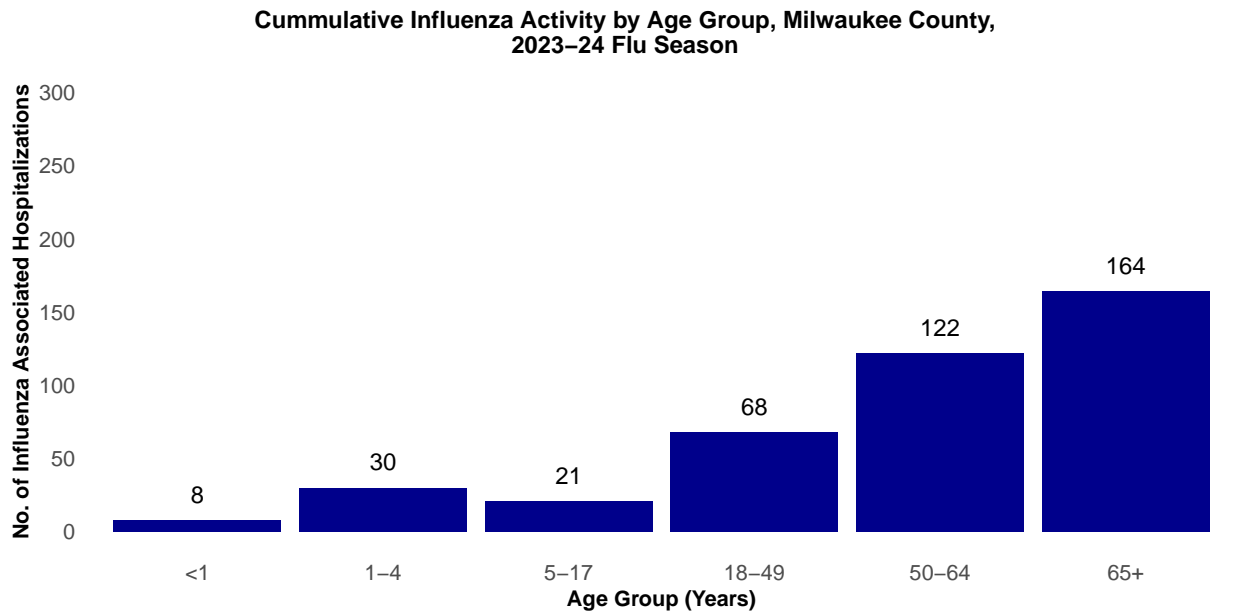
From October 1, 2023 through February 17, 2024 there have been 413 reported influenza-associated hospitalizations in Milwaukee County.

### Milwaukee County Influenza-Associated Hospitalizations



\*Flu activity was unusually low in the 2020-2021 flu season, despite high levels of testing. COVID-19 mitigation measures such as wearing face masks, social distancing, staying home, and school closures, in addition to flu vaccination, likely contributed to the low flu activity during this season.

### Milwaukee County Influenza-Associated Hospitalizations by Age Group MMWR Week 40, 2023 through Week 7, 2023

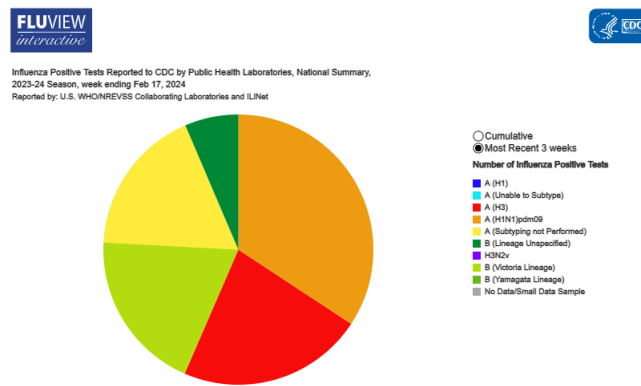


## Influenza Testing Data

### Public Health Laboratory Influenza Testing Data To-Date (Since Week 40)

Lab	Number Tested to date	Number Positive to date	Most Recent Week Percent Positive	Predominant A Subtype and Strain	Predominant B Strain	Predominant Type (A or B)
CDC	2,118,431	231,053	13,304/89,939(14.8%)	(H1N1)pdm09	Victoria	A
WSLH	-	-	2,959/15,199 (19.5%)	Unknown	Unknown	A
MHDL	16	0	6/14 (42.9%)	Unknown	Unknown	A

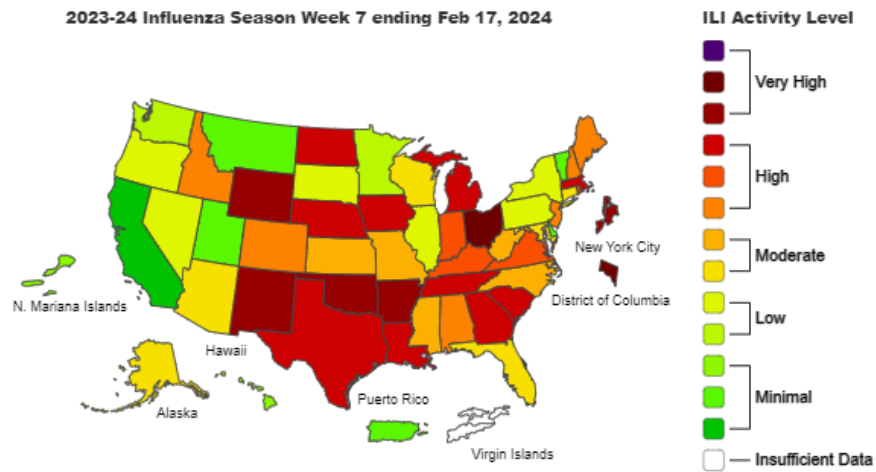
### National Influenza Testing Data, CDC FluView



<http://gis.cdc.gov/grasp/fluview/fluportaldashboard.html> accessed 02/23/2024

## National Influenza Activity

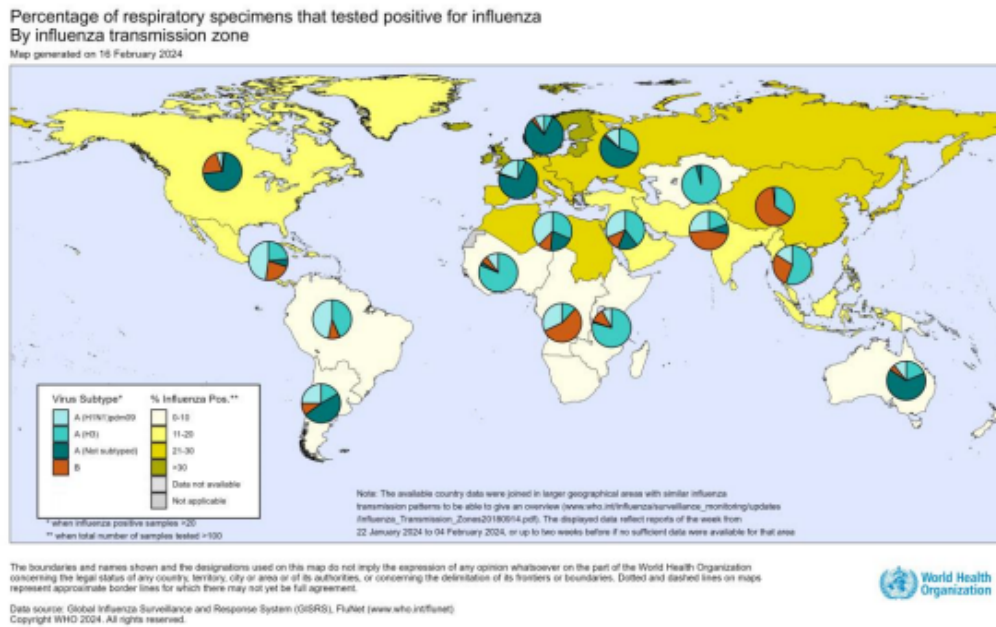
### Outpatient Respiratory Illness Activity Map, CDC FluView



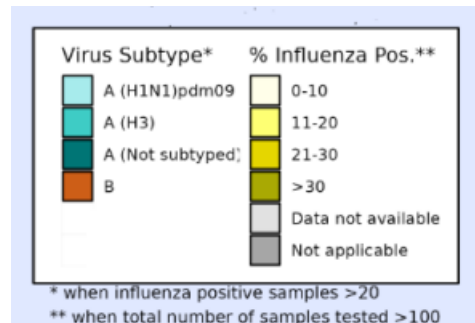
<https://www.cdc.gov/flu/weekly/index.htm#MS2> accessed 02/23/2024

## Global Influenza Activity

**Percentage of respiratory specimens testing positive for influenza, by influenza transmission zone.<sup>1</sup> Map generated on 16 February 2024. (The displayed data reflect reports of the weeks from 22 January 2024 to 04 February 2024 or up to two weeks before if insufficient data were available for an area for that period.)**



<https://www.who.int/teams/global-influenza-programme/surveillance-and-monitoring/influenza-updates>, accessed 02/23/2024



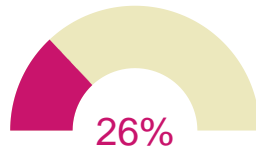
- In the countries of North America, influenza activity remained elevated but some indicators continued on a decreasing trend. Positivity for influenza A viruses decreased slightly in the United States of America (USA) and remained stable in Canada, while positivity for influenza B viruses increased slightly in both countries. Influenza A(H1N1)pdm09 viruses predominated. In the USA, influenza-like illness (ILI) and influenza activity remained stable overall and trends varied by region. ILI remained moderate or high in most regions. The number of new hospital admissions for influenza per week decreased. Cumulative hospital admissions for influenza were lower compared to this time last season and that of 2017-2018 but greater compared to this time in other previous seasons since 2015-2016. Pneumonia and influenza mortality decreased. In Canada, the percentage of visits for ILI increased slightly and was within expected levels for this time of year. Influenza-associated hospitalizations rates were high in adults aged 65 and older and children under 5 years of age. RSV activity slightly decreased in the USA and was stable in Canada, both were below expected levels for this time of year.

- In Europe and Central Asia, influenza activity overall in the region remained above the 10% positivity epidemic threshold. The influenza season was declared to have started in week 51 in the Region. In the week ending 4 February, two countries reported very high influenza intensity (Russian Federation and Slovakia), six countries reported high influenza intensity (Belarus, Bosnia and Herzegovina, Finland, Montenegro, Romania, and Slovenia), twenty countries reported medium influenza intensity, six reported low influenza intensity and one reported baseline intensity. Influenza activity was reported as widespread in twenty-nine countries, regional in one, and sporadic, low or no activity in the other six reporting countries. ILI or acute respiratory infection (ARI) activity was above the seasonal baseline in 25 of 31 reporting countries in latest week. Among the influenza detections in primary care sentinel surveillance, influenza A viruses predominated with a higher proportion of A(H1N1)pdm09 virus detections compared to A(H3N2) detections. Severe acute respiratory infection (SARI) hospitalizations and intensive care unit (ICU) admissions for influenza remained elevated and stable. SARS-CoV-2 positivity in primary care and secondary care sentinel surveillance was stable compared to the prior week, however activity has been decreasing over the last seven weeks. RSV positivity decreased a little in primary and secondary care sentinel surveillance overall, however increases were reported in some countries. Pooled all-cause mortality estimates from the EuroMOMO network showed substantial elevated excess mortality overall and in age groups over 45 years

# Influenza Vaccination Uptake by City of Milwaukee Residents, 2023-2024 Season

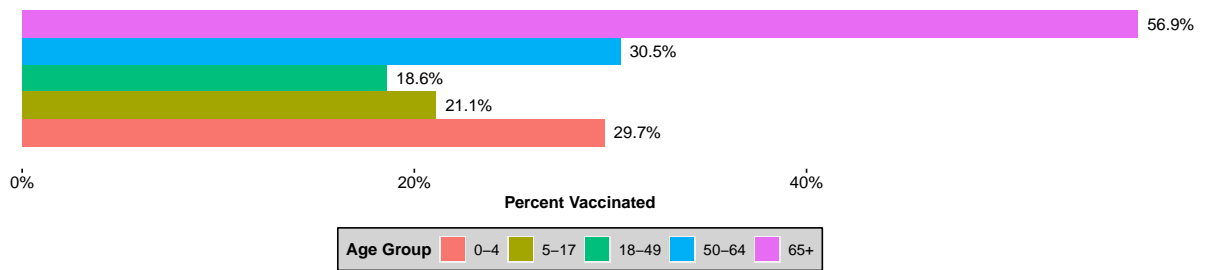
## Overview

- City of Milwaukee residents who have received at least one dose of flu vaccinations as of February 23, 2024:

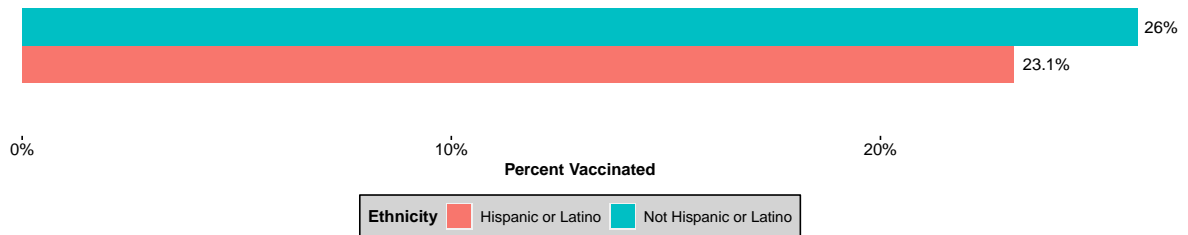


## Influenza Vaccination Coverage for 2023-2024 Season by Demographics

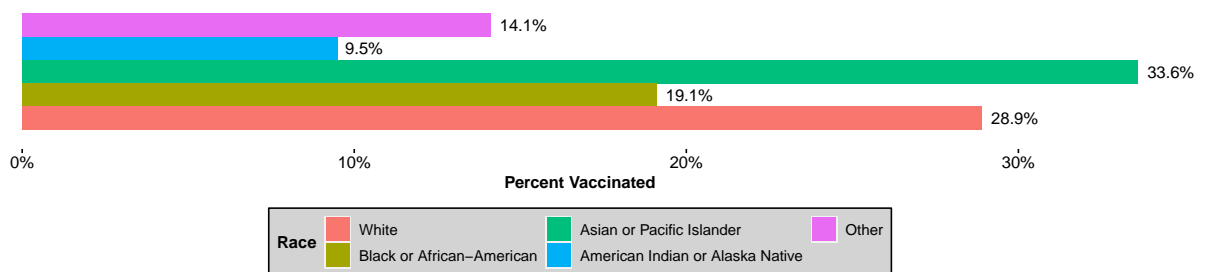
### Influenza Vaccinations by Age Group



### Influenza Vaccinations by Ethnicity



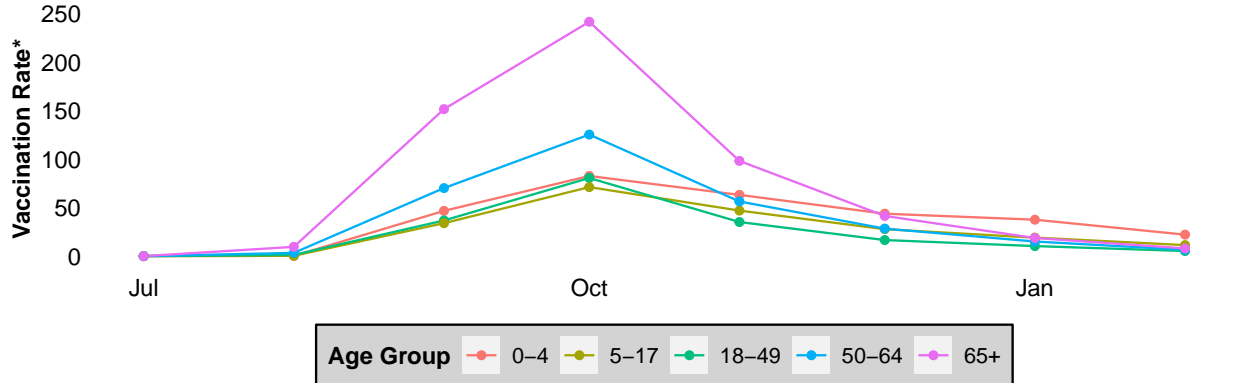
### Influenza Vaccinations by Race





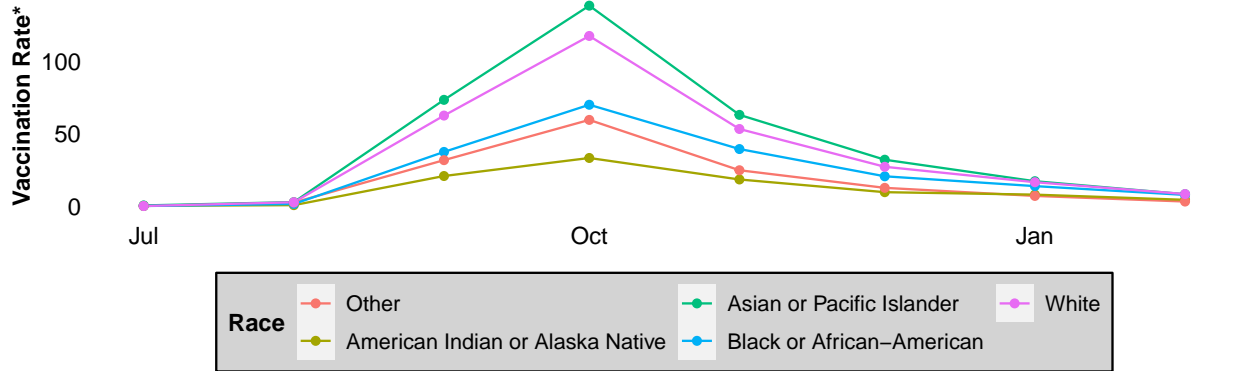
## Vaccination Uptake Timelines

### Influenza Vaccinations for Milwaukee Residents, 2023–24 Season by Month and Age Group



\*Vaccination rates are per 1000 residents using 2021 ACS 5-year population estimates

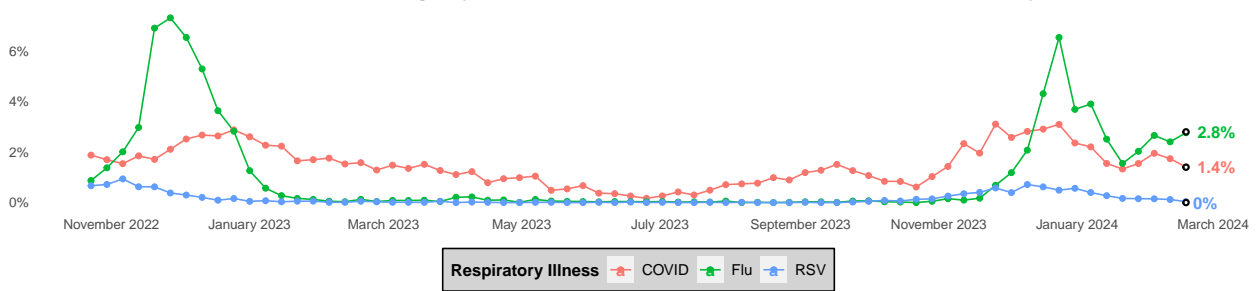
### Influenza Vaccinations for Milwaukee Residents, 2023–24 Season by Month and Race



\*Vaccination rates are per 1000 residents using 2021 ACS 5-year population estimates

## Respiratory Illness Emergency Department Visits in Milwaukee County

### Percent of All Emergency Room Visits Due to COVID, Flu, or RSV in Milwaukee County



## COVID-19 Activity

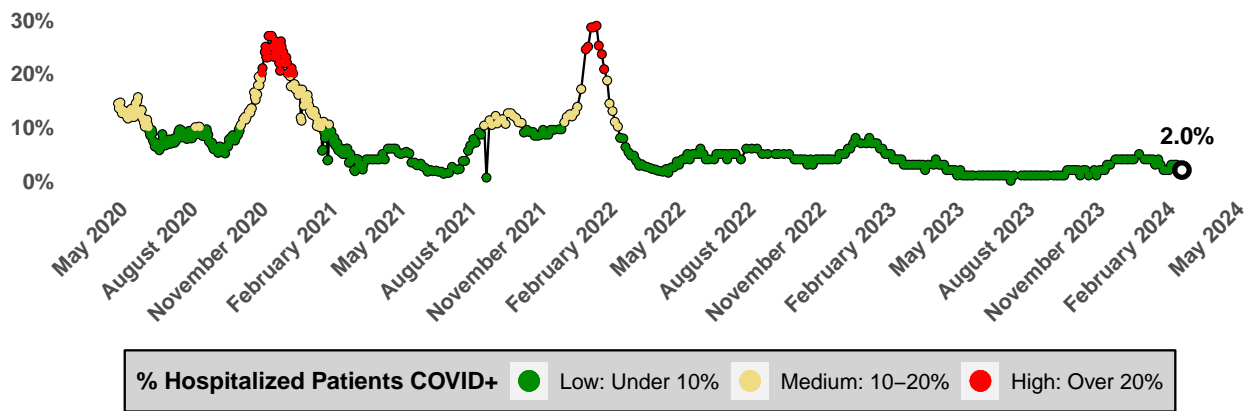
### City of Milwaukee COVID-19 Vaccination Uptake

- As of February 23, 2024, 11.5% of city residents are up-to-date with their COVID-19 vaccinations.

### COVID-19 Hospital Admission Metrics, Updated February 23, 2023

COVID-19 Hospital Admission Level - Low		
County Weekly Metrics Used to Determine the COVID-19 Hospital Admission Level	Comparison to Prior Week	
New hospital admissions of confirmed COVID-19, past week (total)	143	Down from 154
New COVID-19 admissions per 100,000 population	9.1	Down from 9.8
% Staffed inpatient beds occupied by patients with confirmed COVID-19 past week (average)	3.2%	Up from 3.1%

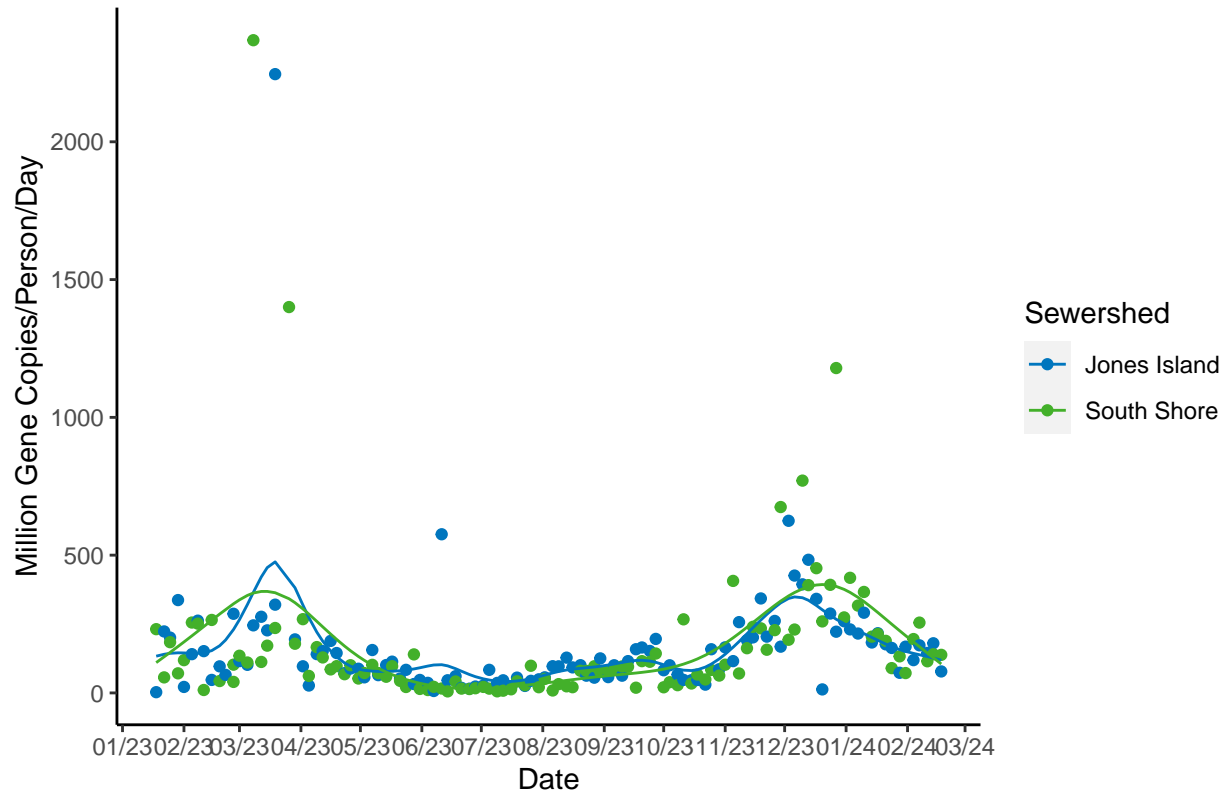
### Hospitalized Patients that are COVID-19 Positive Timeline, Milwaukee County



Data Source: HERC Region 7  
Last Update: 2024-02-22

## SARS-CoV-2 Wastewater Surveillance

### COVID-19 Trends in Milwaukee Sewersheds



**Category:** Compared to the last 6 months of data, the average of the last three most recent SARS-CoV-2 measurements are in the 37.25 percentile for Jones Island Sewershed and are in the 43.14 percentile for South Shore Sewershed. These measurements are *moderate* for Jones Island and *moderate* for South Shore.

**Trajectory:** Wastewater concentrations of SARS-CoV-2 *significantly increased* in the Jones Island or South Shore sewersheds.

Please note that at this time, the values reported here are slightly different than the values reported for Jones Island and South Shore on the DHS COVID-19 Wastewater Dashboard – this is not an error. The differences are due to the Milwaukee Health Department Lab (MHDL) using different methodologies than the lab who sends data to DHS.