



INFLUENZA REPORT 2024-2025 Influenza Season

MMWR Week 13 (3/23/25 - 3/29/25)

Weekly Report of Influenza and Influenza-like Illness (ILI) Activity

Wyoming Department of Health | Updated April 4, 2025

Overview (MMWR Week 13)



Influenza and Influenza-like Illness Activity

Spread

Local Transmission levels continue to decrease across the state

Co-circulating

Other Respiratory Infections: SARS-CoV-2, Pertussis, and RSV

Flu Activity

Declining Most counties reported a decrease in overall influenza case counts this week

Seasonal Data

Types of Flu Influenza A and B viruses are circulating

Outbreaks

0 No newly reported school or LTCF outbreaks reported this week

Syndromic

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No newly reported syndromic anomalies were reported this week

Severity

Hospitalizations The percent of ED visits and hospital admissions for influenza is elevated but trending down

EMS

21 Suspected ILI reports this week

ILI Activity

Minimal

Reports of outpatient respiratory illnesses have decreased

Subtypes

Primary: all three All three viruses (A/H1N1, A/H3N2, and B) were co-circulating this week

Deaths

168

No locally reported pediatric deaths this week; 168 pediatric deaths reported in the US so far this season

Hot Spots

Tracking Trends Several schools and daycares across the state continue to report high levels of respiratory activity

Geographic Spread



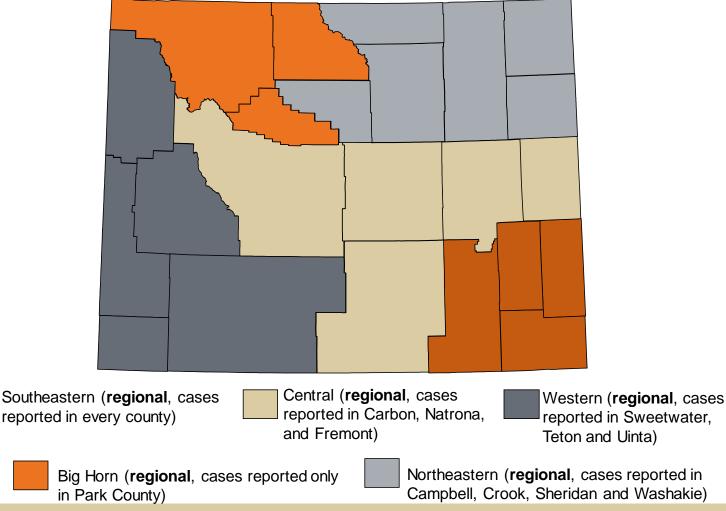
Geographic Activity by Regions

Wyoming as a whole had minimal ILI activity this week (MMWR Week 13). Transmission levels continue to decrease across the state.

Healthcare providers in 15 counties reported ILI activity.

The electronically reported influenza cases represent all five Infectious Disease Epidemiology (IDE) Geographic Regions.

Healthcare providers across the state electronically reported 47 cases of influenza (rapid influenza diagnostic tests and PCR confirmed tests) this week.



IDE Geographic Regions of Wyoming

Virologic Surveillance

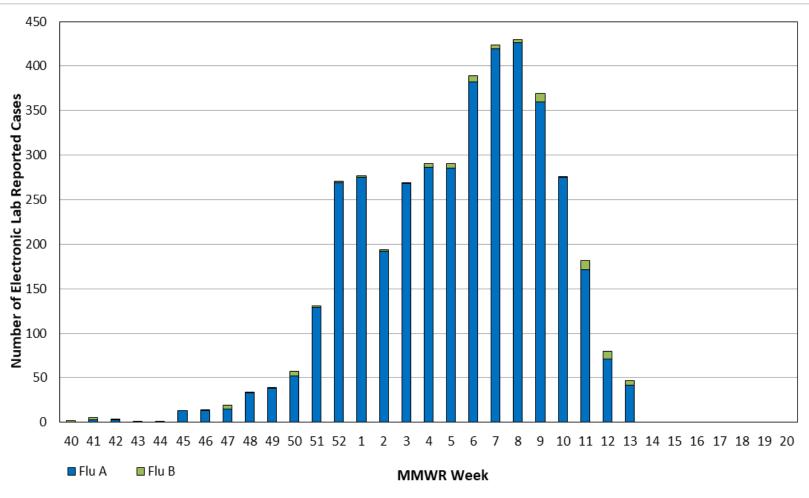


Public Health Laboratory

The overall volume of samples tested for influenza at the Wyoming Public Health Laboratory has steadily declined following the increasing distribution of the CDC Influenza SARS-CoV-2 Multiplex Assay in addition to at home testing options. We strongly encourage providers across the state to send additional specimens to the WPHL for virologic surveillance. The number of positive influenza specimens electronically reported this week decreased compared to week 12.

Healthcare and Clinical Laboratories

Clinical laboratories across the country most frequently reported influenza A (A/H1N1 and A/H3N2) and B viruses co-circulating during MMWR Week 13.



Electronic Lab Reports of Influenza Cases

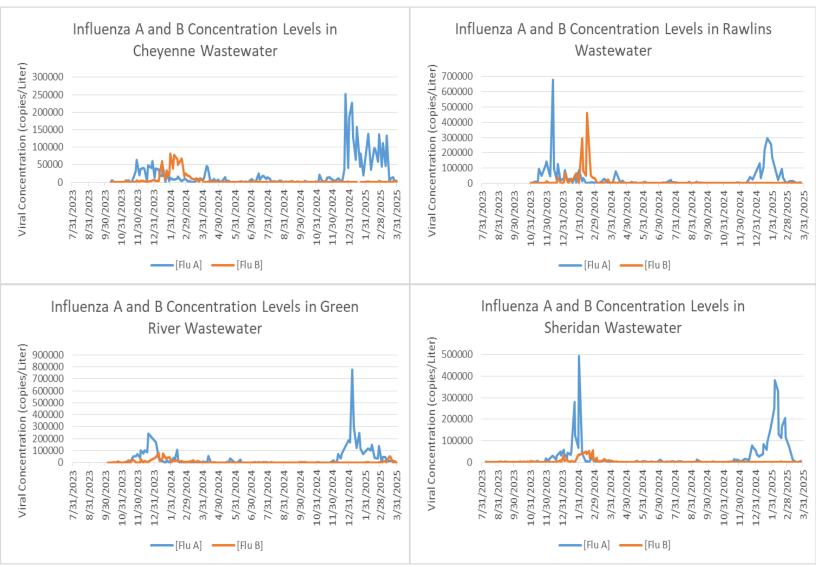
* This graph is not representative of all influenza cases across the state

Wastewater Surveillance



Importance of Wastewater Surveillance:

Here at the Wyoming Public Health Laboratory, we have a team of scientists working to analyze wastewater samples to identify trends in influenza (and many other pathogens). The graphs pictured below depict trend lines for the 2023-2024 influenza season and the 2024-2025 season. It is important to note that the high concentrations we saw this season have dwarfed many of the values that were detected last year.



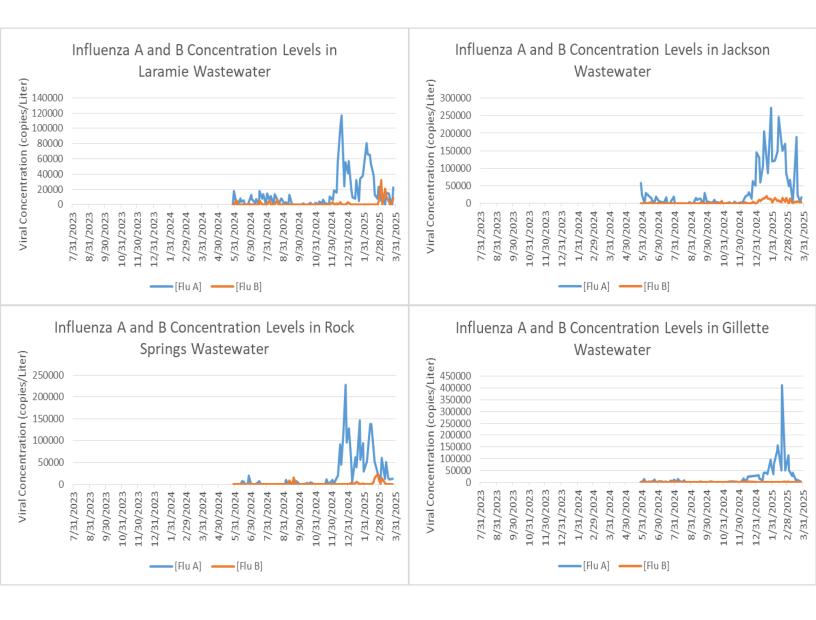
Sampling and Analysis Methodologies:

For each city, twice a week, we have a wastewater utility operator take a 24 hour composite sample from the influent channel prior to treatment, of which they send us a total of 150mL in three 50mL tubes for us to test. They then ship the samples chilled via priority overnight so that we can run all of our measurements the following day. The sampling procedure is conducted in triplicate, and we take an average of the three to determine the estimated concentration of viral particles present in the wastewater for any given day. We then take the average concentration and divide it by our percent recovery to account for any deviation due to differing levels of present inhibitors. Each plot point on the graph represents the average viral concentration for a set of triplicates, normalized for the percent recovery.



Four additional sample sites:

Our colleagues at the University of Wyoming have also started to analyze wastewater samples that have been collected at four additional treatment facilities across the state. The graphs below show current trend lines of varying influenza concentrations detected in wastewater starting in June of 2024 up until present. The data depicted below does not include the 2023-2024 influenza season. As a result, the initial viral concentrations appear diminished because of the higher values we observed earlier this season when we had sustained community-wide transmission.



Influenza-like Illness Surveillance

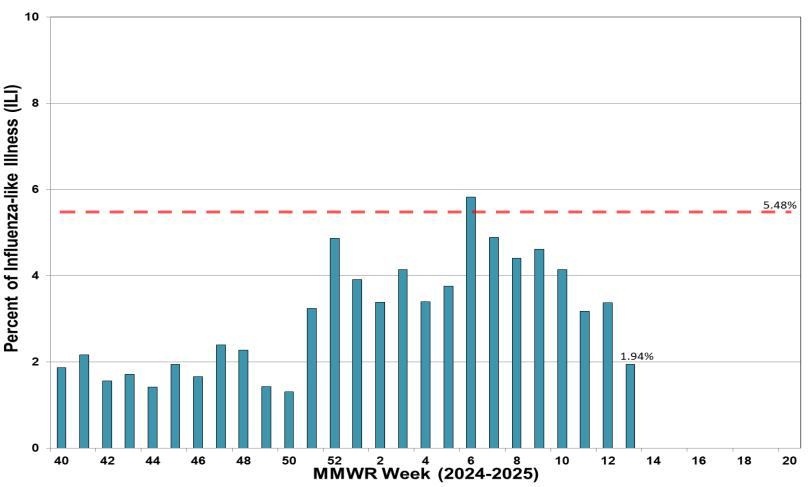


ILINet Providers

The percent of patient visits to ILINet Sentinel Providers for an influenza-like illness was 1.94%, which is below Wyoming's baseline (5.48%), and a decrease compared to week 12.

The Wyoming Department of Health received reports from more than 50% of the ILINet providers across the state. Although weekly percentages could continue to change as additional values are submitted.

Key Updates: Seasonal influenza activity continues to decline; however, CDC expects several more weeks of flu activity. Based on CDC calculations, transmission within Wyoming was **minimal** this week. Nationally, outpatient respiratory illness remained stable this week and remains above baseline for the eighteenth consecutive week. HHS regions 1, 2, 3, and 6 are above their region-specific baselines, Region 5 is at its baseline, and all other HHS regions are below their baselines in regions.



Weekly Percent of ILI Visits

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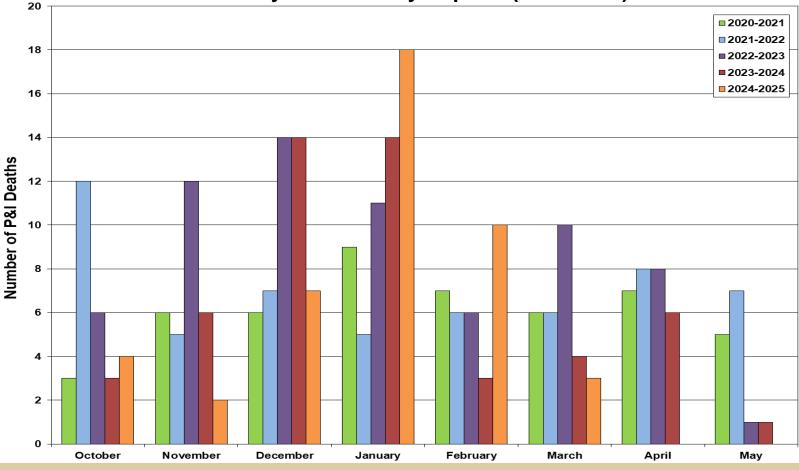
Pneumonia and Influenza Mortality



Mortality Data

Tracking death certificates is the best surveillance system to capture and identify pneumonia and influenza-associated deaths in Wyoming. According to the CDC, influenza is infrequently listed on death certificates. Also, testing for seasonal influenza infections is not frequently performed, particularly among the elderly, who are at greatest risk for seasonal influenza complications and death. Therefore, public health officials may not identify influenza-associated deaths in many instances; consequently, this surveillance system may underestimate the true impact of influenzaassociated deaths across the state.

There have been 44 pneumonia and influenza (P&I) mortality reports certified since the beginning of the 2024-2025 Influenza Season.



Monthly P&I Mortality Reports (2020-2025)