

MMWR Week 45 (11/2/2025-11/8/2025)



INFECTIOUS DISEASE EPIDEMIOLOGY

Influenza Report

2025 - 2026 Influenza Season

MMWR Week 45 (11/2/25-11/8/25)

Updated November 14, 2025



Overview (MMWR Week 45)

Influenza and Influenza-like Illness (ILI) Activity

Spread

Sporadic

Transmission levels remain relatively low across the state

Flu Activity

Low

Reported influenza activity remains low across the state

ILI Activity

Minimal

Reports of outpatient respiratory illnesses are minimal

Co-circulating

Other Viruses:

SARS-CoV-2 and low levels of RSV

Seasonal Data

Types of Flu:

Influenza A and B viruses are circulating

Subtypes

Primary: A H3N2

Predominately H3N2 viruses were reported across the country this week

Outbreaks

0

No LTCF or school-associated outbreaks reported this week

Severity

Hospitalizations

The number and weekly rate of hospital admissions remain low, but are increasing across the country

Deaths

0

No locally or nationally reported pediatric deaths so far this season

Syndromic

0

No syndromic anomalies reported this week

EMS Reports

7

Suspected ILI reports this week

Hot Spots

Tracking Trends

Most counties continue to report low levels of influenza activity



Geographic Spread

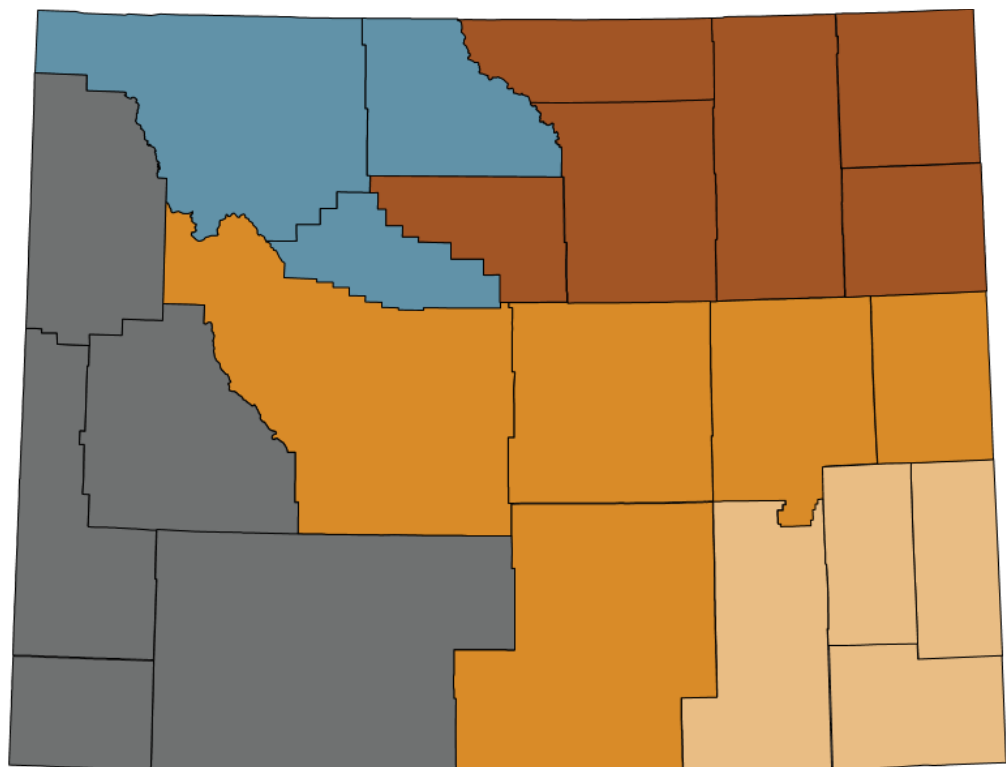
Geographic Activity by Regions

Wyoming as a whole had **minimal ILI activity** this week (MMWR Week 45).
Transmission levels remain low across the state.

- Healthcare providers in **four** counties electronically reported influenza cases.
- The electronically reported influenza cases represent **two** Infectious Disease Epidemiology (IDE) Geographic Regions.
- Healthcare providers across the state electronically reported **fewer than 20** influenza cases (rapid influenza diagnostic tests and PCR confirmed tests) this week.

IDE Geographic Regions of Wyoming

Southeast	Central	Western	Big Horn	North East
Sporadic, cases reported in Laramie and Albany	Sporadic, cases reported in Carbon and Natrona	No reported cases this week	No reported cases this week	No reported cases this week



Virologic Surveillance

Public Health Laboratory

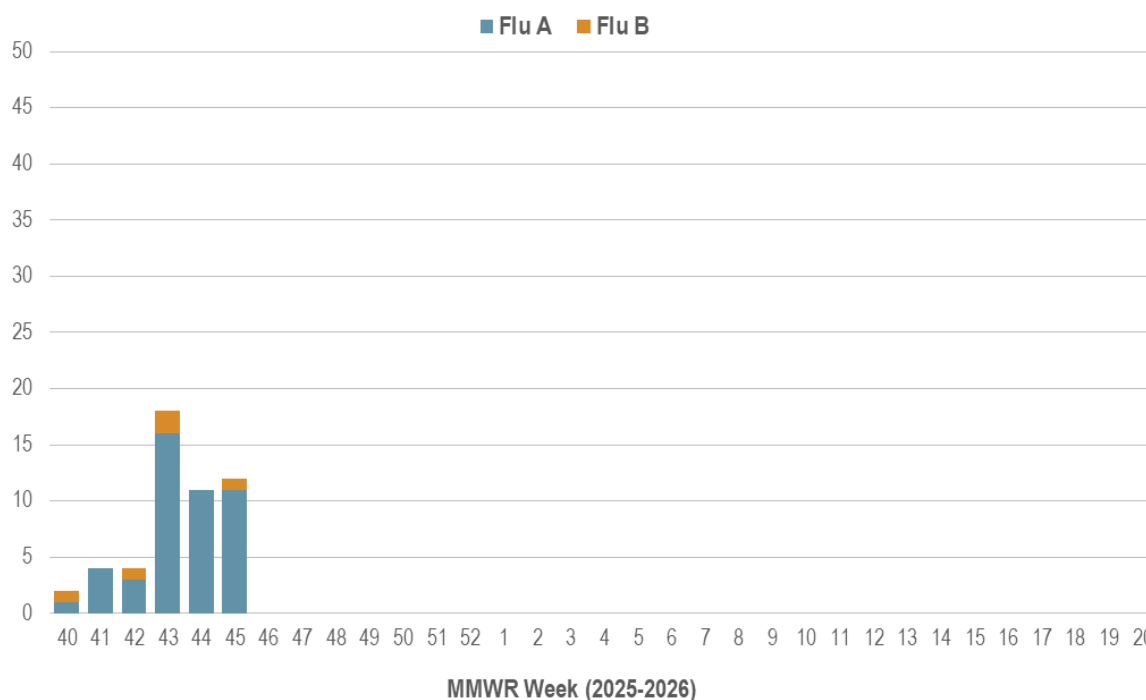
The overall volume of samples tested for influenza at the Wyoming Public Health Laboratory has steadily declined following the increasing distribution of the CDC Influenza SARS-CoV-2 Multiplex Assay, in addition to at home testing options. We greatly encourage providers across the state to send additional specimens to the WPHL for virologic surveillance. The number of positive influenza specimens electronically reported this week **increased slightly** compared to week 44.

Healthcare and Clinical Laboratories

Clinical laboratories across the country most frequently reported **Influenza A/H3N2 viruses** circulating during MMWR Week 45, with a handful of Influenza A/H1N1 and B viruses.

Electronic Lab Reports of Influenza Cases

Number of Electronic Lab Reported Cases



Influenza-Like Illness Surveillance

MMWR Week 45: 2.66% ▼ below WY baseline (5.36%)

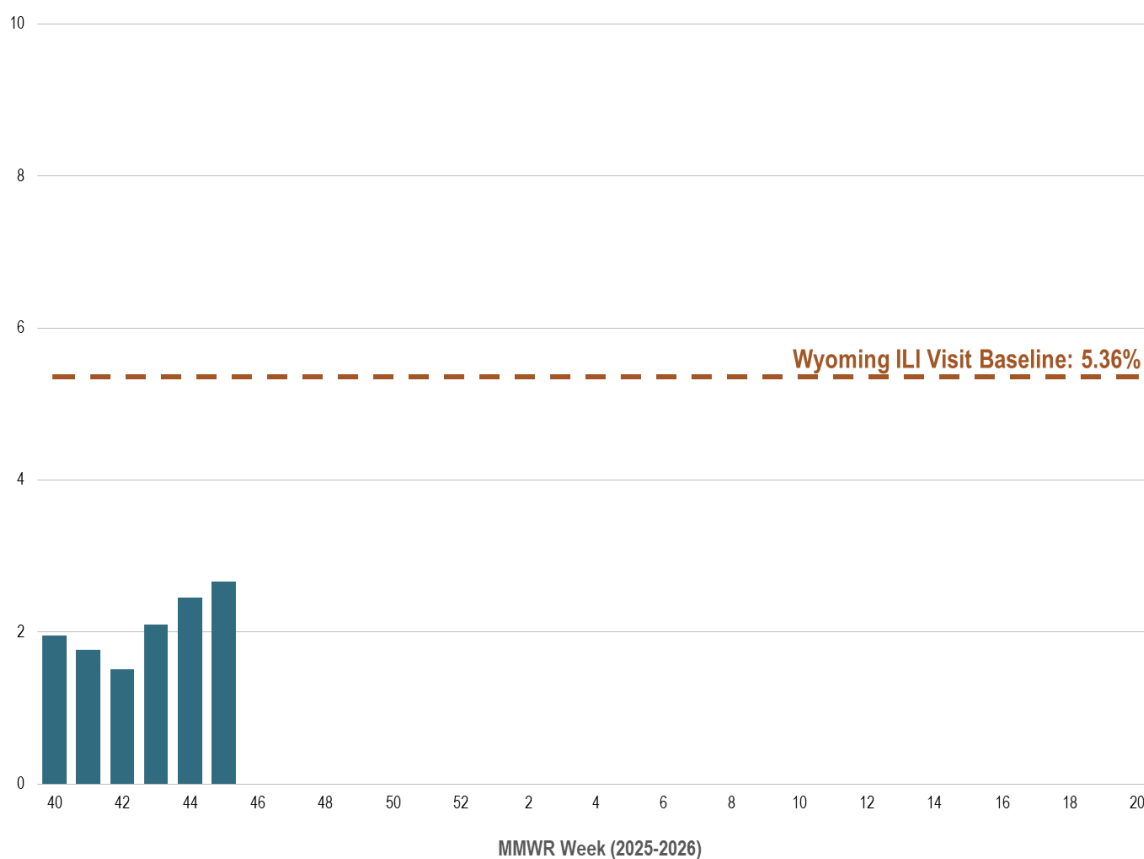
Percent of patient visits to ILI-Net Sentinel Providers for ILI

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

Key Updates: Seasonal influenza activity remains low nationally but is increasing, primarily among children. Based on CDC calculations, transmission within Wyoming remained **minimal** this week. Nationally and in HHS regions 1, 2, 3, 5, 6, 7, 8, and 10, the percentage of respiratory specimens testing positive for influenza virus in clinical laboratories increased compared to the previous week.

Weekly Percent of ILI Visits

Percent of Influenza-like Illness (ILI)



Pneumonia and Influenza Mortality

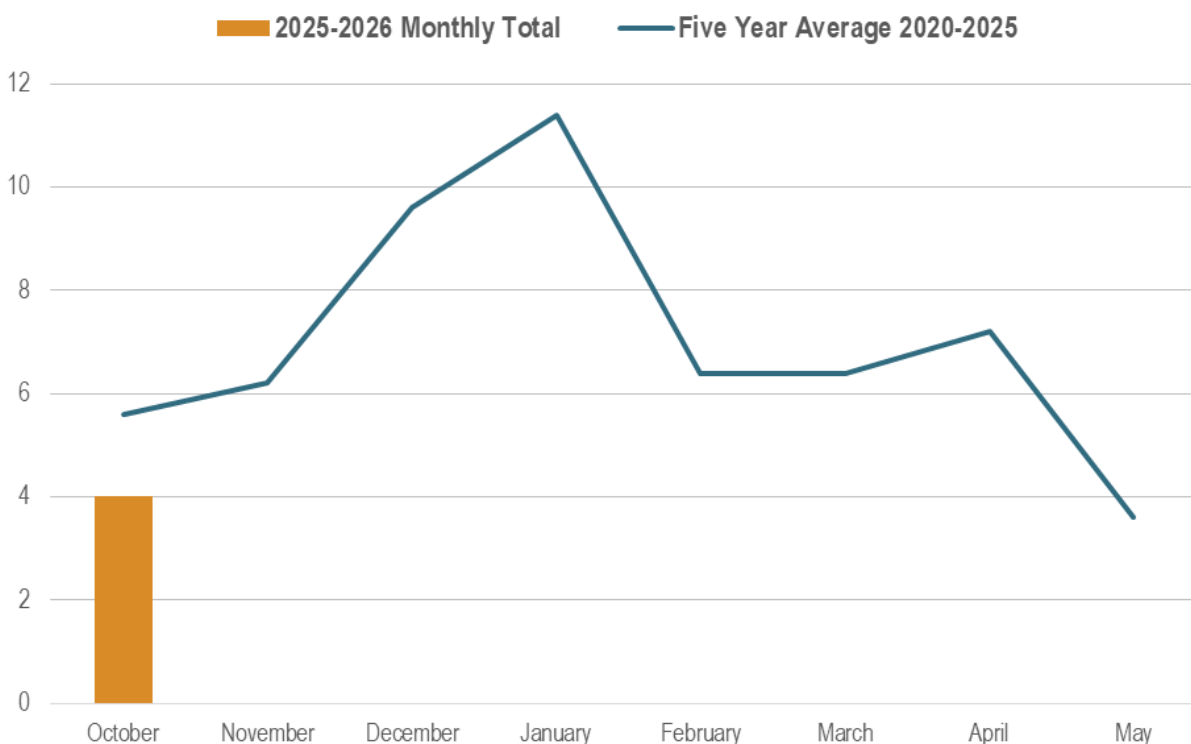
Mortality Data

Tracking death certificates is the most effective surveillance system for capturing and identifying 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 be able to identify influenza-associated deaths in many instances; consequently, this surveillance system may underestimate the true impact of influenza-associated deaths in the state.

There have been **four** pneumonia and influenza (P&I) mortality reports certified since the beginning of the 2025-2026 Influenza Season.

Monthly P&I Mortality Reports (2020-2026)

Number of P&I Deaths

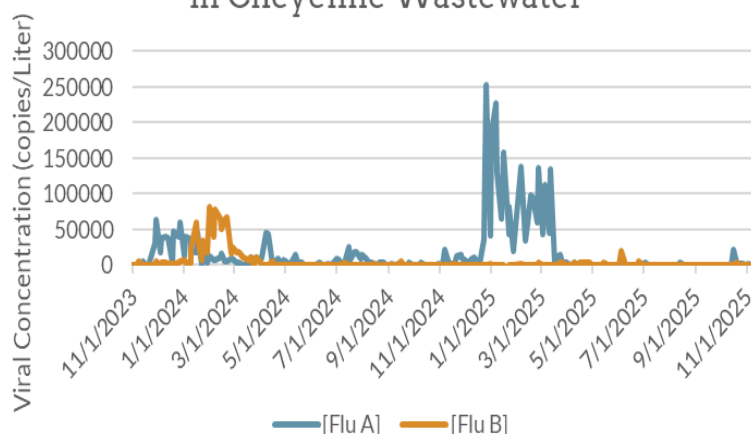


Wastewater Surveillance

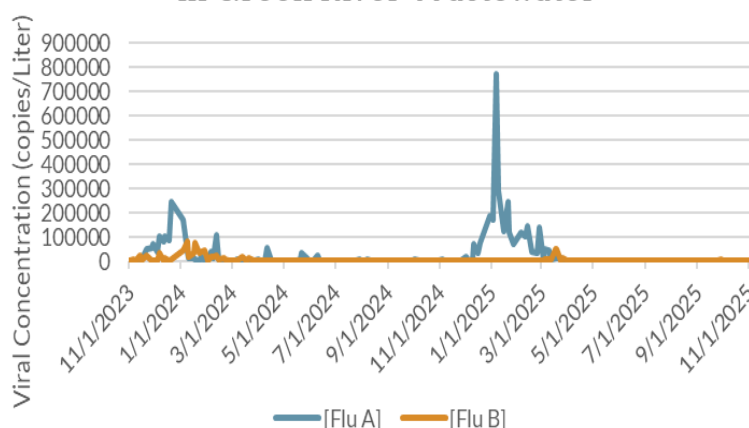
Here at the Wyoming Public Health Laboratory (WPHL), we have a team of scientists analyzing wastewater samples from across the state to identify trends in influenza (and many other pathogens). The graphs pictured below depict trend lines for the past two influenza seasons (2023-2025) as well as current trends. It is important to note that the high concentrations observed last season have dwarfed many of the previously detected values.

WPHL Sites: Cheyenne, Green River, Rawlins, and Sheridan

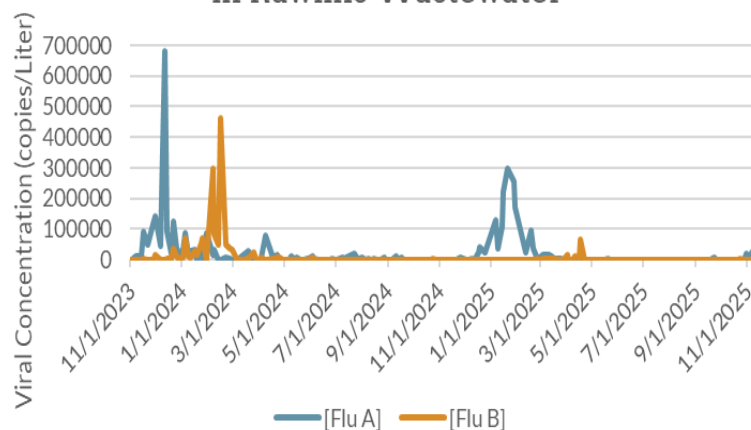
Influenza A and B Concentration Levels in Cheyenne Wastewater



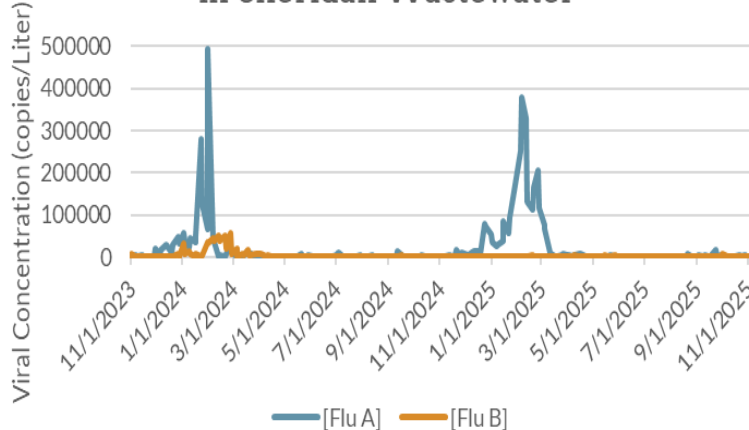
Influenza A and B Concentration Levels in Green River Wastewater



Influenza A and B Concentration Levels in Rawlins Wastewater



Influenza A and B Concentration Levels in Sheridan Wastewater



Wastewater Surveillance Continued

Our colleagues at the University of Wyoming (UW) have collaborated with the WPHL to analyze wastewater samples collected at four additional treatment facilities across the state. The graphs below show the current trend lines of varying influenza concentrations detected in wastewater, starting in June 2024 and continuing to the present. The current viral concentrations appear to be diminished compared to the higher values we observed last season during sustained community-wide transmission.

UW Sites: Laramie, Rock Springs, Jackson, and Gillette

