

MMWR Week 50 (12/7/2025-12/13/2025)



INFECTIOUS DISEASE EPIDEMIOLOGY

Influenza Report

2025 - 2026 Influenza Season

MMWR Week 50 (12/7/25-12/13/25)

Updated December 19, 2025



Overview (MMWR Week 50)

Influenza and Influenza-like Illness (ILI) Activity

Spread

Local

Transmission levels are starting to increase across the state

Flu Activity

Low

Reported influenza activity is increasing across the state

ILI Activity

Low

Reports of outpatient respiratory illnesses are low, but increasing

Co-circulating

Other Respiratory Infections:

SARS-CoV-2, Pertussis, 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 influenza outbreaks reported this week

Severity

Hospitalizations

The number and weekly rate of hospital admissions are increasing across the country

Deaths

3

No locally reported pediatric deaths; three pediatric deaths have been reported in the US so far this season

Syndromic

0

No syndromic anomalies were reported this week

EMS Reports

20

The number of suspected ILI reports remained stable compared to last week

Hot Spots

Tracking Trends

Several counties have reported an increase in weekly case counts



Geographic Spread

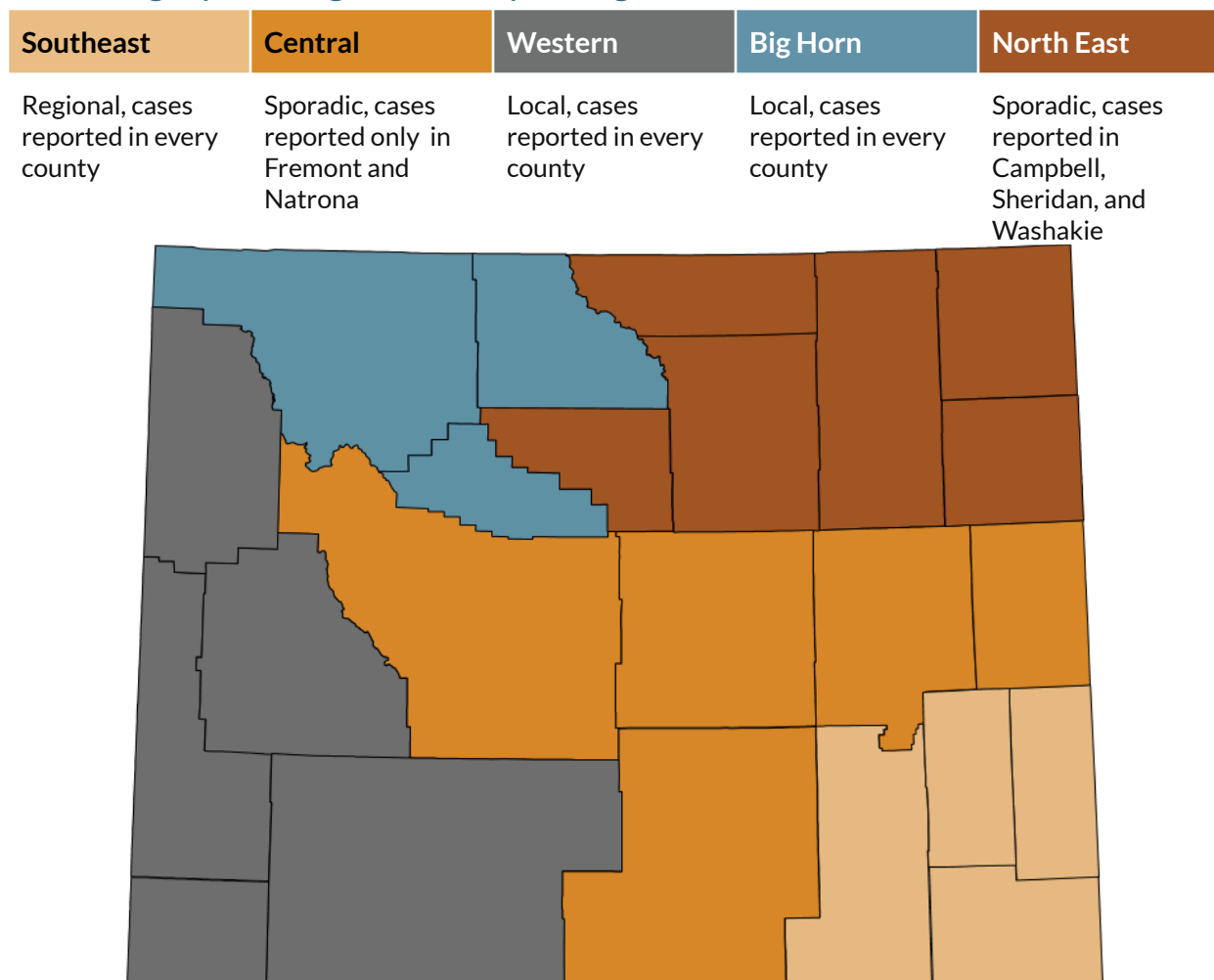
Geographic Activity by Regions

Wyoming as a whole had **low ILI activity** this week (MMWR Week 50).

Transmission levels remain low, but are increasing across the state.

- Healthcare providers in **17** counties electronically reported influenza cases.
- The electronically reported influenza cases represent **all five** Infectious Disease Epidemiology (IDE) Geographic Regions.
- Healthcare providers across the state electronically reported **131** influenza cases (rapid influenza diagnostic tests and PCR confirmed tests) this week.

IDE Geographic Regions of Wyoming



Virologic Surveillance

Public Health Laboratory

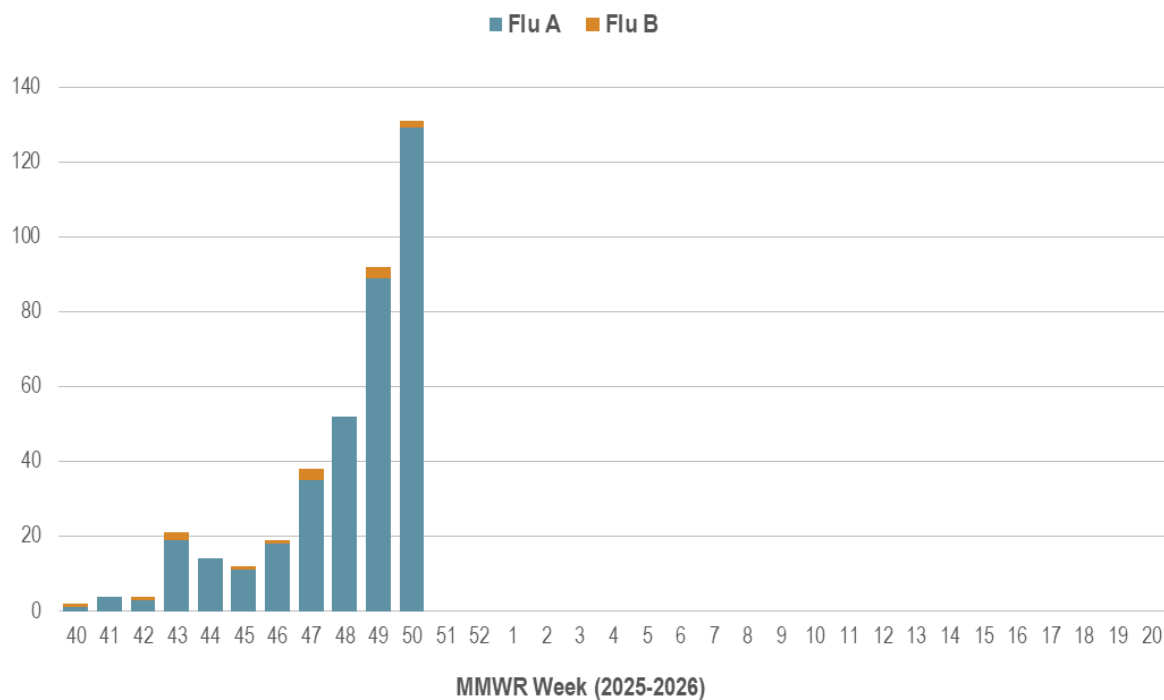
The overall volume of samples tested for influenza at the Wyoming Public Health Laboratory has steadily declined following the increasing distribution of the CDC Influenza SARS-CoV-2 Multiplex Assay, in addition to at-home testing options. We greatly encourage providers across the state to send additional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

Healthcare and Clinical Laboratories

Clinical laboratories across the country most frequently reported **Influenza A/H3N2 viruses** circulating during MMWR Week 50, 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 50: 4.40% ▼ below WY baseline (5.36%)

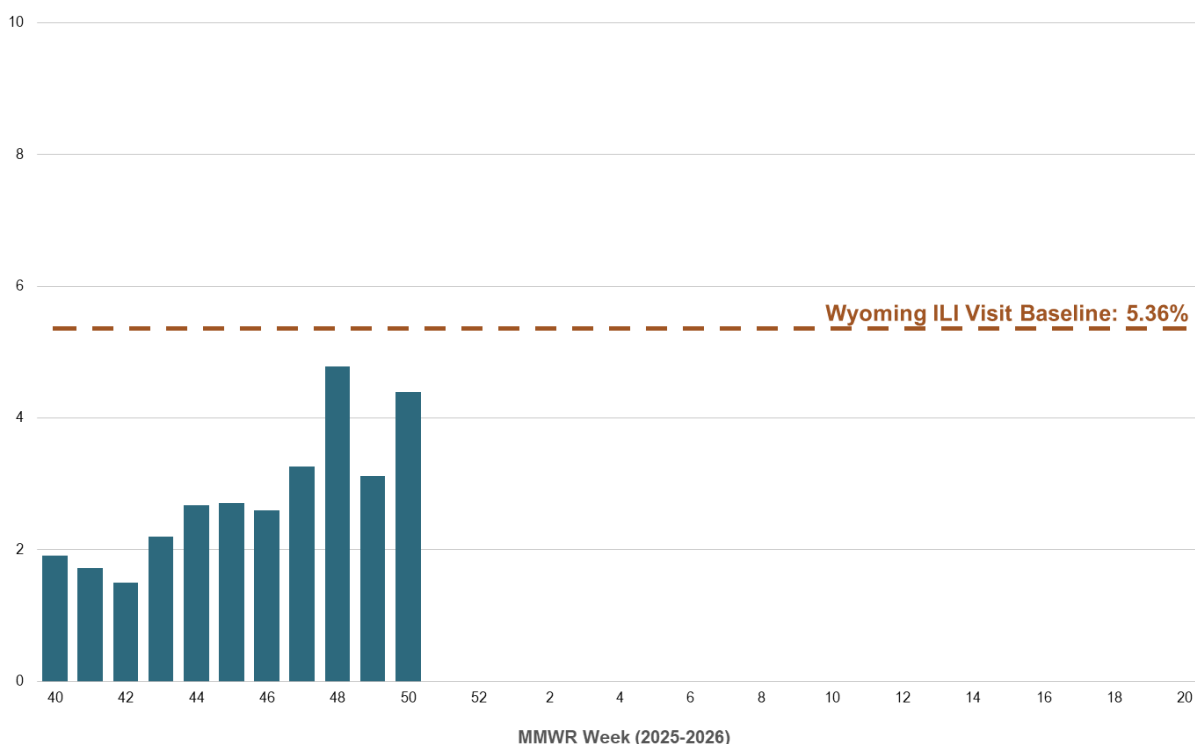
The percent of patient visits to ILI-Net Sentinel Providers for ILI increased compared to last week.

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 continues to increase across the country. The timing of this increased activity is similar to that of several past seasons. Based on CDC calculations, transmission within Wyoming was **low** this week. Sustained elevated activity is observed across multiple key activity indicators in many areas of the country, signaling the start of the 2025-2026 influenza season. Severity indicators remain low at this time, but influenza activity is expected to continue for weeks. Nationally and in HHS regions 1, 2, 3, 4, 5, 6, 7, 8, and 9, the percentage of respiratory specimens testing positive for influenza virus in clinical laboratories increased.

Weekly Percent of ILI Visits

Percent of Influenza-like Illness (ILI)



Pneumonia and Influenza Mortality

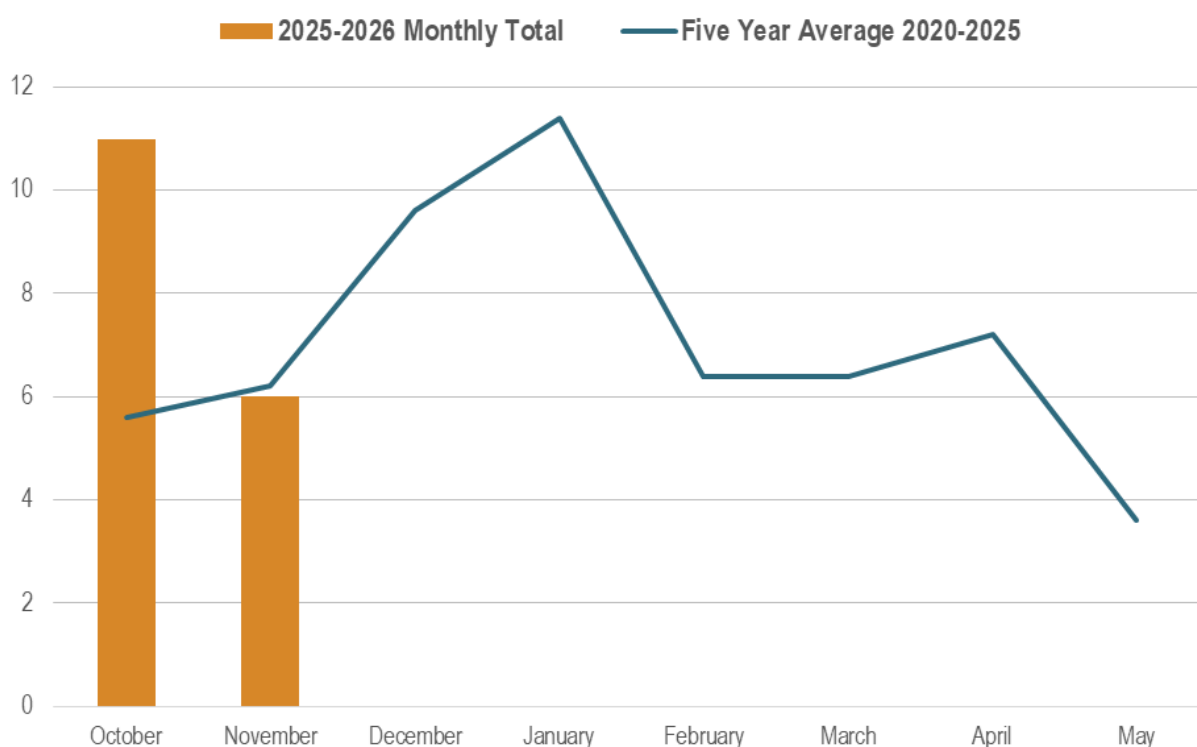
Mortality Data

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; as a result, this surveillance system may underestimate the true impact of influenza-associated deaths in the state.

There have been **17** 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

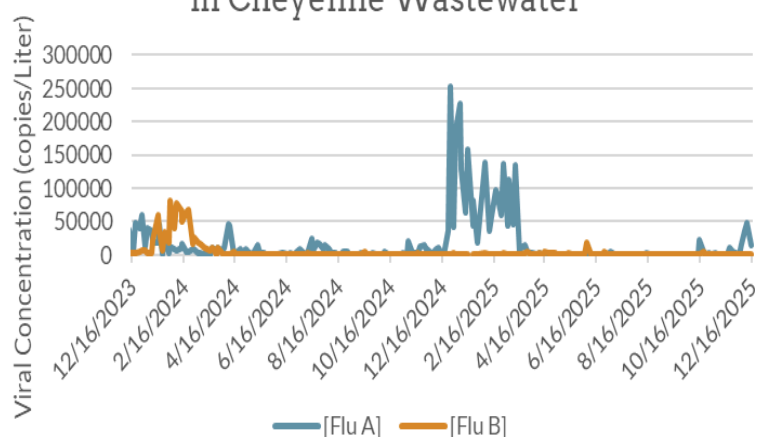


Wastewater Surveillance

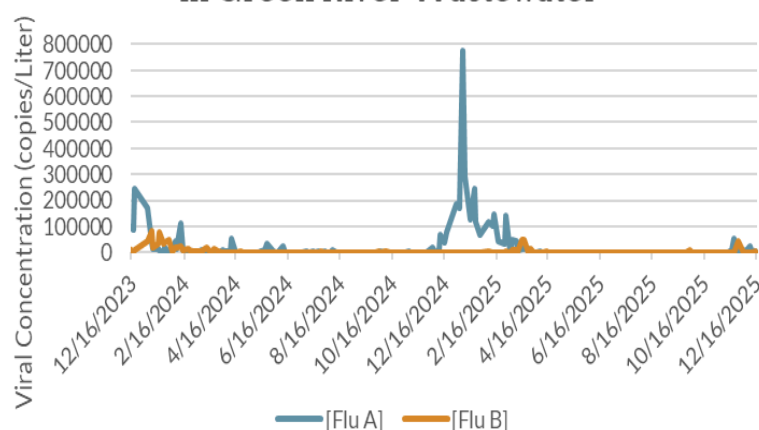
Here at the Wyoming Public Health Laboratory (WPHL), we have a team of scientists analyzing wastewater samples from across the state to identify trends in influenza (and many other pathogens). The graphs pictured below depict trend lines for the past two influenza seasons (2023-2025) as well as current 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

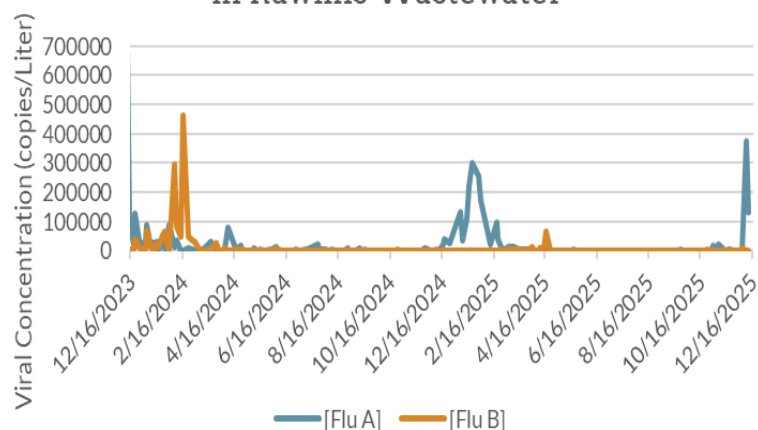
Influenza A and B Concentration Levels in Cheyenne Wastewater



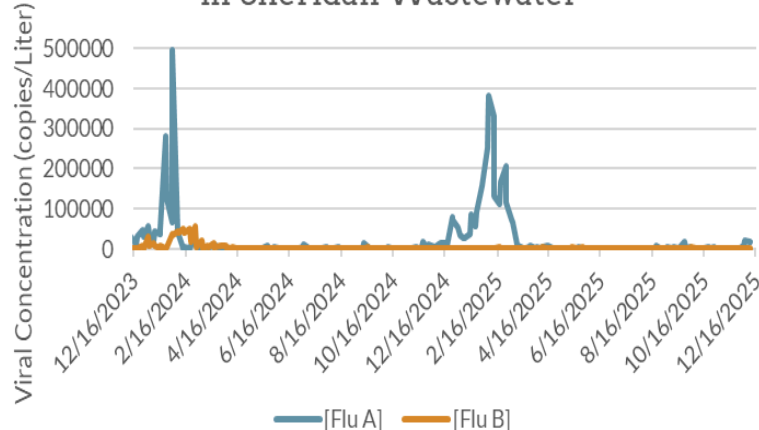
Influenza A and B Concentration Levels in Green River Wastewater



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

