

MMWR Week 14 (4/5/2026-4/11/2026)



INFECTIOUS DISEASE EPIDEMIOLOGY

Influenza Report

2025 - 2026 Influenza Season

MMWR Week 14 (4/5/26-4/11/26)

Updated April 17, 2026



Overview (MMWR Week 14)

Influenza and Influenza-like Illness (ILI) Activity

Spread

Local

Transmission levels decreased compared to last week

Flu Activity

Minimal

Reported influenza case counts decreased compared to last week

ILI Activity

Minimal

Reports of outpatient respiratory illnesses decreased compared to last week

Co-circulating

Other Respiratory Infections:

SARS-CoV-2, Pertussis, and RSV

Seasonal Data

Types of Flu:

Influenza A and B viruses are circulating

Subtypes

Primary: B

Predominantly, influenza B viruses were reported across the country this week

Outbreaks

0

No LTCF or school-associated influenza outbreaks were reported this week

Severity

Hospitalizations

The weekly influenza-associated hospitalization rate peaked in week 52 and has since decreased

Deaths

143

There have been 143 pediatric deaths reported across the country so far this season

Syndromic

5

There were five syndromic anomalies reported this week in Campbell and Sweetwater counties

EMS Reports

10

The number of suspected ILI reports decreased compared to last week

Hot Spots

Tracking Trends

Most counties reported a decrease in case counts compared to last week



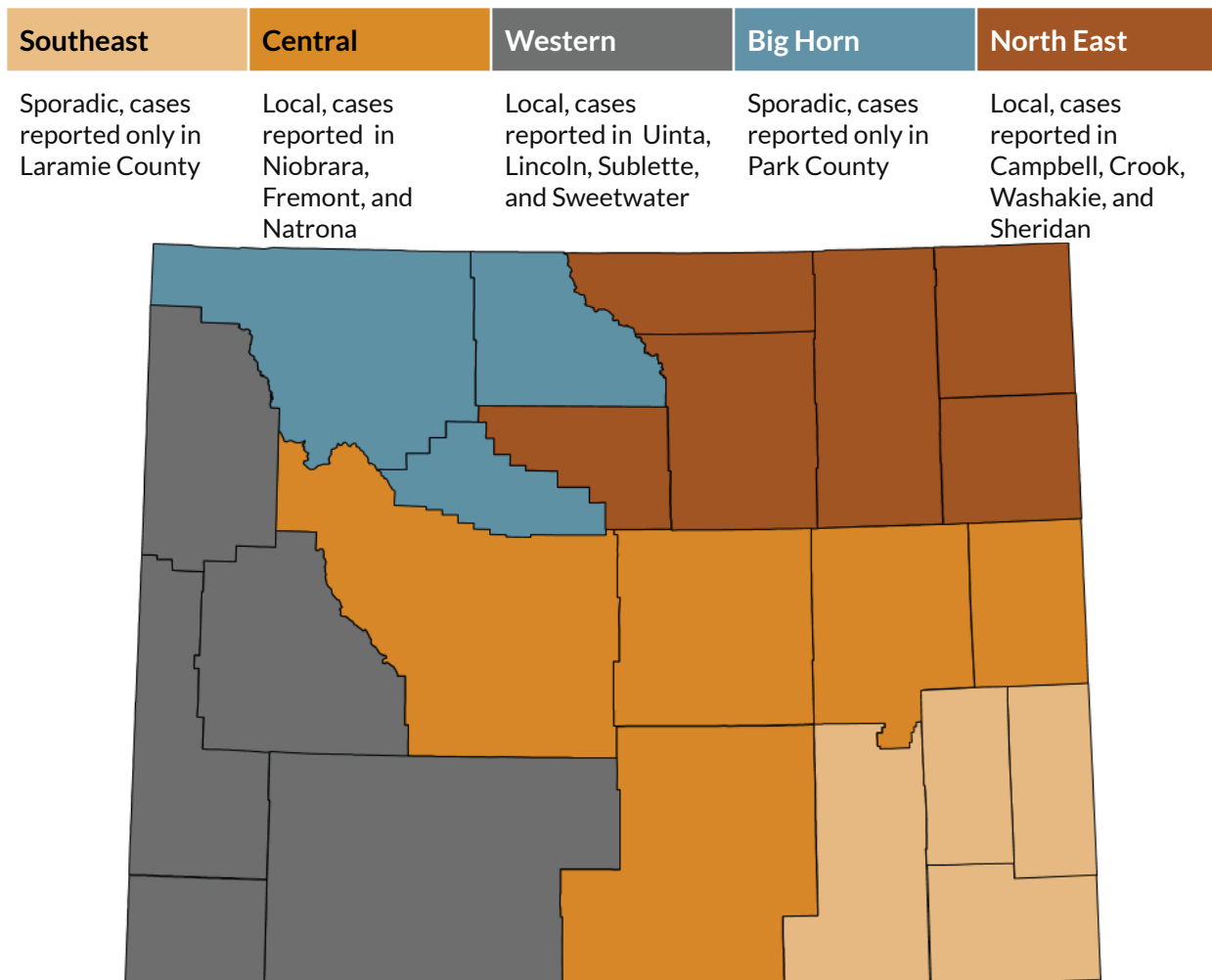
Geographic Spread

Geographic Activity by Regions

Wyoming as a whole had **minimal ILI activity** this week (MMWR Week 14). Transmission levels decreased slightly compared to last week.

- Healthcare providers in **13** 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 **77** influenza cases (rapid influenza diagnostic tests and PCR-confirmed tests) this week.

IDE Geographic Regions of Wyoming



Virologic Surveillance

Public Health Laboratory

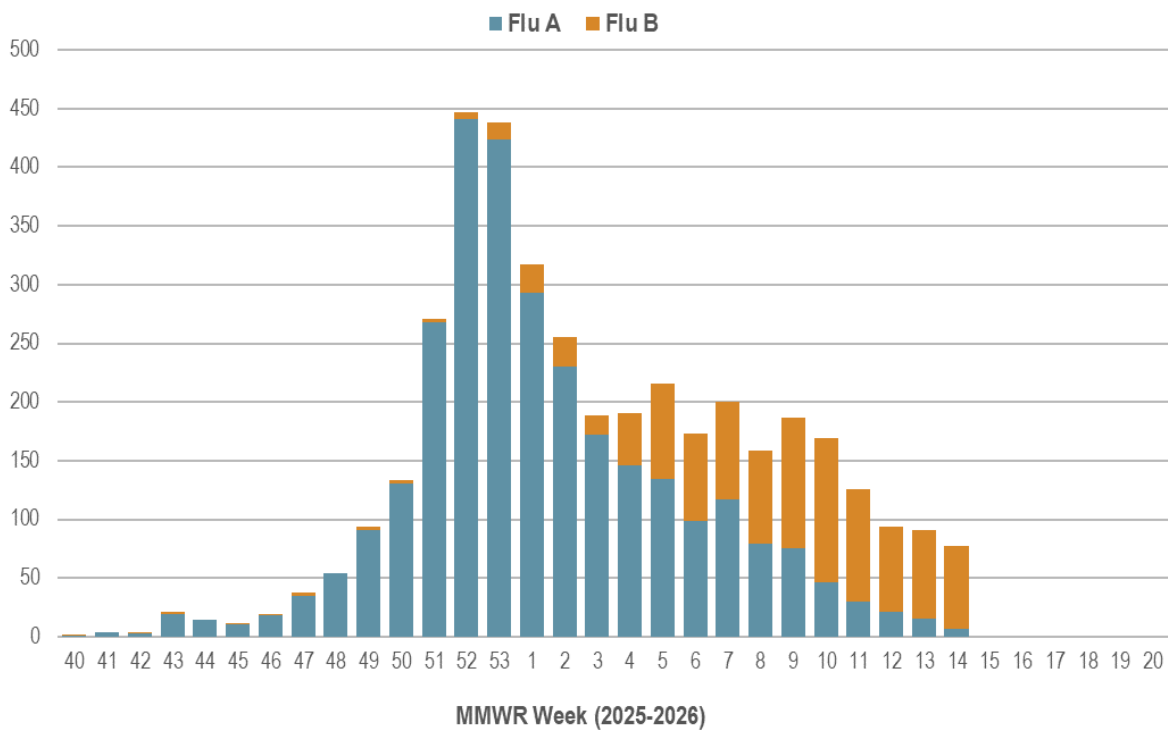
The overall volume of samples tested for influenza at the Wyoming Public Health Laboratory has steadily declined following the increasing distribution of the CDC Influenza SARS-CoV-2 Multiplex Assay, in addition to at-home testing options. We greatly encourage providers across the state to send additional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

Healthcare and Clinical Laboratories

Clinical laboratories across the country most frequently reported **influenza B viruses** circulating during MMWR Week 14.

Electronic Lab Reports of Influenza Cases

Number of Electronic Lab Reported Cases



Influenza-Like Illness Surveillance

MMWR Week 14: 2.05% ▼ below WY baseline (5.36%)

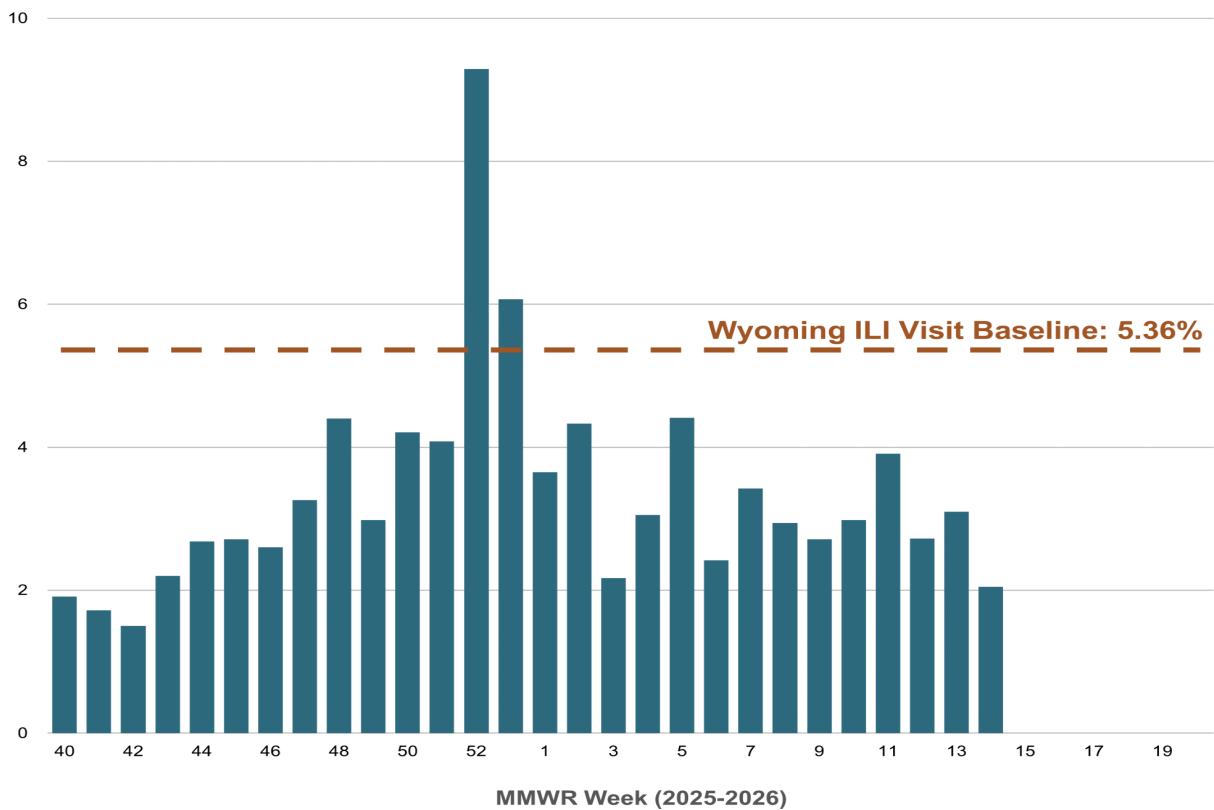
The percent of patient visits to ILI-Net Sentinel Providers for ILI decreased compared to last week.

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

Key Updates: Seasonal influenza activity continues to decrease. Influenza A activity is low across all HHS regions and influenza B activity continues to trend downward. Based on CDC calculations, transmission within Wyoming was **minimal** this week. Nationally, the percentage of respiratory specimens testing positive for the influenza virus in clinical laboratories decreased this week. Percent positivity remained stable in Region 4, and decreased in Regions 1, 3, 5, 6, 7, 8, and 10. The percent positivity for influenza A viruses is low in all HHS regions and influenza B percent positivity continues to decrease nationally and in all regions, except Region 9.

Weekly Percent of ILI Visits

Percent of Influenza-like Illness (ILI)



Pneumonia and Influenza Mortality

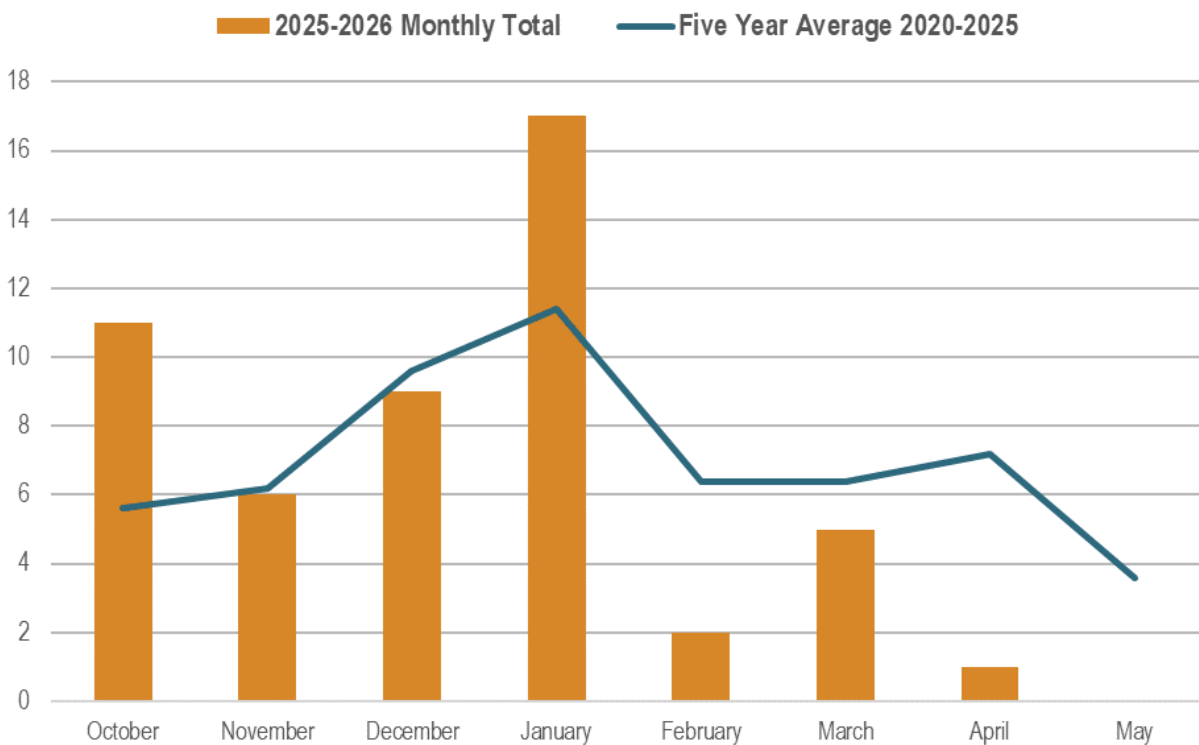
Mortality Data

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

Monthly P&I Mortality Reports (2020-2026)

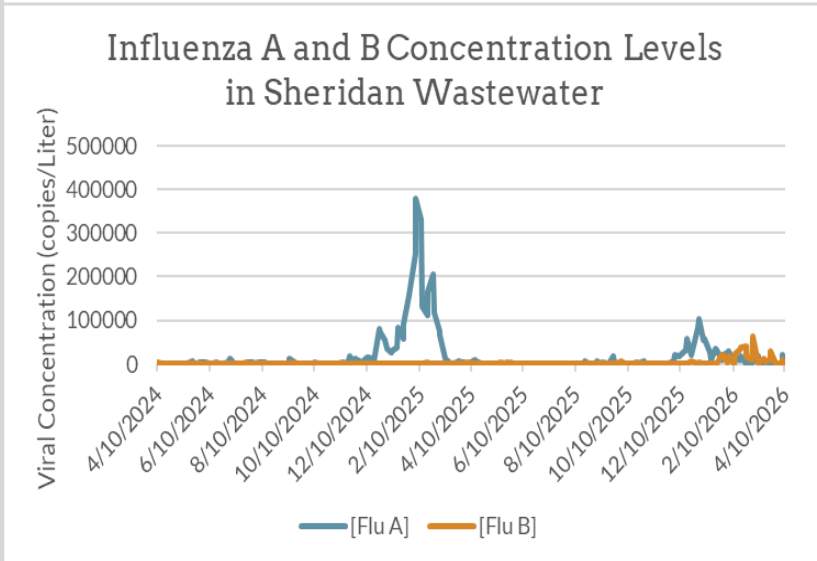
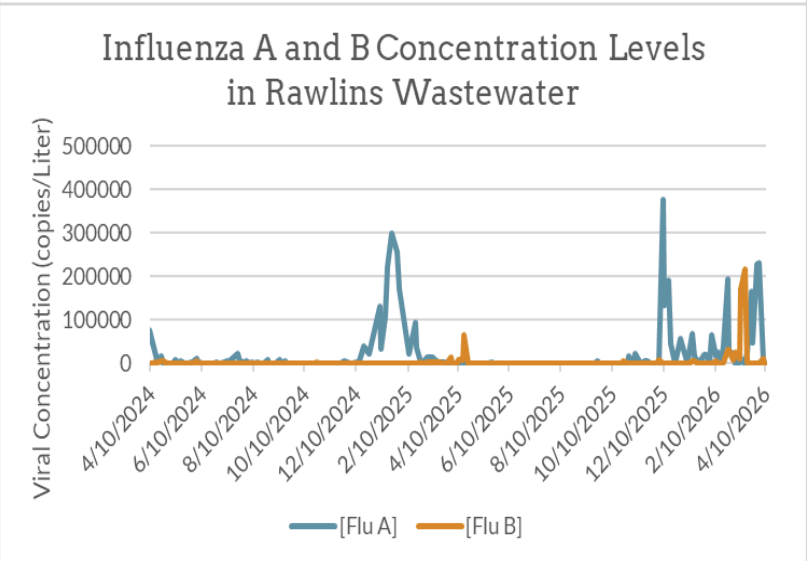
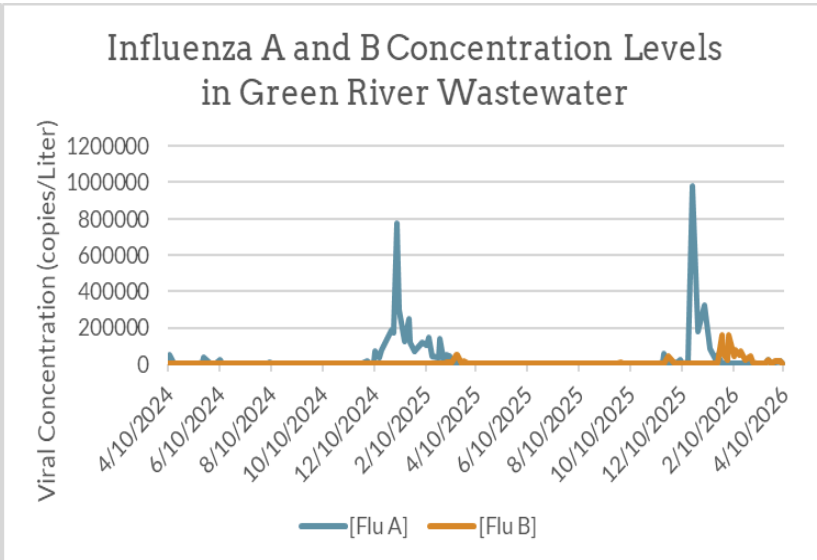
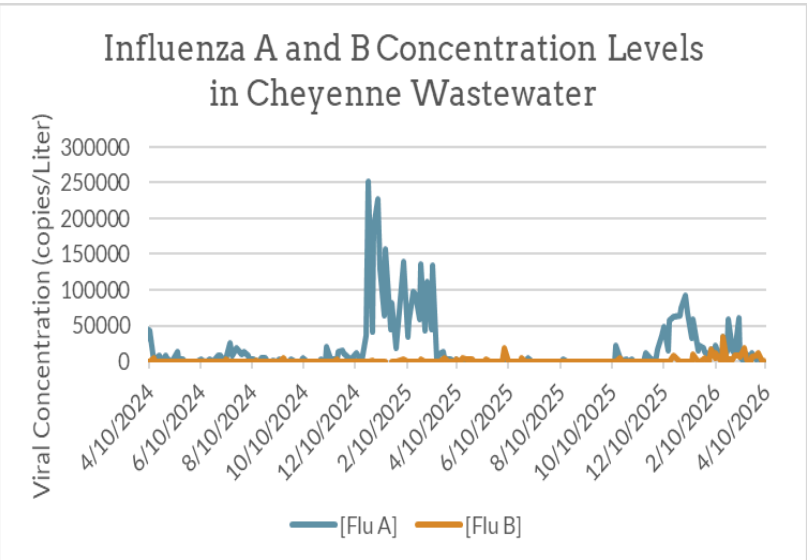
Number of P&I Deaths



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 (2023-2026) 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



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

