

This report summarizes the influenza surveillance data in Santa Clara County during the 2021-2022 influenza season. For more information, visit the [Santa Clara County Influenza Webpage](#), the [CDPH Influenza Webpage](#), and the [CDC U.S. Influenza Webpage](#).

Key Points

- In Santa Clara County, there was a small peak of cases in December 2021 and a larger peak in late May/early June 2022. Statewide and nationwide, influenza activity was higher during this season than in the previous flu season.
- Influenza A and Influenza B viruses co-circulated countywide, statewide, and nationwide, with flu A as the predominant strain.

Table 1. Summary of influenza activity during the 2021-22 influenza season^{1,2,3}

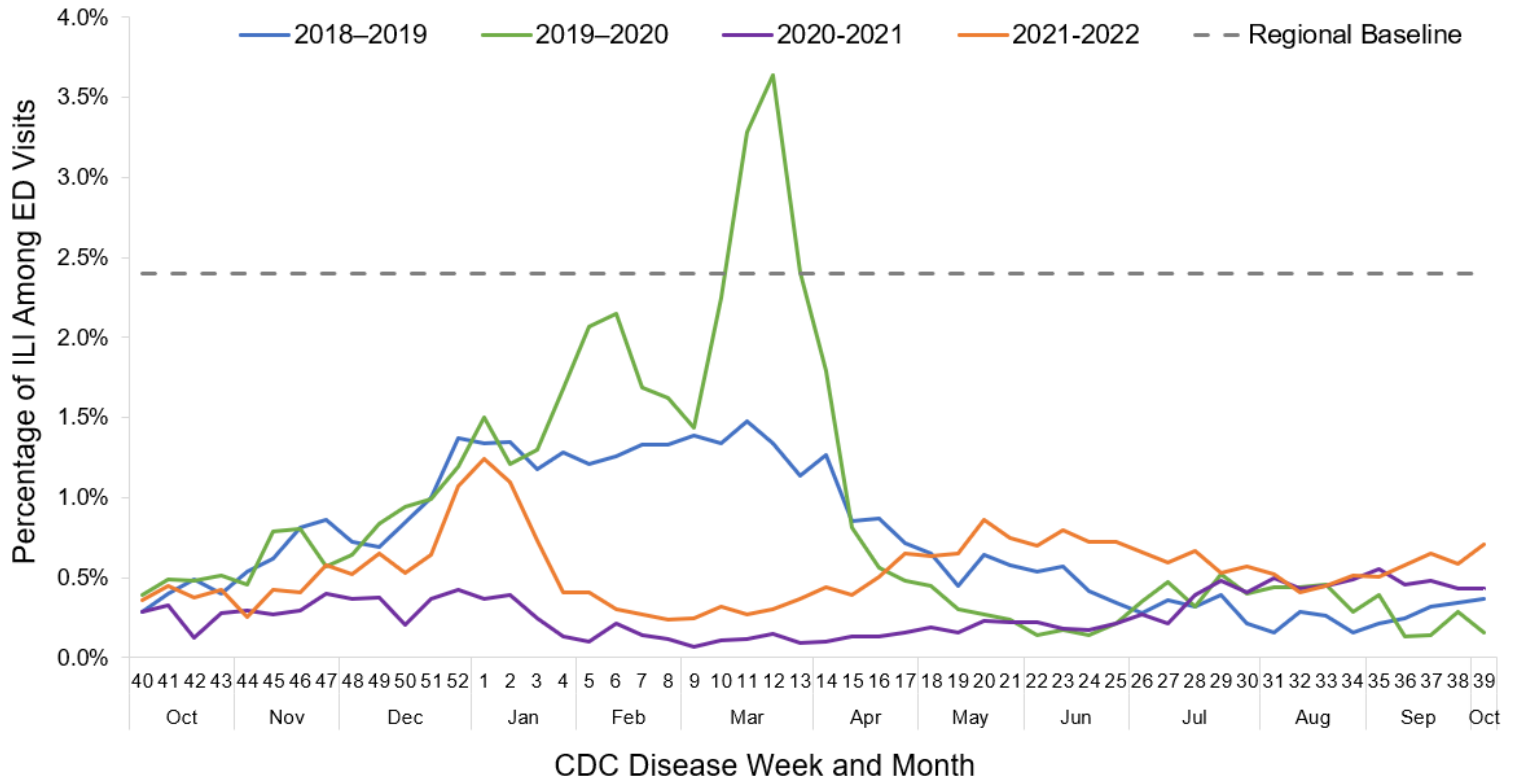
		<u>Countywide</u> Santa Clara	<u>Statewide</u> California	<u>Nationwide</u> United States
Activity	Activity level	This influenza season started at a lower level compared to previous seasons, but activity increased past Week 20 (May 15 to May 21, 2022).		
	Circulating strains	Influenza A & B	Influenza A & B	Influenza A & B
	Predominant strain	Influenza A	Influenza A	Influenza A
Laboratory	# (%) positive for influenza	1,161 (1.43%)	12,866 (4.4%)	136,829 (3.7%)
Hospitalizations	ICU admissions (Under 65 years)	0	Data not available	Data not available
Deaths	Children (Under 18 years)	0	0	39
	Adults (Under 65 years)	0	119	2,916
Outbreaks	Healthcare or community setting	1	29	Data not available

¹ For Santa Clara County data, laboratory sources include PCR, rapid, and point-of-care tests from Santa Clara County Public Health Laboratory, Sutter Health/Palo Alto Medical Foundation, and Stanford Health Care. Countywide data is from 10/3/21-10/1/22 and are provisional as of 10/4/22.

² California data is from the California Department of Public Health (CDPH). Statewide data is from 10/3/21-7/2/22 and are provisional as of 7/6/22. Laboratory information is from clinical sentinel labs.

³ United States data is from the Centers for Disease Prevention and Control (CDC). Nationwide data is from 10/3/21-9/24/22 and are provisional as of 10/4/22.

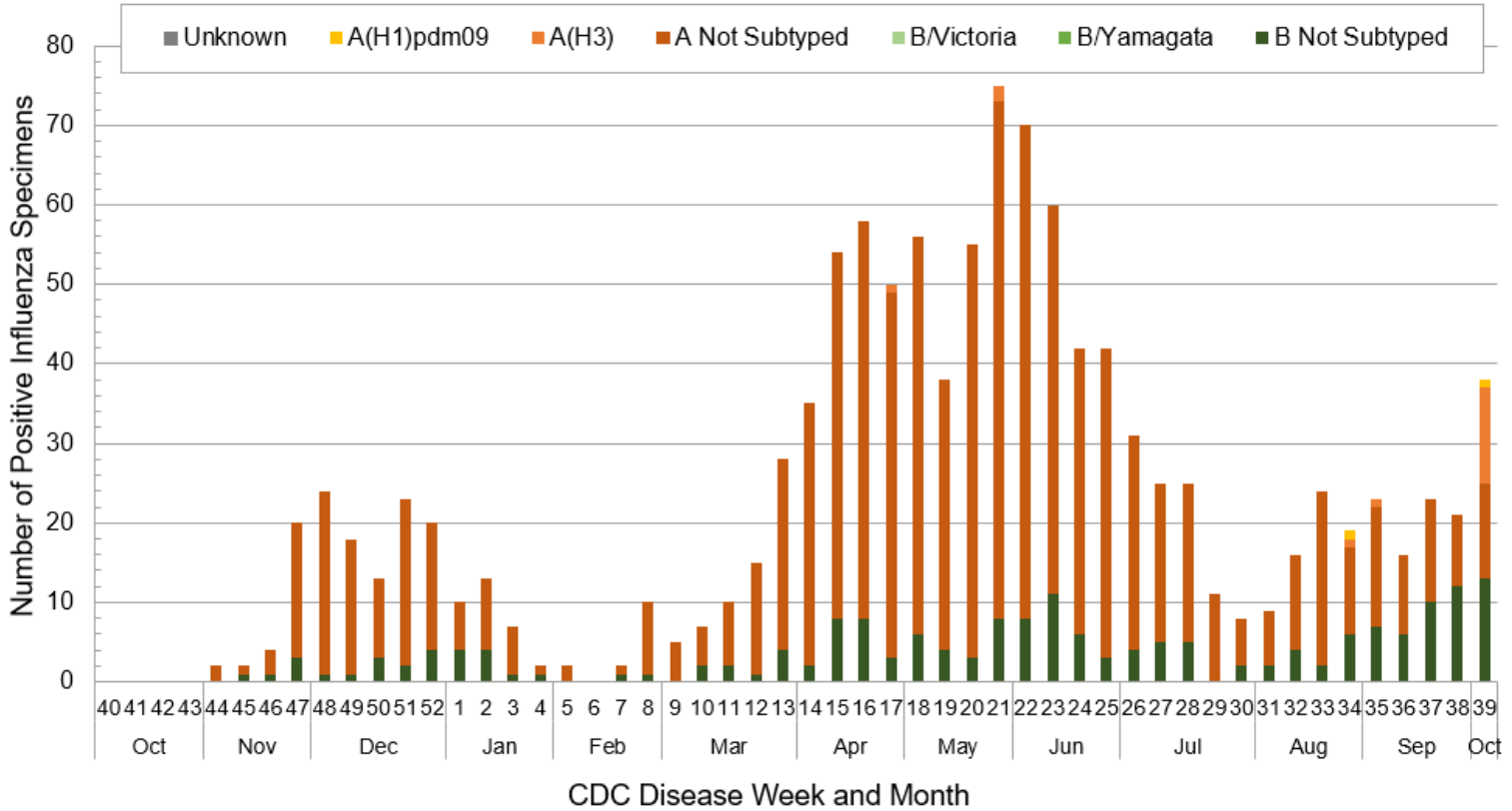
Figure 1. Weekly percentage of emergency department visits for influenza-like illness (ILI) in Santa Clara County, 2018-19 to 2021-22 flu seasons⁴



⁴ Emergency department visits for ILI are tracked through ESSENCE (Electronic Surveillance System for the Early Notification of Community-Based Epidemics). Data are provisional as of 10/3/22.

Influenza Virologic Surveillance

Figure 2⁵. Respiratory specimens testing positive for influenza in Santa Clara County by week, October 3, 2021 – October 1, 2022



⁵ Laboratory sources include PCR, rapid, and point-of-care tests from Santa Clara County Public Health Laboratory, Sutter Health/Palo Alto Medical Foundation, and Stanford Health Care. Limitations of Figure 2 data include presence of out-of-jurisdiction cases, inability to subtype influenza by certain laboratories, and potential missed influenza cases tested by alternate laboratories in the county.

About Our Surveillance Systems

In Santa Clara County, we use a broad range of surveillance methods to monitor trends in influenza activity during flu season. We closely monitor emergency department ILI data, laboratory data provided by the Public Health Laboratory (PHL) and clinical laboratories, and severe/fatal influenza cases reported to SCCPHD⁶.

Reporting Requirements

Required by CDPH	Voluntarily Reported in Santa Clara County
<ul style="list-style-type: none"> Laboratory-confirmed fatalities <18 years old Outbreaks of laboratory-confirmed influenza Novel influenza strains or cases thereof 	<ul style="list-style-type: none"> Laboratory-confirmed fatalities <65 years old Laboratory-confirmed ICU cases <65 years old

Emergency Department Visits for ILI

Emergency department visits for ILI are tracked through ESSENCE (Electronic Surveillance System for the Early Notification of Community-Based Epidemics). This real-time, automated syndromic surveillance system collects and categorizes chief complaint data from emergency department visits into different syndromes, including ILI (fever, congestion, sneezing, sore throat, runny nose, and cough).

Public Health Laboratory Surveillance

The PHL uses real-time reverse-transcription polymerase chain reaction (rRT-PCR) for influenza specimen testing of both outpatients and inpatients hospitalized without ICU level. These data do not provide a comprehensive assessment of influenza activity in the county as not all specimens are sent to the PHL.

Influenza ICU Cases

Laboratory-confirmed influenza cases under 65 years old requiring ICU level care are reported (not required) to SCCPHD and tracked in California Reportable Disease Information Exchange (CalREDIE).

Influenza Deaths

Laboratory-confirmed influenza deaths are reported to SCCPHD and tracked in CalREDIE. Although only laboratory-confirmed influenza-associated pediatric deaths are reportable in California, in Santa Clara County, we also track deaths in county residents aged 18–64 years old. The reports are supported by vital records surveillance data.

Outbreak Surveillance

All outbreaks, defined as at least one case of laboratory-confirmed influenza in the setting of a cluster (≥ 2 cases) of ILI within a 72-hour period, are investigated by SCCPHD.

⁶ Clinical laboratory sources include PCR, rapid, and point-of-care tests from Sutter Health/Palo Alto Medical Foundation and Stanford Health Care.