March 15, 2022

Dear Colleague:

This is an update on influenza activity and the availability and distribution of seasonal flu vaccine. Influenza activity is sporadic across the U.S., though it is increasing in most of the country. Influenza activity is low in New York City (NYC). Respiratory specimens submitted for influenza testing in NYC have continued to be positive for either influenza A or influenza B, though the counts of positive specimens have remained at a low level for the past few weeks. Hospitalizations for influenza have increased in the U.S. over the past five weeks, though in NYC over the past few weeks there has been only a low level of influenza-like illness (ILI) emergency departments visits and ILI hospital admissions. However, there continues to be influenza outbreaks in NYC in long-term care facilities. There have been ten influenza-associated pediatric deaths in the U.S. so far this season, with two of them reported during the week ending February 26, but none in NYC.

Although seasonal influenza activity indicators are at a low level in NYC, influenza activity is unpredictable and there might still be an increase in activity during the late winter and early spring. There have been increases in seasonal influenza activity seen as late as May.

Vaccination rates remain below what they were last season, with the number of flu doses administered to the NYC pediatric population as of February 26, 2022, 9% below what it was last year at this time. We encourage you still to take every opportunity to vaccinate your patients against influenza.

Recently published preliminary overall vaccine effectiveness (VE) against medically attended outpatient acute respiratory infection associated with influenza A(H3N2) was 16% (95% CI = -16% to 39%), which is not considered statistically significant. Flu vaccination, therefore, did not reduce the risk for outpatient medically attended illness with influenza A(H3N2) viruses that predominated so far this season. The Centers for Disease Control and Prevention still recommends flu vaccination as long as influenza viruses are circulating, even when VE against one virus is reduced, because vaccination can prevent serious outcomes (e.g., hospitalization, intensive care unit admission, or death) that are associated with influenza A(H3N2) virus infection and might protect against other influenza viruses that could circulate later in the season.

This is our last influenza update for the 2021-2022 season. In August we will send guidance for the 2022-2023 influenza season.

For questions on flu vaccine, other than those pertaining to your VFC order, please call (347) 396-2400 or email nycimmunize@health.nyc.gov. We thank you for your continuing efforts at protecting NYC residents from influenza.

Sincerely,

Jane R. Zucker, MD, MSc