

Ask Dr. Arwady

December 6, 2022

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Our local risk based on CDC COVID-19 Community Levels is:

Medium

	New cases per 100,000 population (last 7 days) [Goal is <200]	New admissions per 100,000 population (last 7 days) [Goal is <10]	Percent of staffed inpatient beds occupied by COVID-19 patients (last 7 days) [Goal is <10%]
City of Chicago	95	8.9	3.4%
Cook County (including City of Chicago)	117	11.5	4.1%

Chicago metrics are calculated based on Chicago-level data.

Cook County metrics are calculated by the CDC and posted on the <u>CDC Community Levels website</u>. Data current as of 12/1/2022.



MEDIUM

In "Medium" risk, the Chicago Department of Public Health recommends individuals:

- Stay up to date* with COVID-19 vaccines
- Wear a face mask in indoor public settings where vaccine status is not known
- Get tested if you have symptoms
- Follow all isolation and quarantine guidance, including wearing a face mask
- If you are at high risk for severe illness, talk to your healthcare provider about whether you need to wear a mask and take other precautions

^{*}Up-to-date means a person has received all recommended COVID-19 vaccines, including any booster dose(s) when eligible.



* Additional COVID-19 Indicators for Chicago

Chicago COVID-19 Emergency Department encounters

LOW CONCERN

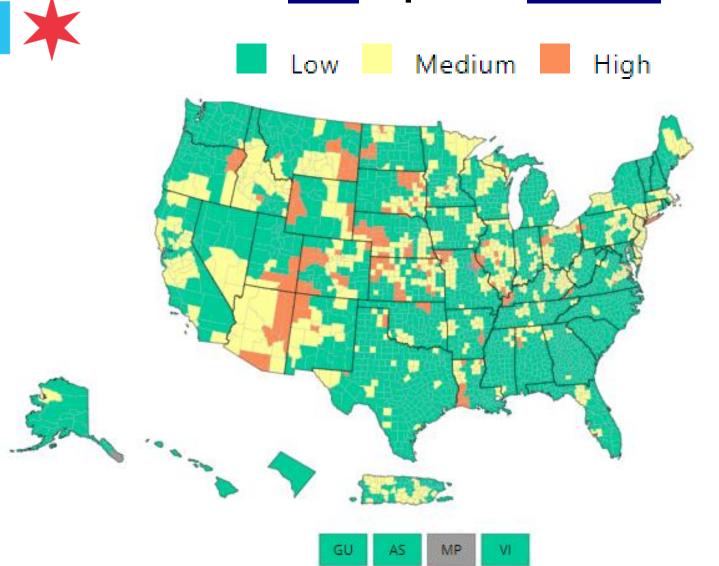
Chicago Wastewater Sampling

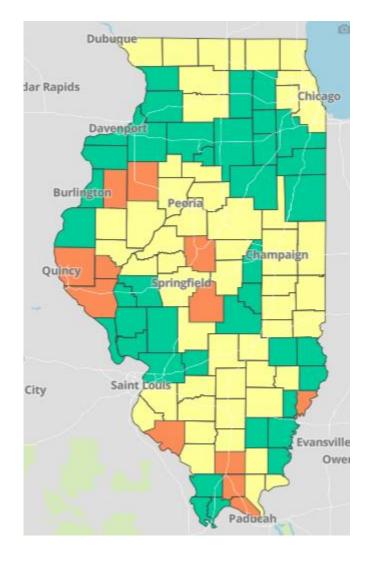
HIGH CONCERN

Chicago Variant Risk Assessment

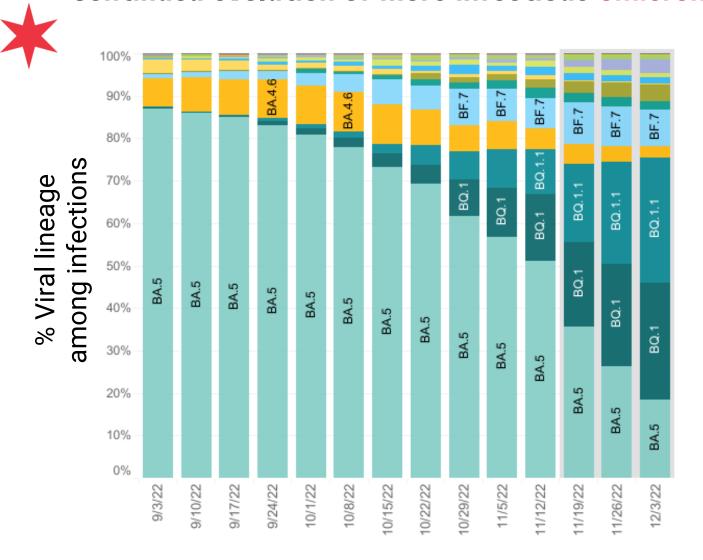
MEDIUM CONCERN

Last week, 5.7% of U.S. Counties reported High COVID Community Level and 25% reported Medium Level.





Variant Surveillance, Midwest Region Continued evolution of more infectious Omicron subvariants



BQ.1.1	29.6%
BQ.1	27.6%
BA.5	18.4%
BF.7	8.5%
BN.1	4.1%
XBB	3.4%
BA.4.6	2.6%
BA.5.2.6	2.1%
BF.11	1.4%
BA.2.75	0.9%
BA.2	0.8%
BA.2.75.2	0.6%

Collection date, week ending



If you test positive for COVID-19 and are more likely to get very sick from COVID, treatments are available.

- Don't delay: treatment must be started within days of when you first develop symptoms to be effective.
- For example: Paxlovid (nirmatrelvir and ritonavir) is an oral antiviral therapy that was granted EUA for the treatment of mild to moderate COVID-19.
 - Individuals ages 12 and up, weighing at least 40 kg or 88 lb, with mild to moderate COVID-19, who are at high risk of developing severe illness are eligible for this medication.
- Some treatments might have side effects or interact with other medications you are taking. Ask a healthcare provider if medications to treat COVID-19 are right for you.
- If you don't have a healthcare provider, visit a <u>Test to Treat location</u> or contact the City's **COVID-19 Hotline at 312-746-4835**



THINK YOU'RE UP TO DATE WITH YOUR COVID VACCINES?

IF YOU HAVEN'T
BEEN VACCINATED
SINCE LABOR DAY...



Previously vaccinated Chicagoans age 5+ are eligible for the new bivalent booster and the best protection against Omicron.





Pfizer and BioNTech have asked the FDA to authorize bivalent boosters for children under 5 years.

It's possible COVID boosters for the youngest Chicagoans could be administered before the New Year!





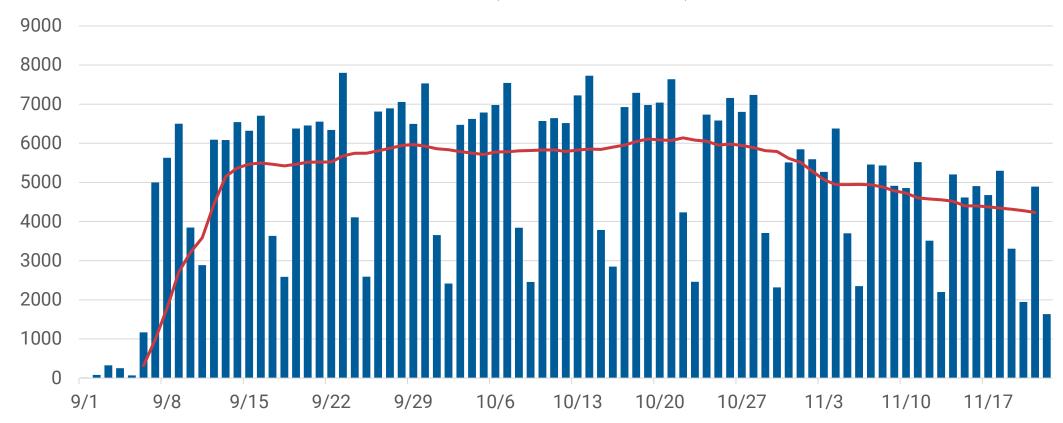
Higher Updated Booster Coverage among Chicagoans than Nationwide Estimates—but too low everywhere

People with an Updated (Bivalent) Booster Dose	Percent of US Population (as of 11/30)	Percent of Chicago Population (as of 11/29)
Population ≥ 5 years	12.7%	15.9%
Population ≥ 12 years	13.8%	16.6%
Population ≥ 18 years	14.7%	17.4%
Population ≥ 65 years	32.6%	33.6%



Over 429,000 doses of the updated boosters have been administered to Chicagoans since authorization

The 7DRA doses administered decreased from ~4,500 last week to ~4,300 this week





Demographics of Chicagoans who received an updated COVID-19 vaccine (N=429,660) Race-ethnicity Count

Age Group	Count	(%)
5-11 yrs	10499	2.4%
12-17 yrs	14986	3%
18-29 yrs	48992	11%
30-39 yrs	78886	18%
40-49 yrs	60155	14%
50-59 yrs	61527	14%
60-69 yrs	73320	17%
70-79 yrs	54951	13%
80+ yrs	26344	6%

Race-ethnicity	Count	(%)
Latinx	70050	16%
Black, non-Latinx	79938	19%
White, non-Latinx	225025	52%
Asian, non-Latinx	36270	8%
AIAN, non-Latinx	2173	1%
NHPI, non-Latinx	1001	0%
Other, non-Latinx	7291	2%
Unknown	7912	2%
Sex	Count	(%)
Female	234328	55%
Male	193044	45%
Unknown	2288	1%

AIAN = American Indian Alaskan Native NHPI = Native Hawaiian Pacific Islander

Overall, 23% (+1%) of Eligible Chicagoans have received an updated, Fall 2022 COVID booster

X
V

	No. of Chicagoans eligible for updated vaccine (est.)*	No. of eligible who received updated vaccine	Percent eligible who have received updated vaccine
Race/Ethnicity	· · · · · · · · · · · · · · · · · · ·		
Latinx	520,544	70,068	13.5%
Black, non-Latinx	434,966	79,955	18.4%
White, non-Latinx	646,385	225,053	34.8%
Asian, non-Latinx	143,910	36,292	25.2%
Age Group			
05-11 yrs	98,518	10,499	10.7%
12-17 yrs	127,426	14,986	11.8%
18-29 yrs	355,603	48,992	13.8%
30-39 yrs	354,143	78,886	22.3%
40-49 yrs	276,703	60,155	21.7%
50-59 yrs	254,925	61,527	24.1%
60-69 yrs	216,215	73,320	33.9%
70-79 yrs	127,142	54,951	43.2%
80+ yrs	66,525	26,344	39.6%



GET YOUR UPDATED

In-home vaccination is available to all Chicago households at no cost. Up to 10 people can be vaccinated, so invite your family, friends, or neighbors to get vaccinated together.







EVERYONE 6 MONTHS AND UP IS ELIGIBLE FOR THE AT-HOME PROGRAN

In-home appointments are available four days a week, Saturday through Tuesday, 8:00 am - 6:30 pm.

VACCINES AVAILABLE

- Primary series Moderna (age 6 months through 5 years) and Pfizer (age 6 months and older).
- New Pfizer bivalent boosters (age 5 years and older).
- Flu shots are available as long as one person receives the COVID-19 vaccine.









Saturday, December 10 • 9am-2pm

Olive Harvey College - 10001 S. Woodlawn Ave. Register at: rebrand.ly.Olive-Harvey

The new COVID-19 bivalent booster will be available!

Types of vaccines: Flu, COVID-19 primary series from Pfizer and Moderna starting 6 months+, and Pfizer bivalent boosters from 5 years+



WALK-INS WELCOME!



Need a vaccine or a booster? Have questions?

visit

CHI.GOV/COVIDVAX

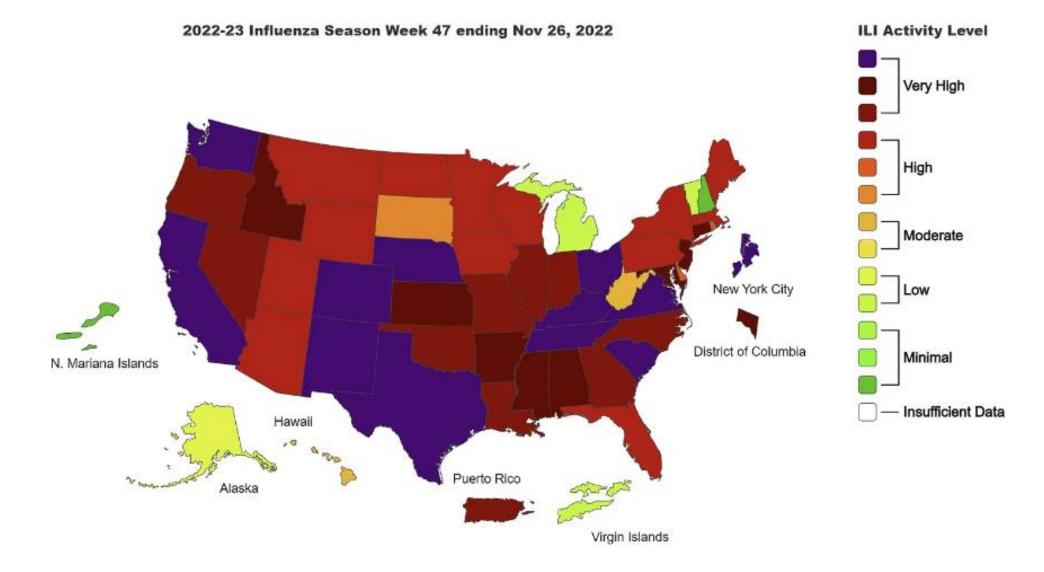
or call

312-746-4835



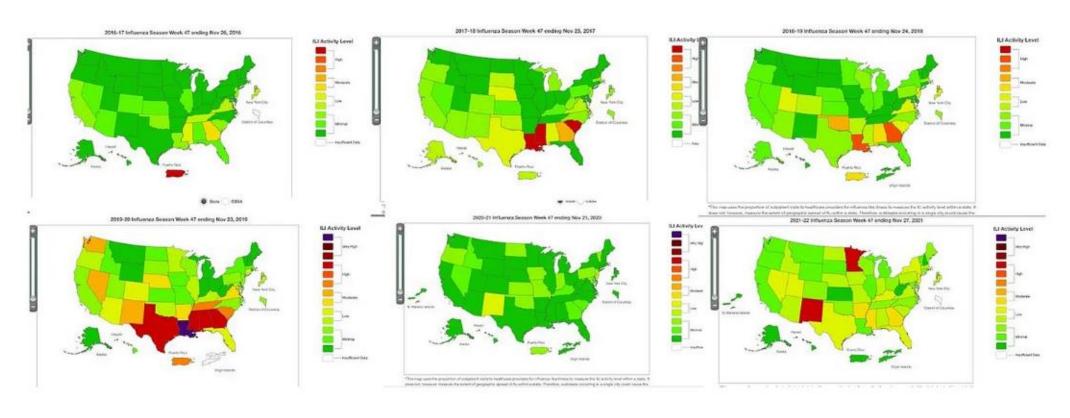








Unusual to see such early and significant flu activity. Here's what the same data looked like in 2016-2021.

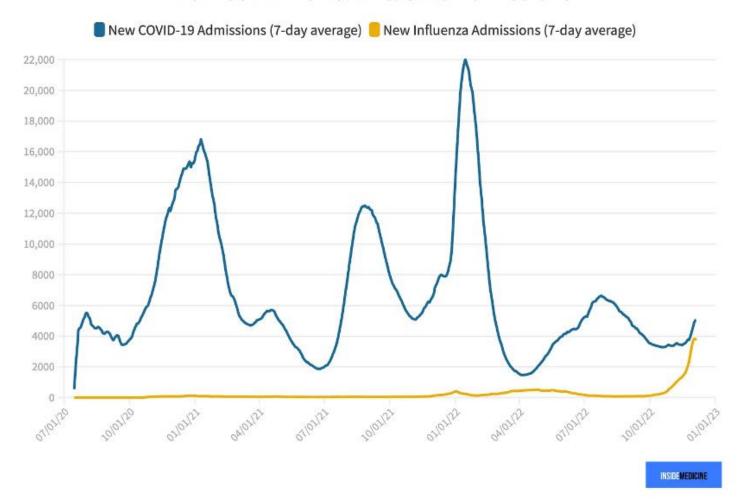


Influenza hospitalizations nationwide right now are higher than they've been in the past decade.

*

Nationwide: Last week, for the first time in the pandemic, influenza hospitalizations overtook COVID hospitalizations.

New COVID-19 vs. Influenza Admissions



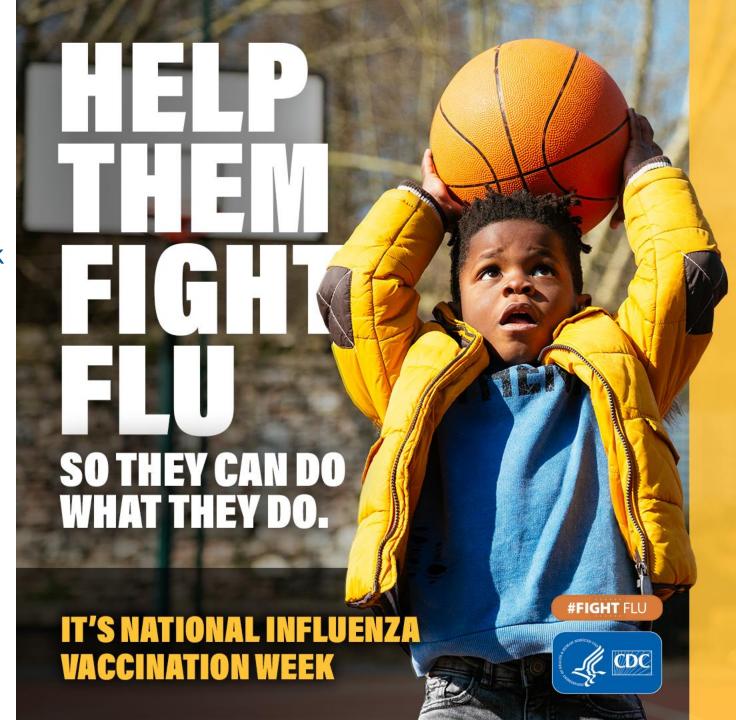






National Influenza Vaccination Week is December 5-9, 2022

- National Influenza Vaccination Week (NIVW) is an annual observance in December to remind everyone 6 months and older that <u>there's still</u> <u>time</u> to get vaccinated against flu.
- Vaccination is particularly important for people who are at higher risk of developing serious flu complications, including young children.
- Millions of children get sick with flu every year, and thousands will be hospitalized as a result.





Surveillance Indicators for Acute Respiratory Illness

Indicator	What is being measured?	Who is reporting?
Outpatient visits (ILINet)	The percent of outpatient visits due to influenza-like illness	Federally qualified health center with multiple locations throughout Chicago submits aggregate weekly data
Emergency department visits	The percent of emergency department visits due to influenza-like illness and other diagnoses	All acute care hospitals report near-real time data to IDPH
Laboratory tests for respiratory viruses	The number and percent of specimens positive for influenza	Five hospital labs and two commercial labs submit aggregate weekly testing data



What is Influenza Like Illness (ILI)?

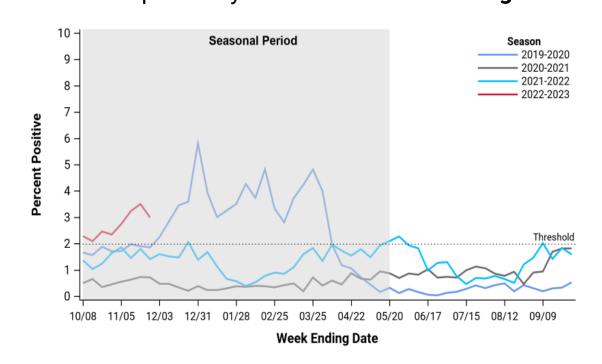
- Fever AND cough OR sore throat
- Syndromic surveillance approach used to monitor different healthcare visits for respiratory illnesses based on symptoms not laboratory-confirmed illness
- ILI will capture respiratory illness visits due to diseases that present with similar symptoms, including flu, COVID-19, and RSV



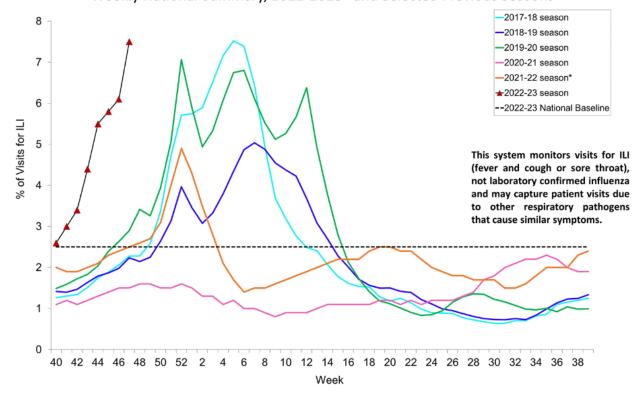


Outpatient Illness Surveillance Assess trends in outpatient visits due to respiratory illness

Percent of outpatient visits due to ILI reported by ILINet facilities in **Chicago**



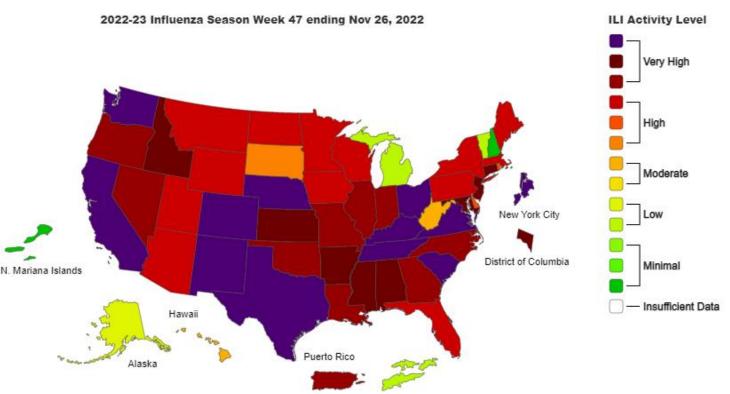
Percentage of Outpatient Visits for Respiratory Illness Reported By The U.S. Outpatient Influenza-like Illness Surveillance Network (ILINet), Weekly National Summary, 2022-2023* and Selected Previous Seasons



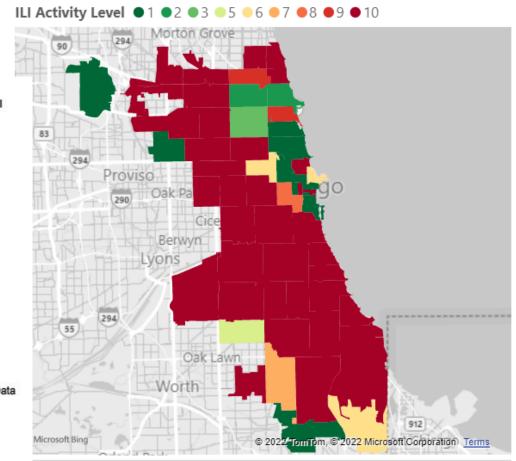


ILI Activity by Geography

National data: based on outpatient visits due to ILI



Chicago data: based on ED visits due to ILI



Virgin Islands

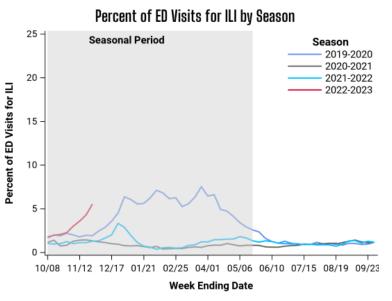


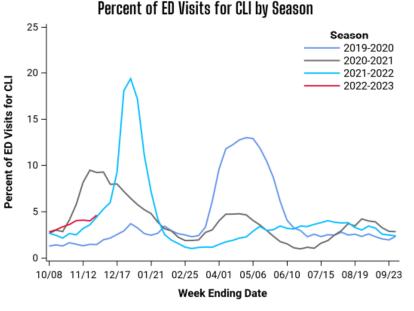
Emergency Department Illness Surveillance Assess trends in emergency department visits due to respiratory illness

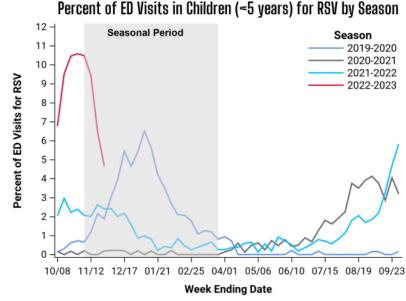
Influenza like illness (ILI)

COVID like illness (CLI)

RSV



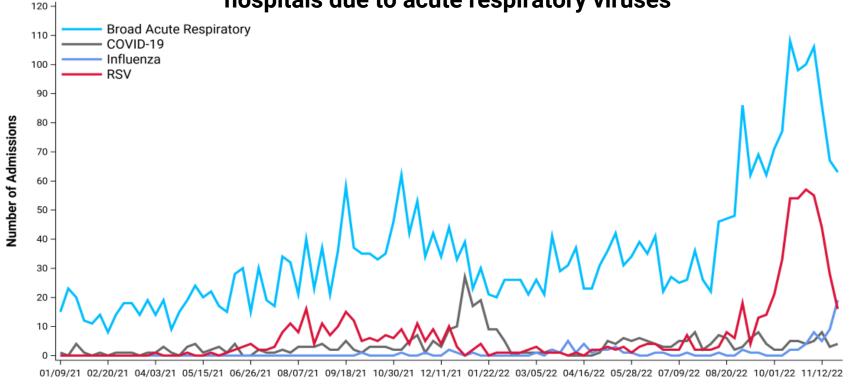






Emergency Department Illness Surveillance Assess trends in hospital admissions via the emergency department

Hospital admissions among children <18 years-old at Chicago hospitals due to acute respiratory viruses

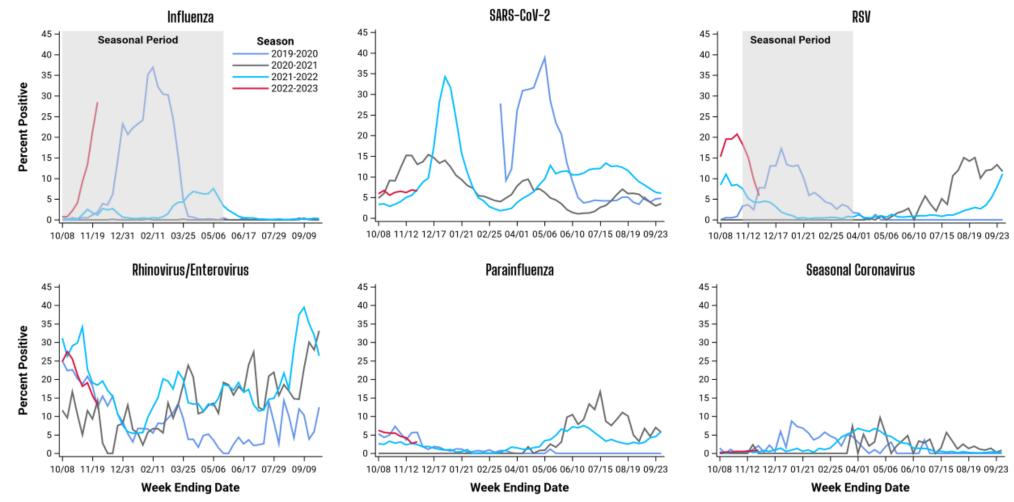


Week Ending Date

Data reported through 11/26/2022. Assigned syndromes or diseases are based on chief complaint terms and diagnosis codes. Broad acute respiratory is a syndrome to identify visits with diagnostic codes associated with a broad range of acute respiratory illnesses. This includes codes associated with specific respiratory infections (e.g. influenza, RSV, or coronavirus), as well as codes associated with general respiratory illness such as cough or pneumonia.

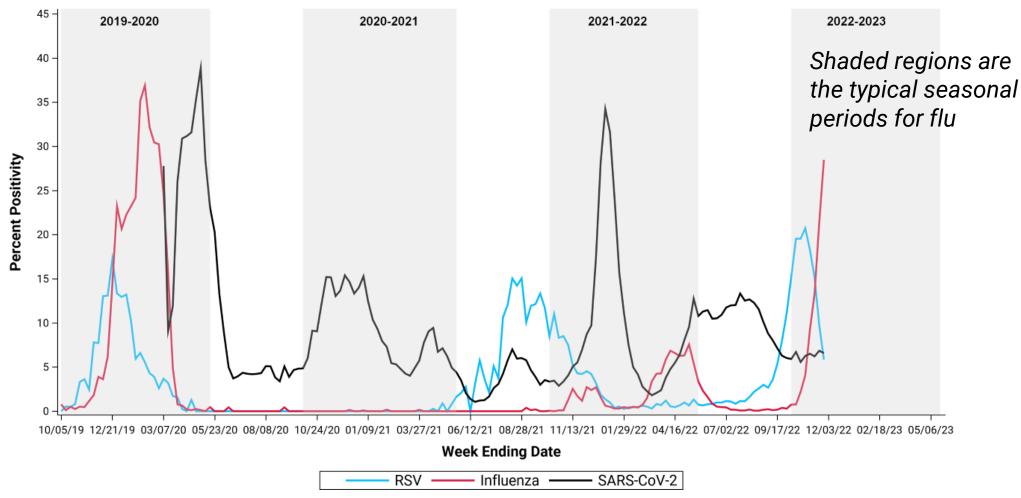


Laboratory-Based Surveillance: Assess trends in test positivity





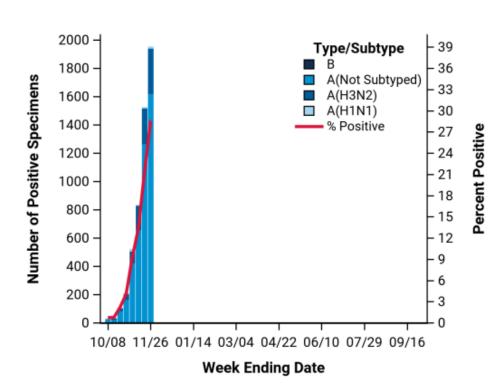
Laboratory-Based Surveillance: Monitor co-circulating viruses





Laboratory-Based Surveillance: Determine additional details about what types of viruses are circulating

Influenza type/subtypes detected during the 2022-23 season



	Week Ending		Since	
	November 26, 2022		October 2, 2022	
Type / Subtype	# Positive	%	# Positive	%
Influenza A	1,952	99.9	5,213	99.8
(H1N1)pdm09	13	0.7	55	1.1
H3N2	320	16.4	899	17.2
Subtyping not performed	1,619	82.9	4,259	81.7
Influenza B	2	0.1	9	0.2
Total Positive	1,954	100.0	5,222	100.0



*Additional Disease-Specific Indicators for Flu or COVID-19

Measure the burden of severe illness caused by influenza and COVID-19 and describe risk factors for severe disease

- Influenza-associated ICU hospitalizations
- HHS Protect hospital surveillance
 - Number of new influenza and COVID-19 admissions at Chicago hospital
- Pediatric influenza-associated deaths
- IDPH Vital records
 - Deaths due to pneumonia/influenza/COVID-19 occurring in Chicago

Provide guidance for management of outbreaks in high-risk settings

- Long-term care facility influenza and COVID-19 outbreaks
- National Healthcare Safety Network long-term care facility module
 - Number of residents/staff with influenza and COVID-19



X How Can We Predict How Well a Vaccine Might Work?

- Person Being Vaccinated
 - Previous history of vaccination
 - Age
 - Immune status

- Virus
 - Influenza virus proteins are constantly changing
 - Vaccines work best when there is a good "match" between flu vaccine and circulating viruses

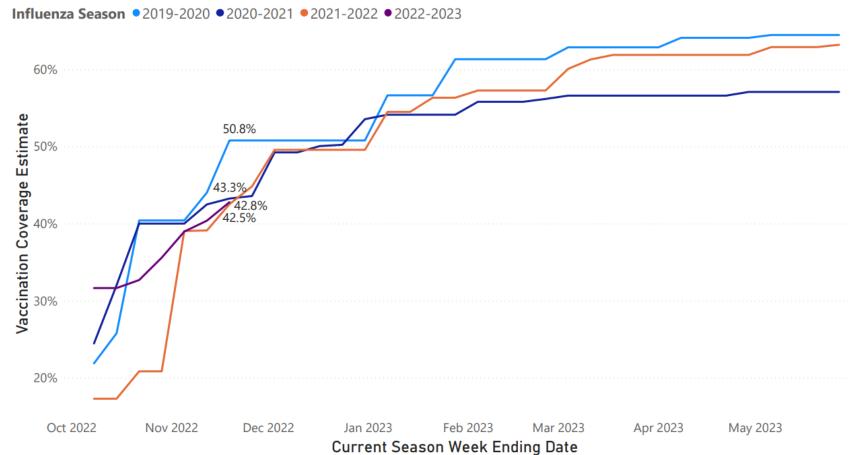
Southern hemisphere 2022 trends- suggest a good match



Child Flu Coverage: Seasonal Comparisons through November 19

Updated 12/2/22: https://www.cdc.gov/flu/fluvaxview/dashboard/vaccination-coverage-race.html

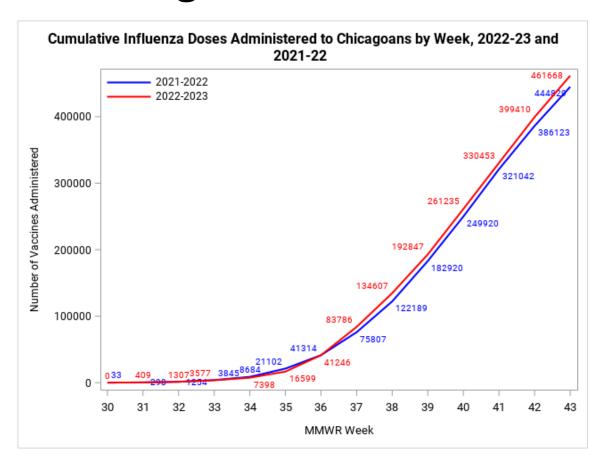
NIS Chicago Influenza Vaccination Coverage Estimates Among Children Under 18 by Week



 NIS data indicate 2022-23 influenza vaccination coverage is similar to what it was this time last year and the 2020-21 season, but lower than what it was in the 2019-20 season



Cumulative Influenza Doses Administered in I-CARE through October



- Nearly 17,000 additional influenza vaccine doses have been administered to Chicagoans compared to the number of doses administered to Chicagoans at this time last season
- Vaccines have been administered by 2,631 providers this season compared to 2,236 last season

^{*}MMWR Week 30 is the last week of July/ first week of August

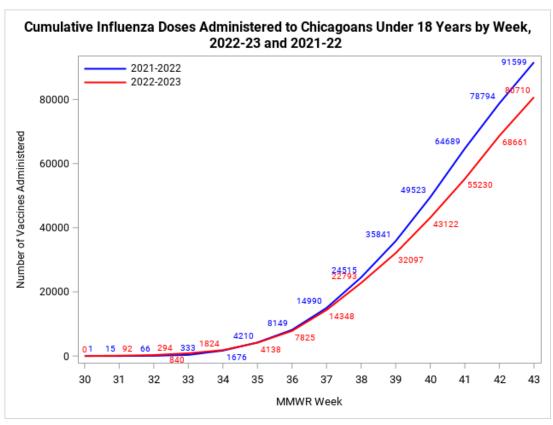
^{*}MMWR Weeks 31-35 cover the month of August/ first week of September

^{*}MMWR Weeks 36-39 cover the month of September

^{*}MMWR Weeks 40-43 cover the month of October



Cumulative Influenza Doses Administered to Children Under 18 Years in I-CARE through October



- Continue to see fewer flu shots being administered to children under 18 this season compared to the same time period in the 2021-22 season
- Nearly 11,000 fewer flu doses have been administered to this age group this season compared to last season

^{*}MMWR Week 30 is the last week of July/ first week of August

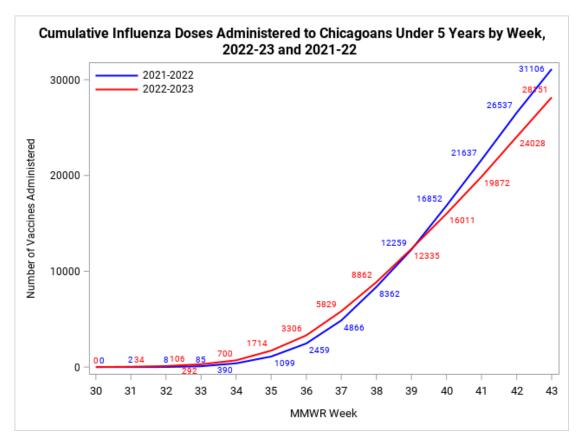
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^{*}MMWR Weeks 36-39 cover the month of September

^{*}MMWR Weeks 40-43 cover the month of October



Cumulative Influenza Doses Administered to Children Under 5 Years in I-CARE through October



- Approximately 3,000 fewer influenza vaccine doses have been administered to children under 5 years this season compared to the same time period last year
- Despite starting the season slightly stronger compared to last year, at week 40 the number of doses administered in the 2022-23 season dropped below what it was in the 2021-22 season and has since remained lower

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