



# District 2 Public Health

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Banks, Dawson, Forsyth, Franklin, Habersham, Hall, Hart, Lumpkin, Rabun, Stephens, Towns, Union and White Counties

March 24, 2025

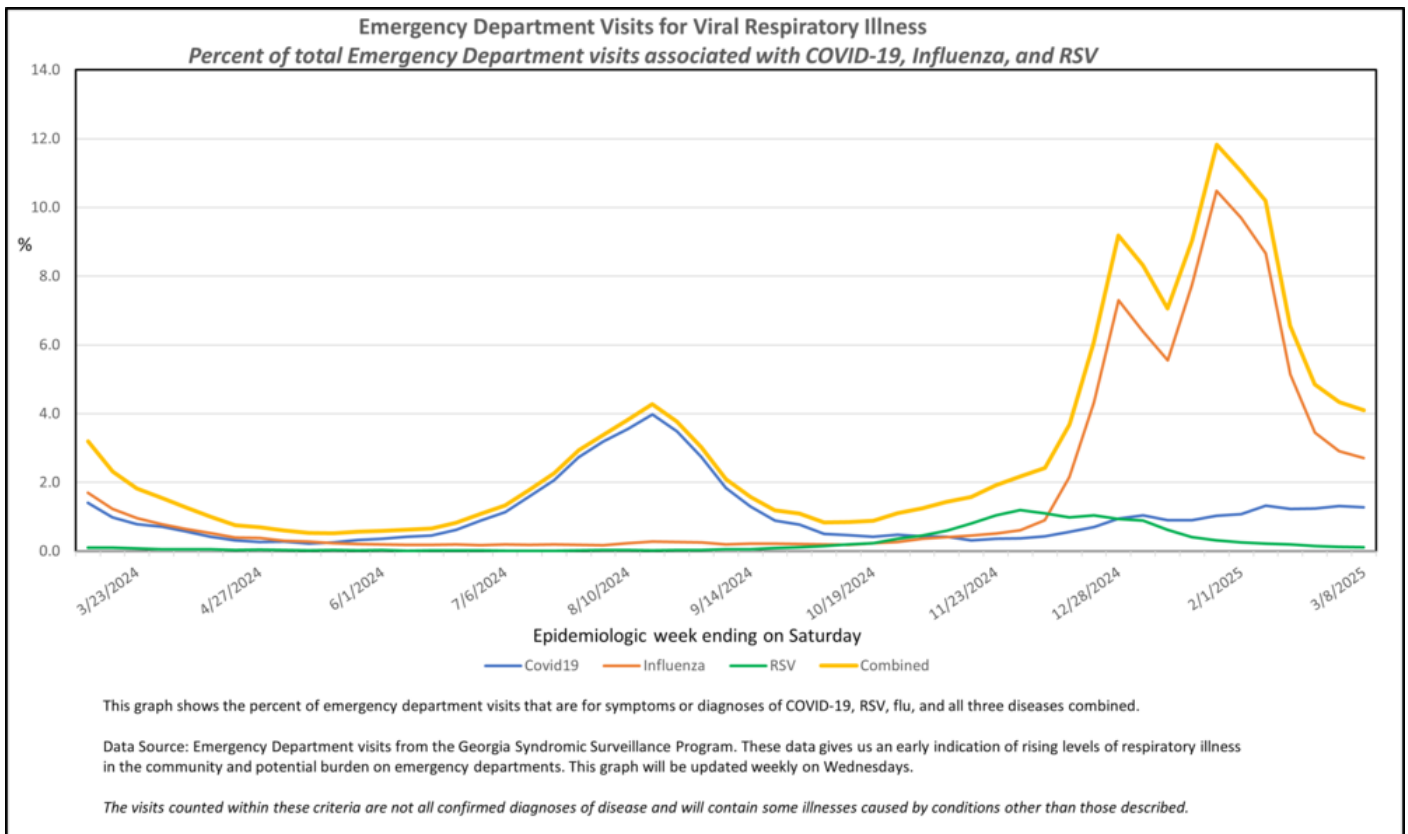
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## Viral Respiratory Diseases Surveillance

### **Pan-Respiratory Virus Surveillance (Georgia- last updated 3/8/2025)**

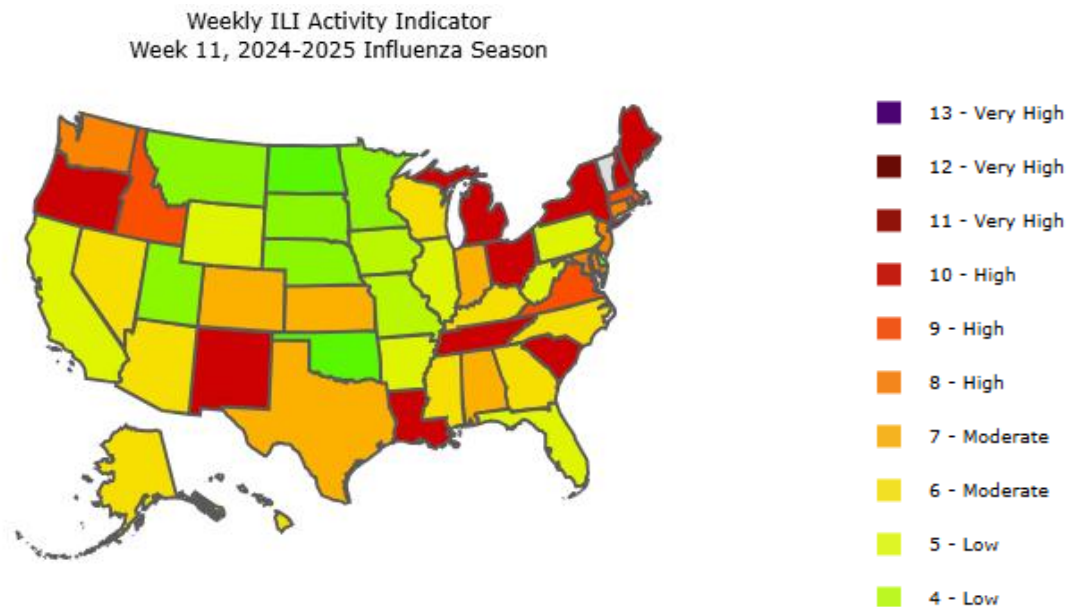


Graph shows Influenza cases are significantly higher than RSV and COVID-19 ending week of 3/8/2025. However, Influenza cases started to decline on past weeks.

## Georgia Flu Surveillance Update: Week 11 (Ending March 15, 2025)

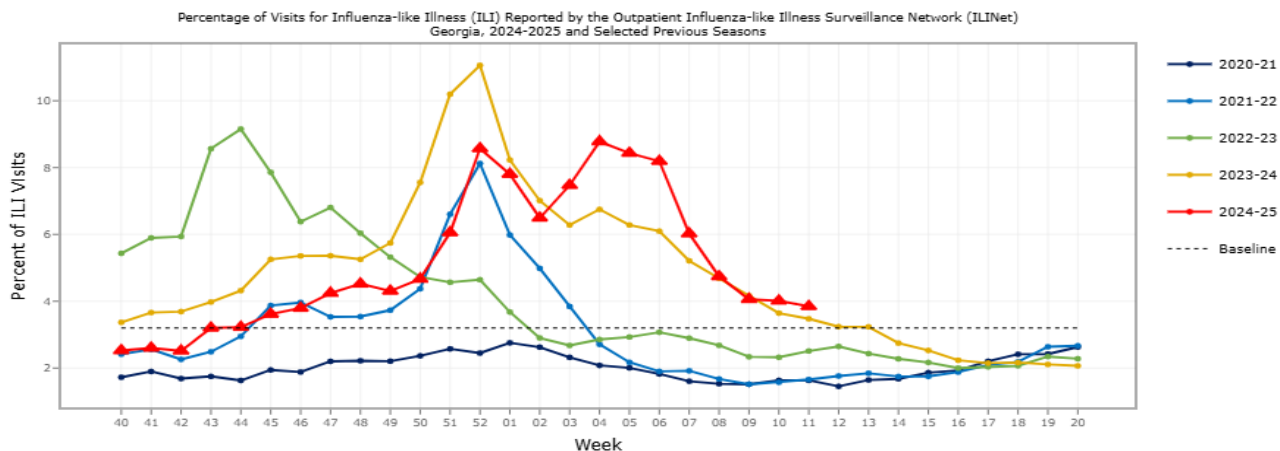
As of Week 11, Georgia flu activity was Moderate= 6 (on the scale of 1-13). Activity levels are based on the percent of outpatient visits in Georgia due to Influenza-like illness during this timeframe.

For the corresponding week, the percentage of outpatient visits for Influenza-like Illness was 3.8% (which is above the regional baseline of 3.2%), the number of influenza-associated death was 0 (124 total for the current ILI season); the number of Metro Area Influenza Hospitalizations was 81 (4,666 total for current Flu season); and the number of Influenza Outbreaks was 7 (245 total for current Flu season).



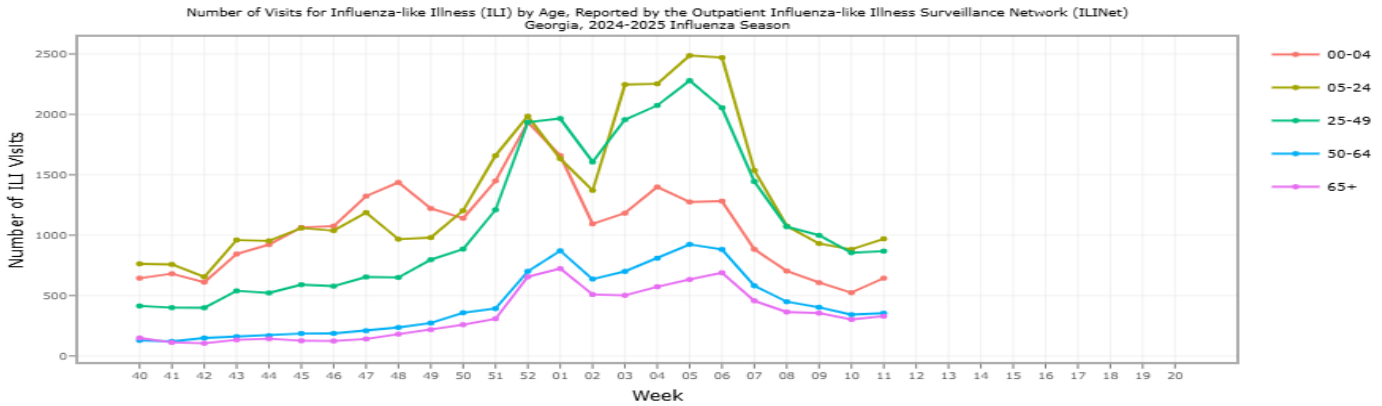
Map shows Influenza-like cases in US southern region. Georgia activity indicator is at level 6 (**Moderate**) on week 11 as shown in yellow color.

## ILI (Influenza-like Illness) Percentages by Season



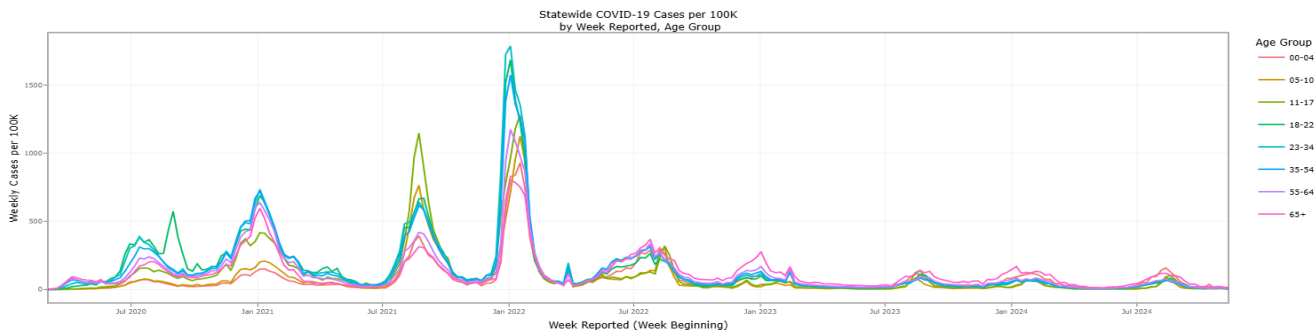
Graph shows Georgia Flu snapshot comparison to previous years. Graph shows slight increase in percentage of cases for week 11 of 2024-2025 when compared to same time in 2023-2024. On the other hand, graph shows a slight decrease in percentage of Georgia flu cases compared to previous week in 2024-2025.

## ILI (Influenza-like Illness) Percentages by Age



For week 11, the graph shows increase in ILI (Influenza-like Illness) cases for 00-04, 05-24 and 65+ age groups. On the other hand, age groups 25-49 and 50-64 remain stable.

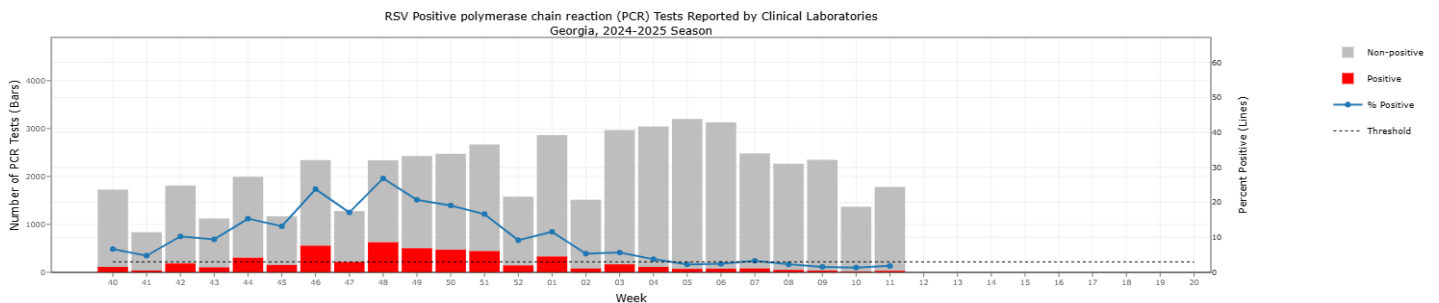
## COVID-19 Snapshot in Georgia



Graph shows COVID-19 cases being low for all age groups. The SARS-CoV-2 subvariant Omicron LP.8.1 is responsible for 47% followed by the subvariant XEC with 26% of all cases in U.S. Majority of COVID-19 cases, hospitalizations and deaths are occurring among those 65 years and older.

## Respiratory Syncytial Virus Infection (RSV) Surveillance

Data from NREVSS are also analyzed to measure the RSV seasonality. Antigen and polymerase chain reaction (PCR) tests are analyzed separately to determine the start and end of RSV season. Season onset is defined as the first week of two consecutive weeks when the percent positive of ALL laboratory confirmed tests are greater than or equal a certain threshold. The end is defined as the first week of two consecutive weeks when the percent positive of ALL lab confirmed tests are less than a certain threshold. For antigen-based testing, the threshold is 10% and for PCR the threshold is 3%. During week 11 clinical laboratories in Georgia reported testing 2,789 (1.0% positive) antigen specimens and 1,781 (1.9% positive) PCR specimens.



For week 11, PCR Detections: Graph shows a stable trend in RSV PCR positive test results/cases compared to the previous week.

## Highly Pathogenic Avian Influenza (HPAI) Update:

**Avian Influenza (AI) is a reportable disease in Georgia.** Health providers in GA should continue to call **866-PUB-HLTH (866-782-4584)** to notify the state health department immediately if a patient with Flu A (unsubtyped/unsubtypable) or suspect flu fits the epidemiological risk factors for H5 infection, so we can fast track and prioritize testing and/or receipt of results. **This is a time where a call to public health would be appropriate if they have a Flu A positive or suspicion of Flu in a patient AND they report of epidemiology risk factors.**

The US situation in animals is best found on the USDA website: <https://www.aphis.usda.gov/livestock-poultry-disease/avian/avian-influenza/hpai-detections>

Questions regarding animal health should always be directed at the Department of Agriculture. However, some helpful information about AI surveillance can be found here: <https://agr.georgia.gov/avian-influenza> and on the USDA pages: <https://www.aphis.usda.gov/livestock-poultry-disease/avian/avian-influenza> (this also includes links for the sick bird line). If you have concerns about AI in birds, call the Georgia Avian Influenza hotline at **770-766-6850** or visit <https://www.gapoultrylab.org/avian-influenza-hotline/>.

**Getting vaccinated is the best thing you can do to protect yourself and others.**

District 2 health departments have vaccines available. Please contact your local health department for information on how to get your vaccine at [http://phdistrict2.org/?page\\_id=597](http://phdistrict2.org/?page_id=597).

To learn more about how to protect yourself against flu and other respiratory diseases, visit DPH website at <https://dph.georgia.gov/epidemiology/acute-disease-epidemiology/viral-respiratory-diseases> and CDC website at <https://www.cdc.gov/flu/>

All Georgia physicians, laboratories, and other health care providers are required by law to report notifiable diseases. Instructions, including notifiable conditions and the timeframe in which they are reportable can be found at <https://dph.georgia.gov/epidemiology/disease-reporting>. Georgia tracks the listed conditions statewide using multiple overlapping surveillance systems, especially in the case of viral respiratory diseases as some are not reportable at the individual case level.