State of Alaska **Epidemiology**



Bulletii

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Alaska Influenza and COVID-19 Surveillance Summary, 2023–24 Season

Background

The Alaska Section of Epidemiology (SOE) conducts yearround surveillance for influenza and COVID-19, with enhanced surveillance from October through May. This surveillance tracks virus activity, morbidity, and mortality, with weekly reports available through the SOE Respiratory Virus Snapshot from October through May and monthly reports thereafter. This Bulletin summarizes the 2023-24 respiratory virus season for influenza and COVID-19, from October 1, 2023, through September 30, 2024. This timeframe accounts for the sporadic flu activity observed year-round in Alaska and the known absence of a defined COVID-19 season. A separate Bulletin covered 2023–24 respiratory syncytial virus (RSV) surveillance.

Alaska 2023–24 Influenza and COVID-19 Trends

During the 2023–24 season in Alaska, reported influenza cases were marginally lower but overall similar to the previous season, and higher than in 2019-20, 2020-21, and 2021-22. Influenza cases this season spiked earlier than any recent year on record,2 beginning in October 2023. Initially driven by influenza A, the dominant strain shifted to influenza B by February 2024, leading to a second surge in spring 2024 (Figure). Reported COVID-19 cases in Alaska were slightly lower than in the 2022–23 season, with a substantial winter surge that was followed by a smaller summer increase (similar to national trends).

Emergency Department Syndromic Surveillance

Syndromic surveillance monitors trends in influenza-like illness (ILI) and COVID-like illness (CLI) by analyzing pooled emergency department data from participating facilities across Alaska. Patients with a fever of ≥100°F and a cough or sore throat are classified as having ILI. Those without influenza but with fever (≥100°F) and cough or shortness of breath or difficulty breathing—with or without a COVID-19 diagnosis code—are classified as having CLI. Unlike case-based surveillance, which depends on laboratory testing, syndromic surveillance uses keyword searches and diagnosis codes to identify trends. While less specific than lab-confirmed case reporting, both systems generally align in trends (Figure). SOE also participates in the US Outpatient Influenza-like Illness Surveillance Network (ILINet), which tracks ILI data nationwide. For more details, see CDC's respiratory virus data.

Influenza and COVID-19-Associated Mortality

During the 2023-24 season, there were 10 influenza-associated deaths and 80 COVID-19-associated deaths among Alaska residents. These were identified through clinician reports, hospital records, and reviews of Alaska death certificate data.

Vaccine Coverage

Influenza immunization coverage for the 2023-24 season based on VacTrAK data was 23.7% among Alaskans aged 18 years and older, similar to the previous season but significantly lower than national estimates.⁴ In the same age group, 13.4% of Alaskans

received the 2023-24 COVID-19 vaccine and were considered "up to date", which is also well below the national average.⁵

Laboratory Influenza Surveillance

Alaska's sentinel influenza surveillance for the 2023-24 season was suspended due to laboratory staffing shortages, but efforts are underway to resume these activities for next season. Clinicians continue to play a vital role in characterizing influenza activity statewide by conducting rapid flu tests on patients with ILI in clinics, performing multiplex testing in hospitals, and sharing specimens with the Alaska State Virology Laboratory (ASVL). This system enables the characterization of influenza specimens by strain, antiviral resistance, and vaccine match, representing Alaska's diverse geography and dispersed population.

During the 2023-24 season, Alaska saw a similar number of influenza cases as the previous year, with an early October spike and a shift from influenza A to B by February. Preliminary vaccine effectiveness against medically attended influenza was estimated at 49%.6 COVID-19 cases were lower than the previous season but included a notable summer surge.

Recommendations

- Clinicians should encourage all eligible patients aged ≥6 months to receive the updated seasonal influenza and 2024-2025 COVID-19 vaccines. Vaccination is the most effective way to prevent morbidity and mortality from both viruses.
- Clinicians can submit respiratory specimens from patients with CLI/ILI to ASVL for COVID-19, influenza, and RSV testing. Free supplies can be obtained by calling 907-371-1000, and laboratory request forms are available here.
- Laboratories must report all positive influenza and COVID-19 test results (including rapid test results) to SOE per 7 AAC 27.007. For influenza, laboratories are also encouraged to report the total number of tests performed and the number of positive results directly to CDC to support Alaska's National Respiratory and Enteric Surveillance System goals. Call ASVL at 907-371-1000 for more information.
- Health care providers must report suspected and confirmed influenza-deaths and unusual clusters of respiratory illness to SOE (call 907-269-8000 during business hours, or 800-478-0084 after hours).

References

- Alaska Department of Health. Respiratory Virus Snapshot. Available at: https://health.alaska.gov/dph/Epi/id/Pages/COVID-19/covidandflu.aspx
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Figure. Influenza and COVID-19 Cases Detected through Laboratory Reporting and Emergency Department Syndromic Surveillance Data - Alaska, October 2023–September 2024

