This report describes current trends in suburban Cook County for COVID-19, influenza, and RSV. Selected graphics are presented on pages 2-4. For complete surveillance data on these pathogens, please visit our respiratory dashboard.

Key Points

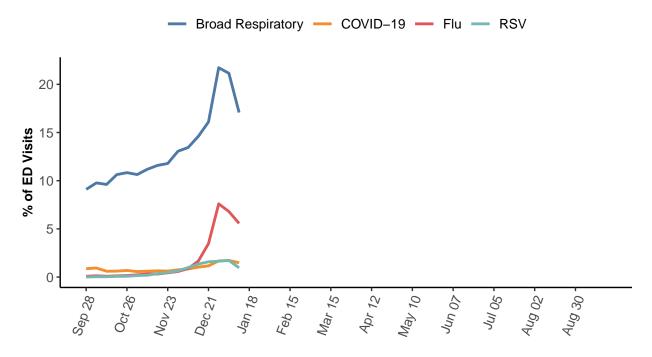
COVID-19 activity is **low** and stable. **Influenza** activity is **high** and stable. **RSV** activity is **moderate** and stable.

- Flu activity remains high, but RSV activity has been moved down to moderate. COVID-19 activity remains low. Activity for all three pathogens has stabilized, with some signs of beginning to trend down.
- Emergency room visits and hospital admissions for flu are around last year's peak, and are the highest of the three monitored respiratory viruses. ER visits and hospital admissions for RSV have dropped lower than last season's peak and are trending down.
- ICU admissions are highest for flu, followed by RSV. The vast majority of RSV ICU admissions have been in children under 5, but ICU admissions for flu are affecting all age groups with the majority in those over the age of 45. COVID-19 ICU admissions continue to be reported, primarily in adults over 65.
- Percent positivity for flu remains high at 15.3%. Of specimens tested for RSV, 8.5% were positive, down from 11.5% the previous week. COVID-19 positivity increased from 5.6% to 6.7%.
- So far this season, among positive flu A specimens with influenza subtype available, 59% were pandemic 2009 H1N1 and 41% were H3N2.
- Wastewater detections for RSV and flu are still increasing. Wastewater detections for SARS-CoV-2 (COVID-19) have plateaued.
- Wastewater sequencing data for SARS-CoV-2 indicate a variety of JN.1 sub-lineages are cocirculating, with XEC overtaking KP.3 and KP.3.1.1.
- CDC's core recommendations for *individuals* include staying up to date with all recommended respiratory virus vaccines, practicing good respiratory hygiene (covering your cough, washing your hands), taking steps for cleaner air, and using precautions to prevent the spread of respiratory viruses when you are sick. This means staying home until you've been fever-free for 24 hours and your symptoms are getting better. CDC also recommends individuals are familiar with treatment options for flu and COVID-19, especially if you are at high risk for severe outcomes.
- CDC's core recommendations for *organizations* include supporting vaccination efforts (like hosting a clinic or providing time off for vaccination and recovery), encouraging good respiratory hygiene with posters and adequate hand-washing supplies, taking steps for cleaner air, and supporting time off for individuals to stay home when sick or to seek treatment.
- Overall respiratory activity has started to decline, but remains high, especially for flu. Individuals at risk for severe outcomes from flu may wish to take additional precautions, such as masking or physical distancing, and seek treatment quickly for respiratory symptoms. It's not too late to get vaccinated. Respiratory activity will likely continue for several weeks.

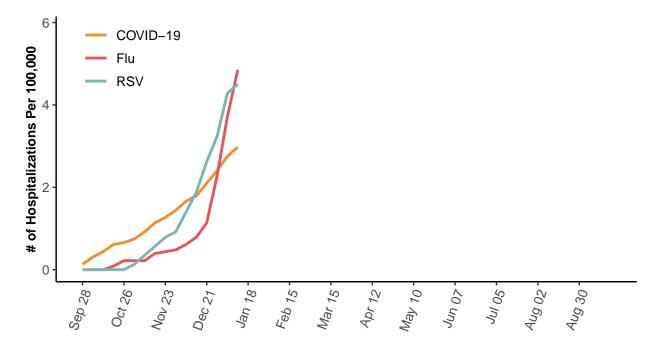
We would like to thank all of our surveillance partners for their help in collecting this information! Additional details on our methods can be found here



Emergency Rooms Visits by Respiratory Diagnosis



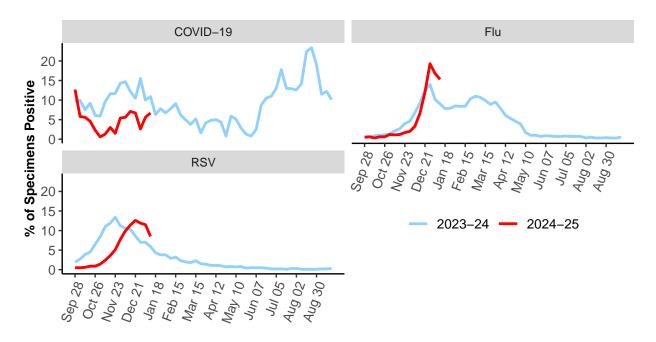
Cumulative ICU Admission Rate for Reportable Respiratory Viruses





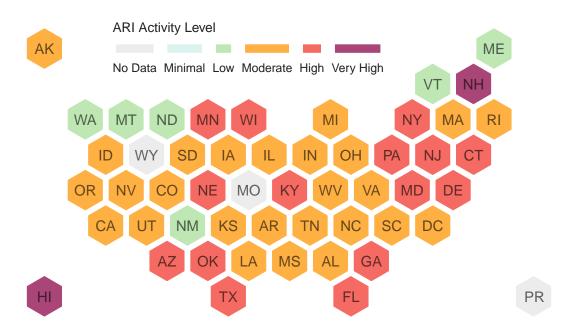
Percent Positivity by Respiratory Virus

Laboratories contributing data differ by pathogen. Lab data may not be comparable between viruses. Graphics are better used to look at trajectory for a given virus over time.



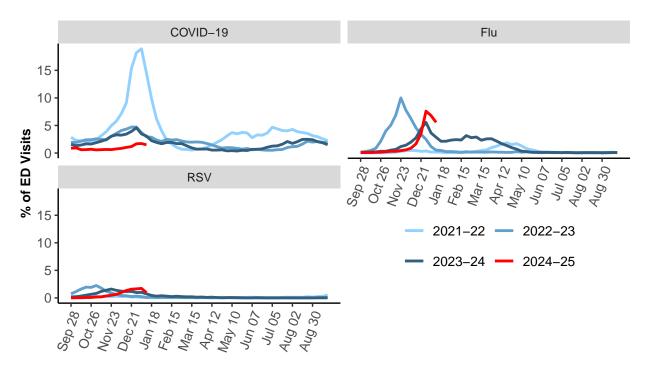
CDC Acute Respiratory Illness Activity Levels by State

Data for the week ending 2025-01-11, most recent CDC data available





Emergency Rooms Visits by Season and Diagnosis



Emergency Room Visits by Age and Diagnosis

