

Update on the Omicron Variant and Influenza Activity

This health advisory provides updated information on the SARS-CoV-2 omicron variant as well as influenza activity in North Dakota and the United States. This advisory is also asking for providers and healthcare systems to enhance current activities to reduce influenza and COVID-19 and prevent stress to already busy healthcare systems.

The omicron variant has been confirmed in four cases of COVID-19 in North Dakota, two cases from central North Dakota and two cases from eastern North Dakota. Three of the four cases had been vaccinated against COVID-19 but did not have booster doses. Two cases had traveled to another state, together, during their incubation period and two cases reported no travel, indicating local transmission. None of the cases were hospitalized.

Recent data being collected from the emergence of the omicron variant of SARS-CoV-2 is showing increased transmissibility and increased immune evasion from both vaccine-induced immunity and immunity from natural infection. In Europe and South Africa cases related to omicron continue to double about every three days. An outbreak at a New York College demonstrated rapid transmission with just over 900 cases being reported in a one-week period. Omicron may be less severe than previous variants, however this data is preliminary. Furthermore, even if it is less severe, it is likely that a high number of cases will occur in a short period of time due to its high reproductive number. A sharp increase in cases may potentially stress medical and hospital capacity. Cases were reported among the fully vaccinated, including some with booster doses of vaccine. Preliminary, real world [data](#) from the United Kingdom show two doses of the mRNA vaccine offer 30-40% vaccine effectiveness against Omicron with a booster dose providing 70-75%.

Influenza activity in the United States and North Dakota continues to increase. This week reported influenza A cases in North Dakota increased more than 150% to 502 cases, total. Of the 31 influenza A cases that have been subtyped in North Dakota, 30 are of the H3N2 subtype. Recently, two North Dakota universities reported increased influenza activity as well.

Both COVID-19 and influenza are primarily respiratory illnesses that have considerable overlap of symptoms, signs, and complications. Those who are at increased risk for severe outcomes, including hospitalizations and deaths, are similar for both viruses. These populations include people who are older, have underlying health conditions, or are immunocompromised are among those at increased risk. Patients presenting with or hospitalized with respiratory illness should be tested for both COVID-19 and influenza.

Only half of vaccinated North Dakotans have received a booster dose of COVID-19 vaccine. Flu vaccination coverage across the United States, including in North Dakota, is significantly lower from coverage rates seen in previous years. This is particularly concerning among our pediatric population which has seen 6% lower rates of administered influenza vaccinations when compared to rates in 2020. To date, only 28% of children 18 and younger have been vaccinated against influenza in North Dakota. Less than 20% of children ages 5-11 and less than 40% of adolescents have received COVID-19

vaccine. Many children are still experiencing delays in educational performance associated with school closures during the COVID-19 pandemic, it is more important than ever to get our children vaccinated against influenza and COVID-19 so that they can stay healthy and in school.

Potential surges in COVID-19 due to omicron along with increasing influenza cases have a real potential to impact health care delivery in our state, we are asking that healthcare providers urgently implement activities to increase influenza and COVID-19 vaccination rates. Below are some examples of activities that are needed across the state:

- Use your electronic medical record system to send prompts to patients about influenza and COVID-19 vaccine, including the need for booster doses.
- Send reminder/recall letters to patients in need of COVID-19 booster doses and influenza vaccine.
- Administer COVID-19 and influenza vaccine at the same time.
- Ensure both COVID-19 and influenza vaccines are available in all inpatient and outpatient settings, including pediatrics, walk-in clinics, family practice, OB-GYN, etc.
- Offer vaccines at convenient times, including evenings and weekends.
- Offer vaccines at convenient locations, including workplaces, schools, events, malls, etc.
- Administer influenza vaccine and COVID-19 booster doses to healthcare providers to ensure workforce capacity.
- Ensure consistent messaging about vaccines from all staff at your facility.
- Host virtual townhalls/webinars/press conferences to educate about vaccines and illnesses.
- Participate in influenza and COVID-19 surveillance by selecting random samples from patients to be submitted the Laboratory Services Section to test for both SARS-CoV-2 and influenza and to further characterize these viruses by variant or type. Specimen shipping to the NDDoH and storage instructions can be found [here](#).

Surveillance activity for the omicron variant and other variants in North Dakota continues. Public health surveillance includes prioritizing for whole genome sequencing the following specimens that test positive by PCR:

- Those specimens that demonstrate a spike gene target failure (SGTF),
- Hospitalized cases,
- Breakthrough cases,
- Cases amongst recent travelers and
- Cases associated with unusual clusters.

Other PCR positive specimens are chosen at random each week to reach our goal of sequencing 400 to 480 specimens per week. Laboratories are encouraged to submit specimens that have tested positive by a nucleic acid amplification test, such as PCR, to Laboratory Services for potential whole genome sequencing and SARS-CoV-2 lineage assignment. Furthermore, sequencing is being conducted in North Dakota's wastewater to identify omicron if present in sufficient quantities.

Providers can call 701-328-2378 with questions or to report cases they think may be at higher risk for infection with the omicron variant. Laboratory questions can be addressed to the Laboratory Services Section by calling 701-328-6272.

Laboratory-identified Influenza and SARS-CoV-2 are reportable conditions to the NDDoH.

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##This message was distributed to state and local health officers, state and local epidemiologists, state and local laboratory directors, public information officers, HAN coordinators, and clinician organizations##