

Racial, ethnic disparities seen for severe flu-associated disease

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(HealthDay)—Racial and ethnic disparities exist in the rates of severe

influenza-associated disease among U.S. children and adults, according to a study published online Aug. 24 in *JAMA Network Open*.

Alissa C. O'Halloran, from the U.S. Centers for Disease Control and Prevention in Atlanta, and colleagues assessed influenza-associated hospitalization, [intensive care unit](#) (ICU) admission, and in-hospital death by race and ethnicity during 10 influenza seasons using data from the Influenza-Associated Hospitalization Surveillance Network.

The researchers identified 113,352 persons with an influenza-associated hospitalization and found that among persons aged younger than 75 years, Black persons were more likely to be hospitalized (e.g., age 50 to 64 years: rate ratio [RR], 2.50) and to be admitted to an ICU (e.g., age 50 to 64 years: RR, 2.09) compared with similarly aged White people. For people younger than 50 years of age, American Indian or Alaska Native persons were more likely to be hospitalized (e.g., age 18 to 49 years: RR, 1.72) and to be admitted to an ICU (e.g., age 18 to 49 years: RR, 1.84) compared with similarly aged White people. Among children ages 4 years and younger, hospitalization rates were higher in Black children (RR, 2.21), Hispanic children (RR, 1.87), American Indian or Alaska Native children (RR, 3.00), and Asian or Pacific Islander children (RR, 1.26), as were rates of ICU admission (Black children: RR, 2.74; Hispanic children: RR, 1.96; American Indian and Alaska Native children: RR, 3.51) compared with White children.

"These findings suggest that targeted prevention and intervention efforts, such as improved influenza vaccine coverage and early use of antiviral treatment, could improve influenza-associated outcomes among racial and ethnic minority groups identified in this study as having higher rates of severe influenza disease," the authors write.

More information: [Abstract/Full Text](#)

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