Maine Weekly Influenza Surveillance Report

April 12, 2007

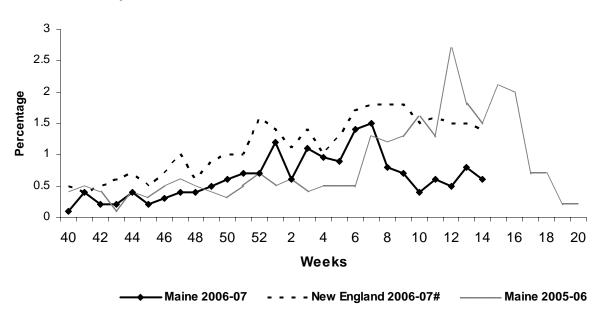
Synopsis

During the week ending April 7, 2007 (MMWR week 14)*, regional influenza activity was reported in Maine. Maine continues to receive reports of laboratory-confirmed influenza in multiple regions of the state and an increase in pneumonia and influenza-associated deaths was observed this week.

Moderate Disease Surveillance

Outpatient influenza-like illness (ILI)

During the week ending April 7, 2007, 0.6% of sentinel provider outpatient visits were due to ILI (range 0% - 1.6%).





New England is defined as Connecticut, Maine, Massachusetts, New Hampshire, Rhode Island, and Vermont.

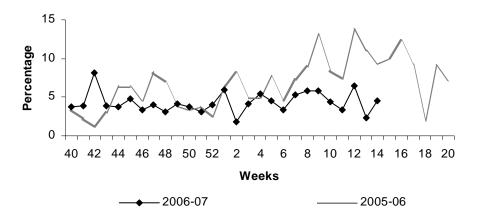
Severe Disease Surveillance

Hospital inpatients

During the week ending March 31, 2007 (week 13), 2.3% of admissions reported by four hospitals were due to respiratory illness (range 0% - 5.2%). During the week ending April 7, 2007 (week 14), 4.5% of admissions reported by two hospitals were due to respiratory illness (range 1.9% - 7.2%).

* At time of publication, reporting may be incomplete. Numbers presented here may change as more reports are received.

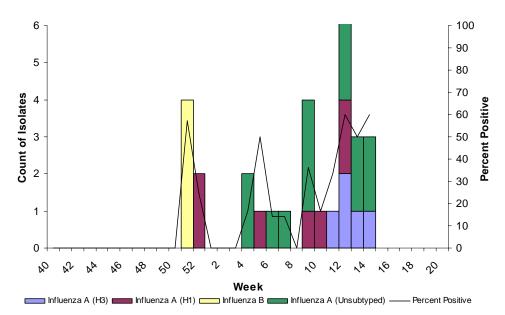
Hospital Admissions due to Respiratory Illness -- Maine, 2005-07



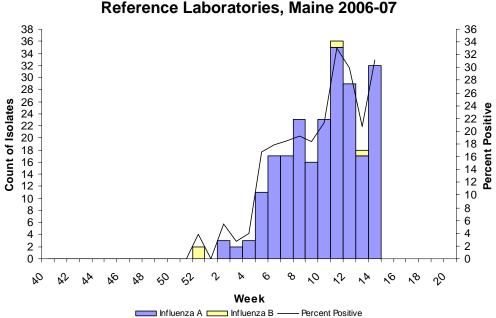
Laboratory Reporting

During the week ending April 7, 2007, three respiratory specimen was submitted to the Maine Health and Environmental Testing Laboratory (HETL) for influenza culture. Of these, one (33.3%) was positive for influenza A, and results are pending on the remaining two specimens. An additional two specimens were submitted to HETL for influenza PCR testing during the week ending April 7, 2007; both specimens were positive for influenza A. As of April 7, 2007, a total of 183 respiratory specimens have been submitted for culture and/or PCR to HETL since the influenza surveillance season began on October 1, 2007. Of these specimens, 32 (17.4%) were culture or PCR-positive for influenza (7 for influenza A [H1], 5 for influenza A [H3], 16 for influenza A [unsubtyped], and 4 for influenza B), four (2.2%) specimens were presumptive positive for adenovirus, one (0.5%) specimen was positive for RSV, four (2.2%) specimens were not tested, results are pending for two specimens, and the remaining specimens were negative.

Respiratory Specimens Culture and/or PCR-Positive for Influenza – Maine Health and Environmental Testing Laboratory, 2006-07



During the week ending April 7, 2007, a total of 103 respiratory specimens were submitted to two private reference laboratories in Maine. Of these, 32 (31.1%) specimens were positive for influenza A. As of April 7, 2007, a total of 1,502 respiratory specimens have been submitted for viral testing to two reference laboratories in Maine since the influenza surveillance season began on October 1, 2006. Of these, 233 (15.5%) specimens were positive for influenza (229 for influenza A and 4 for influenza B), 254 (16.9%) were positive for RSV, 1 (0.1%) specimen was positive for parainfluenza 2, 7 (0.5%) were positive for parainfluenza-3, 15 (1.0%) were positive for adenovirus, 12 (0.8%) specimens were positive for enterovirus, and the remaining specimens were negative.



Respiratory Specimens Positive for Influenza – Two Reference Laboratories, Maine 2006-07

Outbreaks

During the week ending April 7, 2007, one outbreak of influenza-like illness was reported in a central region long-term care facility. To date, six outbreaks of influenza have been reported in Maine this season.

<u>Facility</u> Type*	<u>Region</u>	<u>Date</u> Reported	Attack Rate		<u>Hospital-</u> izations #	<u>Deaths</u> <u>#</u>	Vaccination rate <u>%</u>		Lab-confirmed
			Residents	<u>Staff</u>			Residents	<u>Staff</u>	
School	Western	2/5/07	8.9	0	0	0	٨	Λ	Influenza A/B
School	Midcoast	2/12/07	25.0	20.0	0	0	۸	Λ	Λ
LTC	Western	2/21/07	4.8	0	1	0	۸	40.0	Influenza A/B
School	Western	2/22/07	31.4	6.3	0	0	۸	Λ	Influenza A
School	Eastern	3/21/07	20.4	0	0	0	۸	Λ	Λ
LTC	Central	4/6/07	6.3	^	0	0	^	^	Influenza A

Table: Influenza-like illness outbreaks by selected characteristics – Maine, 2006-07	
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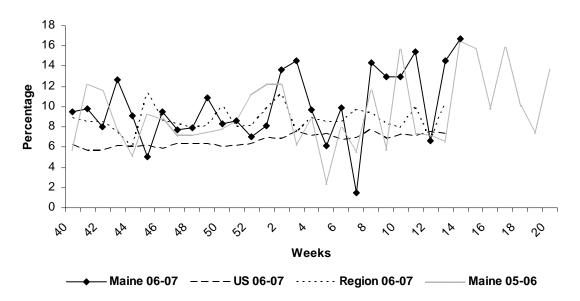
* Outbreak definition is specific to facility type. An outbreak in long-term care facilities (LTC) is defined as \geq 3 patients with ILI identified on same floor or ward during a short (e.g., 48-72 hour) period OR \geq 1 patients with lab-confirmed influenza; an outbreak in an acute care facility is defined as \geq 1 patients with ILI or lab-confirmed influenza with symptom onset \geq 48 hours post-admission (i.e., nosocomial); and an outbreak in a school is defined as \geq 15% absentee rate among student population due to ILI or labconfirmed influenza. ^ Data unavailable

Fatalities Surveillance

Death Certificates

During the week ending April 7, 2007, 16.7% of deaths reported by three city vital records office were attributable to pneumonia and influenza (range: 15.6% - 20.0%).

Percentage of Deaths Attributable to Pneumonia and Influenza – Maine, New England and the United States, 2005-07



[^] New England includes the following reporting areas: Boston, MA; Bridgeport, CT; Cambridge, MA; Fall River, MA; Hartford, CT; Lowell, MA; Lynn, MA; New Bedford, MA; New Haven, CT; Providence, RI; Somerville, MA; Springfield, MA; Waterbury, CT; Worcester, MA.

Pediatric Fatalities

As of April 7, 2007, no influenza-associated pediatric deaths have been reported in Maine this season.

National Influenza Activity

State health departments report the estimated level of influenza activity in their states each week. States report influenza activity as: 1) no activity, 2) sporadic, 3) local, 4) regional, or 5) widespread (definitions of these levels can be found at: <u>www.cdc.gov/flu/weekly/usmap.htm</u>). Maine reported regional influenza activity for the week ending April 7, 2007. Attached below is the weekly influenza activity estimate report for the week ending March 31, 2007.

