Maine Weekly Influenza Surveillance Report

October 25, 2007

Synopsis

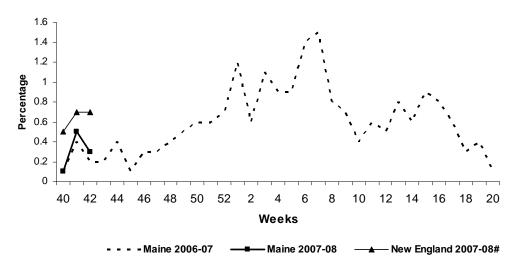
During the week ending October 20, 2007 (MMWR week 42)*, Maine Influenza Sentinel Providers reported low levels of outpatient visits for influenza-like illness and partner hospitals reported moderate levels of influenza and pneumonia-associated hospital admissions. Laboratory partners, including the Maine Health and Environmental Testing Laboratory, reported slight increase in influenza testing, though no specimens have tested culture or PCR-positive for influenza yet this season.

Moderate Disease Surveillance

Outpatient influenza-like illness (ILI)

During the week ending October 20, 2007 (week 42), 0.3% of outpatient visits reported by 10 sentinel providers were attributed to influenza-like illness (ILI), defined as fever and cough or sore throat in the absence of a known cause. This is a slight decrease from the week previous when 0.5% of outpatient visits were for ILI. In the New England, 0.7% of outpatient visits were attributed to influenza-like illness.

Outpatient Visits for Influenza-like Illness -- Maine, 2006-08



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

Severe Disease Surveillance

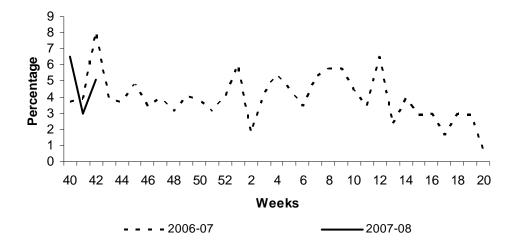
Hospital inpatients

During the week ending October 20, 2007 (week 42), a total of 5.1% of hospital admissions reported by three participating hospitals were attributable to influenza or pneumonia. This is a slight increase from the week previous when 3.0% of admissions were for pneumonia or

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

influenza. Pneumonia and influenza hospital admissions thus far this season appear to be consistent with last year's rate.

Hospital Admissions Due to Pneumonia or Influenza -- Maine, 2006-08



Laboratory Reporting

As of October 20, 2007 (week 42), a total of 8 respiratory specimens were submitted to the Maine Health and Environmental Testing Laboratory (HETL). Of these, one specimen was negative for influenza by PCR and results are pending on the remaining specimens.

As of October 20, 2007, a total of 15 respiratory specimens were submitted to two private reference laboratories in Maine. Of these, no specimens were positive for influenza. One specimen (6.7%) was positive for parainfluenza-1, one specimen (6.7%) was positive for parainfluenza-3, 2 (13.3%) specimens were positive for enterovirus, and the remaining specimens were negative.

Outbreaks

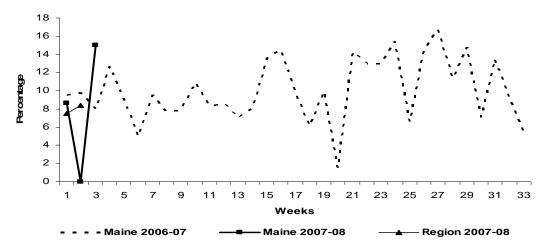
No outbreaks of influenza have been reported yet this season.

Fatalities Surveillance

Death Certificates

During the weeks ending October 20, 2007 (week 42), 15% of deaths reported by two city vital records office were attributable to pneumonia and influenza. This is an increase from the previous weeks when 0% and 8.6% of deaths were attributed to pneumonia or influenza.

Percentage of Deaths Attributable to Pneumonia and Influenza – Maine, New England and the United States, 2006-08



[^] 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.

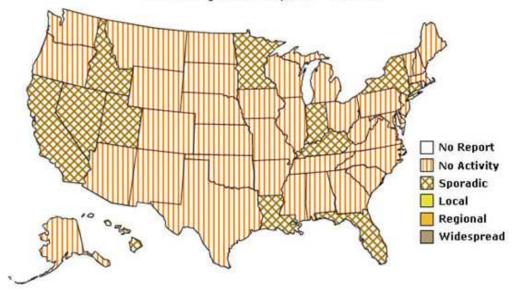
Pediatric Fatalities

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: www.cdc.gov/flu/weekly/usmap.htm). Maine reported local influenza activity for the week ending October 13, 2007 (week 41).

Weekly Influenza Activity Estimates Reported by State and Territorial Epidemiologists*
Week Ending October 13, 2007 - Week 41



^{*}This map indicates geographic spread and does not measure the severity of influenza activity.