Maine Weekly Influenza Surveillance Report

November 21, 2007

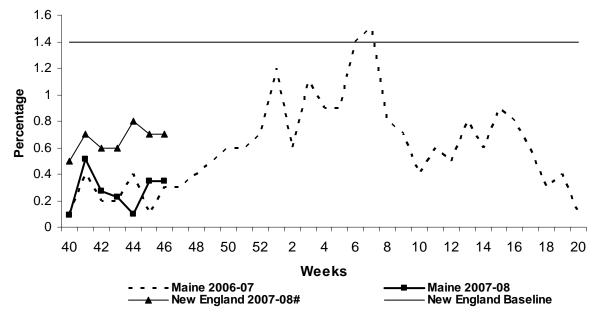
Synopsis

During the week ending November 17, 2007 (MMWR week 46)*, surveillance indicators suggest respiratory illness are present in the community. Laboratory partners, including the Maine Health and Environmental Testing Laboratory, report an 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 November 17, 2007 (week 46), 0.4% of outpatient visits reported by seven Maine Sentinel Providers were for influenza-like illness (ILI), defined as fever and cough or sore throat in the absence of a known cause. In the New England States, 0.7% of outpatient visits were attributed to influenza-like illness during week 46.





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

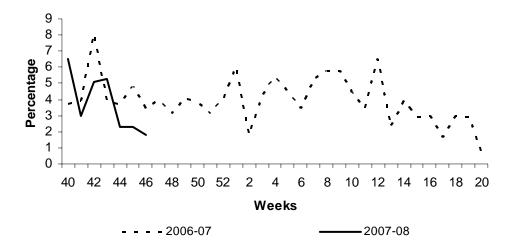
Severe Disease Surveillance

Hospital inpatients

During the week ending November 17, 2007 (week 46), a total of 1.8% of hospital admissions reported by two hospital partners were attributable to influenza or pneumonia. Pneumonia and influenza hospital admissions at this time appear to be consistent with last year's rate.

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

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



Laboratory Reporting

During the week of November 17, 2007 (week 46), one respiratory specimen was submitted to the Maine Health and Environmental Testing Laboratory (HETL) for influenza testing; results are pending on this specimen. As of November 17, 2007 (week 46), a total of 30 respiratory specimens were submitted to the Maine Health and Environmental Testing Laboratory (HETL) for influenza testing. Of these, 13 specimens were negative for influenza by PCR, 24 were negative for influenza by culture, and culture results are pending on the remaining specimens.

During the week ending November 17, 2007 (week 46), a total of 5 respiratory specimens were submitted to two private reference laboratories; all specimens were negative for influenza. As of November 17, 2007, a total of 73 respiratory specimens were submitted to two private reference laboratories in Maine. Of these, all specimens were negative for influenza. Five specimens (6.8%) were positive for RSV, five specimens (6.8%) were positive for parainfluenza-1, three specimens (4.1%) were positive for parainfluenza-3, one (1.4%) specimen was positive for adenovirus, three (4.1%) specimens were positive for enterovirus, and the remaining specimens were negative.

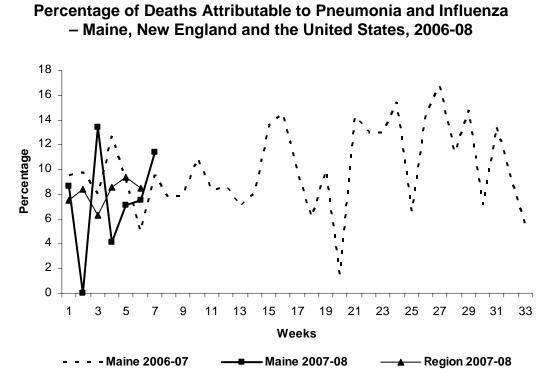
Outbreaks

No outbreaks of influenza have been reported yet this season.

Fatalities Surveillance

Death Certificates

During the weeks ending November 17, 2007 (week 46), 11.4% of deaths reported by two city vital records offices were attributable to pneumonia and influenza. This is a slight increase from the week ending November 10, 2007 when 7.5% of deaths were attributed to pneumonia or influenza.



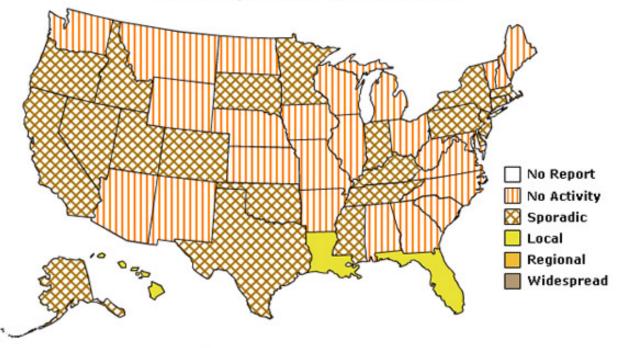
[^] New England includes the following reporting areas: Boston, MA; Bridgeport, CT; Cambridge, MA; Fall River, MA; Hartford, CT; Lowell, MA; Lynn, MA; New Bedford, MA; New Haven, CT; Providence, RI; Somerville, MA; Springfield, MA; Waterbury, CT; Worcester, MA.

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: <u>www.cdc.gov/flu/weekly/usmap.htm</u>). Maine reported no influenza activity for the week ending November 10, 2007 (week 45).



Weekly Influenza Activity Estimates Reported by State and Territorial Epidemiologists* Week Ending November 10, 2007 - Week 45

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