

Maryland Weekly Influenza Surveillance Activity Report

A summary of influenza surveillance indicators reported to DHMH for the week ending February 11, 2017

Prepared by the Infectious Disease Epidemiology and Outbreak Response Bureau Infectious Disease Bureau – Prevention and Health Promotion Administration Maryland Department of Health and Mental Hygiene

The data presented in this document are provisional and subject to change as additional reports are received.

SUMMARY

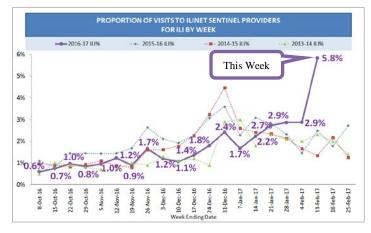
During the week ending February 11, 2017, influenza-like illness (ILI) intensity in Maryland was **HIGH** and there was **WIDESPREAD** geographic activity. The proportion of outpatient visits for ILI reported both by Sentinel Providers and by Maryland Emergency Departments increased sharply. The proportion of MRITS respondents reporting ILI decreased. The proportion of specimens testing positive for influenza at clinical laboratories continued to increase. A total of 202 specimens tested positive for influenza at the DHMH lab – most were influenza Type A (H3). There were 220 hospitalizations and 17 respiratory outbreaks reported to DHMH. Nationally, influenza activity remained high.

Click here to visit our influenza surveillance web page

ILI Intensity Levels	Influenza Geographic Activity	
Minimal	No Activity	
Low	Sporadic	
Moderate	Local	
🖌 High	Regional	
	✓ Widespread	

ILINet Sentinel Providers

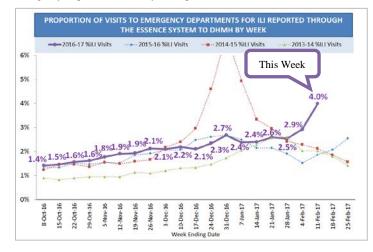
Thirty-five sentinel providers reported a total of 7,009 visits this week. Of those, 409 (5.8%) were visits for ILI. This is well above the Maryland baseline of 2.2%.



ILI Visits To Sentinel Providers By Age Group	This Week Number (%)	Last Week Number (%)	Season Number (%)
Age 0-4	56 (14%)	37 (14%)	683 (24%)
Age 5-24	220 (54%)	135 (50%)	1125 (40%)
Age 25-49	80 (20%)	59 (22%)	558 (20%)
Age 50-64	33 (8%)	22 (8%)	277 (10%)
Age ≥ 65	20 (5%)	19 (7%)	174 (6%)
Total	409 (100%)	272 (100%)	2817 (100%)

Visits to Emergency Departments for ILI

Emergency Departments in Maryland reported a total of 46,730 visits this week through the ESSENCE surveillance system. Of those, 1,866 (4.0%) were visits for ILL.



ILI Visits To Emergency Departments By Age Group	This Week Number (%)	Last Week Number (%)	Season Number (%)
Age 0-4	320 (17%)	288 (22%)	5814 (30%)
Age 5-24	715 (38%)	442 (34%)	5516 (28%)
Age 25-49	462 (25%)	332 (25%)	4646 (24%)
Age 50-64	216 (12%)	130 (10%)	1965 (10%)
Age ≥ 65	153 (8%)	116 (9%)	1462 (8%)
Total	1866 (100%)	1308 (100%)	19403 (100%)

Neighboring states' influenza information:

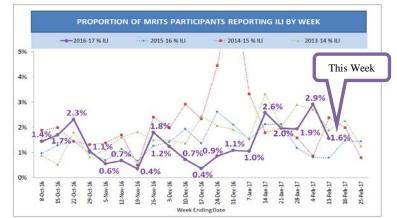
Delaware	http://dhss.delaware.gov/dph/epi/influenzahome.html
District of Columbia	http://doh.dc.gov/service/influenza
Pennsylvania	http://www.health.pa.gov/My%20Health/Diseases%20and%20Conditions/I-L/Pages/Influenza.aspx#.V-LtaPkrJD8
Virginia	http://www.vdh.virginia.gov/epidemiology/influenza-flu-in-virginia/influenza-surveillance/
West Virginia	http://dhhr.wv.gov/oeps/disease/flu/Pages/fluSurveillance.aspx

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Community-based Influenza Surveillance (MRITS)

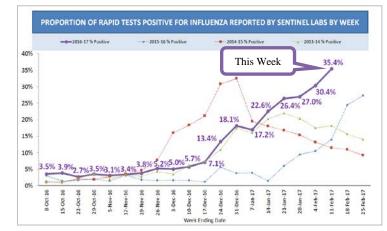
MRITS is the Maryland Resident Influenza Tracking System, a weekly survey for influenza-like illness (ILI). A total of 577 residents responded to the MRITS survey this week. Of those, 9 (1.6%) reported having ILI and missing a cumulative 15 days of regular daily activities.



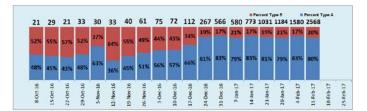
MRITS Respondents Reporting ILI By Age Group	This Week Number (%)	Last Week Number (%)	Season Number (%)
Age 0-4			4 (3%)
Age 5-24	4 (44%)	4 (24%)	42 (29%)
Age 25-49	1 (11%)	8 (47%)	42 (29%)
Age 50-64	3 (33%)	2 (12%)	34 (23%)
Age ≥ 65	1 (11%)	3 (18%)	25 (17%)
Total	9 (100%)	17 (100%)	147 (100%)

Clinical Laboratory Influenza Testing

Fifty-six clinical laboratories reported performing 7,254 influenza diagnostic tests, mostly rapid influenza diagnostic tests (RIDTs). Of those, 2,568 (35.4%) were positive for influenza. Of those testing positive, 2,054 (80.0%) were influenza Type A and 514 (20.0%) were influenza Type B. The <u>reliability of RIDTs</u> depends largely on the conditions under which they are used. False-positive (and true-negative) results are more likely to occur when the disease prevalence in the community is low, which is generally at the beginning and end of the influenza season and during the summer.

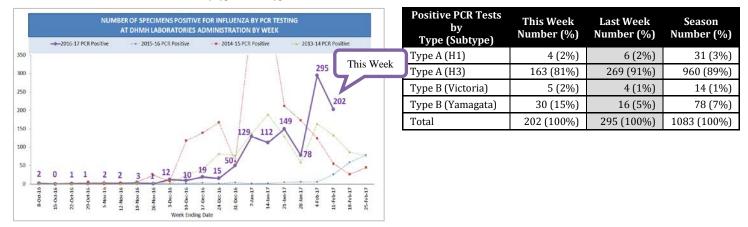


Positive Rapid Flu Tests by Type	This Week Number (%)	Last Week Number (%)	Season Number (%)
Туре А	2054 (80%)	1307 (83%)	7205 (79%)
Туре В	514 (20%)	273 (17%)	1871 (21%)
Total	2568 (100%)	1580 (100%)	9076 (100%)



State Laboratories Administration Influenza Testing

The DHMH Laboratories Administration performed a total of 316 PCR tests for influenza and 202 (63.9%) specimens tested positive. Of those testing positive, 163 (80.7%) were positive for Type A (H3), 4 (2.0%) were positive for Type A (H1), 30 (14.9%) were positive for Type B (Yamagata), and 5 (2.5%) were positive for Type B (Victoria). PCR testing is more reliable than RIDT. The DHMH testing identifies subtypes of influenza A, information that is not available from the RIDT results. The table below summarizes results by type and subtype.



Where to get an influenza vaccination

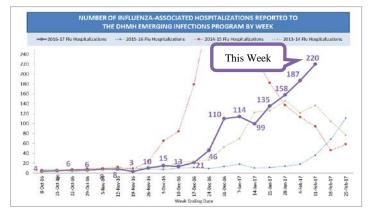
Interested in getting a flu vaccine for the 2016-17 influenza season? Go to http://phpa.dhmh.maryland.gov/influenza/Pages/getvaccinated.aspx and click on your county/city of residence. You will be redirected to your local health department website for local information on where to get your flu vaccine.

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Influenza-associated Hospitalizations

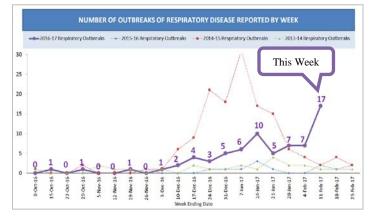
A total of 220 hospitalizations were reported this week. (A person with an overnight hospital stay along with a positive influenza test of any kind, e.g., RIDT or PCR, is considered an "influenza-associated hospitalization" for purposes of influenza surveillance.)



Influenza- Associated Hospitalizations by Age Group	This Week Number (%)	Last Week Number (%)	Season Number (%)
Age 0-4	13 (6%)	13 (7%)	58 (5%)
Age 5-17	18 (8%)	12 (6%)	64 (5%)
Age 18-24	7 (3%)	4 (2%)	26 (2%)
Age 25-49	22 (10%)	21 (11%)	114 (10%)
Age 50-64	44 (20%)	36 (19%)	222 (19%)
Age ≥ 65	116 (53%)	101 (54%)	684 (59%)
Total	220 (100%)	187 (100%)	1168 (100%)

Outbreaks of Respiratory Disease

There were 17 respiratory outbreaks reported to DHMH this week. (Disease outbreaks of any kind are reportable in Maryland. Respiratory outbreaks may be reclassified once a causative agent is detected, e.g., from ILI to influenza.)



Respiratory Outbreaks by Type	This Week Number (%)	Last Week Number (%)	Season Number (%)
Influenza	13 (76%)	7 (100%)	46 (66%)
Influenza-like Illness	4 (24%)		18 (26%)
Pneumonia			6 (9%)
Other Respiratory			
Total	17 (100%)	7 (100%)	70 (100%)

National Influenza Surveillance (CDC)

During week 6 (February 5-11, 2017), influenza activity increased in the United States.

- <u>Viral Surveillance:</u> The most frequently identified influenza virus subtype reported by public health laboratories during week 6 was influenza A (H3). The percentage of respiratory specimens testing positive for influenza in clinical laboratories increased.
- Pneumonia and Influenza Mortality: The proportion of deaths attributed to pneumonia and influenza (P&I) was above the system-specific epidemic threshold in the National Center for Health Statistics (NCHS) Mortality Surveillance System.
- 0 Influenza-associated Pediatric Deaths: Nine influenza-associated pediatric deaths were reported.
- Influenza-associated Hospitalizations: A cumulative rate for the season of 29.4 laboratory-confirmed influenza-associated hospitalizations per 100,000 population was reported.
- Outpatient Illness Surveillance: The proportion of outpatient visits for influenza-like illness (ILI) was 5.2%, which is above the national baseline of 2.2%. All 10 regions reported ILI at or above their region-specific baseline levels. New York City and 28 states experienced high ILI activity; Puerto Rico and seven states experienced moderate ILI activity; five states experienced low ILI activity; nine states experienced minimal ILI activity; and the District of Columbia had insufficient data.
- Geographic Spread of Influenza: The geographic spread of influenza in Puerto Rico and 46 states was reported as widespread; Guam and four states reported regional activity; the District of Columbia reported local activity; and the U.S. Virgin Islands reported sporadic activity.

