

A summary of influenza surveillance indicators reported to MDH for the week ending May 12, 2018

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

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

SUMMARY

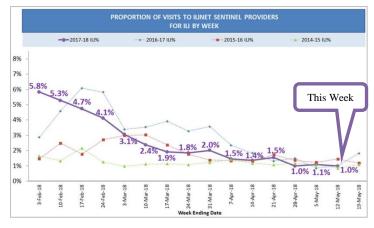
During the week ending May 12, 2018, influenza-like illness (ILI) intensity in Maryland was **MINIMAL** and there was **SPORADIC** geographic activity. The proportion of outpatient visits for ILI reported by Sentinel Providers and by Maryland Emergency Departments both decreased slightly. The proportion of MRITS respondents reporting ILI increased. Clinical laboratories reported a decrease in the proportion of specimens testing positive for influenza. Nineteen specimens tested positive for influenza at the MDH lab. There were 5 influenza-associated hospitalizations. The cumulative season number of influenza-associated deaths among hospitalized adults was 118. There were no respiratory outbreaks were reported to MDH.

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Activity	
No Activity	
✔ Sporadic	
Local	
Regional	
Widespread	

ILINet Sentinel Providers

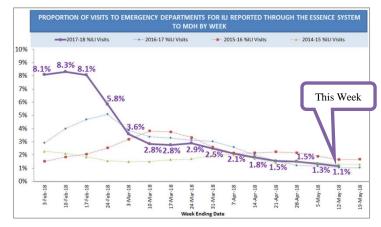
Eighteen sentinel providers reported a total of 5,776 visits this week. Of those, 57 (1.0%) were visits for ILI. This is below the Maryland baseline of 2.0%.



ILI Visits To Sentinel Providers By Age Group	This Week Number (%)	Last Week Number (%)	Season Number (%)
Age 0-4	14 (25%)	17 (20%)	1,294 (23%)
Age 5-24	26 (46%)	45 (52%)	2,336(41%)
Age 25-49	7 (12%)	12 (14%)	1,187 (21%)
Age 50-64	9 (16%)	8 (9%)	614 (11%)
Age ≥ 65	1 (2%)	5 (6%)	288 (5%)
Total	57 (100%)	87 (100%)	5,719 (100%)

Visits to Emergency Departments for ILI

Emergency Departments in Maryland reported a total of 44,215 visits this week through the ESSENCE surveillance system. Of those, 505 (1.1%) were visits for ILI.



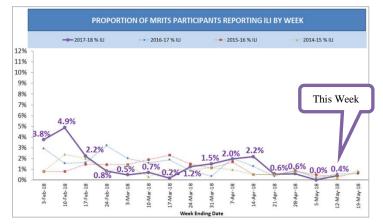
ILI Visits To Emergency Departments By Age Group	This Week Number (%)	Last Week Number (%)	Season Number (%)
Age 0-4	133 (26%)	173 (29%)	10,530 (24%)
Age 5-24	169 (33%)	180 (31%)	12,505 (28%)
Age 25-49	118 (23%)	139 (24%)	11,482 (26%)
Age 50-64	49 (10%)	60 (10%)	5,522 (12%)
Age ≥ 65	36 (7%)	37 (6%)	4,314 (10%)
Total	505 (100%)	589 (100%)	44,353 (100%)

Neighboring stats: influenza information: Delaware http://dhs.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)

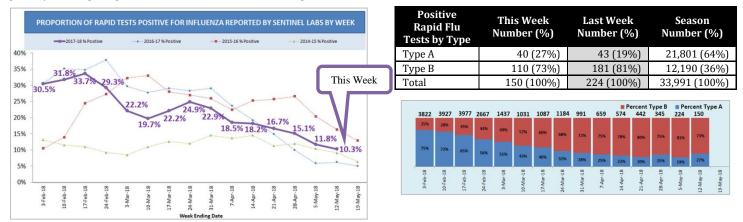
MRITS is the Maryland Resident Influenza Tracking System, a weekly survey for influenza-like illness (ILI). A total of 500 residents responded to the <u>MRITS survey</u> this week. Of those, 2 (0.4%) reported having ILI and missing 3 cumulative days of regular daily activities.



MRITS Respondents Reporting ILI By Age Group	This Week Number (%)	Last Week Number (%)	Season Number (%)
Age 0-4			9 (3%)
Age 5-24	1 (50%)		85 (31%)
Age 25-49			55 (20%)
Age 50-64	1 (50%)		98 (35%)
Age ≥ 65			30 (11%)
Total	2 (100%)		277 (100%)

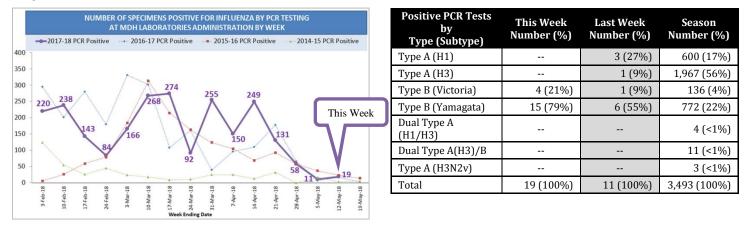
Clinical Laboratory Influenza Testing

There were 46 clinical laboratories reporting 1,456 influenza diagnostic tests, mostly rapid influenza diagnostic tests (RIDTs). Of those, 150 (10.3%) were positive for influenza. Of those testing positive, 40 (27%) were influenza Type A and 110 (73%) 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.



State Laboratories Administration Influenza Testing

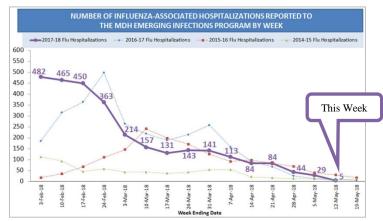
The MDH Laboratories Administration performed a total of 49 PCR tests for influenza and 19 (38.8%) were positive for influenza. Of those testing positive, 15 (78.9%) were positive for Type B (Yamagata), and 4 (21.1%) were positive for Type B (Victoria). PCR testing is more reliable than RIDT. The MDH testing identifies subtypes of influenza A and lineages of influenza B, information that is not available from the RIDT results. The table below summarizes results by type, subtype, and lineage.



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Influenza-associated Hospitalizations

A total of 5 influenza-associated 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.) This surveillance is conducted as a component of the Maryland Emerging Infections Program.



Influenza- Associated Hospitalizations by Age Group	This Week Number (%)	Last Week Number (%)	Season Number (%)
Age 0-4		4 (14%)	293 (6%)
Age 5-17		2 (7%)	227 (5%)
Age 18-24			130 (3%)
Age 25-49	3 (60%)	2 (7%)	595 (12%)
Age 50-64	1 (20%)	7 (24%)	1,032 (22%)
Age ≥ 65	1 (20%)	14 (48%)	2,510 (52%)
Total	5 (100%)	29 (100%)	4,787 (100%)

Influenza-associated Deaths

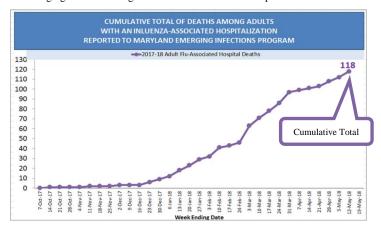
An influenza-associated death is one with a clinically compatible illness and a positive influenza test of any kind.

Pediatric Deaths: The total number of pediatric (< 18 years of age) deaths reported this influenza season is 3.

Influenza-associated pediatric mortality is a reportable condition in Maryland. Pediatric deaths are tracked without regard to hospitalization.

Adult Deaths Among Hospitalized Patients: A total of 118 deaths have been reported among adults admitted to Maryland hospitals this influenza season. Influenza-associated adult mortality is *not* a reportable condition in Maryland. However, adult mortality surveillance is conducted as a component of the Maryland

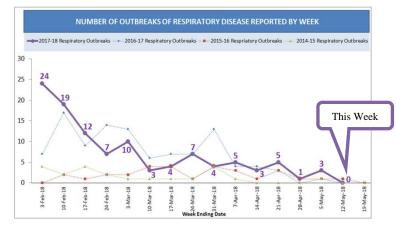
Emerging Infections Program's influenza-associated hospitalization surveillance.



Influenza-Associated Deaths	Cumulative Season Total
Pediatric Deaths (Age < 18)	3
Adult Deaths (in hospitalized cases)	118

Outbreaks of Respiratory Disease

There were no respiratory outbreaks reported to MDH 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.)



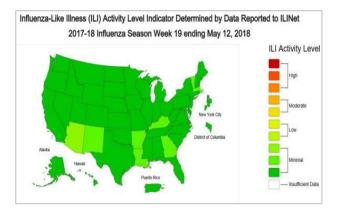
Respiratory Outbreaks by Type	This Week Number (%)	Last Week Number (%)	Season Number (%)
Influenza		3 (100%)	153 (80%)
Influenza-like Illness			24 (13%)
Pneumonia			14 (7%)
Other Respiratory			
Total		3 (100%)	191 (100%)

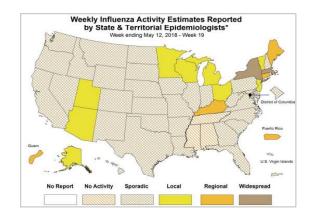
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National Influenza Surveillance (CDC)

During week 19 (May 6-12, 2018), influenza activity continued to decrease in the United States.

- Viral Surveillance: Overall, influenza A(H3) viruses have predominated this season. Since early March, influenza B viruses have been more frequently reported than influenza A viruses. The percentage of respiratory specimens testing positive for influenza in clinical laboratories decreased.
- Pneumonia and Influenza Mortality: The proportion of deaths attributed to pneumonia and influenza (P&I) was below the system-specific epidemic threshold in the National Center for Health Statistics (NCHS) Mortality Surveillance System.
- 0 Influenza-associated Pediatric Deaths: Three influenza-associated pediatric deaths were reported.
- Influenza-associated Hospitalizations: A cumulative rate of 106.6 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 1.2%, which is below the national baseline of 2.2%. All 10 regions reported ILI below region-specific baseline levels. New York City, the District of Columbia, Puerto Rico and all 50 states experienced minimal ILI activity.
- <u>Geographic Spread of Influenza:</u> The geographic spread of influenza in two states was reported as widespread; Guam, Puerto Rico and three states reported regional activity; nine states reported local activity; the District of Columbia, the U.S. Virgin Islands and 33 states reported sporadic activity; and three states reported no influenza activity.





Where to get an influenza vaccination

Interested in getting a flu vaccine for the 2017-18 influenza season? Go to <u>https://phpa.health.maryland.gov/influenza/Pages/getvaccinated.aspx</u> 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.