Maryland Weekly Influenza Surveillance Activity Report

A summary of influenza surveillance indicators reported to DHMH for the week ending January 9, 2016

Prepared by the Infectious Disease Epidemiology and Outbreak Response 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 January 9, 2016, influenza-like illness (ILI) intensity in Maryland was **LOW** and there was **LOCAL** geographic spread. The proportion of outpatient visits for ILI reported both by Sentinel Providers and Maryland Emergency Departments decreased from last week. The proportion of MRITS respondents reporting ILI dropped substantially for the second straight week. The proportion of specimens testing positive for influenza at clinical laboratories also decreased. One specimen tested positive for influenza type B at the DHMH lab. Ten influenza-associated hospitalizations were reported. One outbreak of ILI was reported. As with last week, laboratory data suggest that much of the current ILI activity may be due to non-influenza respiratory viruses.

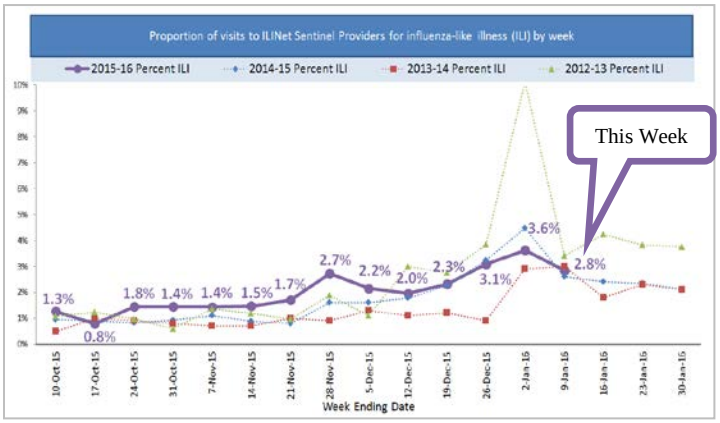
Click here to visit our influenza surveillance web page

ILI Intensity Levels
Minimal
✔ Low
Moderate
High

Influenza Geographic Spread
No Activity
Sporadic
✔ Local
Regional
Widespread

ILINet Sentinel Providers

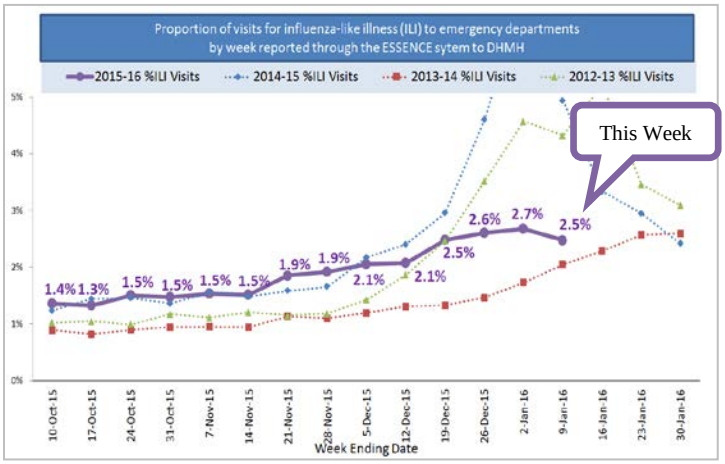
Thirty sentinel providers reported a total of 4,772 visits this week. Of those, 136 (2.8%) were visits for ILI. This is **above** the Maryland baseline of **1.8%**.



ILI Visits To Sentinel Providers By Age Group	This Week Number (%)	Last Week Number (%)	Season Number (%)
Age 0-4	44 (32%)	56 (29%)	450 (25%)
Age 5-24	42 (31%)	41 (21%)	663 (36%)
Age 25-49	28 (21%)	51 (26%)	411 (22%)
Age 50-64	15 (11%)	28 (15%)	205 (11%)
Age ≥ 65	7 (5%)	17 (9%)	104 (6%)
Total	136 (100%)	193 (100%)	1833 (100%)

Visits to Emergency Departments for ILI

Emergency Departments in Maryland reported a total of 50,326 visits this week through the ESSENCE surveillance system. Of those, 1,246 (2.5%) were visits for ILI.



ILI Visits To Emergency Departments By Age Group	This Week Number (%)	Last Week Number (%)	Season Number (%)
Age 0-4	422 (34%)	530 (39%)	4349 (33%)
Age 5-24	320 (26%)	360 (27%)	3966 (30%)
Age 25-49	311 (25%)	265 (20%)	2998 (23%)
Age 50-64	122 (10%)	113 (8%)	1114 (8%)
Age ≥ 65	71 (6%)	77 (6%)	716 (5%)
Unknown	--	--	--
Total	1246 (100%)	1345 (100%)	13143(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.portal.state.pa.us/portal/server.pt/community/influenza_(flu)/14161
Virginia	http://www.vdh.state.va.us/Epidemiology/flu/
West Virginia	http://dhhr.wv.gov/oeps/disease/flu/Pages/fluSurveillance.aspx

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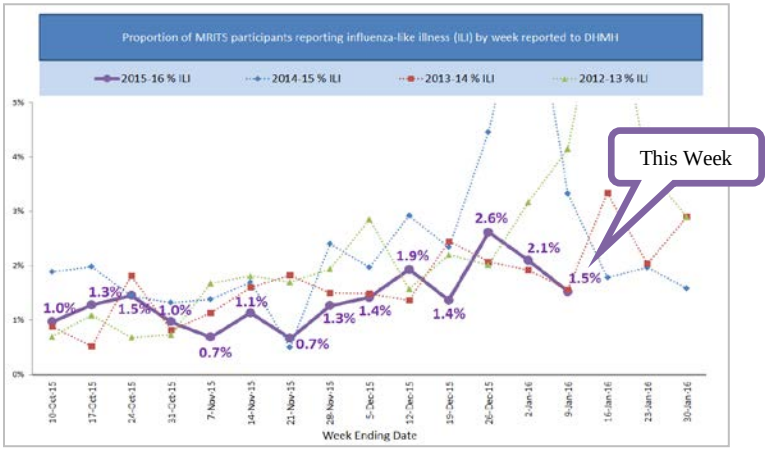
Community-based Influenza Surveillance (MRITS)

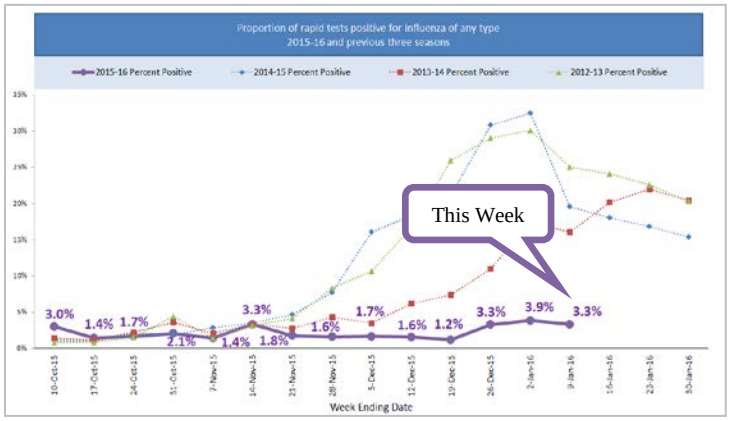
MRITS is the Maryland Resident Influenza Tracking System, a weekly survey for influenza-like illness (ILI). A total of 657 residents responded to the MRITS survey this week. Of those, 10 (1.5%) reported having ILI and missing a cumulative 30 days of regular daily activities.



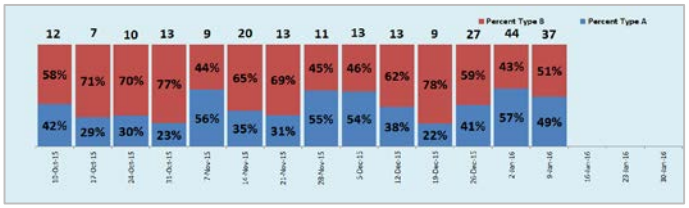
MRITS Respondents Reporting ILI By Age Group	This Week Number (%)	Last Week Number (%)	Season Number (%)
Age 0-4	--	1 (7%)	6 (5%)
Age 5-24	1 (10%)	2 (14%)	30 (25%)
Age 25-49	4 (40%)	2 (14%)	29 (24%)
Age 50-64	5 (50%)	8 (57%)	39 (33%)
Age ≥ 65	--	1 (7%)	16 (13%)
Total	10 (100%)	14 (100%)	120 (100%)

Clinical Laboratory Influenza Testing

Forty-nine clinical laboratories reported performing 1,109 influenza diagnostic tests, mostly rapid influenza diagnostic tests (RIDTs). Of those, 37 (3.3%) were positive for influenza. Of those testing positive, 18 (48.6%) were influenza Type A and 19 (51.4%) were influenza Type B. The reliability of RIDTs 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.

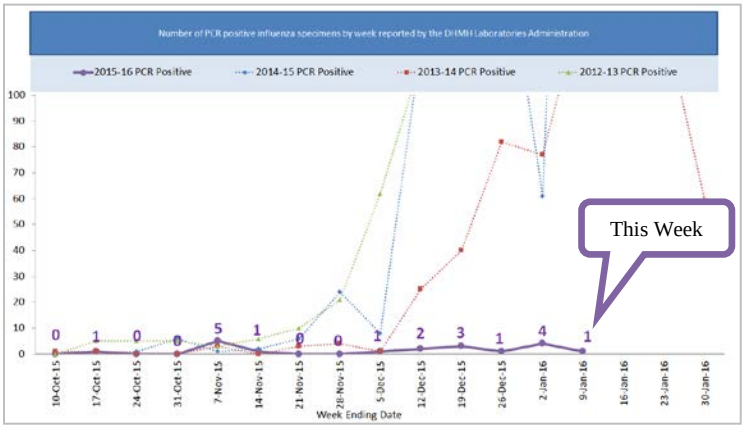


Positive Rapid Flu Tests by Type	This Week Number (%)	Last Week Number (%)	Season Number (%)
Type A	18 (49%)	25 (57%)	103 (43%)
Type B	19 (51%)	19 (43%)	135 (57%)
Total	37 (100%)	44 (100%)	238 (100%)



State Laboratories Administration Influenza Testing

The DHMH Laboratories Administration performed a total of 150 PCR tests for influenza and 1 (0.7%) specimen tested positive for influenza type B (Yamagata lineage). 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.



Positive PCR Tests by Type (Subtype)	This Week Number (%)	Last Week Number (%)	Season Number (%)
Type A (H1)	--	2 (50%)	9 (47%)
Type A (H3)	--	1 (25%)	6 (32%)
Type B (Victoria)	--	--	1 (5%)
Type B (Yamagata)	1 (100%)	1 (25%)	3 (16%)
Total	1 (100%)	4 (100%)	19 (100%)

Where to get an influenza vaccination

Interested in getting a flu vaccine for the 2015-16 influenza season? Go to http://dhmh.maryland.gov/flumd/SitePages/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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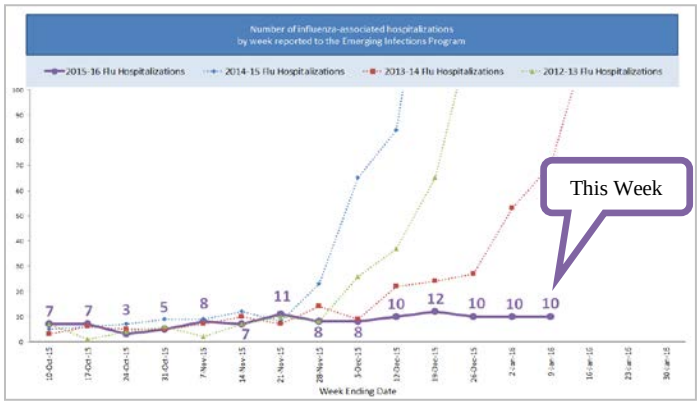
Influenza-associated Hospitalizations

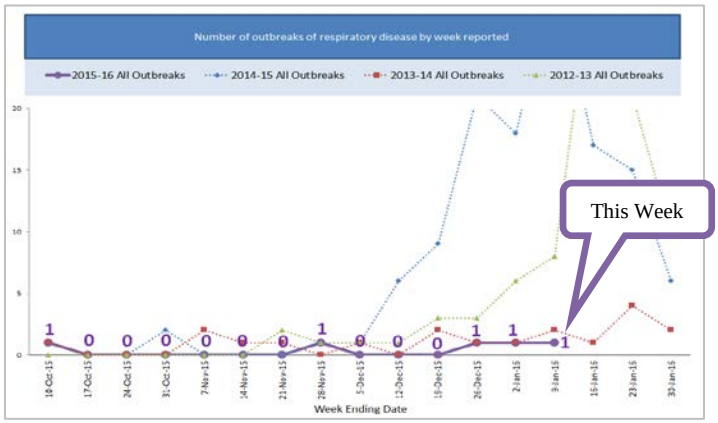
Ten influenza-associated hospitalizations were reported to DHMH. (A person with an overnight hospital stay along with a positive influenza test of any kind, e.g. RIDT or PCR, is considered an "influenza-associated hospitalization" for purposes of influenza surveillance.)



Influenza-Associated Hospitalizations by Age Group	This Week Number (%)	Last Week Number (%)	Season Number (%)
Age 0-4	1 (10%)	1 (10%)	18 (16%)
Age 5-17	--	--	10 (9%)
Age 18-24	--	--	1 (1%)
Age 25-49	1 (10%)	--	14 (12%)
Age 50-64	2 (20%)	3 (30%)	24 (21%)
Age ≥ 65	6 (60%)	6 (60%)	49 (42%)
Total	10 (100%)	10 (100%)	116 (100%)

Outbreaks of Respiratory Disease

There was 1 respiratory outbreak 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	--	--	--
Influenza-like Illness	1 (100%)	--	1 (20%)
Pneumonia	--	1 (100%)	4 (80%)
Other Respiratory	--	--	--
Total	1 (100%)	1 (100%)	5 (100%)

National Influenza Surveillance (CDC)

During week 1 (January 3-9, 2016), laboratory data indicated that influenza activity increased slightly in the United States.

- **Viral Surveillance:** The most frequently identified influenza virus type reported by public health laboratories during week 1 was influenza A, with influenza A (H1N1)pdm09 viruses predominating. The percentage of respiratory specimens testing positive for influenza in clinical laboratories was low.
- **Pneumonia and Influenza Mortality:** The proportion of deaths attributed to pneumonia and influenza (P&I) was below their system-specific epidemic threshold in both the NCHS Mortality Surveillance System and the 122 Cities Mortality Reporting System.
- **Influenza-associated Pediatric Deaths:** One influenza-associated pediatric death was reported.
- **Influenza-associated Hospitalizations:** A cumulative rate for the season of 1.5 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 2.0%, which is below the national baseline of 2.1%. Four of 10 regions reported ILI at or above region-specific baseline levels. Puerto Rico and one state experienced high ILI activity; New York City and seven states experienced low ILI activity; 42 states experienced minimal ILI activity; and the District of Columbia had insufficient data.
- **Geographic Spread of Influenza:** The geographic spread of influenza in Guam, Puerto Rico, and nine states were reported as regional; 11 states reported local activity; the U.S. Virgin Islands and 28 states reported sporadic activity; and the District of Columbia and two states reported no influenza activity.