

Maine Weekly Influenza Surveillance Report

April 25, 2007

Synopsis

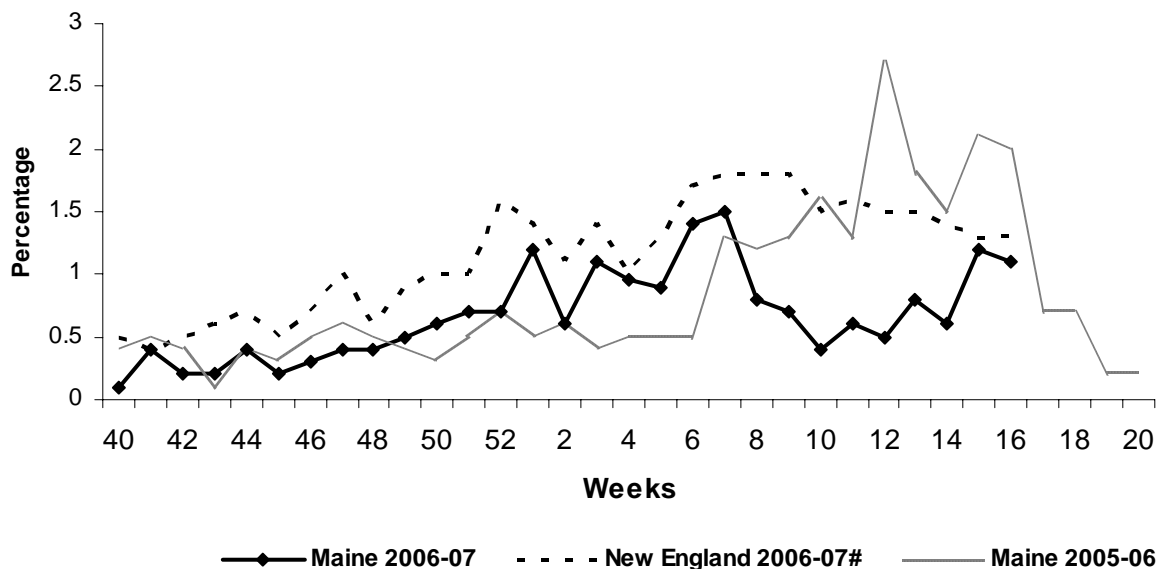
During the week ending April 21, 2007 (MMWR week 16)*, local influenza activity was reported in Maine. A decrease was observed during week 16 in laboratory-confirmed influenza and hospitalizations attributable to respiratory illness. One outbreak of influenza was reported during the week ending April 21, 2007 in a central region long-term care facility.

Moderate Disease Surveillance

Outpatient influenza-like illness (ILI)

During the week ending April 21, 2007, 1.1% of sentinel provider outpatient visits were due to ILI (range 0% - 1.7%).

Outpatient Visits for Influenza-like Illness -- Maine, 2005-07



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

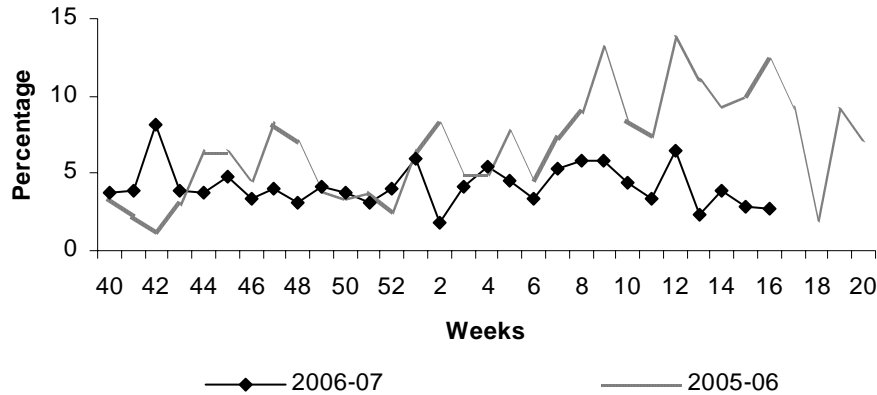
Severe Disease Surveillance

Hospital inpatients

During the week ending April 14, 2007 (week 15), 2.9% of admissions reported by two hospitals were due to respiratory illness (range 1.6% - 4.2%). During the week ending April 21, 2007 (week 16), 2.7% of admissions reported by one hospital were due to respiratory illness.

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

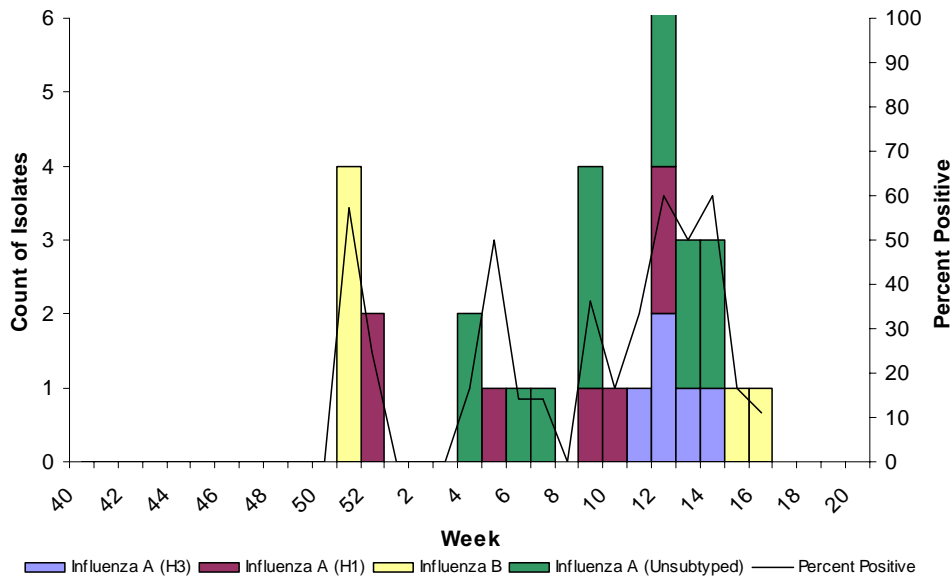
Hospital Admissions due to Respiratory Illness -- Maine, 2005-07



Laboratory Reporting

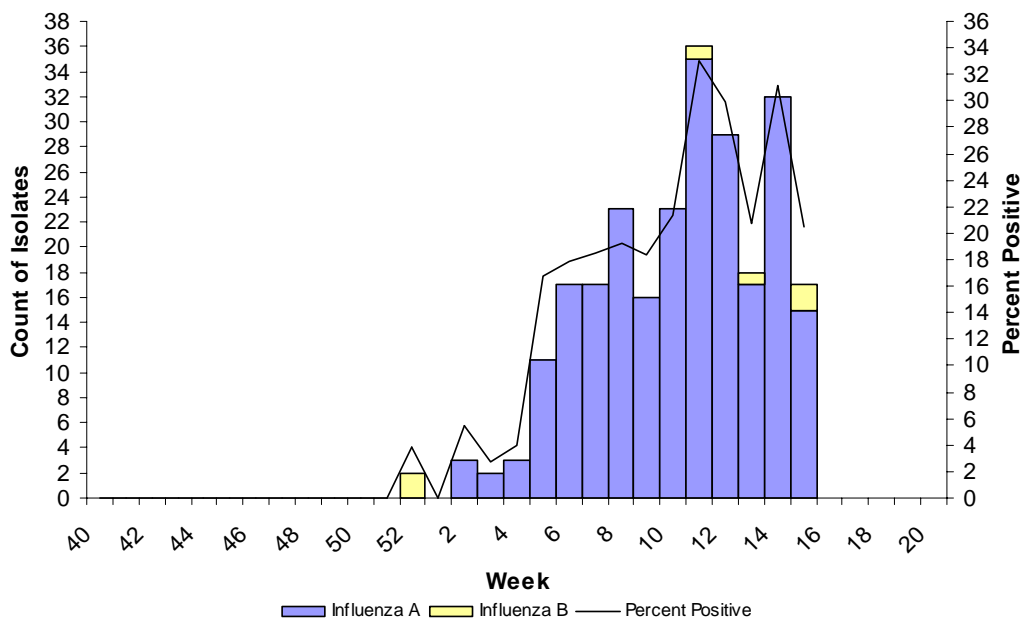
During the week ending April 21, 2007, seven respiratory specimen was submitted to the Maine Health and Environmental Testing Laboratory (HETL) for influenza culture. Of these, one (14.3%) was positive for influenza B, one was positive for adenovirus, and results are pending on the remaining five specimens. Two additional specimens were submitted to HETL for influenza PCR testing during the week ending April 21, 2007; both specimens were negative for influenza. As of April 21, 2007, a total of 204 respiratory specimens have been submitted for culture and/or PCR to HETL since the influenza surveillance season began on October 1, 2007. Of these specimens, 34 (16.7%) were culture or PCR-positive for influenza (7 for influenza A [H1], 5 for influenza A [H3], 16 for influenza A [unsubtyped], and 6 for influenza B), four (2.0%) specimens were presumptive positive for enterovirus, three (1.5%) specimens were positive for adenovirus, one (0.5%) specimen was positive for RSV, four (2.0%) specimens were not tested, results are pending for eight specimens, and the remaining specimens were negative.

Respiratory Specimens Culture and/or PCR-Positive for Influenza – Maine Health and Environmental Testing Laboratory, 2006-07



During the week ending April 21, 2007, a total of 3 respiratory specimens were submitted to one private reference laboratories in Maine. All of these specimens were negative for influenza. As of April 21, 2007, a total of 1,588 respiratory specimens have been submitted for viral testing to two reference laboratories in Maine since the influenza surveillance season began on October 1, 2006. Of these, 250 (15.7%) specimens were positive for influenza (244 for influenza A and 6 for influenza B), 262 (16.5%) were positive for RSV, 1 (0.1%) specimen was positive for parainfluenza 2, 10 (0.6%) were positive for parainfluenza-3, 15 (0.9%) were positive for adenovirus, 13 (0.8%) specimens were positive for enterovirus, and the remaining specimens were negative.

Respiratory Specimens Positive for Influenza – Two Reference Laboratories, Maine 2006-07



Outbreaks

During the week ending April 21, 2007, one outbreak of influenza was reported in a central region long-term care facility. To date, eight outbreaks of influenza have been reported in Maine this season.

Table: Influenza-like illness outbreaks by selected characteristics – Maine, 2006-07

Facility Type*	Region	Date Reported	Attack Rate %		Hospitalizations #	Deaths #	Vaccination rate %		Lab-confirmed
			Residents	Staff			Residents	Staff	
School	Western	2/5/07	8.9	0	0	0	^	^	Influenza A/B
School	Midcoast	2/12/07	25.0	20.0	0	0	^	^	^
LTC	Western	2/21/07	4.8	0	1	0	^	40.0	Influenza A/B
School	Western	2/22/07	31.4	6.3	0	0	^	^	Influenza A
School	Eastern	3/21/07	20.4	0	0	0	^	^	^
LTC	Central	4/6/07	6.3	^	0	0	^	^	Influenza A
LTC	Central	4/12/07	20.0	^	0	0	^	^	Influenza A
LTC	Western	4/17/07	2.4	0	1	0	100	30	Influenza A/B

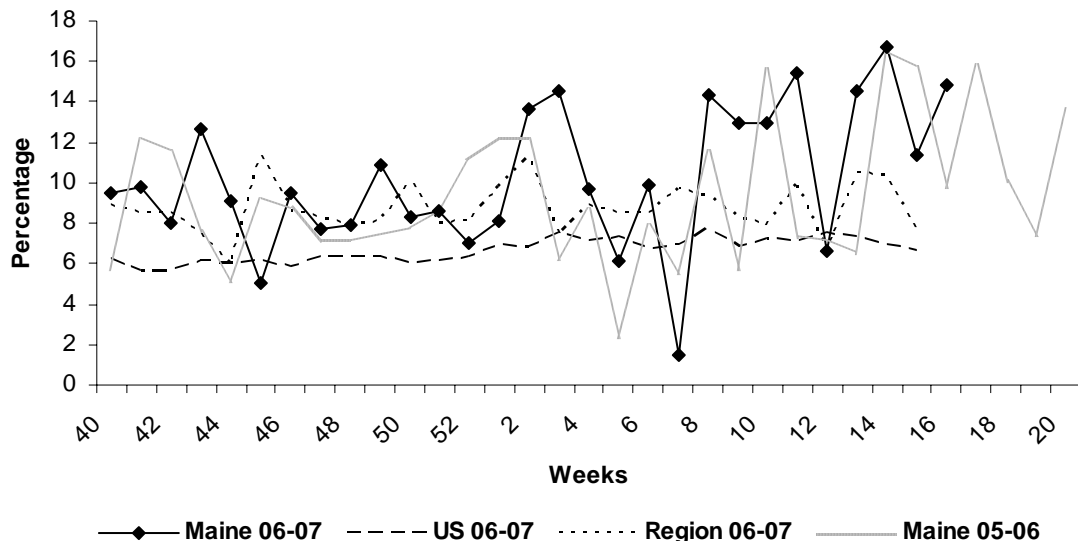
* Outbreak definition is specific to facility type. An outbreak in long-term care facilities (LTC) is defined as ≥ 3 patients with ILI identified on same floor or ward during a short (e.g., 48-72 hour) period OR ≥ 1 patients with lab-confirmed influenza; an outbreak in an acute care facility is defined as ≥ 1 patients with ILI or lab-confirmed influenza with symptom onset ≥ 48 hours post-admission (i.e., nosocomial); and an outbreak in a school is defined as $\geq 15\%$ absentee rate among student population due to ILI or lab-confirmed influenza. ^ Data unavailable

Fatalities Surveillance

Death Certificates

During the week ending April 21, 2007, 11.4% of deaths reported by three city vital records office were attributable to pneumonia and influenza (range: 4.3% - 62.5%).

Percentage of Deaths Attributable to Pneumonia and Influenza – Maine, New England and the United States, 2005-07



^ 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

As of April 21, 2007, 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 April 21, 2007. Attached below is the weekly influenza activity estimate report for the week ending April 14, 2007.

