

Maine Weekly Influenza Surveillance Report

March 12, 2008

Synopsis

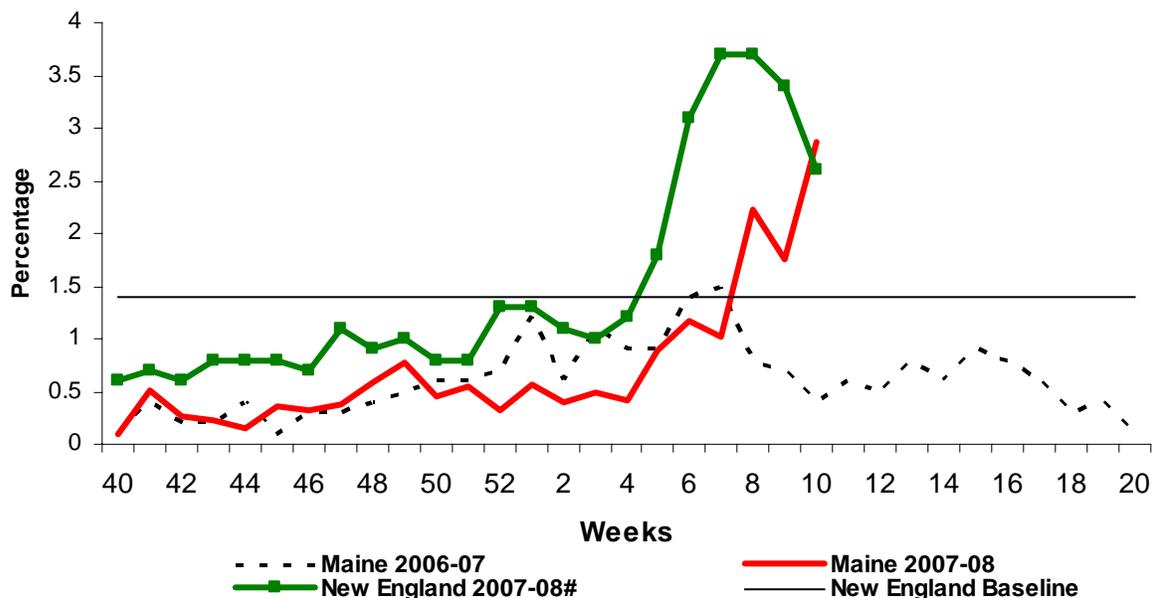
During the week ending March 8, 2008 (MMWR week 10)*, Maine reported widespread influenza activity. Increases in outpatient visits for influenza-like illness and laboratory-confirmed influenza were observed during week 10. Four outbreaks of influenza-like illness were reported in three districts of the state.

Moderate Disease Surveillance

Outpatient influenza-like illness (ILI)

During the week ending March 8, 2008 (week 10), 2.9% of outpatient visits reported by eight Maine Sentinel Providers were for influenza-like illness (ILI), defined as fever ($\geq 100^{\circ}$ F / $\geq 37.8^{\circ}$ C) and cough or sore throat in the absence of a known cause. In the New England States, 2.6% of outpatient visits were attributed to influenza-like illness during week 10.

Outpatient Visits for Influenza-like Illness -- Maine, 2006-08



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

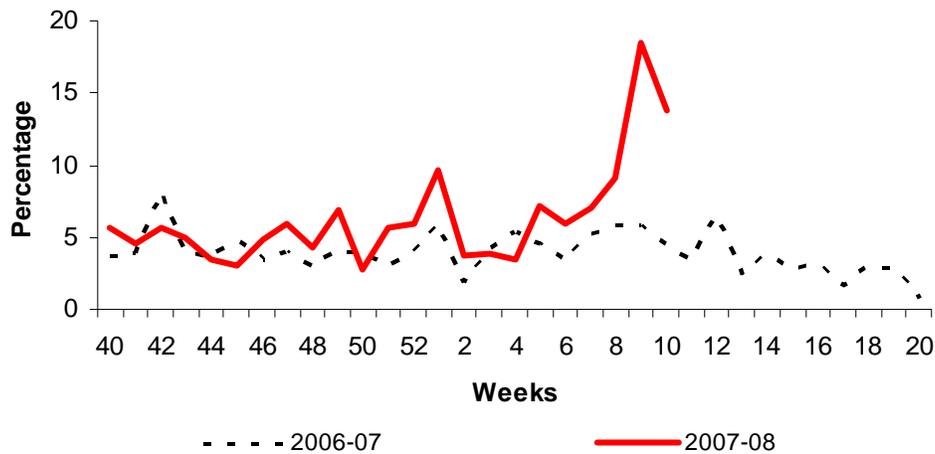
* At time of publication, reporting may be incomplete. Numbers presented here may change as more reports are received.

Severe Disease Surveillance

Hospital inpatients

During the week ending March 8, 2008 (week 10), 13.8% of hospital admissions reported by three hospitals were attributable to pneumonia or influenza. This is a decrease from week 9 when 18.5% of hospital admissions were attributable to pneumonia and influenza.

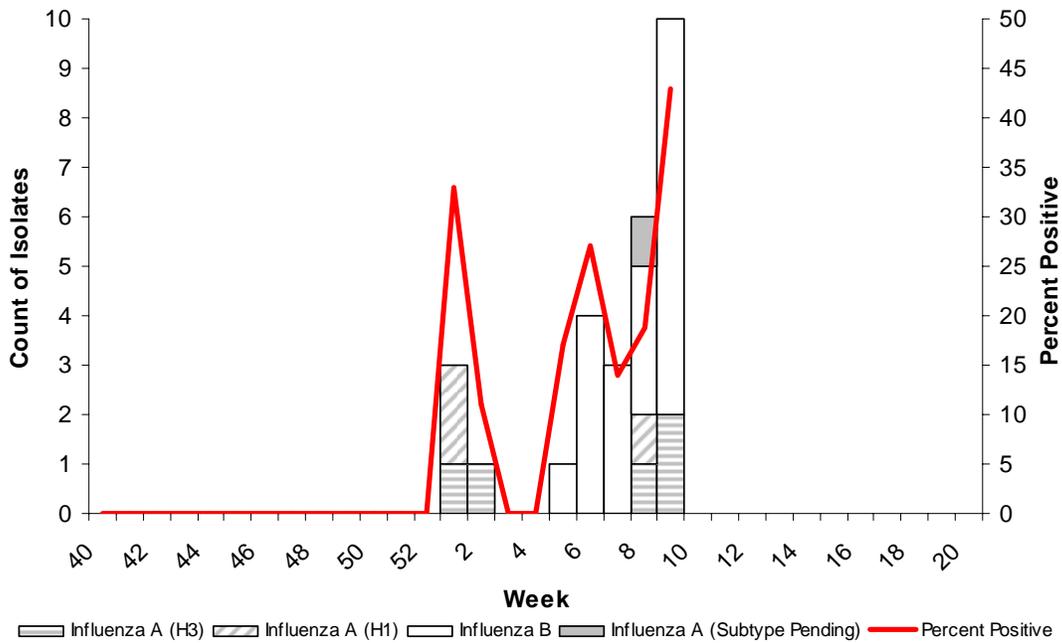
Hospital Admissions Due to Pneumonia or Influenza -- Maine, 2006-08



Laboratory Reporting

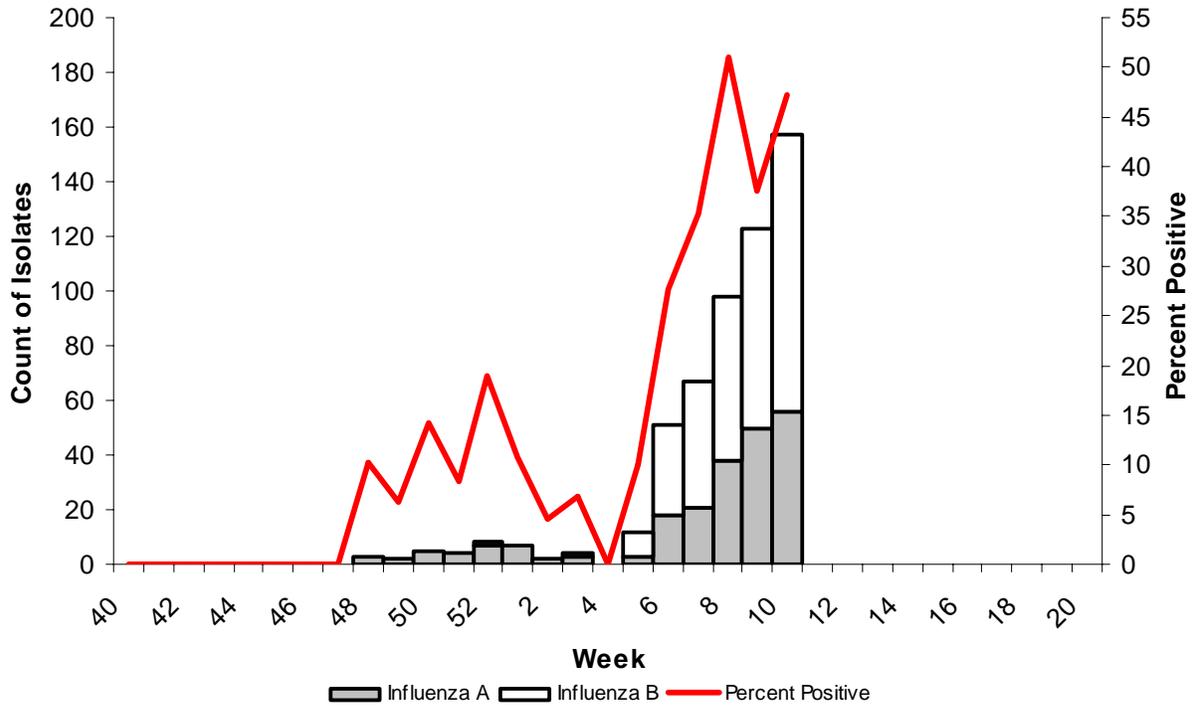
As of March 1, 2008 (week 9), a cumulative total of 217 respiratory specimens had been submitted to the Maine Health and Environmental Testing Laboratory (HETL) for testing. To date, a total of 30 (14.6%) specimens were positive for influenza; five were influenza A (H3), three were influenza A (H1), and 19 specimens were influenza B. In addition, three specimens were positive for parainfluenza-2, one specimen was positive for parainfluenza-1, and one specimen was positive for mumps.

**Respiratory Specimens Positive for Influenza
From the Health and Environmental Testing Laboratory – Maine, 2007-08**



Two private reference laboratories in Maine reported for the week ending March 8, 2008 (week 10). Fifty-six of 175 specimens were positive for influenza A and 101 were positive for influenza B. In addition, 38 specimens were positive for RSV. As of March 8, 2008, a cumulative total of 1559 respiratory specimens had been submitted to two private reference laboratories in Maine. Of these, 219 (14.0%) specimens were positive for influenza A and 325 (20.8%) were positive for influenza B. Four hundred thirty-eight specimens were positive for RSV, ten specimens were positive for parainfluenza-1, ten specimens were positive for parainfluenza-2, three specimens were positive for parainfluenza-3, six specimens was positive for adenovirus, three specimens were positive for enterovirus, and the remaining specimens were negative.

**Respiratory Specimens Positive for Influenza
From Two Reference Laboratories – Maine, 2007-08**



Outbreaks

During the week ending March 8, 2008, four outbreaks of influenza-like illness were reported in Maine; all were laboratory confirmed. A total of 33 outbreaks of influenza-like illness have been reported in Maine this season.

Influenza-like illness outbreaks by selected characteristics – Maine, 2007-08

Facility Type*	Region	Date Reported	Attack Rate %		Hospitalizations #	Deaths #	Vaccination rate %		Lab-confirmed	
			Resident	Staff			Resident	Staff		
1	LTC	Midcoast	12/27/07	9	0	0	0	100	55	Influenza A
2	LTC	Eastern	1/14/08	31	6	1	0	100	94	^
3	School	Midcoast	1/28/08	7	0	0	0	^	^	Influenza A
4	School	Aroostook	1/29/08	27	0	0	0	^	^	Influenza
5	School	Aroostook	1/29/08	15	^	^	^	^	^	^
6	School	Midcoast	1/31/08	3	0	0	0	^	^	Influenza
7	School	Aroostook	2/4/08	20	11	0	0	^	^	Influenza A
8	LTC	Midcoast	2/12/08	24	5	0	0	98	5	Influenza B
9	LTC	Midcoast	2/13/08	40	17	0	0	80	83	Influenza A
10	LTC	Western	2/15/08	9	^	2	^	^	^	Influenza B
11	LTC	Eastern	2/15/08	11	16	89	50	1	0	Influenza A
12	School	Midcoast	2/15/08	20	0	0	0	^	^	Influenza B
13	LTC	Western	2/20/08	34	^	0	0	^	^	Influenza A
14	ACF Unit	Western	2/20/08	36	^	Na	0	^	^	Influenza
15	LTC	Eastern	2/21/08	20	8	^	^	^	^	Influenza B
16	LTC	Western	2/21/08	0	3	^	^	90	50	Influenza A
17	LTC	Western	2/21/08	1	3	1	1	60	50	Influenza

18	LTC	Southern	2/22/08	1	0	^	^	^	^	Influenza
19	LTC	Eastern	2/22/08	1	0	^	^	^	^	Influenza B
20	ACF	Eastern	2/25/08							Influenza
21	ACF	Western	2/25/08	1	^	^	^	^	^	Influenza B
	Unit									
22	LTC	Southern	2/26/08	1	^	^	^	^	^	Influenza A
23	LTC	Western	2/26/08	1	^	0	1	^	^	Influenza
24	LTC	Central	2/26/08	3	2	0	0	96	75	Influenza A
25	LTC	Southern	2/26/08	3	5	^	^	^	^	Influenza A
26	LTC	Eastern	2/26/08	3	3	0	0	95	40	Influenza B
27	LTC	Western	2/27/08	1	^	0	0	^	^	Influenza
28	LTC	Western	2/28/08	1	^	^	^	^	^	Influenza
29	LTC	Eastern	2/29/08	7	2	0	0	100	50	Influenza B
30	LTC	Western	3/3/08	1	1	1	0	98	60	Influenza A
31	LTC	Eastern	3/5/08	33	5	^	^	^	^	Influenza B
32	LTC	Central	3/7/08	3	31	3	0	99	43	Influenza B
33	LTC	Western	3/7/08	5	^	^	^	^	^	Influenza 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 (ACF) 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.

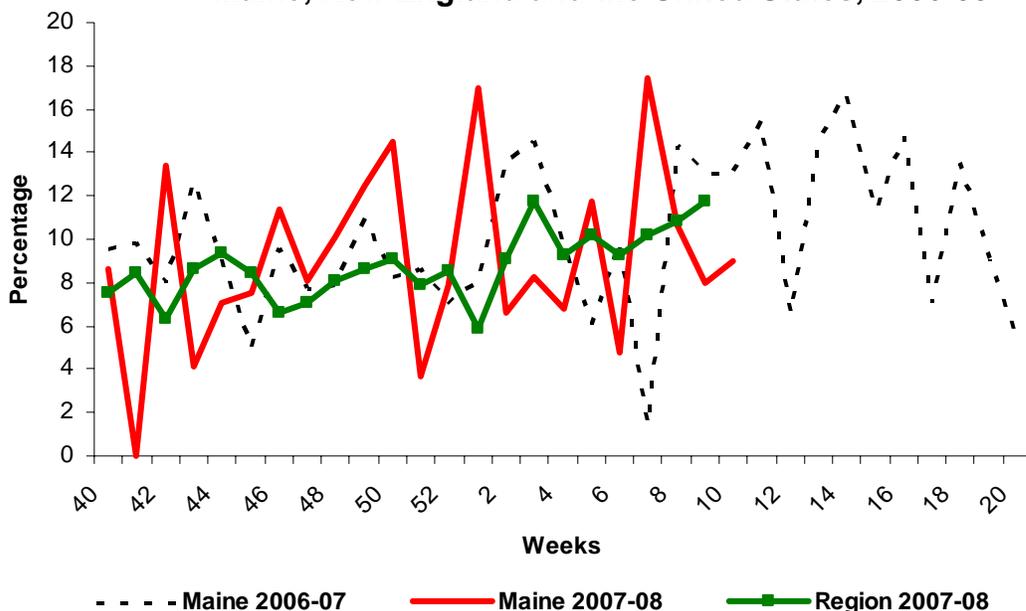
^ Data unavailable NA indicates not applicable

Fatalities Surveillance

Death Certificates

During the week ending March 8, 2008 (week 10), 9.0% of deaths reported by three city vital records offices were attributable to pneumonia and influenza.

Percentage of Deaths Attributable to Pneumonia and Influenza – Maine, New England and the United States, 2006-08



^ 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

The first influenza-associated pediatric death in Maine was reported during week 9.

National Influenza Activity

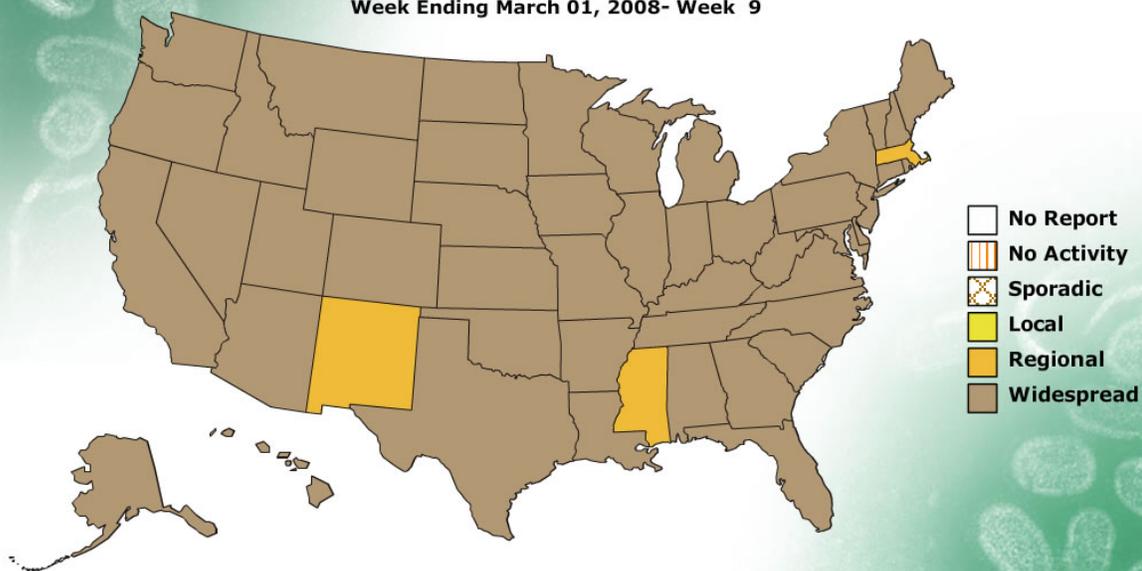
State health departments report the estimated level of influenza activity in their states each week. States report influenza activity as: 1) no activity, 2) sporadic, 3) local, 4) regional, or 5) widespread (definitions of these levels can be found at: www.cdc.gov/flu/weekly/usmap.htm). Maine reported widespread influenza activity for the weeks ending March 1, 2008 (week 9) and March 8, 2008 (week 10).

FLUVIEW



A Weekly Influenza Surveillance Report Prepared by the Influenza Division
Weekly Influenza Activity Estimates Reported by State and Territorial Epidemiologists*

Week Ending March 01, 2008- Week 9



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