

Maine Weekly Influenza Surveillance Report

March 5, 2008

Synopsis

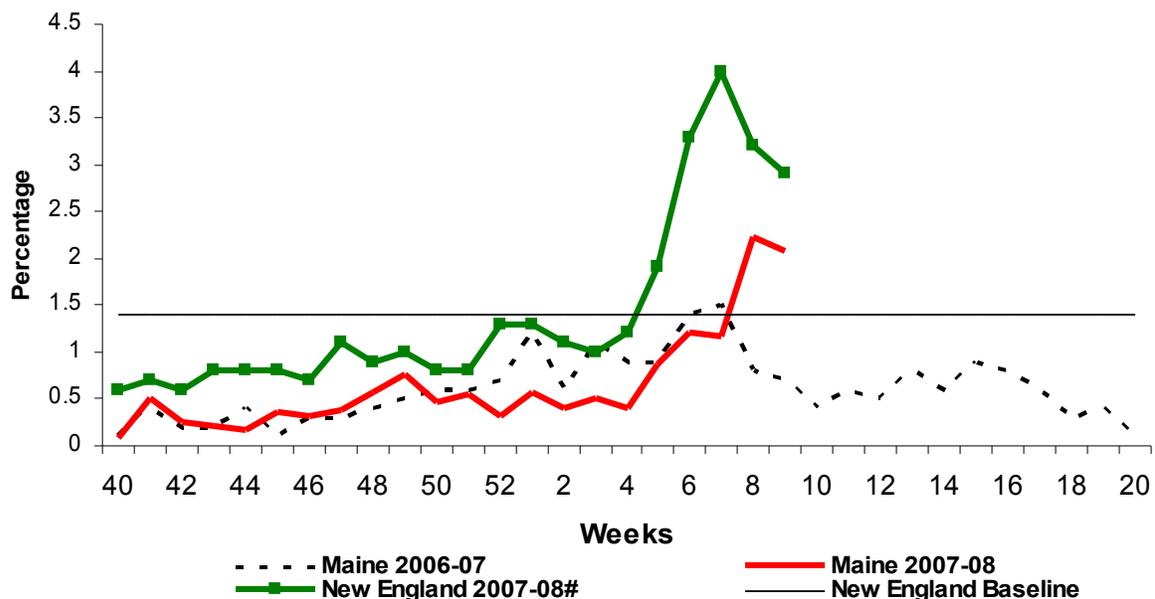
During the week ending March 1, 2008 (MMWR week 9)*, Maine reported widespread influenza activity. Surveillance data indicate high levels of influenza and influenza-like illness circulating throughout the state, including among hospitalized and long-term care facility patients. An influenza-associated pediatric death was reported during week 9.

Moderate Disease Surveillance

Outpatient influenza-like illness (ILI)

During the week ending March 1, 2008 (week 9), 2.1% of outpatient visits reported by nine 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, 2.9% of outpatient visits were attributed to influenza-like illness during week 9.

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



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

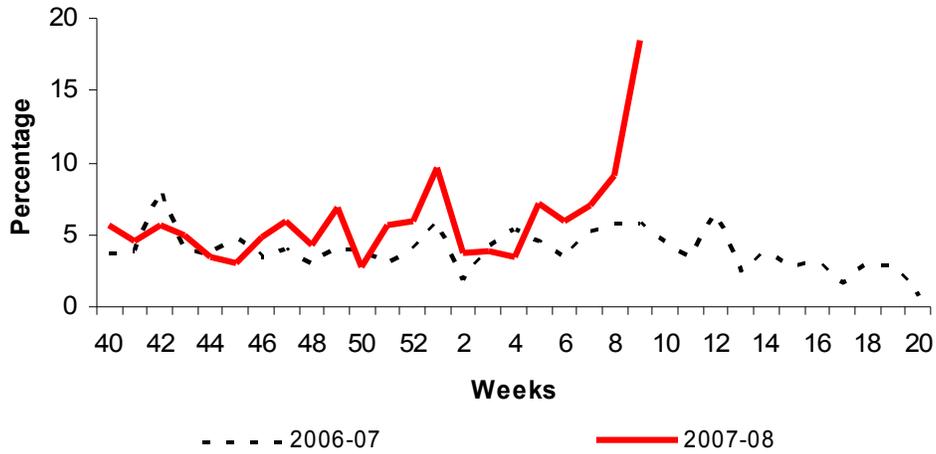
Severe Disease Surveillance

Hospital inpatients

During the week ending March 1, 2008 (week 9), 18.5% of hospital admissions reported by two hospitals were attributable to pneumonia or influenza. This is an increase from week 8 when 9.1% of hospital admissions were attributable to pneumonia and influenza.

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

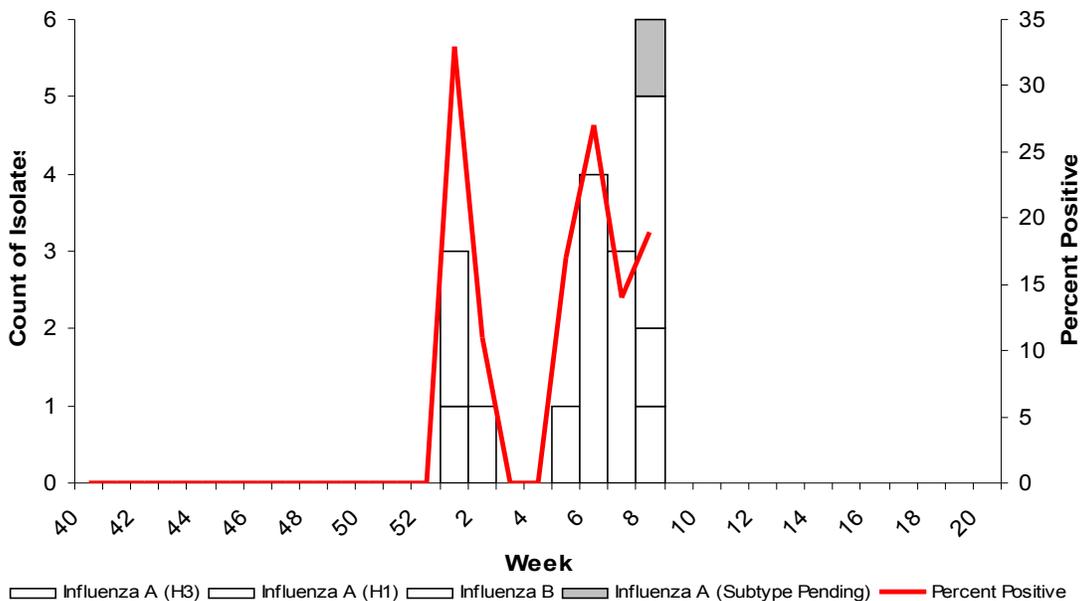
Hospital Admissions Due to Pneumonia or Influenza -- Maine, 2006-08



Laboratory Reporting

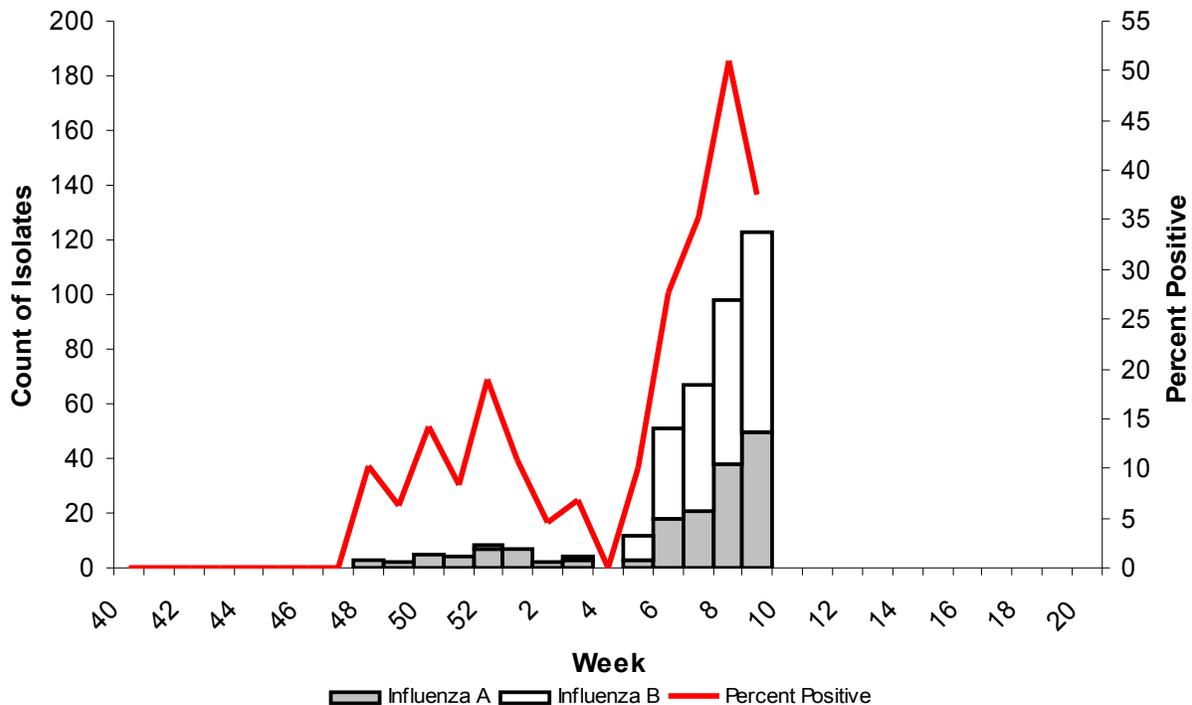
As of February 23, 2008 (week 8), a cumulative total of 178 respiratory specimens had been submitted to the Maine Health and Environmental Testing Laboratory (HETL) for testing. To date, seven specimens were positive for influenza A (three specimens were A (H1) and three were A (H3)) and eleven specimens were positive for influenza B. In addition, three specimens were positive for parainfluenza-2, one specimen was positive for parainfluenza-1, and one

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



One private reference laboratory in Maine reported for the week ending March 1, 2008 (week 9). Fifty of 205 specimens were positive for influenza A and 73 were positive for influenza B. In addition, 38 specimens were positive for RSV. As of March 1, 2008, a cumulative total of 1379 respiratory specimens had been submitted to two private reference laboratories in Maine. Of these, 163 (11.8%) specimens were positive for influenza A and 223 (16.2%) were positive for influenza B. Four hundred 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.

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



Outbreaks

During the week ending March 1, 2008, ten outbreaks of influenza-like illness were reported in Maine; all were laboratory confirmed. A total of 29 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 |
| 8 | LTC | Midcoast | 2/12/08 | 24 | 5 | 0 | 0 | 98 | 5 | Influenza |
| 9 | LTC | Midcoast | 2/13/08 | 40 | 17 | 0 | 0 | 80 | 83 | Influenza |
| 10 | LTC | Western | 2/15/08 | 9 | ^ | 2 | ^ | ^ | ^ | Influenza |
| 11 | LTC | Eastern | 2/15/08 | 11 | 16 | 89 | 50 | 1 | 0 | Influenza |
| 12 | School | Midcoast | 2/15/08 | 20 | 0 | 0 | 0 | ^ | ^ | Influenza |
| 13 | LTC | Western | 2/20/08 | 34 | ^ | 0 | 0 | ^ | ^ | Influenza |
| 14 | ACF Unit | Western | 2/20/08 | 36 | ^ | Na | 0 | ^ | ^ | Influenza |
| 15 | LTC | Eastern | 2/21/08 | 20 | 8 | ^ | ^ | ^ | ^ | Influenza |
| 16 | LTC | Western | 2/21/08 | 0 | 3 | ^ | ^ | 90 | 50 | Influenza |
| 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 |
| 20 | ACF | Eastern | 2/25/08 | | | | | | | Influenza |
| 21 | ACF Unit | Western | 2/25/08 | 1 | ^ | ^ | ^ | ^ | ^ | Influenza |
| 22 | LTC | Southern | 2/26/08 | 1 | ^ | ^ | ^ | ^ | ^ | Influenza |
| 23 | LTC | Western | 2/26/08 | 1 | ^ | 0 | 1 | ^ | ^ | Influenza |
| 24 | LTC | Central | 2/26/08 | 3 | 2 | 0 | 0 | 96 | 75 | Influenza |
| 25 | LTC | Southern | 2/26/08 | 3 | 5 | ^ | ^ | ^ | ^ | Influenza |
| 26 | LTC | Eastern | 2/26/08 | 3 | 3 | 0 | 0 | 95 | 40 | Influenza |
| 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 |

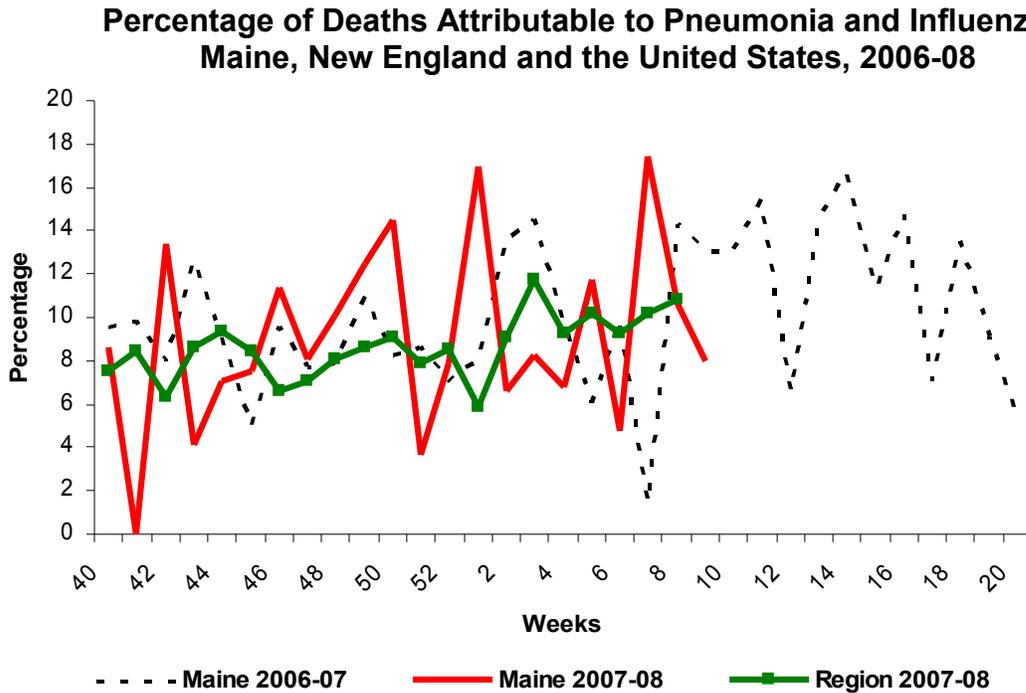
* Outbreak definition is specific to facility type. An outbreak in long-term care facilities (LTC) is defined as ≥ 3 patients with ILI identified on same floor or ward during a short (e.g., 48-72 hour) period OR ≥ 1 patients with lab-confirmed influenza; an outbreak in an acute care facility (ACF) is 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 1, 2008 (week 9), 8.0% of deaths reported by two city vital records offices were attributable to pneumonia and influenza.



^ 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. The child was a 1 year old in the Eastern Region who was diagnosed with influenza B.

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 February 23, 2008 (week 8) and March 1, 2008 (week 9).

FLUVIEW



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

Week Ending February 23, 2008- Week 8



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