

Maine Weekly Influenza Surveillance Report

February 28, 2007

Synopsis

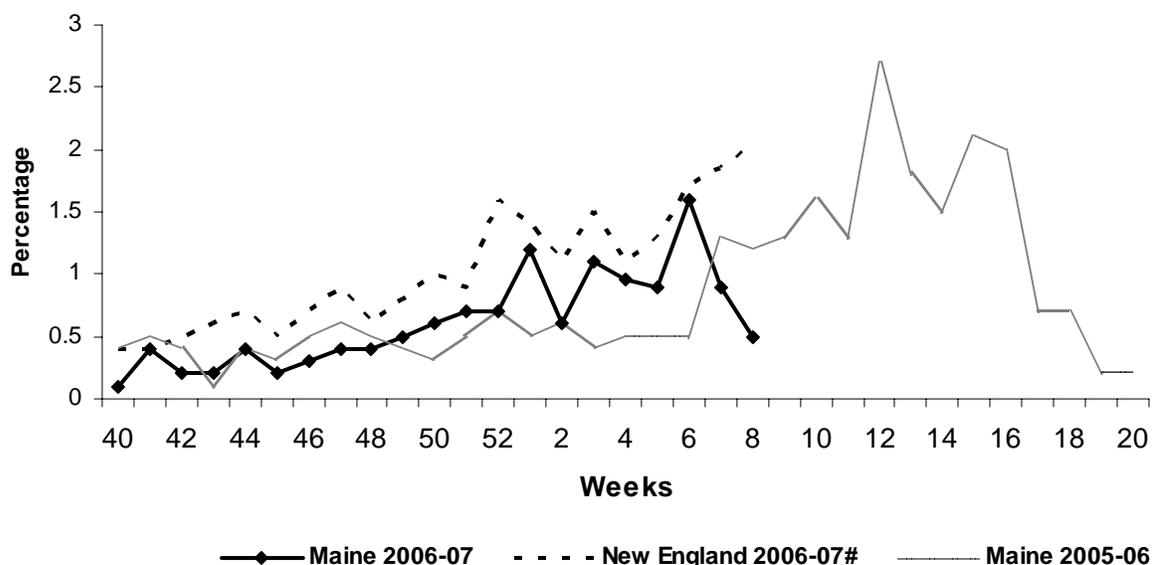
During the week ending February 24, 2007 (MMWR week 8)*, regional influenza activity was reported in Maine. An increase in laboratory-confirmed influenza and influenza-associated outbreaks was observed this week.

Moderate Disease Surveillance

Outpatient influenza-like illness (ILI)

During the week ending February 24, 2007, 0.5% of sentinel provider outpatient visits were due to ILI (range 0% - 3.6%).

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



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

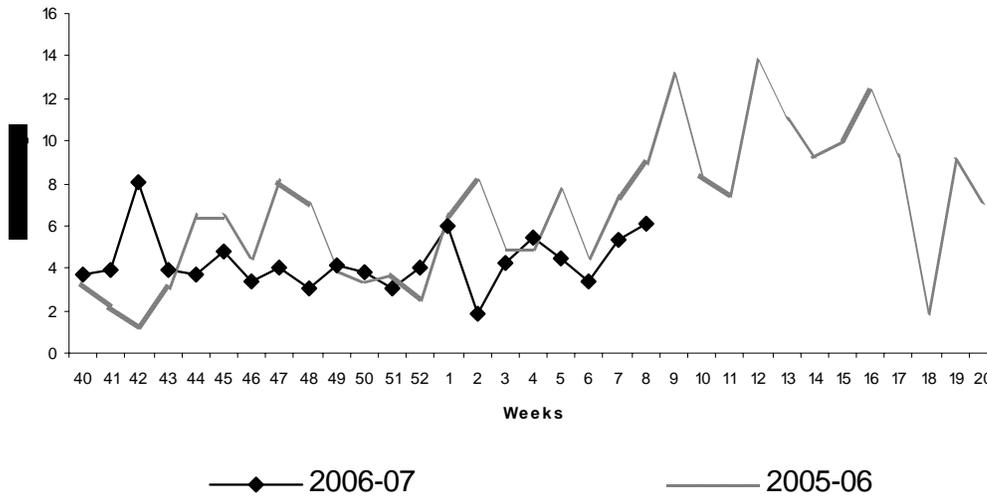
Severe Disease Surveillance

Hospital inpatients

During the week ending February 17, 2007 (week 7), 5.3% of admissions reported by four hospitals were due to respiratory illness (range 1.8% - 10.5%). During the week ending February 24, 2007 (week 8), 6.1% of admissions reported by three hospitals were due to respiratory illness (range 2.1% - 10.8%).

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

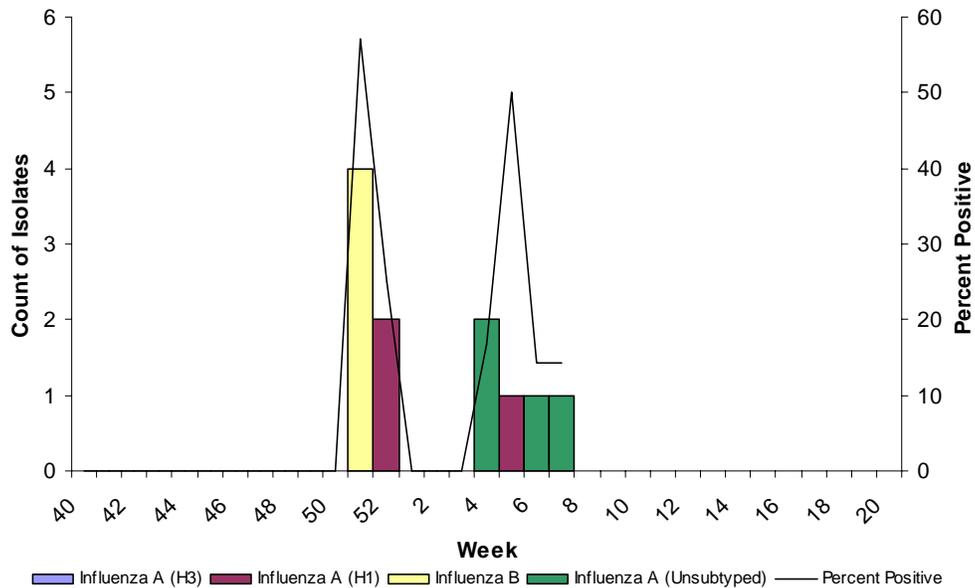
Hospital Admissions due to Respiratory Illness -- Maine, 2005-07



Laboratory Reporting

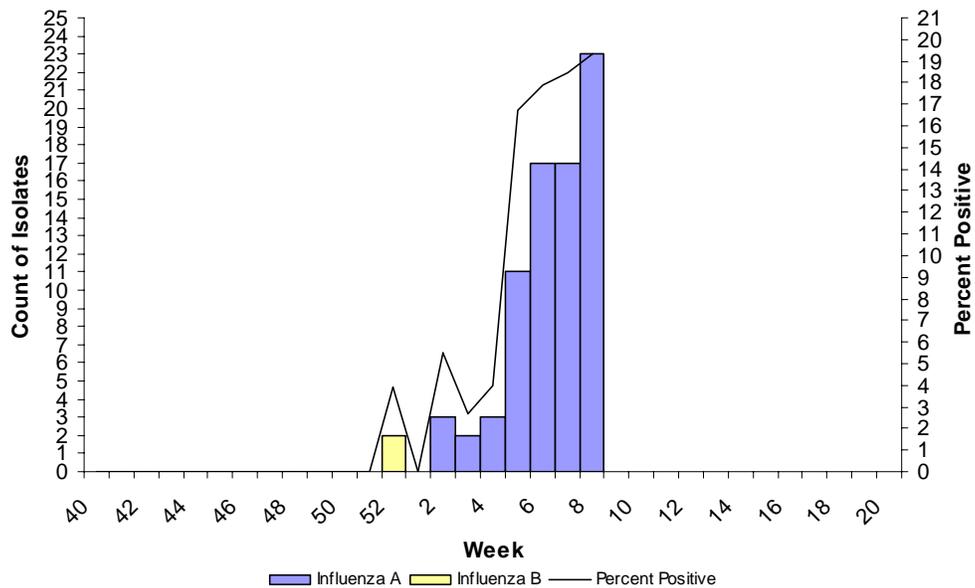
During the week ending February 24, 2007, eight respiratory specimens were submitted to the Maine Health and Environmental Testing Laboratory (HETL) for influenza culture; results are pending on these specimens. Four additional respiratory specimens were submitted to HETL for influenza PCR during the week of February 24, 2007; three specimen tested negative for influenza and a result is pending on one specimen. As of February 24, 2007, a total of 137 respiratory specimens have been submitted for culture and/or PCR to HETL since October when the influenza surveillance season began. Of these specimens, eleven (8.0%) were culture or PCR-positive for influenza (three for influenza A [H1], four for influenza A [unsubtyped], and four for influenza B), three (2.2%) specimens were presumptive positive for enterovirus, three (2.2%) specimens were not tested, results are pending for twelve 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 February 24, 2007, a total of 119 respiratory specimens were submitted to two private reference laboratories in Maine. Of these, 23 (19.3%) specimens were positive for influenza A. As of February 24, 2007, a total of 907 respiratory specimens have been submitted for viral testing to two reference laboratories in Maine since October when the influenza surveillance season began. Seventy-eight specimens (8.6%) were positive for influenza (76 for influenza A and 2 for influenza B), 150 (16.5%) were positive for RSV, 2 (0.2%) was positive for parainfluenza-3, 11 (1.2%) were positive for adenovirus, 11 (1.2%) 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 February 24, 2007, two outbreaks of influenza were reported, one in a Western region long-term care facility (LTC) and one in a Western region school. To date, four 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
School	Midcoast	2/12/07	25.0	20.0	0	0	^	^	^
LTC	Western	2/21/07	4.8	^	0	0	^	^	Influenza
School	Western	2/22/07	20.0	^	0	0	^	^	Influenza

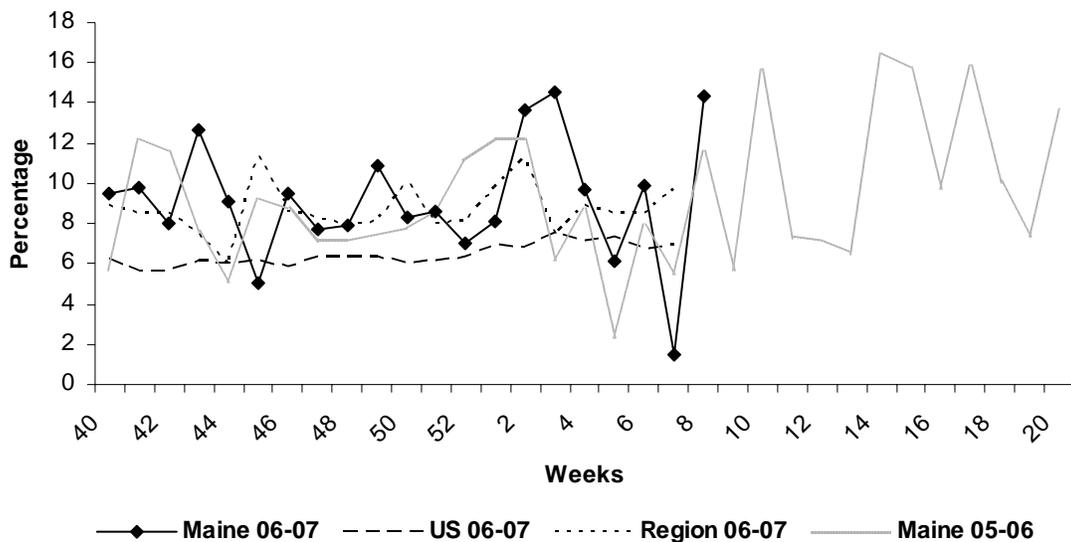
* Outbreak definition is specific to facility type. An outbreak in long-term care facilities (LTC) is defined as ≥ 3 patients with ILI identified on same floor or ward during a short (e.g., 48-72 hour) period OR ≥ 1 patients with lab-confirmed influenza; an outbreak in an acute care facility is defined 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 February 24, 2007, 14.3% of deaths reported by two city vital records offices were attributable to pneumonia and influenza (range 5.9% - 18.8%).

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.

