

Infectious Disease Epidemiology Report



Haemophilus influenzae, Maine 2010

Background

The Infectious Disease Epidemiology Program of the Maine Center for Disease Control and Prevention (Maine CDC) monitors the incidence of invasive *Haemophilus influenzae* (*H. influenzae*) through mandatory reporting by healthcare providers, clinical laboratories and other public health partners. This report summarizes surveillance data on cases of invasive *H. influenzae* from 2010.

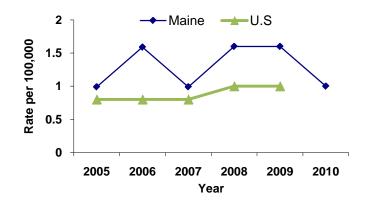
Methods

Cases of invasive *H. influenzae* were defined as persons with isolation of *H. influenzae* from a normally sterile site (e.g., blood or cerebrospinal fluid [CSF] or, less commonly, joint, pleural, or pericardial fluid). Standardized case report forms were completed for each case in 2010. Serotyping was performed on *H. influenzae* isolates at the Maine's Health and Environmental Testing Laboratory (HETL). Rates were calculated using 2010 U.S. census population.

Results

A total of 13 cases of invasive *H. influenzae* were reported in 2010. Two cases were serotype b (Table 1). The 2010 rate of *H. influenzae* in Maine was 1.0 cases per 100,000 population (Figure 1). All cases of non- serotype b were in adults over 45 years.

Figure 1: Rate of *H. influenzae* by year - Maine 2005-10



Of the 13 invasive *H. influenzae* cases reported in 2010, 7 (53.8%) cases were diagnosed with bacteremia; 5 (38.5%) with pneumonia, and 1 unknown diagnosis. Four deaths were associated with invasive *H. influenzae* disease in 2010.

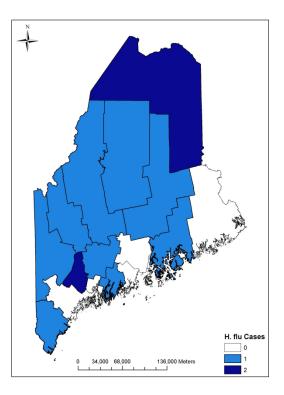
No cases of invasive *H. influenzae* type b (Hib) disease were reported in children under 5 in 2010.

Table 1: Invasive H. influenzae by age andserotype – Maine, 2010

	Serotype							
Age	В		Non-B		Non-		Unknown*	
					Ту	pe		
Years	No.	%	No.	%	No.	%	No.	%
<5	0	0	0	0	0	0	0	0
5-17	0	0	0	0	0	0	0	0
18-34	0	0	0	0	1	20	0	0
35-44	1	50	0	0	0	0	0	0
45-64	0	0	1	20	0	0	0	0
<u>></u> 65	1	50	4	80	4	80	1	100
Total	2	100	5	100	5	100	1	100

*Unknown due to sample not being sent to HETL for testing.

Invasive *H. influenzae* disease was identified among residents in 11 of 16 Maine counties (Figure 2). Figure 2: *Haemophilus influenzae* Cases- Maine 2010



Discussion

In 2010, there were no Hib cases identified in infants or young children in Maine. Unvaccinated household and day care contacts of a known Hib case are at higher risk for the disease because the bacteria is spread from person to person by airborne droplets through coughing or sneezing.

Prophylaxis with antibiotics is recommended for all household members and close contacts of someone diagnosed with Hib disease only if there is at least one unvaccinated child under 4 years of age or a child or adult with a weak immune system lives in the home.

A vaccine against Hib is available in the United States and recommended for the following individuals:

- All infants beginning at 2 months of age.
- Persons older than 59 months of age who have high-risk conditions including sickle cell disease, HIV/AIDS, asplenia, bone marrow transplant or are profoundly immunocompromised.

Hib is not recommended for healthy persons older than 59 months of age.

Maintaining high vaccination rates, particularly among children in child-care settings, is important to prevent Hib. There are no vaccines for use against non-serotype b disease.

H. influenza disease should be reported to Maine CDC by calling 1-800-821-5821 or faxing to 1-800-293-7534. For more information contact your healthcare provider or local health center.

Additional information about H. influenzae can be found at:

- Maine CDC <u>http://www.maine.gov/dhhs/boh/ddc/epi/airb</u> <u>orne/haemophilus.shtml</u>
- Federal CDC <u>http://www.cdc.gov/vaccines/vpd-vac/hib/default.htm</u>