Maine Weekly Influenza Surveillance Report

October 18, 2006

Synopsis
During the weeks ending October 7, 2006 (week 40) and October 14, 2006 (week 41)*, no influenza activity was reported in Maine.

Moderate Disease Surveillance

Outpatient influenza-like illness (ILI)
During week 40, 0.1% of sentinel provider outpatient visits were due to ILI (range 0% - 3.8%). During week 41, 0.4% of sentinel provider outpatient visits were due to ILI (range 0% - 11.1%).

Severe Disease Surveillance

Hospital inpatients
During week 40, four hospitals reported 3.7% of admissions were due to respiratory illness (Range 0% - 7.8%). During week 41, two hospitals reported 3.9% of admissions were due to respiratory illness (Range 1.1% - 6.6%).
Laboratory Reporting
As of week 41, a total of 4 respiratory specimens have been submitted for viral testing to the Maine Health and Environmental Testing Laboratory. Two specimens were negative for influenza and other respiratory illnesses; results are pending for two specimens.

A total of 29 specimens have been submitted for viral testing to two reference laboratories in Maine during weeks 40 and 41; all were negative for influenza.

Fatalities Surveillance
Death Certificates
During week 40, 9.5% of deaths reported by three city vital records offices were attributable to pneumonia and influenza (Range 4.0% - 14.3%). During week 41, 9.8% of deaths reported by three city vital records offices were attributable to pneumonia and influenza (Range 3.0% - 33.3%).
Percentage of Deaths Attributable to Pneumonia and Influenza – Maine, New England and the United States, 2004-07

^ 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 October 18, 2006, no influenza-associated pediatric deaths have been reported.

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