Maine Weekly Influenza Surveillance Report

February 14, 2007

Synopsis
During the week ending February 10, 2007 (MMWR week 6)*, regional influenza activity was reported in Maine. An increase in outpatient visits for influenza-like illness and laboratory-confirmed influenza was observed during this week, and one outbreak of influenza was reported in a Western region school.

Moderate Disease Surveillance

Outpatient influenza-like illness (ILI)
During the week ending February 10, 2007, 1.6% of sentinel provider outpatient visits were due to ILI (range 0% - 7.7%).

Severe Disease Surveillance

Hospital inpatients
During the week ending February 3, 2007 (week 5), 4.5% of admissions reported by four hospitals were due to respiratory illness (range 2.3% - 7.2%). During the week ending February 10, 2007 (week 6), 3.5% of admissions reported by two hospitals were due to respiratory illness (range 1.4% - 5.7%).

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

During the week ending February 10, 2007, six respiratory specimens were submitted to the Maine Health and Environmental Testing Laboratory (HETL) for influenza culture; one specimen was negative for influenza and results are pending on the remaining specimens. As of February 10, 2007, a total of 121 respiratory specimens have been submitted for culture and/or PCR to HETL since October when the influenza surveillance season began. Of these specimens, nine (7.4%) were culture or PCR-positive for influenza (three for influenza A [H1], two for influenza A [unsubtyped], and four for influenza B), three (2.5%) specimens were presumptive positive for enterovirus, three (2.5%) specimens were not tested, results are pending for nine 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 10, 2007, a total of 95 respiratory specimens were submitted to two private reference laboratories in Maine. Of these, 17 (17.9%) specimens were positive for influenza A. As of February 10, 2007, a total of 696 respiratory specimens have been submitted for viral testing to two reference laboratories in Maine since October when the influenza surveillance season began. Thirty-eight specimens (5.5%) were positive for influenza (36 for influenza A and 2 for influenza B), 101 (14.5%) were positive for RSV, 1 (0.1%) was positive for parainfluenza-3, 10 (1.4%) were positive for adenovirus, 11 (1.6%) specimens were positive for enterovirus, and the remaining specimens were negative.

**Outbreaks**

As of February 10, 2007, one outbreak of laboratory-confirmed as influenza was reported in a Western region school.

<table>
<thead>
<tr>
<th>Facility Type*</th>
<th>Region</th>
<th>Date Reported</th>
<th>Attack Rate</th>
<th>Hospitalizations</th>
<th>Deaths</th>
<th>Vaccination rate</th>
<th>Lab-confirmed</th>
</tr>
</thead>
<tbody>
<tr>
<td>School</td>
<td>Western</td>
<td>2/5/07</td>
<td>8.9%</td>
<td>0</td>
<td>0</td>
<td>^</td>
<td>Influenza</td>
</tr>
</tbody>
</table>

* Outbreak definition is specific to facility type. An outbreak in long-term care facilities (LTC) is defined as >3 patients with IILI 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 IILI or lab-confirmed influenza with symptom onset ≥48 hours post-admission (i.e., nosocomial); and an outbreak in a school is defined as ≥15% absentee rate among student population due to IILI or lab-confirmed influenza.

^ Data unavailable
Fatalities Surveillance

Death Certificates
During the week ending February 10, 2007, 9.9% of deaths reported by three city vital records offices were attributable to pneumonia and influenza (range 0% - 22.2%).

![Percentage of Deaths Attributable to Pneumonia and Influenza – Maine, New England and the United States, 2005-07](chart.png)

^ 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 February 10, 2007, no influenza-associated pediatric deaths have been reported in Maine this season.

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](http://www.cdc.gov/flu/weekly/usmap.htm)). Maine reported local influenza activity for the week ending February 3, 2007.
Weekly Influenza Activity Estimates Reported by State & Territorial Epidemiologists

Week ending February 3, 2007 - Week 5

Legend:
- No Report
- No Activity
- Sporadic
- Local Activity
- Regional
- Widespread