Maine Weekly Influenza Surveillance Report

February 21, 2007

Synopsis
During the week ending February 17, 2007 (MMWR week 7)*, regional influenza activity was reported in Maine. Reports of laboratory-confirmed influenza from multiple regions of the state were received this week.

Moderate Disease Surveillance

Outpatient influenza-like illness (ILI)
During the week ending February 17, 2007, 0.9% of sentinel provider outpatient visits were due to ILI (range 0% - 1.9%).

Severe Disease Surveillance

Hospital inpatients
During the week ending February 10, 2007 (week 6), 3.8% of admissions reported by three hospitals were due to respiratory illness (range 1.4% - 5.7%). During the week ending February 17, 2007 (week 7), 5.0% of admissions reported by one hospital were due to respiratory illness.

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

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

During the week ending February 17, 2007, three respiratory specimens were submitted to the Maine Health and Environmental Testing Laboratory (HETL) for influenza culture; one specimen was positive for influenza A and results are pending on the remaining two specimens. One additional respiratory specimen was submitted to HETL for influenza PCR during the week of February 17, 2007; this specimen tested negative for influenza. As of February 17, 2007, a total of 122 respiratory specimens have been submitted for culture and/or PCR to HETL since October when the influenza surveillance season began. Of these specimens, ten (8.2%) were culture or PCR-positive for influenza (three for influenza A [H1], three 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 three specimens, and the remaining specimens were negative.
During the week ending February 17, 2007, a total of 92 respiratory specimens were submitted to two private reference laboratories in Maine. Of these, 17 (18.5%) specimens were positive for influenza A. As of February 17, 2007, a total of 788 respiratory specimens have been submitted for viral testing to two reference laboratories in Maine since October when the influenza surveillance season began. Fifty-five specimens (7.0%) were positive for influenza (53 for influenza A and 2 for influenza B), 122 (15.5%) were positive for RSV, 1 (0.1%) was positive for parainfluenza-3, 10 (1.3%) were positive for adenovirus, 11 (1.4%) specimens were positive for enterovirus, and the remaining specimens were negative.
Outbreaks

During the week ending February 17, 2007, no outbreaks influenza were reported. To date, one outbreak on laboratory-confirmed influenza has been reported in Maine this season.

<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>0</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 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 ≥15% absentee rate among student population due to ILI or lab-confirmed influenza. ^ Data unavailable

Fatalities Surveillance

Death Certificates

During the week ending February 17, 2007, 2.6% of deaths reported by two city vital records offices were attributable to pneumonia and influenza (range 0% - 5.6%).

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.

Pediatric Fatalities

As of February 17, 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). Maine reported local influenza activity for the week ending February 10, 2007.