

# Maine Weekly Influenza Surveillance Report

## 2024-2025 Influenza Season

December 3, 2024

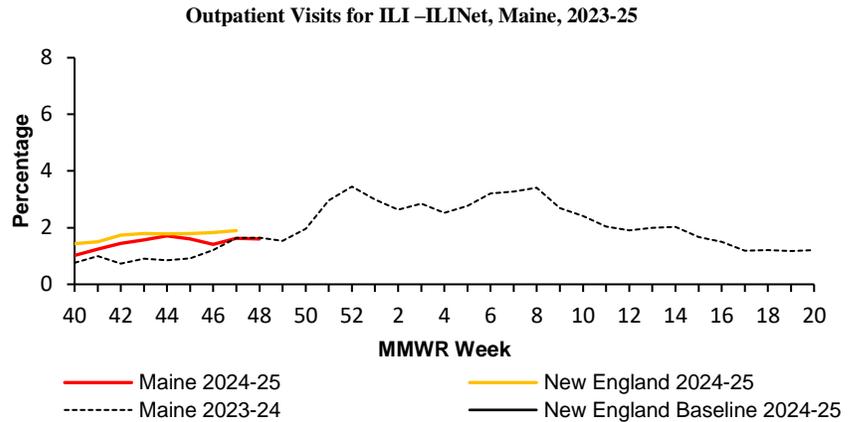
Data for MMWR week 48 (ending 11/30/2024)



### U.S. Outpatient Influenza-like Illness Surveillance Network (ILINet)

Percent of Outpatient Health Care Visits Due to ILI
<b>1.60</b>

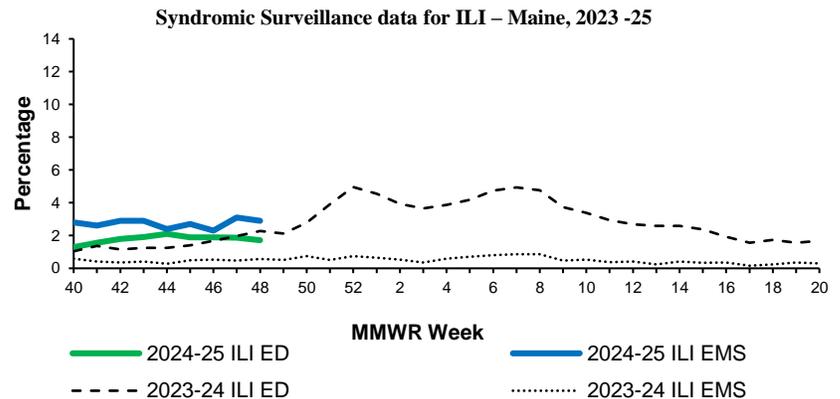
Number of ILINet Reporting Providers
<b>45</b>



### Syndromic Surveillance

Percent of Emergency Room Visits Due to ILI
<b>1.72</b>

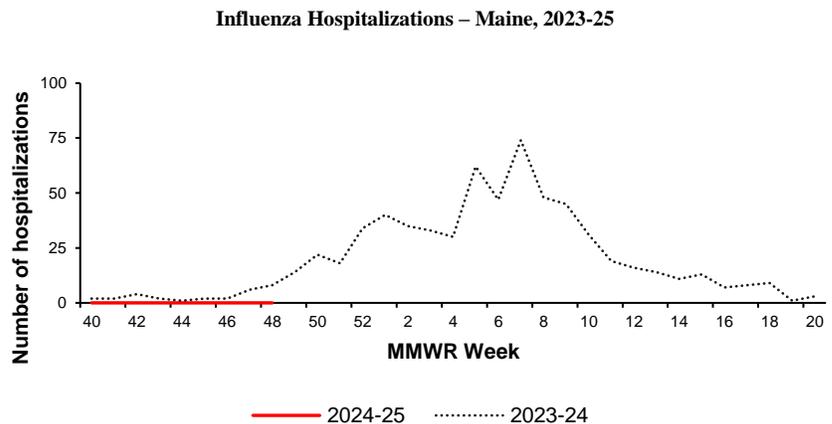
Percent of Emergency Medical Services (EMS) calls for ILI
<b>0.33</b>



### Hospitalizations

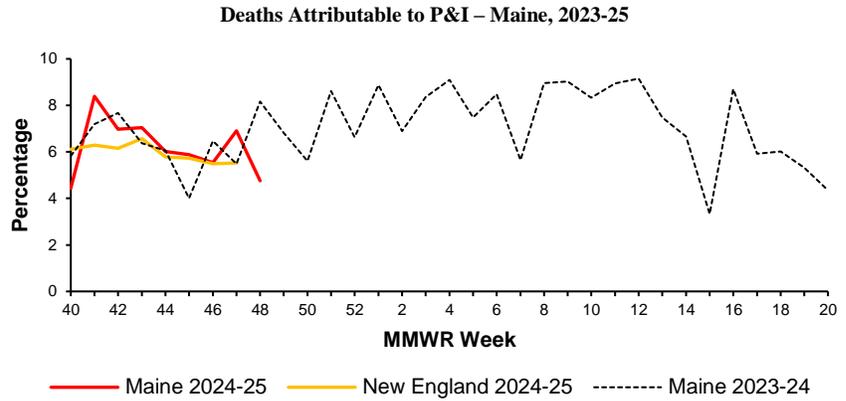
Influenza-Associated Hospitalizations This Week
<b>0</b>

Total Influenza-Associated Hospitalizations This Season
<b>0</b>



## Pneumonia and Influenza (P&I) Deaths

Percent of Deaths Due to P&I	<b>4.76%</b>
Influenza-Associated Deaths This Week*	<b>0</b>
Total Influenza-Associated Deaths This Season*	<b>0</b>
Pediatric Influenza-Associated Deaths This Season	<b>0</b>

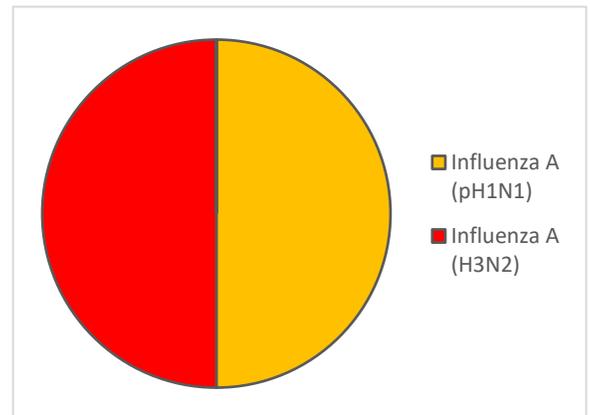
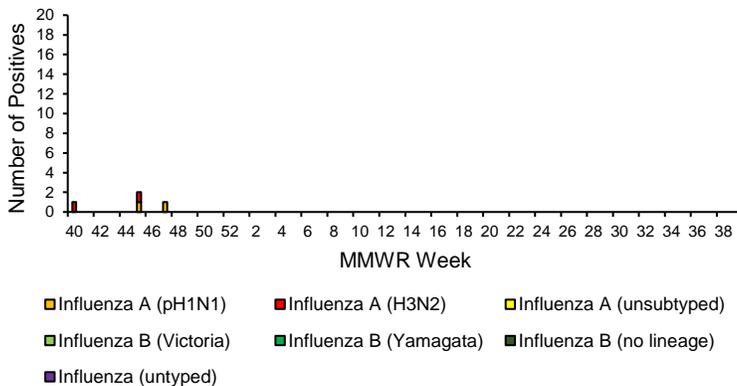


\*This number represents the number of individuals who had influenza specifically listed on their death certificate. This is likely an underrepresentation of the true burden, as many influenza-associated deaths are due to secondary infections. This is why Maine CDC reports Pneumonia and Influenza (P&I) deaths.

## Virologic Surveillance

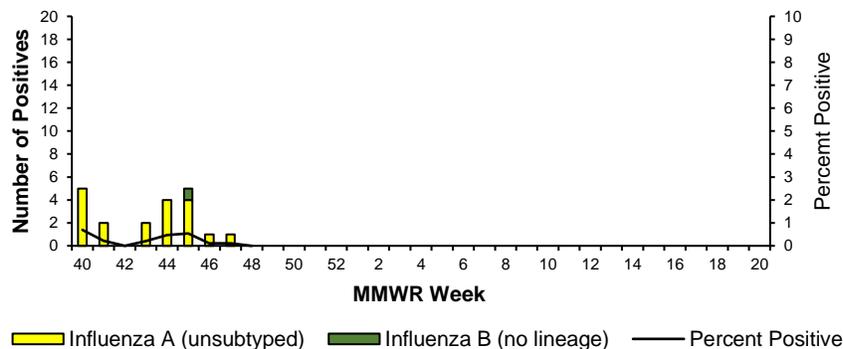
Health and Environmental Testing Laboratory	Week 48	2024-25 Season
<b>No. of specimens tested</b>	0	10
<b>No. of positive specimens</b>	0	4 (40%)
<i>Positive specimens by type</i>		
<b>Influenza A</b>		
(H1N1)pdm09	0	2 (50%)
H3N2	0	2 (50%)
<b>Influenza B</b>	-	-
Yamagata lineage	-	-
Victoria lineage	-	-

## Influenza Positive PCR Tests, HETL – Maine, 2024-25



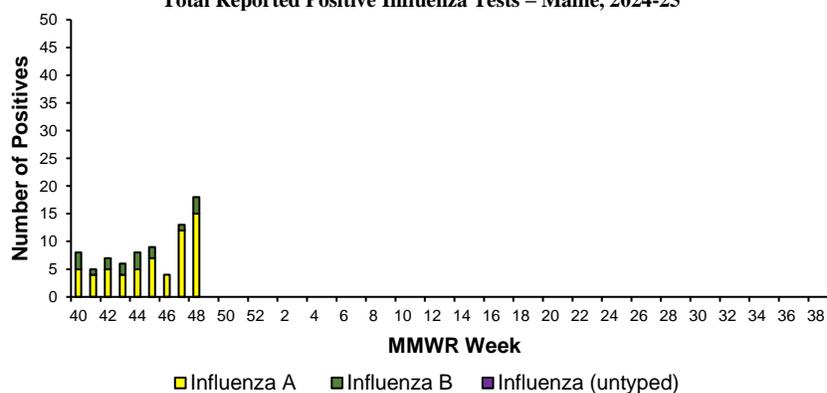
Maine Reference Laboratories	Week 48	2024-25 Season
No. of specimens tested	869	7,977
No. of positive specimens (%)	0	20 (0.27%)
<i>Positive specimens by type</i>		
Influenza A	0	19
Influenza B	0	1

Influenza Positive Tests, Maine Reference Labs – Maine, 2024-25



All Reported Laboratory Results	Week 48	2024-25 Season
No. of specimens positive by antigen test	5	31
No. of specimens positive by molecular test	13	47
<i>Positive specimens by type</i>		
Influenza A	15 (83%)	61 (78%)
Influenza B	3 (17%)	10 (22%)

Total Reported Positive Influenza Tests – Maine, 2024-25



## Antigenic Characterization (Vaccine Strain Match)

US CDC characterizes antigenicity by how well antibodies made against the vaccine strains recognize circulating virus that have been grown in cell culture. Of the characterized viruses, the vaccine strain antibodies recognized:

- 96.3% of influenza A/H1N1 viruses were well-recognized by ferret antisera raised against the cell-grown A/Wisconsin/67/2022-like reference virus for the season
- 74.9% of influenza A/H3N2 ) viruses were well-recognized by ferret antisera raised against the cell-grown A/Massachusetts/18/2022-like reference virus for the season.
- 100% of influenza B/Victoria lineage viruses were well-recognized by ferret antisera raised against the cell-grown B/Austria/1359417/2021-like reference virus.
- No influenza B/Yamagata samples were available for characterization

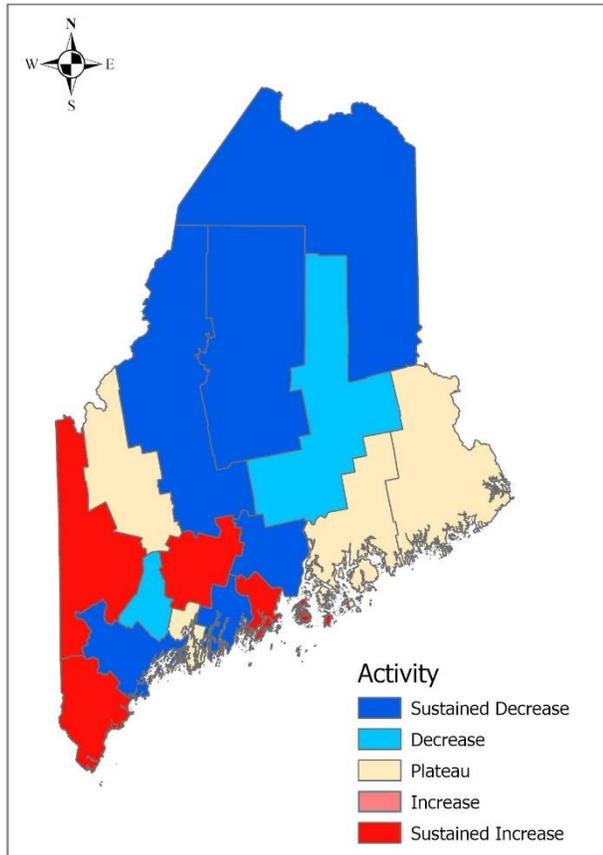
### Weekly County-level Influenza, Maine, Week 48

County	Positive labs	Hospitalizations	Activity Trend	Severity Estimate <sup>§</sup>
Androscoggin	4	0	Decrease	low
Aroostook	3	0	Sustained Decrease	low
Cumberland	13	0	Sustained Decrease	low
Franklin	1	0	Plateau	low
Hancock	5	0	Plateau	low
Kennebec	5	0	Sustained Increase	low
Knox	1	0	Sustained Increase	low
Lincoln	2	0	Sustained Decrease	low
Oxford	6	0	Sustained Increase	low
Penobscot	8	0	Decrease	low
Piscataquis	0	0	Sustained Decrease	low
Sagadahoc	2	0	Plateau	low
Somerset	1	0	Sustained Decrease	low
Waldo	1	0	Sustained Decrease	low
Washington	0	0	Plateau	low
York	26	0	Sustained Increase	low
<b>Total</b>	<b>78</b>	<b>0</b>	-	-

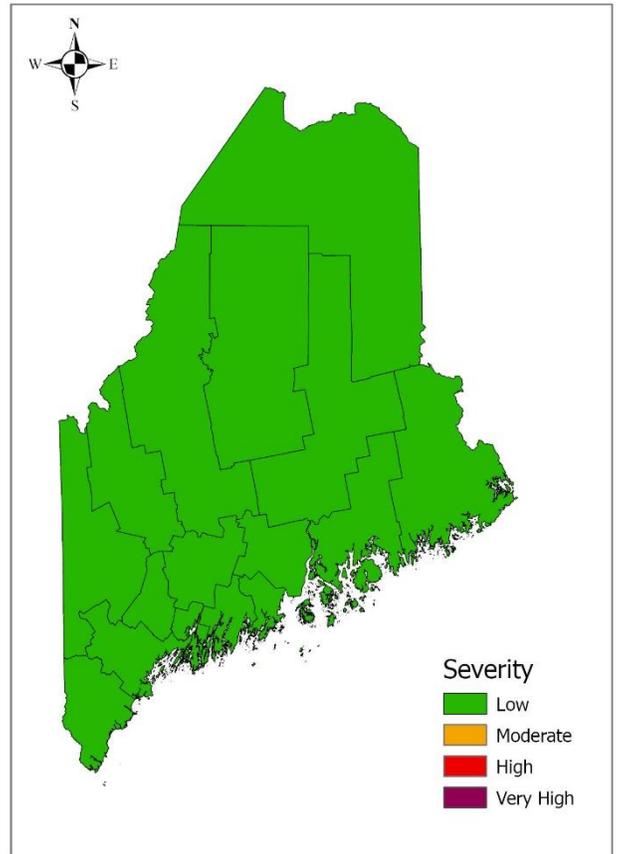
\*Activity trends are determined by county-level emergency department visits due to ILI. Activity trend levels include “sustained increase”, “increase”, “plateau”, “decrease”, and “sustained decrease.” This will become available when enough weeks of data have been collected.

<sup>§</sup>Severity is estimated using county-level P&I deaths, syndromic surveillance, and hospitalizations. Thresholds are calculated statewide from previous seasons’ data using the moving epidemic method, as described at <https://www.cdc.gov/flu/about/classifies-flu-severity.htm>

### Influenza Activity Trends, Maine, Week 48



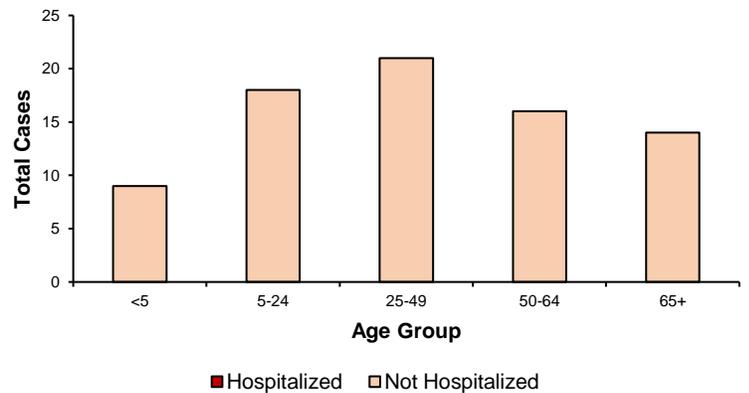
### Influenza Severity Estimates, Maine Week 48



### Age Information – Maine, 2024-25 Influenza Season

	Age (years)		
	Min.	Mean	Max
<b>Cases</b>	< 1	39	88
<b>Hospitalizations</b>	NA	NA	NA
<b>Deaths</b>	NA	NA	NA

Positive Influenza Tests by Age and Hospitalization Status – Maine, 2024-25



## Influenza-Like Illness Outbreaks – Maine, 2024-25 Influenza Season

**Number of New Outbreak Investigations**  
0

**Total Outbreaks This Season**  
0

### Outbreak Facility Type Key:

LTC - Long Term Care Facility

AC - Acute Care Facility (nosocomial)

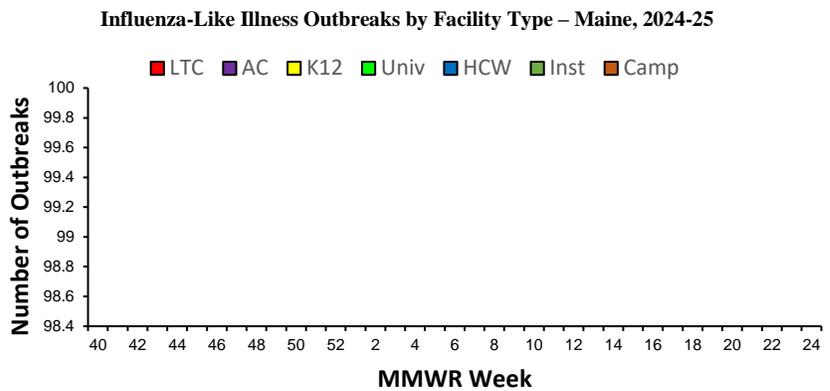
K12 - School (K-12) or daycare

Univ - School (residential) or University

HCW - Health care workers

Inst - Other institutions (workplaces, correctional facilities etc)

Camp - Camp



### Influenza-Like Illness Outbreak by Facility Type and County – Maine, 2024-25

County	LTC	AC	K12	Univ	HCW	Inst	Camp	Total
Androscoggin								
Aroostook								
Cumberland								
Franklin								
Hancock								
Kennebec								
Knox								
Lincoln								
Oxford								
Penobscot								
Piscataquis								
Sagadahoc								
Somerset								
Waldo								
Washington								
York								
<b>Total</b>	-	-	-	-	-	-	-	-

