MINNESOTA DEPARTMENT OF HEALTH

Weekly Influenza & Respiratory Illness Activity Report

A summary of influenza surveillance indicators prepared by the Division of Infectious Disease Epidemiology Prevention & Control

Current: Week Ending January 10, 2015 | WEEK 1

All data are preliminary and may change as more reports are received



Summary

During the week ending January 10, 2015 (Week 1), surveillance indicators showed WIDESPREAD geographic spread of influenza. Since the start of the influenza season, 4 pediatric (less than 18 years of age) influenza-related deaths have been identified.

Minnesota Influenza Geographic Spread*	
No Activity	
Sporadic	
Local	
Regional	
Widespread	

^{*}Based on CDC's Activity Estimates Definitions: www.cdc.gov/flu/weekly/overview.htm

Minnesota Influenza Surveillance Website: www.health.state.mn.us/divs/idepc/diseases/flu/stats/

Weekly U.S. Influenza Surveillance Report: www.cdc.gov/flu/weekly/

World Health Organization (WHO) Surveillance: www.who.int/influenza/surveillance monitoring/updates/en/

Google Flu Trends: www.google.org/flutrends/us/

Neighboring states' influenza information:

Iowa ww.idph.state.ia.us/IdphArchive/Archive.aspx?channel=FluReports

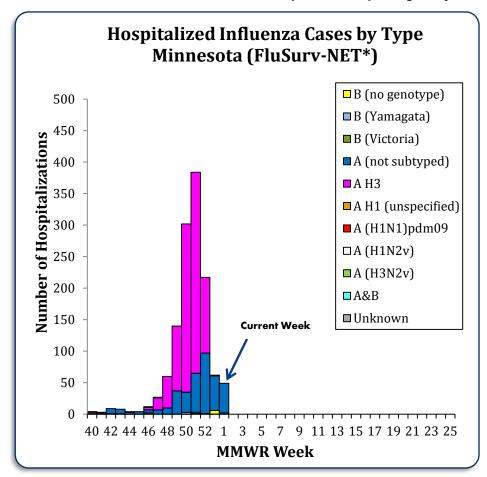
Wisconsin www.dhs.wisconsin.gov/communicable/influenza/Reports/Surveillance.htm

North Dakota <u>www.ndflu.com/default.aspx</u>

South Dakota http://doh.sd.gov/diseases/infectious/flu/

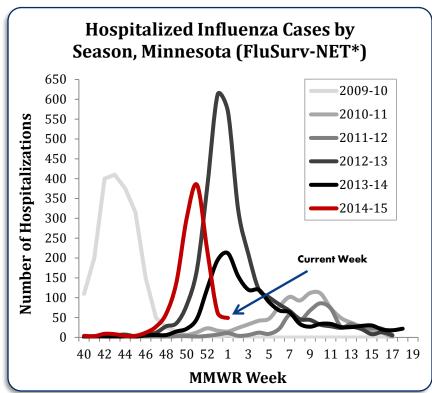
Hospitalized Influenza Surveillance

Hospitalized influenza cases are based on disease reports of laboratory-positive influenza (via DFA, IFA, viral culture, EIA, rapid test, paired serological tests or RT-PCR) and specimens from hospitalized patients with acute respiratory illness submitted to MDH-PHL by hospitals and laboratories. **Due to the need to confirm reports and reporting delays, consider current week data preliminary.**



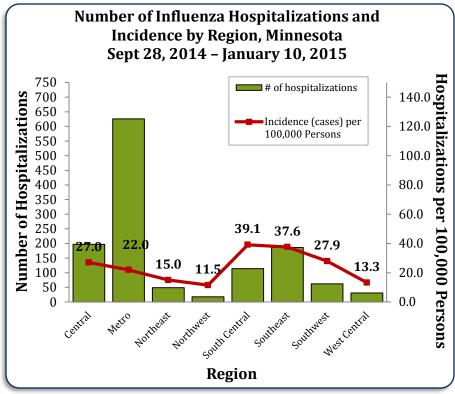
Hospitalizations this week	Hospitalizations last week	Total (to date)
49	62	1,285

^{*}Influenza Surveillance Network

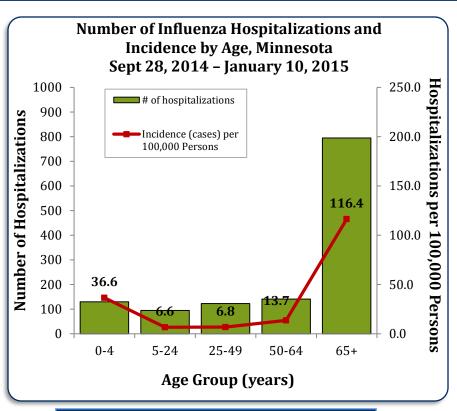


Season	Hospitalizations current week (historic)	Total
2009-2010	5	2,060
2010-2011	15	965
2011-2012	11	556
2012-2013	569	3,068
2013-2014	212	1,540
2014-2015	49	1,285 (to date)

Hospitalized Influenza Surveillance - continued



Region	Hospitalizations this week	Total (to date)
Central	14 (29%)	197 (15%)
Metro	127(55%)	626 (49%)
Northeast	0 (0%)	49 (4%)
Northwest	1 (2%)	18 (1%)
South Central	3 (6%)	114 (9%)
Southeast	0 (0%)	186 (15%)
Southwest	4 (8%)	62 (5%)
West Central	0 (0%)	31 (2%)

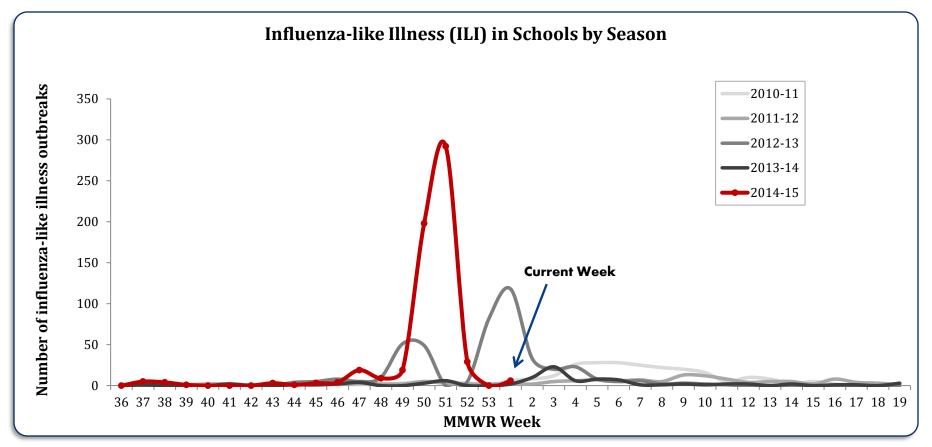


Median age (years) at time of admission
73.9

Respiratory Disease Outbreak Surveillance

School Outbreaks

K-12 schools report an outbreak of influenza-like illness (ILI) when the number of students absent with ILI reaches 5% of total enrollment or three or more students with ILI are absent from the same elementary classroom

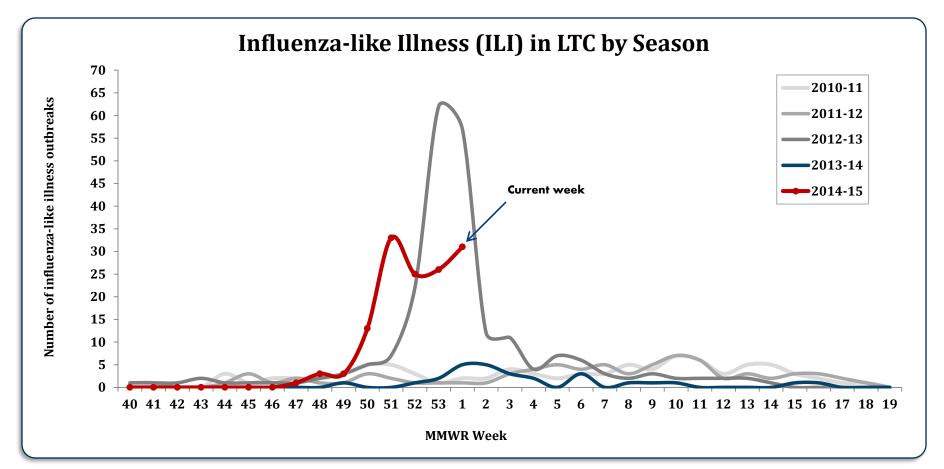


New school outbreaks this week	New school outbreaks last week	Total this season (to date)
6	0	593

Respiratory Disease Outbreak Surveillance

Long-Term Care (LTC) Outbreaks

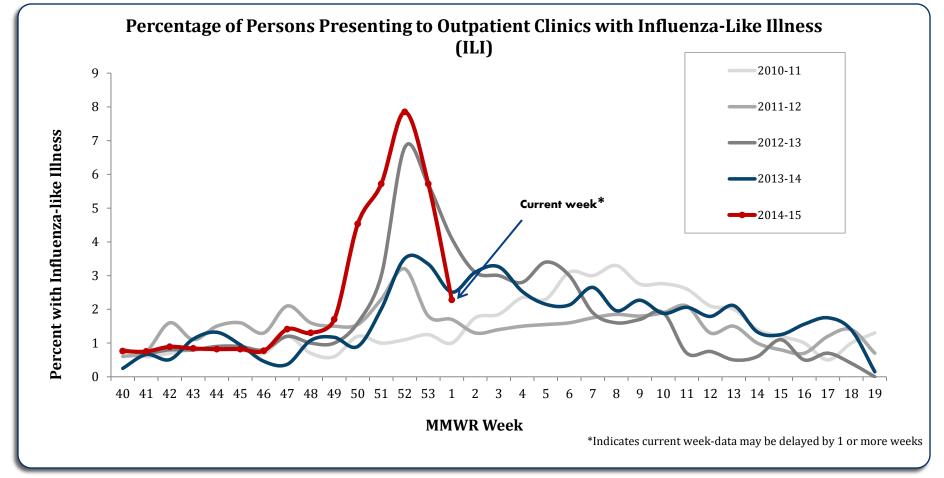
LTC facilities report to MDH when they suspect an outbreak of influenza in their facility. Laboratory confirmed outbreaks are reported here



New LTC outbreaks	New LTC outbreaks	Total this season
this week	last week	(to date)
31	26	135

Sentinel Provider Surveillance (Outpatients)

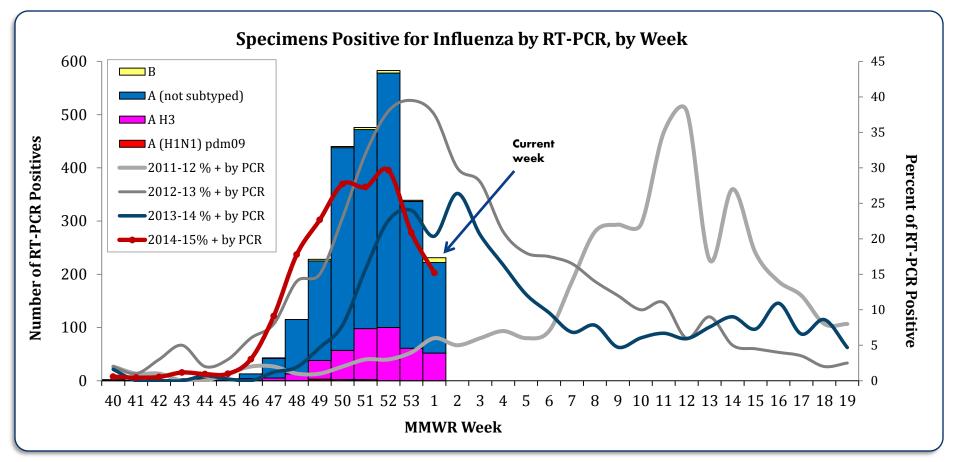
MDH collaborates with healthcare providers who report the total number of patients seen and the total number of those patients presenting to outpatient clinics with influenza-like illness.



% of outpatients with	% of outpatients with
ILI this week	ILI last week
2.28%	5.72%

Laboratory Surveillance

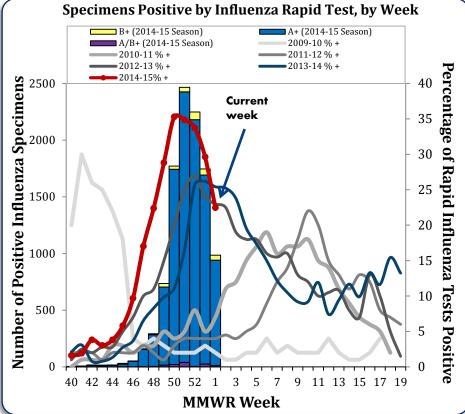
The MN Lab System (MLS) Laboratory Influenza Surveillance Program is made up of more than 310 clinic- and hospital-based laboratories, voluntarily submitting testing data weekly. These laboratories perform rapid testing for influenza and Respiratory Syncytial Virus (RSV). Significantly fewer labs perform PCR testing for influenza and three also perform PCR testing for other respiratory viruses. MDH-PHL provides further characterization of submitted influenza isolates to determine the hemagglutinin serotype to indicate vaccine coverage. Tracking the laboratory results assists healthcare providers with patient diagnosis of influenza-like illness and provides an indicator of the progression of the influenza season as well as prevalence of disease in the community.



% RT-PCR positive this week	% RT-PCR positive last week
15.20%	20.86%

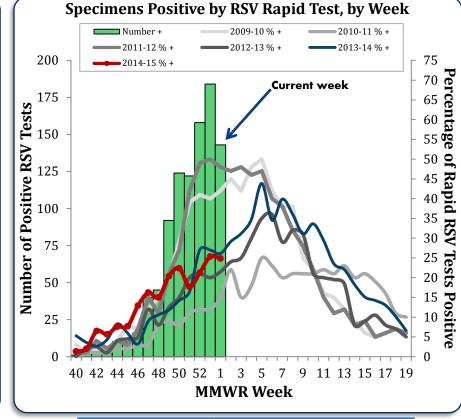
Laboratory Surveillance – Rapid Test

MLS Laboratories – Influenza Testing



Region	% rapid influenza tests + (current week)
Northeast	26%
South Central	29%
Southwest	20%
Southeast	20%
Metro	20%
Central	23%
West Central	25%
Northwest	26%
State (overall)	22%

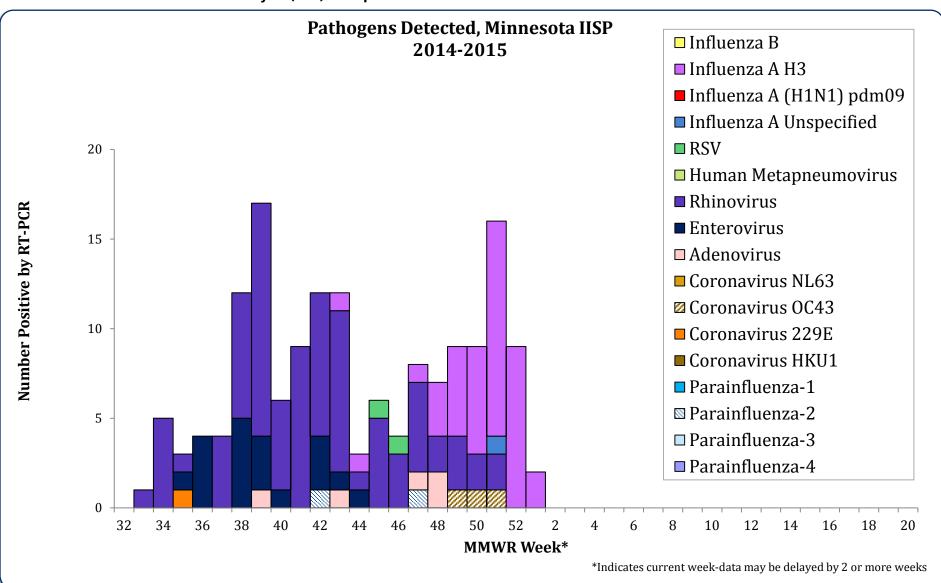
MLS Laboratories – RSV Testing



Region	% rapid RSV tests + (current week)
Northeast	10%
South Central	16%
Southwest	13%
Southeast	19%
Metro	29%
Central	33%
West Central	10%
Northwest	0%
State (overall)	25%

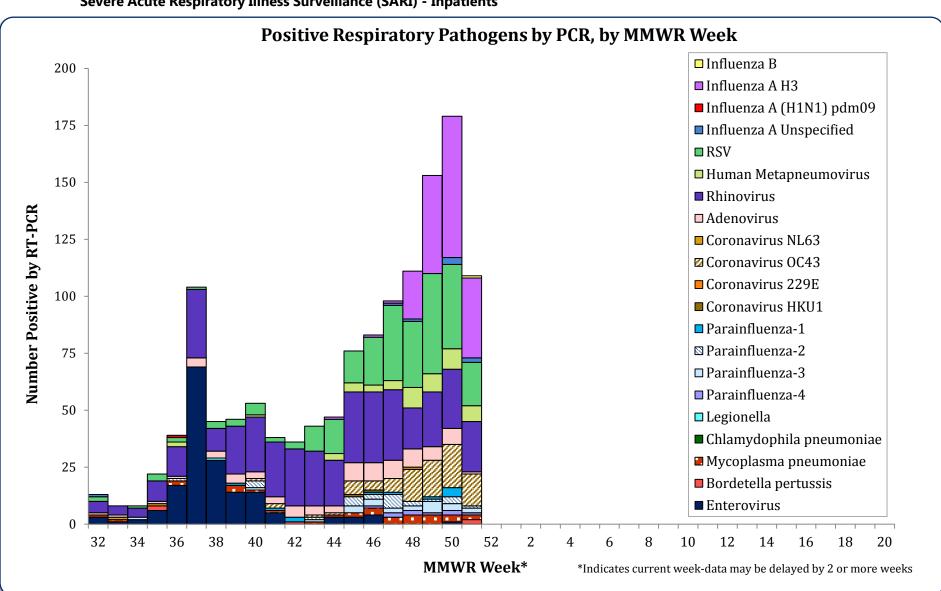
Laboratory Surveillance – PCR

MN Influenza Incidence Project (IISP) - Outpatients



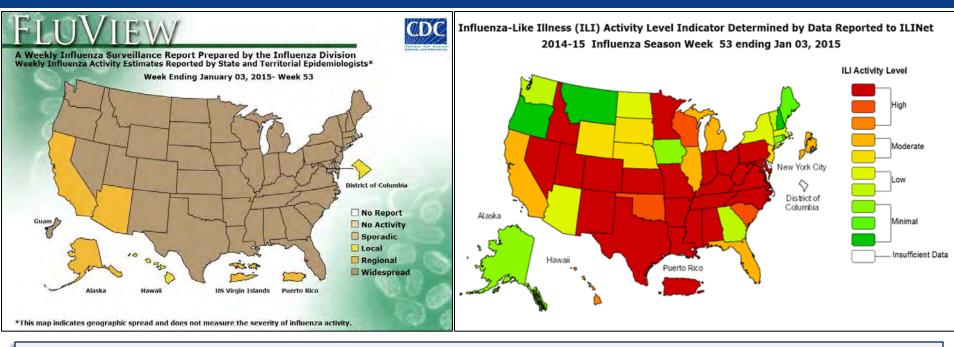
Laboratory Surveillance – PCR

Severe Acute Respiratory Illness Surveillance (SARI) - Inpatients



Weekly U.S. Influenza Surveillance Report

Current: Week Ending January 3, 2015 | WEEK 53



National Influenza Surveillance (CDC)



During week 53 (December 28, 2014-January 3, 2015), influenza activity continued at elevated levels in the United States.

<u>Viral Surveillance</u>: Of 30,469 specimens tested and reported by U.S. World Health Organization (WHO) and National Respiratory and Enteric Virus Surveillance System (NREVSS) collaborating laboratories during week 53, 7,515 (24.7%) were positive for influenza.

Pneumonia and Influenza Mortality: The proportion of deaths attributed to pneumonia and influenza (P&I) was above the epidemic threshold.

Influenza-associated Pediatric Deaths: Five influenza-associated pediatric deaths were reported.

<u>Influenza-associated Hospitalizations:</u> A cumulative rate for the season of 20.1 laboratory-confirmed influenza-associated hospitalizations per 100,000 population was reported.

Outpatient Illness Surveillance: The proportion of outpatient visits for influenza-like illness (ILI) was 5.6%, above the national baseline of 2.0%. All 10 regions reported ILI at or above region-specific baseline levels. Puerto Rico and 26 states experienced high ILI activity; New York City and eight states experienced moderate ILI activity; seven states experienced low ILI activity; eight states experienced minimal ILI activity; and the District of Columbia and one state had insufficient data.

<u>Geographic Spread of Influenza:</u> The geographic spread of influenza in Guam and 46 states was reported as widespread; Puerto Rico, the U.S. Virgin Islands and three states reported regional activity; and the District of Columbia and one state reported local activity.