# Weekly Influenza & Respiratory Illness Activity Report

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

### Week Ending January 14, 2017 | WEEK 2

All data are preliminary and may change as more information is received

### Minnesota Influenza Geographic Spread



During the week ending January 14, 2017 (Week 2), surveillance indicators showed regional geographic spread of influenza.

Since the start of the influenza season, 0 pediatric influenza-related deaths have been reported.

Based on CDC's Activity Estimates Definitions: http://www.cdc.gov/flu/weekly/overview.htm

Minnesota Influenza Surveillance: <a href="http://www.health.state.mn.us/divs/idepc/diseases/flu/stats/">http://www.health.state.mn.us/divs/idepc/diseases/flu/stats/</a>

Weekly U.S. Influenza Surveillance Report: <a href="http://www.cdc.gov/flu/weekly/">http://www.cdc.gov/flu/weekly/</a>

World Health Organization (WHO) Surveillance: <a href="http://www.who.int/influenza/surveillance">http://www.who.int/influenza/surveillance</a> monitoring/updates/en/

Neighboring states' influenza information:

lowahttp://www.idph.state.ia.us/ldphArchive/Archive.aspx?channel=FluReportsWisconsinhttp://www.dhs.wisconsin.gov/communicable/influenza/surveillance.htm

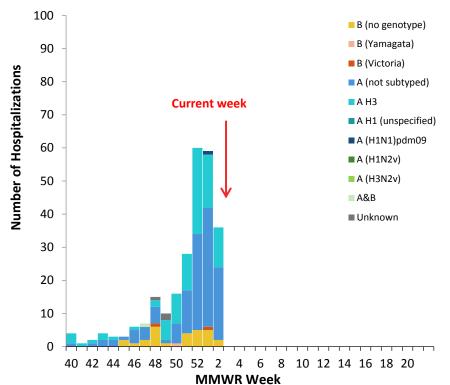
North Dakota <a href="http://www.ndflu.com/default.aspx">http://www.ndflu.com/default.aspx</a>
South Dakota <a href="http://doh.sd.gov/diseases/infectious/flu/">http://doh.sd.gov/diseases/infectious/flu/</a>



## Hospitalized Influenza Surveillance

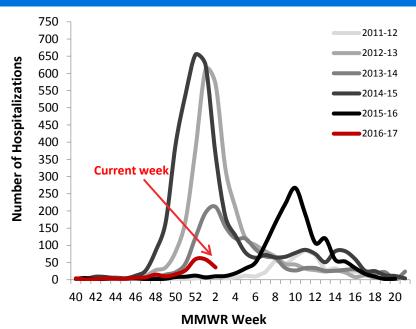
Hospitalized influenza cases are based on disease reports of laboratory-positive influenza (via DFA, IFA, viral culture, EIA, rapid test, paired serological tests or RT-PCR) and specimens from hospitalized patients with acute respiratory illness submitted to MDH-PHL by hospitals and laboratories. **Due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

# Hospitalized Influenza Cases by Type Minnesota (FluSurv-NET\*) B (no gen B (Yamag



| Hospitalizations this week | Hospitalizations last week | Total hospitalizations (to date) |
|----------------------------|----------------------------|----------------------------------|
| 39                         | 59                         | 254                              |

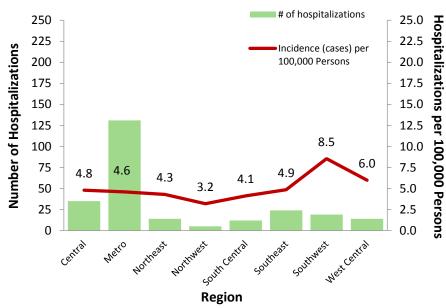
### Hospitalized Influenza Cases by Season, Minnesota (FluSurv-NET\*)



| Season    | Total hospitalizations (historic) |
|-----------|-----------------------------------|
| 2011-2012 | 556                               |
| 2012-2013 | 3,068                             |
| 2013-2014 | 1,540                             |
| 2014-2015 | 4,138                             |
| 2015-2016 | 1,541                             |
| 2016-2017 | 254 (to date)                     |
|           |                                   |

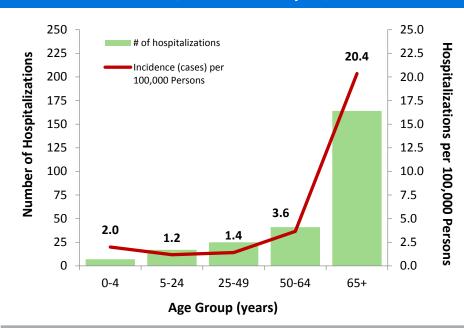
### Hospitalized Influenza Surveillance (continued)

# Number of Influenza Hospitalizations and Incidence by Region, Minnesota October 2, 2016 – January 14, 2017



| Kegion        |                               |                    |  |
|---------------|-------------------------------|--------------------|--|
| Region        | Hospitalizations<br>this week | Total<br>(to date) |  |
| Central       | 6 (17%)                       | 35 (14%)           |  |
| Metro         | 20 (56%)                      | 131 (52%)          |  |
| Northeast     | 0 (0%)                        | 14 (6%)            |  |
| Northwest     | 0 (0%)                        | 5 (2%)             |  |
| South Central | 2 (6%)                        | 12 (5%)            |  |
| Southeast     | 3 (8%)                        | 24 (9%)            |  |
| Southwest     | 5 (14%)                       | 19 (7%)            |  |
| West Central  | 0 (0%)                        | 14 (6%)            |  |
|               |                               |                    |  |

# Number of Influenza Hospitalizations and Incidence by Age, Minnesota October 2, 2016 – January 14, 2017

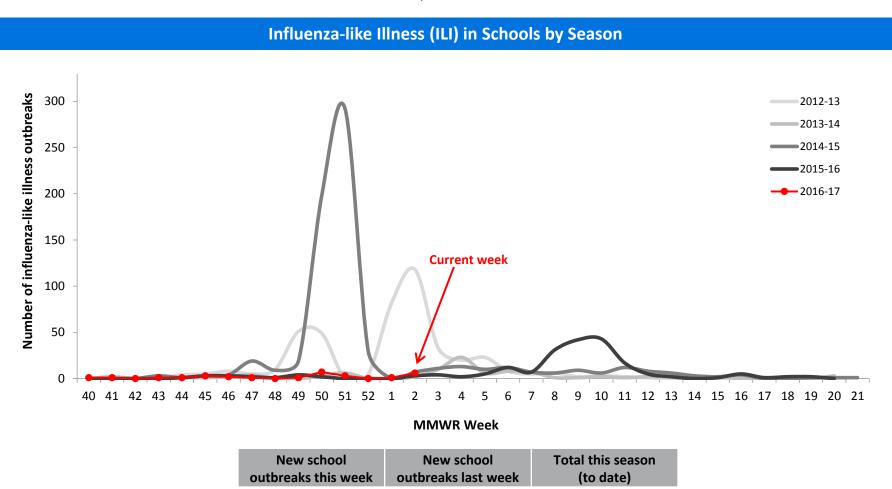


Median age (years)
at time of admission
73.0

## 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.



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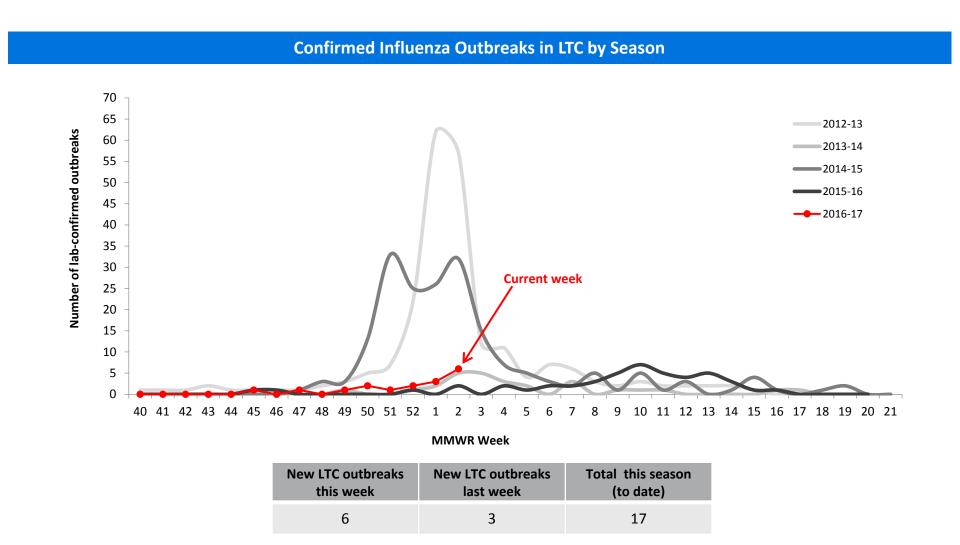
28

6

### Respiratory Disease Outbreak Surveillance (continued)

### Long-Term Care (LTC) Outbreaks

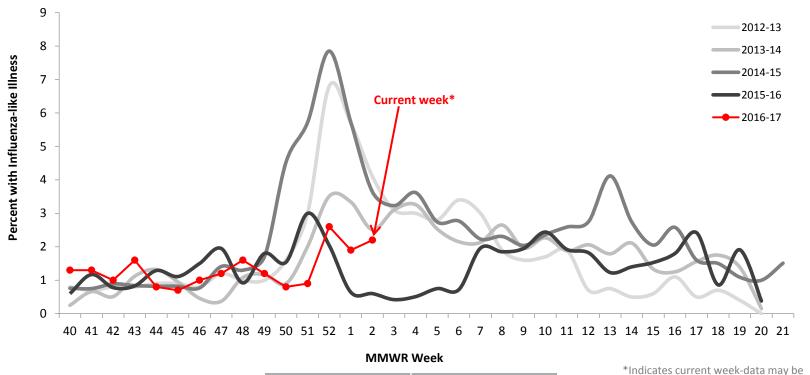
LTC facilities report to MDH when they suspect an outbreak of influenza in their facility. Laboratory-confirmed outbreaks are reported here.



# 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.

### Percentage of Persons Presenting to Outpatient Clinics with Influenza-Like Illness (ILI)



% of outpatients with % of outpatients with

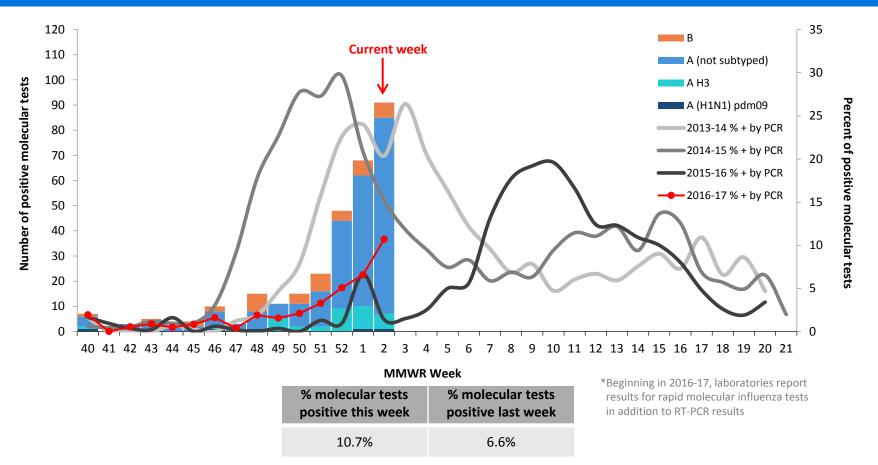
ILI this week ILI last week 2.2% 1.9%

delayed by 1 or more weeks

# 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.

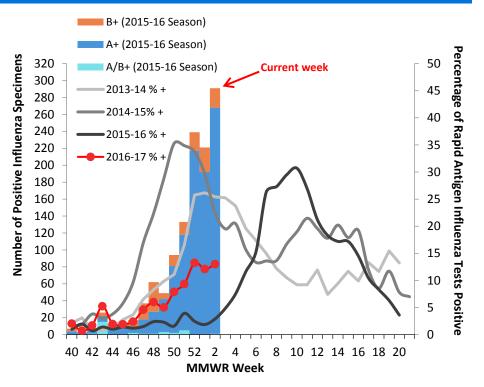
### Specimens Positive for Influenza by Molecular Testing\*, by Week



### Laboratory Surveillance (continued)

MLS Laboratories - Influenza Testing

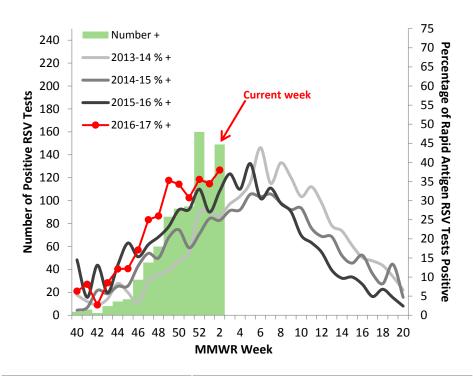
### Specimens Positive by Influenza Rapid Antigen Test, by Week



| Region          | % rapid antigen influenza tests + (current week) |
|-----------------|--|
| Northeast       | 6%   |
| South Central   | 16%  |
| Southwest       | 16%  |
| Southeast       | 13%  |
| Metro           | 15%  |
| Central         | 11%  |
| West Central    | 11%  |
| Northwest       | 8%   |
| State (overall) | 13%  |

#### MLS Laboratories - RSV Testing

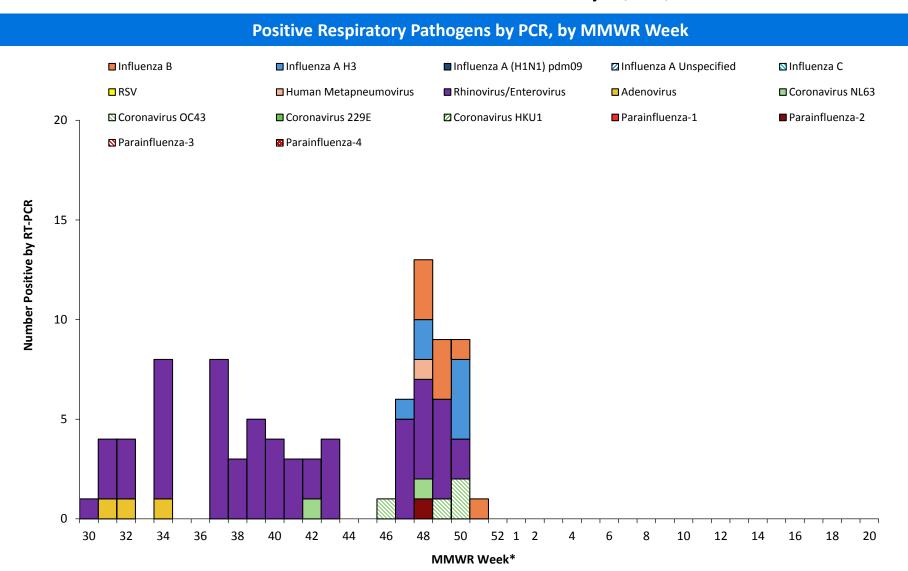
### Specimens Positive by RSV Rapid Antigen Test, by Week



| Region          | % rapid antigen RSV tests + (current week) |
|-----------------|--|
| Northeast       | 13%  |
| South Central   | 54%  |
| Southwest       | 45%  |
| Southeast       | 33%  |
| Metro           | 37%  |
| Central         | 44%  |
| West Central    | 50%  |
| Northwest       | 0%   |
| State (overall) | 38%  |

### Laboratory Surveillance (continued)

#### Minnesota Influenza Incidence Surveillance Project (MIISP)

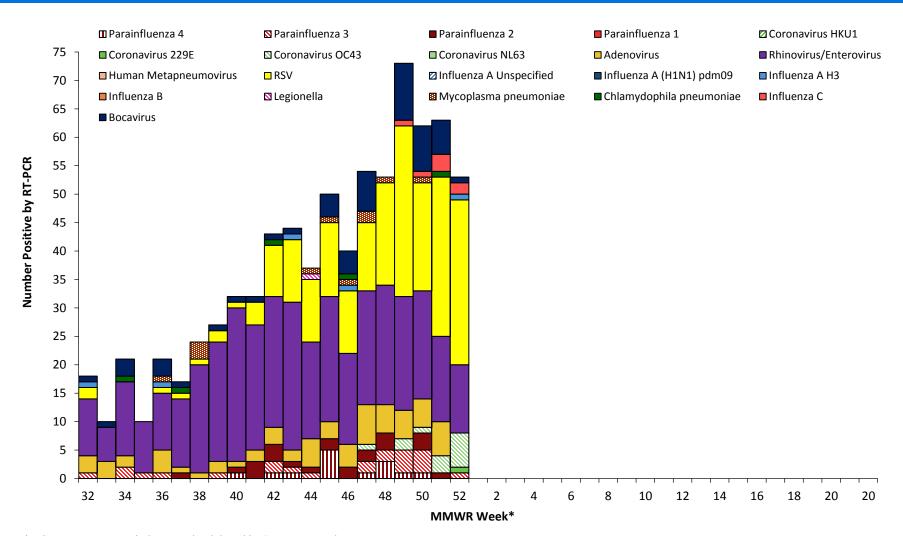


<sup>\*</sup>Indicates current week-data may be delayed by 2 or more weeks

### Laboratory Surveillance (continued)

### **Severe Acute Respiratory Surveillance (SARI) - Inpatients**

### Positive Respiratory Pathogens by PCR, by MMWR Week



<sup>\*</sup>Indicates current week-data may be delayed by 2 or more weeks

### Weekly U.S. Influenza Surveillance Report

2016-2017 Influenza Season Week 1 ending January 7, 2017

### National Influenza Surveillance (CDC): <a href="http://www.cdc.gov/flu/weekly/">http://www.cdc.gov/flu/weekly/</a>

**Viral Surveillance:** The most frequently identified influenza virus subtype reported by public health laboratories during week 1 was influenza A (H3). The percentage of respiratory specimens testing positive for influenza in clinical laboratories increased.

**Pneumonia and Influenza Mortality:** The proportion of deaths attributed to pneumonia and influenza (P&I) was below the system-specific epidemic threshold in the National Center for Health Statistics (NCHS) Mortality Surveillance System.

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

**Influenza-associated Hospitalizations:** A cumulative rate for the season of 7.1 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 3.2%, which is above the national baseline of 2.2%. All 10 regions reported ILI at or above their region-specific baseline levels. New York City, Puerto Rico, and eight states experienced high ILI activity; six states experienced moderate ILI activity; seven states experienced low ILI activity; 28 states experienced minimal ILI activity, and the District of Columbia and one state had insufficient data.

**Geographic Spread of Influenza:** The geographic spread of influenza in Puerto Rico and 21 states was reported as widespread; Guam and 21 states reported regional activity; the District of Columbia and eight states reported local activity; and the U.S. Virgin Islands reported no activity.

