2011-12 North Dakota Weekly Influenza Update

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Week: 18

1395 Total Influenza Cases
67 Hospitalizations
0 Deaths

Current Summary:

Influenza activity in North Dakota is LOCAL.

Outpatient ILI Surveillance is well below baseline at 0.89%

There currently have been no deaths related directly to influenza this year (September 1, 2011 to present).

Respiratory Viruses

<table>
<thead>
<tr>
<th>Virus Type</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>RSV A</td>
<td>5</td>
</tr>
<tr>
<td>RSV B</td>
<td>3</td>
</tr>
<tr>
<td>Rhinovirus</td>
<td>11</td>
</tr>
<tr>
<td>Adenovirus</td>
<td>4</td>
</tr>
<tr>
<td>Parainfluenza Virus</td>
<td>4</td>
</tr>
<tr>
<td>Human Metapneumovirus</td>
<td>5</td>
</tr>
</tbody>
</table>

*Only providers participating in IISP have specimens tested for these viruses.

Influenza Cases by County

Outpatient Illness Surveillance--Influenza-like Illness

<table>
<thead>
<tr>
<th>Week</th>
<th>% ILI</th>
<th>0-4</th>
<th>5-24</th>
<th>25-49</th>
<th>50-64</th>
<th>65+</th>
</tr>
</thead>
<tbody>
<tr>
<td>16</td>
<td>1.04%</td>
<td>13</td>
<td>13</td>
<td>11</td>
<td>3</td>
<td>2</td>
</tr>
<tr>
<td>17</td>
<td>0.99%</td>
<td>8</td>
<td>16</td>
<td>9</td>
<td>4</td>
<td>8</td>
</tr>
<tr>
<td>18</td>
<td>0.89%</td>
<td>7</td>
<td>10</td>
<td>11</td>
<td>3</td>
<td>5</td>
</tr>
</tbody>
</table>

www.ndflu.com
**North Dakota School Surveillance:**

-- 5 Schools Reporting

-- Percent Absent due to illness for this week is well below what would be considered significant absenteeism.

-- If your school would be willing to participate in our surveillance, please contact Lindsey VanderBusch, lvanderbusch@nd.gov.

**Sentinel Laboratory Surveillance**

-- 15 North Dakota Laboratories Reporting

-- The Percent Positivity for Influenza is Decreasing.

-- RSV activity peaked in Week 8. Seasonably late.
During week 18 (April 29-May 5, 2012), influenza activity declined nationally and in most regions, but remained elevated in some areas of the United States.

U.S. Virologic Surveillance: Of the 2,118 specimens tested by U.S. World Health Organization (WHO) and National Respiratory and Enteric Virus Surveillance System (NREVSS) collaborating laboratories and reported to CDC/Influenza Division, 291 (13.7%) were positive for influenza.

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

Influenza-associated Pediatric Mortality: Two influenza-associated pediatric deaths were reported. One was associated with an influenza B virus and 1 was associated with an influenza A virus for which the subtype was not determined.

Outpatient Illness Surveillance: The proportion of outpatient visits for influenza-like illness (ILI) was 1.4%, which is below the national baseline of 2.4%. All regions reported ILI below region-specific baseline levels. Two states experienced low ILI activity; New York City and 48 states experienced minimal ILI activity, and the District of Columbia had insufficient data to calculate ILI activity.

Geographic Spread of Influenza: Two states reported widespread geographic activity; 8 states reported regional influenza activity; 12 states reported local activity; the District of Columbia, Puerto Rico, and 28 states reported sporadic activity, and Guam and the U.S. Virgin Islands reported no influenza activity.