2011-12 North Dakota Weekly Influenza Update

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Friday, May 18, 2012

Week: 19

1433 Total Influenza Cases
69 Hospitalizations
0 Deaths

Current Summary:

Influenza activity in North Dakota is LOCAL.

Outpatient ILI Surveillance is well below baseline at 0.67%

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

Respiratory Viruses

<table>
<thead>
<tr>
<th>Virus</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>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>
<tr>
<td>19</td>
<td>0.67%</td>
<td>3</td>
<td>3</td>
<td>9</td>
<td>3</td>
<td>0</td>
</tr>
</tbody>
</table>

Week 2011-12 ILI

Week 2010-11 ILI

www.ndflu.com
Week: 19  

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.

*These data do not represent all laboratory results for influenza.
Week: 19

National Update

Friday, May 18, 2012

During week 19 (May 6-12, 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 2,171 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, 288 (13.3%) 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 1.2%, 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 47 states experienced minimal ILI activity, and the District of Columbia and 1 state had insufficient data to calculate ILI activity.

Geographic Spread of Influenza: One state reported widespread geographic activity; 5 states reported regional influenza activity; 11 states reported local activity; the District of Columbia, Guam, Puerto Rico, and 30 states reported sporadic activity, and the U.S. Virgin Islands and 3 states reported no influenza activity.

Influenza Positive Lab Tests—National

Number of Specimens
Week 19
Tested 2,171

Number of Positive Specimens 288 (13.3%)

Positive by Subtype
Influenza A 152
A (2009 H1N1) 12
A (H1) 0
A (H3) 61
A (Untyped) 79

Influenza B 136

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