SYNOPSIS

Influenza activity in Maryland continued to be “sporadic” in geographic spread and “minimum” in intensity during the week ending May 19, 2012 (week 20). The proportion of rapid influenza tests reported as positive dropped to 10% from the previous week’s 16%. Most of those positive tests were type B influenza. A similar observation was made of the tests reported by the DHMH Laboratories Administration for the same week, where the proportion of positives decreased and type B influenza dominated. The proportion of people visiting sentinel providers for ILI or reporting ILI to the MRITS both remained low. This is the final report for the 2011-2012 influenza season.

PLEASE NOTE: Influenza is not a reportable condition in Maryland. As a result, we rely on select sources of information such as some (sentinel) clinical labs and physician offices, and the public. Because these sources cannot report all cases in the state, the counts contained in this summary do not represent the true number of cases of influenza in Maryland. They do provide valuable information about trends. All data are preliminary and subject to change.

INFLUENZA-LIKE ILLNESS SURVEILLANCE (ILINet)

During week 20 of 2012, eight sentinel providers reported that 82 (2.7%) of the 3,085 total visits to their practices were for ILI. This is below the state baseline (highest expected percent ILI when influenza is not present in Maryland) of 5.6%.

Over the last three seasons, the average proportion of visits to sentinel providers for ILI for week 20 is 3.2%.

For more information on ILINet, please visit our website: http://dhmh.maryland.gov/fluwatch and click on “ILINet Sentinel Providers”.

CLINICAL LAB REPORTS OF RAPID FLU TESTING

During week 20 of 2012, twenty-four sentinel clinical laboratories reported 64 (10%) of 666 rapid influenza tests performed were positive. Twenty-five were positive for type A, and 39 were positive for type B.

This proportion of positive tests is greater than the 3-year average for week 20, which is 2%.

While not as accurate as PCR tests, rapid influenza tests become more accurate as influenza becomes more prevalent in the community, giving insight into the activity of influenza.

<table>
<thead>
<tr>
<th>Type of Positives</th>
<th>Number (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Type A</td>
<td>932 (50%)</td>
</tr>
<tr>
<td>Type B</td>
<td>935 (50%)</td>
</tr>
<tr>
<td>Positive, but not typed</td>
<td>0 (0%)</td>
</tr>
<tr>
<td>Total Positive</td>
<td>1,867</td>
</tr>
</tbody>
</table>

Table 1. Number of positive rapid influenza tests, by type, reported by collaborating clinical laboratories 2011-2012 season to date

GET VACCINATED!

Go to http://dhmh.maryland.gov/flumd/SitePages/getvaccinated.aspx and find your local health department for more information.
MARYLAND RESIDENT INFLUENZA TRACKING SURVEY (MRITS)
During week 20 of 2012, a total of 541 (38% of total) participants in the MRITS responded to the weekly survey. Of those who responded, 7 (1.3%) reported flu-like illness.

This proportion is lower than the 3-year average proportion of flu-like illness reports for week 20, which is 1.5%.

We are always looking for more participants for the MRITS. For more information:
http://flusurvey.dhmh.md.gov/

DHMH LABORATORIES ADMINISTRATION REPORTS
During week 20 of 2012, the DHMH Laboratories Administration received a total of 36 specimens for influenza testing by PCR. One was positive for influenza type A (H1N1), 6 were positive for type A (H3), and 6 were positive for type B. The table to the right shows the breakdown of positive tests by influenza strain for the 2011-12 influenza season to date.

More information on the valuable work done by the DHMH Laboratories Administration is available at http://dhmh.maryland.gov/laboratories/SitePages/Home.aspx.

EIP INFLUENZA HOSPITALIZATION SURVEILLANCE
During week 20 of 2012, a total of 3 influenza-associated hospitalizations were reported to DHMH by 42 hospitals.

The three-year average of hospitalizations for week 20 is 5.

To be a confirmed hospitalization associated with influenza, the person must be hospitalized and have a positive influenza test of any kind (rapid test, PCR, culture).

Table 2. Number of respiratory samples positive for influenza by PCR reported by the DHMH Labs Administration, 2011-2012 influenza season

<table>
<thead>
<tr>
<th>Influenza Type</th>
<th>No. (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Type A</td>
<td></td>
</tr>
<tr>
<td>H1</td>
<td>67 (13%)</td>
</tr>
<tr>
<td>H3</td>
<td>286 (56%)</td>
</tr>
<tr>
<td>Unsubtyped</td>
<td>0 (0%)</td>
</tr>
<tr>
<td>Type B</td>
<td>159 (31%)</td>
</tr>
<tr>
<td>TOTAL</td>
<td>512</td>
</tr>
</tbody>
</table>

Figure 3. Proportion reporting ILI to the MRITS by week, 2011-2012 influenza season

Figure 4. Number of hospitalizations associated with influenza, by age group and week, reported to the Emerging Infections Program, 2011-2012 influenza season
REPORTS OF OUTBREAKS IN INSTITUTIONAL SETTINGS
During week 20 of 2012, one outbreak of pneumonia was reported to DHMH.

This is lower than the 3-year average number of outbreaks reported for week 20, which is 5 reported respiratory outbreaks.

Outbreaks may be reclassified as influenza outbreaks if influenza is found to be the causative agent of the outbreak through laboratory testing.

EMERGENCY DEPARTMENT ILI REPORTS (ESSENCE)
During week 20 of 2012, a total of 45,280 visits to emergency departments for all reasons were reported to the Office of Preparedness and Response through the ESSENCE system. Of those visits, 439 (1%) were for influenza-like illness (ILI).

This proportion is lower than the three-year average percent ILI reported through ESSENCE for week 20, which is 1.3%.

For more information on ESSENCE, please visit the Office of Preparedness and Response’s web site at: http://preparedness.dhmh.maryland.gov.

GOOGLE FLU TRENDS
According to Google, influenza activity in Maryland is currently “LOW”. What does this mean? From the Google Flu Trends Website: “We have found a close relationship between how many people search for flu-related topics and how many people actually have flu symptoms. Of course, not every person who searches for ‘flu’ is actually sick, but a pattern emerges when all the flu-related search queries are added together. We compared our query counts with traditional flu surveillance systems and found that many search queries tend to be popular exactly when flu season is happening. By counting how often we see these search queries, we can estimate how much flu is circulating in different countries and regions around the world.”
Synopsis: During week 20 (May 13-19, 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 2,054 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, 286 (13.9%) 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 a seasonal influenza A (H3) virus and one was associated with an influenza B virus.

- **Outpatient Illness Surveillance**: The proportion of outpatient visits for influenza-like illness (ILI) was 1.0%, which is below the national baseline of 2.4%. All regions reported ILI below region-specific baseline levels. One state experienced low ILI activity; New York City and 48 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; 2 states reported regional influenza activity; 8 states reported local activity; the District of Columbia, Guam, Puerto Rico, and 30 states reported sporadic activity; the U.S. Virgin Islands and 8 states reported no influenza activity, and one state did not report.