Maryland Weekly Influenza Surveillance Activity Report
A summary of influenza surveillance indicators reported to MDH for the week ending October 20, 2018

Prepared by the Division of Infectious Disease Surveillance
Prevention and Health Promotion Administration
Maryland Department of Health

The data presented in this document are provisional and subject to change as additional reports are received.

SUMMARY

During the week ending October 20, 2018, influenza-like illness (ILI) intensity in Maryland was MINIMAL and there was SPORADIC geographic activity. The proportion of outpatient visits for ILI reported by Sentinel Providers increased. The proportion of outpatient visits for ILI reported by Maryland Emergency Departments was unchanged. The proportion of MRITS respondents reporting ILI increased. Clinical laboratories proportion of specimens testing positive for influenza decreased. Four specimens tested positive for influenza at the MDH lab. There were 2 influenza-associated hospitalizations. There were 2 respiratory outbreaks reported to MDH.

Click here to visit our influenza surveillance web page

ILI Intensity Levels

<table>
<thead>
<tr>
<th>Activity</th>
<th>Minimal</th>
<th>Low</th>
<th>Moderate</th>
<th>High</th>
<th>Widespread</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>ILI Intensity</strong></td>
<td>✓</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Neighboring states’ influenza information:
Delaware http://dhss.delaware.gov/dph/epi/influenzahome.html
District of Columbia http://doh.dc.gov/service/influenza
West Virginia http://dhhr.wv.gov/oeps/disease/flu/Pages/fluSurveillance.aspx

ILINet Sentinel Providers

Nineteen sentinel providers reported a total of 5,601 visits this week. Of those, 82 (1.5%) were visits for ILI. This is below the Maryland baseline of 2.0%.

Visits to Emergency Departments for ILI

Emergency Departments in Maryland reported a total of 59,592 visits this week through the ESSENCE surveillance system. Of those, 1,122 (1.9%) were visits for ILI.

ILI Visits To Sentinel Providers By Age Group

<table>
<thead>
<tr>
<th>Age Group</th>
<th>This Week Number (%)</th>
<th>Last Week Number (%)</th>
<th>Season Number (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age 0-4</td>
<td>23 (28%)</td>
<td>18 (32%)</td>
<td>55 (29%)</td>
</tr>
<tr>
<td>Age 5-24</td>
<td>36 (44%)</td>
<td>20 (36%)</td>
<td>81 (41%)</td>
</tr>
<tr>
<td>Age 25-49</td>
<td>15 (18%)</td>
<td>6 (11%)</td>
<td>29 (15%)</td>
</tr>
<tr>
<td>Age 50-64</td>
<td>3 (4%)</td>
<td>10 (18%)</td>
<td>16 (8%)</td>
</tr>
<tr>
<td>Age ≥ 65</td>
<td>5 (6%)</td>
<td>2 (4%)</td>
<td>15 (8%)</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>82 (100%)</td>
<td>56 (100%)</td>
<td>196 (100%)</td>
</tr>
</tbody>
</table>

ILI Visits To Emergency Departments By Age Group

<table>
<thead>
<tr>
<th>Age Group</th>
<th>This Week Number (%)</th>
<th>Last Week Number (%)</th>
<th>Season Number (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age 0-4</td>
<td>260 (23%)</td>
<td>241 (23%)</td>
<td>501 (23%)</td>
</tr>
<tr>
<td>Age 5-24</td>
<td>394 (35%)</td>
<td>375 (35%)</td>
<td>769 (35%)</td>
</tr>
<tr>
<td>Age 25-49</td>
<td>291 (26%)</td>
<td>286 (27%)</td>
<td>577 (26%)</td>
</tr>
<tr>
<td>Age 50-64</td>
<td>115 (10%)</td>
<td>96 (9%)</td>
<td>211 (10%)</td>
</tr>
<tr>
<td>Age ≥ 65</td>
<td>62 (6%)</td>
<td>65 (6%)</td>
<td>127 (6%)</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>1,122 (100%)</td>
<td>1,063 (100%)</td>
<td>2,185 (100%)</td>
</tr>
</tbody>
</table>
Maryland Weekly Influenza Surveillance Activity Report
A summary of influenza surveillance indicators reported to MDH for the week ending October 20, 2018

Community-based Influenza Surveillance (MRITS)
MRITS is the Maryland Resident Influenza Tracking System, a weekly survey for influenza-like illness (ILI). A total of 552 residents responded to the MRITS survey this week. Of those, 11 (2.0%) reported having ILI and missing 25 cumulative days of regular daily activities.

Clinical Laboratory Influenza Testing
There were 47 clinical laboratories reporting 1,048 influenza diagnostic tests, mostly rapid influenza diagnostic tests (RIDTs). Of those, 15 (1.4%) were positive for influenza. Of those testing positive, 7 (47%) were influenza Type A and 8 (53%) were influenza Type B. The reliability of RIDTs depends largely on the conditions under which they are used. False-positive (and true-negative) results are more likely to occur when the disease prevalence in the community is low, which is generally at the beginning and end of the influenza season and during the summer.

State Laboratories Administration Influenza Testing
The MDH Laboratories Administration performed a total of 88 PCR tests for influenza and 4 (4.5%) were positive for influenza. All 4 (100%) specimens that tested positive for influenza were for Type B (Victoria). PCR testing is more reliable than RIDT. The MDH testing identifies subtypes of influenza A and lineages of influenza B, information that is not available from the RIDT results. The table below summarizes results by type, subtype, and lineage.
Influenza-associated Hospitalizations

A total of 2 influenza-associated hospitalizations were reported this week. (A person with an overnight hospital stay along with a positive influenza test of any kind, e.g., RIDT or PCR, is considered an “influenza-associated hospitalization” for purposes of influenza surveillance.) This surveillance is conducted as a component of the Maryland Emerging Infections Program.

Influenza-associated Deaths

An influenza-associated death is one with a clinically compatible illness and a positive influenza test of any kind.

**Pediatric Deaths:** No pediatric (< 18 years of age) deaths reported.

**Adult Deaths Among Hospitalized Patients:** No deaths have been reported among adults admitted to Maryland hospitals this influenza season. Influenza-associated adult mortality is not a reportable condition in Maryland. However, adult mortality surveillance is conducted as a component of the Maryland Emerging Infections Program’s influenza-associated hospitalization surveillance.

Outbreaks of Respiratory Disease

There were two respiratory outbreaks reported to MDH this week. (Disease outbreaks of any kind are reportable in Maryland. Respiratory outbreaks may be reclassified once a causative agent is detected, e.g., from ILI to influenza.)
National Influenza Surveillance (CDC)
During week 42 (October 14-20, 2018), influenza activity in the United States remains low.

- **Viral Surveillance:** Influenza A viruses have predominated in the United States since the beginning of July. The percentage of respiratory specimens testing positive for influenza in clinical laboratories was low.
- **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:** No influenza-associated pediatric deaths were reported to CDC.
- **Influenza-like Illness Surveillance:** The proportion of outpatient visits for influenza-like illness (ILI) remained low at 1.5%, which is below the national baseline of 2.2%. All regions reported ILI below their region-specific baseline level.
- **Geographic Spread of Influenza:** The geographic spread of influenza in four states was reported as local; the District of Columbia, Puerto Rico, the U.S. Virgin Islands and 42 states reported sporadic activity; four states reported no activity; and Guam did not report.

Where to get an influenza vaccination
Interested in getting a flu vaccine for the 2018-19 influenza season? Go to [https://phpa.health.maryland.gov/influenza/Pages/getvaccinated.aspx](https://phpa.health.maryland.gov/influenza/Pages/getvaccinated.aspx) and click on your county/city of residence. You will be redirected to your local health department website for local information on where to get your flu vaccine.