Maryland Weekly Influenza Surveillance Activity Report
A summary of influenza surveillance indicators reported to MDH for the week ending November 17, 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 November 17, 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 decreased. The proportion of outpatient visits for ILI reported by Maryland Emergency Departments increased. The proportion of MRITS respondents reporting ILI slightly decreased. Clinical laboratories reported a decrease in the proportion of specimens testing positive for influenza. Three specimens tested positive for influenza at the MDH lab. There were 3 influenza-associated hospitalizations. There were three respiratory outbreaks reported to MDH.

ILINet Sentinel Providers
Eighteen providers reported a total of 4,614 visits this week. Of those, 58 (1.3%) 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 52,704 visits this week through the ESSENCE surveillance system. Of those, 1,083 (2.1%) were visits for ILI.

ILIVisits To Sentinel Providers By Age Group

<table>
<thead>
<tr>
<th>Age Group</th>
<th>This Week</th>
<th>Last Week</th>
<th>Season</th>
</tr>
</thead>
<tbody>
<tr>
<td>0-4</td>
<td>17 (29%)</td>
<td>31 (32%)</td>
<td>161 (29%)</td>
</tr>
<tr>
<td>5-24</td>
<td>21 (36%)</td>
<td>34 (35%)</td>
<td>224 (40%)</td>
</tr>
<tr>
<td>25-49</td>
<td>10 (17%)</td>
<td>18 (19%)</td>
<td>96 (17%)</td>
</tr>
<tr>
<td>50-64</td>
<td>6 (10%)</td>
<td>9 (9%)</td>
<td>47 (8%)</td>
</tr>
<tr>
<td>≥ 65</td>
<td>4 (7%)</td>
<td>6 (6%)</td>
<td>34 (6%)</td>
</tr>
<tr>
<td>Total</td>
<td>58 (100%)</td>
<td>98 (100%)</td>
<td>562 (100%)</td>
</tr>
</tbody>
</table>

ILIVisits To Emergency Departments By Age Group

<table>
<thead>
<tr>
<th>Age Group</th>
<th>This Week</th>
<th>Last Week</th>
<th>Season</th>
</tr>
</thead>
<tbody>
<tr>
<td>0-4</td>
<td>273 (25%)</td>
<td>259 (24%)</td>
<td>1,845 (24%)</td>
</tr>
<tr>
<td>5-24</td>
<td>355 (33%)</td>
<td>337 (32%)</td>
<td>2,625 (34%)</td>
</tr>
<tr>
<td>25-49</td>
<td>289 (27%)</td>
<td>299 (28%)</td>
<td>2,086 (27%)</td>
</tr>
<tr>
<td>50-64</td>
<td>112 (10%)</td>
<td>108 (10%)</td>
<td>757 (10%)</td>
</tr>
<tr>
<td>≥ 65</td>
<td>54 (5%)</td>
<td>50 (5%)</td>
<td>451 (6%)</td>
</tr>
<tr>
<td>Total</td>
<td>1,083 (100%)</td>
<td>1,061 (100%)</td>
<td>7,764 (100%)</td>
</tr>
</tbody>
</table>

Neighboring states' influenza information:
Delaware  http://dhss.delaware.gov/dph/epi/influenza/home.html
District of Columbia  http://doh.dc.gov/service/influenza
West Virginia  http://dhr.wv.gov/oeps/disease/flu/Pages/fluSurveillance.aspx
Community-based Influenza Surveillance (MRITS)
MRITS is the Maryland Resident Influenza Tracking System, a weekly survey for influenza-like illness (ILI). A total of 538 residents responded to the MRITS survey this week. Of those, 3 (0.6%) reported having ILI and missing >10 cumulative days of regular daily activities.

Clinical Laboratory Influenza Testing
There were 51 clinical laboratories reporting 1,446 influenza diagnostic tests, mostly rapid influenza diagnostic tests (RIDTs). Of those, 40 (2.8%) were positive for influenza. Of those testing positive, 15 (38%) were influenza Type A and 25 (63%) 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 65 PCR tests for influenza and 3 (4.6%) were positive for influenza. Of those testing positive, 2 (67%) were positive for Type A (H1) and 1 (33%) was positive 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 3 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 were reported.

Influenza-associated pediatric mortality is a reportable condition in Maryland. Pediatric deaths are tracked without regard to hospitalization.

Adult Deaths Among Hospitalized Patients: A total of 3 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 3 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 46 (November 11-17, 2018), Influenza activity in the United States remains low, although small increases in activity were reported.

- **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:** One influenza-associated pediatric death was reported to CDC for week 46. This death was associated with an influenza A(H1N1)pdm09 virus.

- **Outpatient Illness Surveillance:** Nationwide during week 46, 1.9% of patient visits reported through the U.S. Outpatient Influenza-like Illness Surveillance Network (ILINet) were due to influenza-like illness (ILI). This percentage is below the national baseline of 2.2%.

- **Geographic Spread of Influenza:** The geographic spread of influenza in one state was reported as regional; Guam and 14 states reported local activity; and the District of Columbia, Puerto Rico, the U.S. Virgin Islands and 35 states reported sporadic activity.