

Disease Surveillance & Risk Report

No Report

No Activity

Sporadic

Local

Regional

Widespread

Severe

DEFINITION of Influenza-like or Flu-Like Illness (ILI):

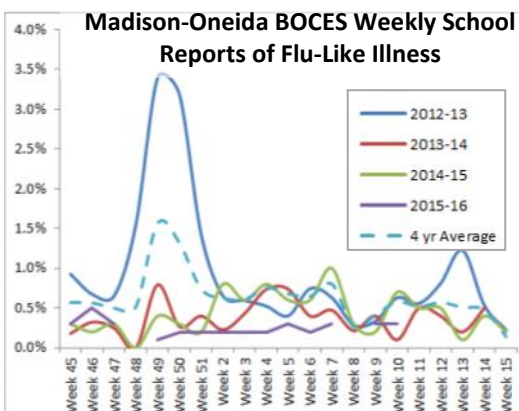
1) Fever > 100°F measured with a thermometer AND (2) Cough AND/OR sore throat in the absence of a known cause other than influenza

Madison County Flu Activity (Week 10)

Flu Activity for the week ending 3/5/16: **Widespread**

- Lab-confirmed flu: 15 lab confirmed Flu Type A reported during week 10. The season total to date is: 31 Flu (1 Flu Type A/B, and 30 Flu Type A).

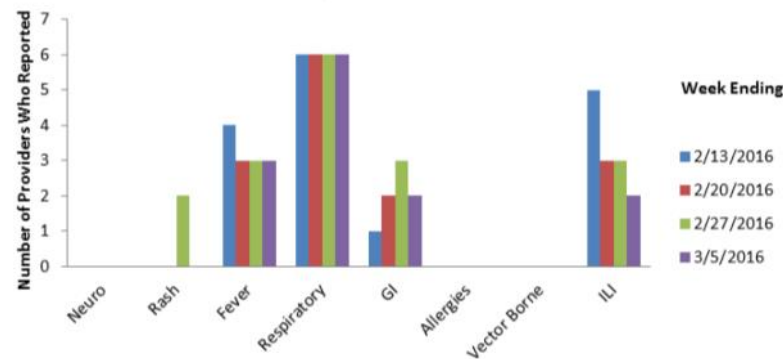
Week 10 Incidence: 20.7 flu cases per 100,000 population
- County workforce*: No influenza-like illness (ILI) was reported
- Madison-Oneida BOCES School District*: 0.3% of children seen by the school nurse appeared with symptoms of influenza-like illness (see chart below)
- College Health Centers*: Flu and ILI was reported
- Primary Care Providers*: ILI was reported
- New York State Hospital Report (HERDS): No flu related hospitalized reported this season to date.
- Flu-Associated Pediatric Deaths: No reports this season to date.



Madison County Disease Surveillance Updates, 2/28/16-3/5/16 (Week 10)

- Communicable Diseases Reported to the Health Department: 9 Chlamydia and 2 Gonorrhea
- Primary Care Providers Reported*: Respiratory illness, fever, gastrointestinal illness (GI), influenza-like illness (ILI), ear infections, lice, flu, and many cases of diarrhea, see chart below.
- Hospital Weekly Surveillance*: Fever, respiratory illness, influenza-like illness, flu, pneumonia, and Chronic Obstructive Pulmonary Disease (COPD) exacerbations were reported
- Syndromic Surveillance in Emergency Departments: *Community Memorial Hospital* reported mild signals for GI and mild to moderate signals for fever and respiratory illness; and *Oneida Healthcare* reported mild to moderate signals for GI and neurologic illness**
- College Health Centers*: Respiratory illness, gastrointestinal illness (GI), pneumonia, flu and influenza-like illness (ILI) was reported
- Medicaid Over-the-Counter (OTC) & Script Medication Alerts—2/10/16 to 2/19/16: No alerts

Weekly Symptoms Reported Among Primary Care Providers



**Neurologic can include non-specific diagnosis of neurological infection (e.g. Meningitis, Encephalitis, etc.) or non-specific conditions (e.g. headache, numbness, dizziness, blurry/double vision, speech difficulty, confusion, disorientation, or anxiety)

*Information denoted with an asterisk is subjective and provided on a voluntary basis.

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This report does *not reflect* the severity of flu activity.

Week Ending: March 5, 2016

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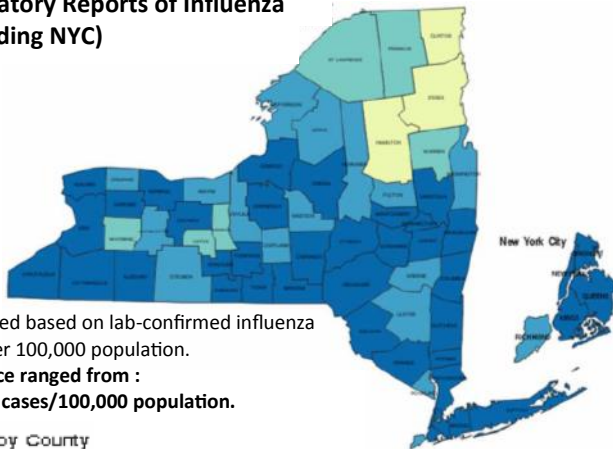
Severe

New York State Flu Activity

Flu Activity for the week ending 2/27/16: **Widespread**

- Lab-Confirmed Flu: 3893 reports, a 55% increase over last week. Flu was reported in 59 counties.
- Flu-Related Hospitalizations: 733 reports, a 29% increase over last week.
- A select group of providers (“sentinel providers”) across the state (outside of NYC) reported the percentage of office visits due to complaints of flu-like illness (ILI) was 3.49%; this is an increase from last week and is above the regional baseline of 2.3%.
- Flu-Associated Pediatric Deaths: None reported to date.

Laboratory Reports of Influenza (including NYC)



Calculated based on lab-confirmed influenza cases per 100,000 population.

Incidence ranged from : 0-62.51 cases/100,000 population.

Cases by County

- No cases reported this season
- Cases reported previously this season, but not this week
- 0.01–1.99 cases/100,000 population
- 2–4.99 cases/100,000 population
- 5–9.99 cases/100,000 population
- Greater than or equal to 10 cases/100,000 population

Source: New York State Department of Health. *Influenza Surveillance, Activity and Reports, 2015-16.* <http://on.ny.gov/1GTxdpF>

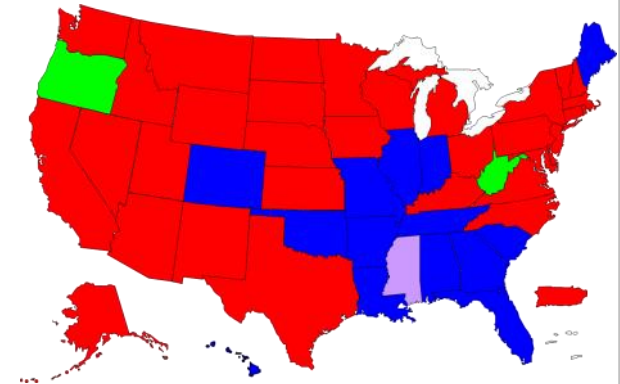
United States Flu Activity

Flu Activity for the week ending 2/27/16 (week 8): **Widespread**

Geographic Flu Activity Summary:

- **Widespread** influenza activity was reported by Puerto Rico and 33 states
- **Regional** influenza activity was reported by Guam and 14 states
- **Local** influenza activity was reported by the District of Columbia and one state
- **Sporadic** influenza activity was reported by the U.S. Virgin Islands and two states

Figure 1: Geographic Spread of Influenza as Assessed by State and Territorial Epidemiologists (This figure does not measure the severity of influenza activity.)

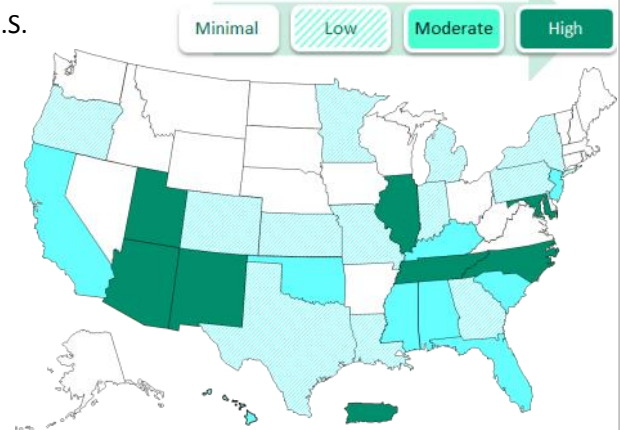


Surveillance Summary:

Flu activity *remained elevated* in the U.S.

- 7.4% of all deaths reported through the 122 Cities Mortality Reporting System were attributed to pneumonia and flu; this is *above* the epidemic threshold of 7.2% for week 8.
- Outpatient illness visits reported through the U.S. ILI Network was 3.2%, this percentage is *above* the national baseline of 2.1%. Nine of 10 regions in the U.S. reported flu-like illness *at or above* their region-specific baselines.
- Four flu-associated pediatric deaths were reported during week 8. A total of 18 flu-associated pediatric deaths have been reported this season to date.

Figure. 2: ILI Activity from ILINet Data



ILI Net Data based on percent of outpatient visits in states due to ILI, more on Fig. 2 at: <http://1.usa.gov/1d3PGtv>

Sources: FluView: Weekly U.S. Influenza and Surveillance Report. Centers