

Week Ending: February 25, 2017

Disease Surveillance & Risk Report

Sporadic Widespread No Report No Activity Local Regional Severe

DEFINTION 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

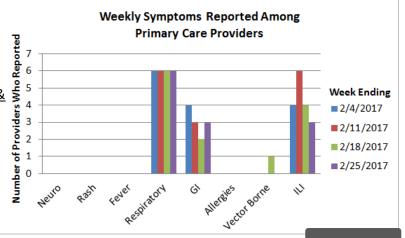
Flu Activity for the week 8, ending 2/25/17: **Widespread**

- Lab-confirmed flu: 46 laboratory confirmed flu (34 flu Type A and 12 flu Type B) were reported. The season total to date of reported flu cases is: 211.
- Schools Districts*: No report due to school break.
- College Health Centers*: ILI and flu were reported
- Primary Care Providers*: ILI and flu were reported
- New York State Hospital Report (HERDS): One flu related hospitalization reported by hospitals in Madison County for week 8. A total of 18 flurelated hospitalizations have been reported this season to date in Madison County.

Madison County Disease Surveillance Updates

Reports for the week ending 2/25/17:

- Communicable Diseases Reported to the Health Department: 4 Chlamydia, Cryptosporidium, and 1 Gonorrhea
- Primary Care Providers Reported*: Flu, ILI, respiratory infections, sinus infections (sinusitis), gastrointestinal illness (GI), strep throat, pneumonia, chronic obstructive pulmonary disease (COPD) exacerbations, bronchitis, and ear infections
- College Health Centers*: Respiratory illness, GI, ILI, flu, URI, strep throat, and mono
- Schools Districts*: No report due to school break.
- Hospital Weekly Surveillance*: Flu, ILI, respiratory illness, URI, fever, pneumonia, and strep throat
- Syndromic Surveillance in Emergency Departments: Mild to moderate signals for fever and respiratory illness on 2/16/17 to 2/17/17
- Medicaid Over-the-Counter (OTC) & Script Medication Alerts—2/4/17 to 2/13/17: Mild to moderate sensitivity for influenza agents (antivirals)



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

^{**}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)

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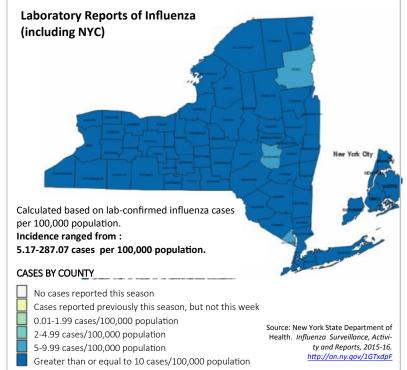
Disease Surveillance & Risk Report

No Report No Activity Sporadic Local Regional Widespread Severe

New York State Flu Activity

Flu Activity for the week ending 2/18/17 (week 7): Widespread

- <u>Lab-Confirmed Flu:</u> 5,575, a 8% *decrease* over last week. Flu was reported in all 62 counties.
- <u>Flu-Related Hospitalizations:</u> 863 reports, a 22% decrease over last week.
- A select group of providers across the state (outside of NYC) reported the percentage of office visits due to complaints of flu-like illness (ILI) was 9.14%; this is a decrease from last week, but remains above the regional baseline of 3.0%.
- <u>Flu-Associated Pediatric Deaths:</u> One report this week. There have been sic flu-associated deaths this season to date.



United States Flu Activity

Flu Activity for the week ending 2/18/17 (week 7): Widespread

Flu activity decreased slightly but remained elevated in the U.S.

Geographic Flu Activity Summary (Fig. 1):

- Widespread influenza activity was reported by Puerto Rico and 44 states
- Regional influenza activity was reported by Guam and four states
- Local influenza activity was reported by the District of Columbia and one state
- Sporadic influenza activity was reported by one state
- The U.S. Virgin Islands reported no flu.

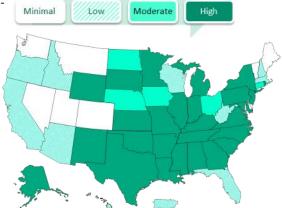
Surveillance Summary:

- 27 states experienced high ILI activity;
 NYC and 5 states experienced moderate ILI activity;
 Puerto Rico and 10 states experienced low ILI activity;
 Eight states experienced minimal ILI activity (Fig 2).
- Based on pneumonia and influenza (P&I) mortality data, 7.8% of deaths during the week ending 2/4/17 were due to P&I.
- A cumulative rate for the season of 33.7 lab-confirmed flu-associated hospitalizations per 100,000 population was reported.
- Outpatient illness visits reported through the U.S. ILI Network was 4.8%, this is a decrease from week 6 but is *above* the national baseline of 2.2%. All 10 U.S. regions reported ILI *at or above* their region-specific baselines.
- Five flu-associated pediatric deaths were reported. To date, 34 deaths have been reported for the 2016-17 flu season.

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



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

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