

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

Madison County Disease Surveillance Updates

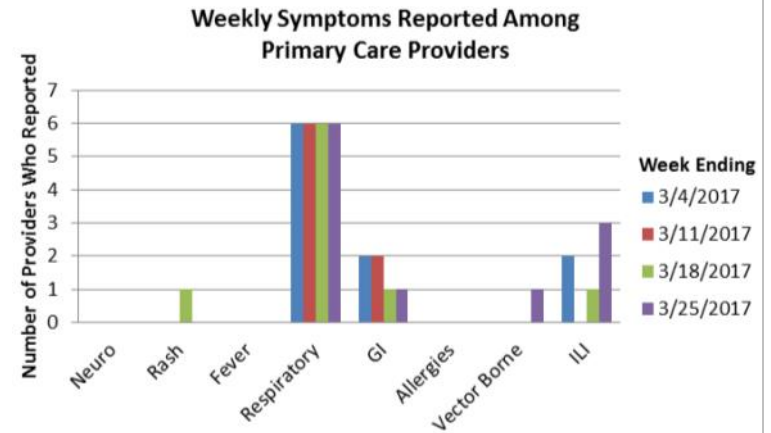
Flu Activity for the week 12, ending 3/25/17:

Widespread

- Lab-confirmed flu: 18 laboratory confirmed flu (6 flu Type A and 12 flu Type B) were reported. The season total to date of reported flu cases is: 359. 
- Schools Districts*: 0.7% of children seen by school nurses appeared with symptoms of influenza-like illness.
- College Health Centers*: No ILI or flu reported
- Primary Care Providers*: ILI and flu reported
- New York State Hospital Report (HERDS): No flu related hospitalization reported by hospitals in Madison County for week 12. A total of 29 flu-related hospitalizations have been reported this season to date in Madison County.

Reports for the week ending 3/25/17:

- Communicable Diseases Reported to the Health Department: 3 Chlamydia, 2 gonorrhea, 1 salmonella, and 1 cryptosporidiosis
- Primary Care Providers Reported*: Respiratory infections, gastrointestinal illness (GI), upper respiratory infections (URI), bronchitis, ILI, flu, strep throat, sore throats, coughs, pneumonia, sinus infections (sinusitis), chronic obstructive pulmonary disease (COPD) exacerbations, and bed bugs
- College Health Centers*: Respiratory illness, URI, sore throats, and pink eye (conjunctivitis)
- Schools Districts*: Flu, URI, GI, strep, and sore throats were reported
- Hospital Weekly Surveillance*: Flu, ILI, respiratory illness, GI, URI, and CRE (Carbapenem-resistant Enterobacteriaceae)
- Syndromic Surveillance in Emergency Departments 3/17/17 to 3/26/17: Mild to moderate sensitivity for asthma
- Medicaid Over-the-Counter (OTC) & Script Medication Alerts—3/3/17 to 3/12/17: No alerts



*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)

Week Ending: March 25, 2017

Disease Surveillance & Risk Report

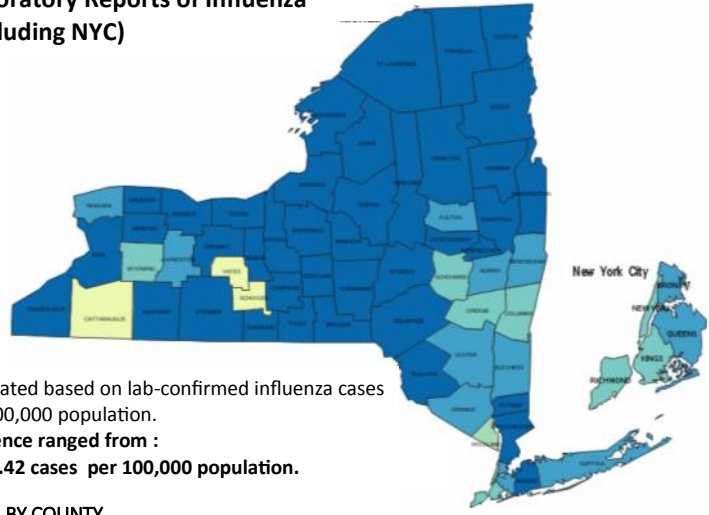
No Report No Activity Sporadic Local Regional Widespread Severe

New York State Flu Activity

Flu Activity for the week ending 3/18/17 (week 11): **Widespread**

- Lab-Confirmed Flu: 2,006, a 13% decrease over last week. Flu was reported in 59 counties.
- Flu-Related Hospitalizations: 360 reports, a 7% 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 0.98; this is a decrease from last week, and is below the regional baseline of 3.0%.
- Flu-Associated Pediatric Deaths: No reports this week. There have been seven flu-associated deaths this season to date.

Laboratory Reports of Influenza (including NYC)



Calculated based on lab-confirmed influenza cases per 100,000 population.
Incidence ranged from : 0-122.42 cases per 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 3/18/17 (week 11): **Widespread**

Flu activity decreased but remained elevated.

Geographic Flu Activity Summary (Fig. 1):

- **Widespread** influenza activity was reported by 36 states
- **Regional** influenza activity was reported by Guam, Puerto Rico and 10 states
- **Local** influenza activity was reported by the District of Columbia and two states
- **Sporadic** activity was reported by two states
- No influenza activity was reported by the U.S. Virgin Islands.

Surveillance Summary:

- 12 states experienced high ILI activity; Six states experienced moderate ILI activity; Nine states experienced low ILI activity; New York City, Puerto Rico, and 23 states experienced minimal ILI activity (Fig 2).
- Based on pneumonia and influenza (P&I) mortality data, 7.8% of deaths during week 8 were due to P&I; this is above the epidemic threshold of 7.5% for week 9.
- A cumulative rate for the season of 50.4 lab-confirmed flu-associated hospitalizations per 100,000 population was reported.
- Outpatient illness visits reported through the U.S. ILI Network was 3.2%, this above the national baseline of 2.2%. Seven of 10 U.S. regions reported ILI at or above their region-specific baselines.
- Two flu-associated pediatric deaths were reported. To date, 55 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.)

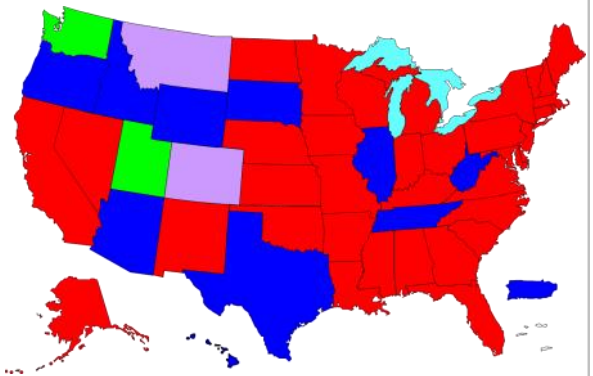
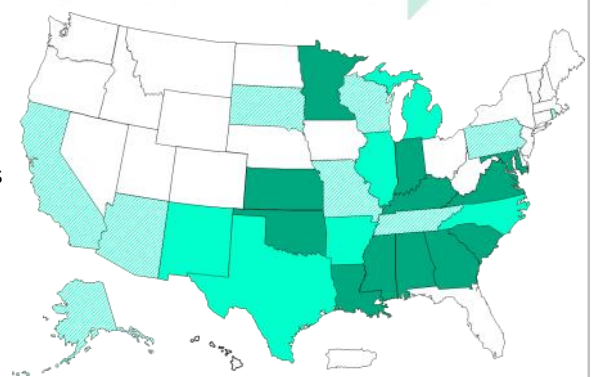


Figure 2: ILI Activity from ILINet Data

Minimal Low Moderate High



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 for Disease Control and Prevention. <http://1.usa.gov/1eDDFhh>