



Weekly Influenza Report Week 22 (05/31/09-06/06/09)

National Synopsis: Seasonal Influenza

During week 21 (May 24 - 30, 2009), influenza activity decreased in the United States, however there are still higher levels of influenza-like illness than is normal for this time of year.

- Two thousand seventy-four (31.1%) specimens tested by U.S. World Health Organization (WHO) and National Respiratory and Enteric Virus Surveillance System (NREVSS) collaborating laboratories and reported to CDC/Influenza Division were positive for influenza.
- The proportion of deaths attributed to pneumonia and influenza (P&I) was below the epidemic threshold.
- Five influenza-associated pediatric deaths were reported.
- The proportion of outpatient visits for influenza-like illness (ILI) was below the national baseline. Three of the 10 surveillance regions reported ILI at or above their region-specific baseline.
- Five states reported geographically widespread influenza activity, 10 states reported regional influenza activity, the District of Columbia and 14 states reported local influenza activity, and 21 states reported sporadic influenza activity.

H1N1 Flu (Novel virus): CDC

On June 11, 2009, the [World Health Organization](#) (WHO) raised the worldwide pandemic alert level to [Phase 6](#) in response to the ongoing global spread of the novel influenza A (H1N1) virus. A Phase 6 designation indicates that a global pandemic is underway.

More than 70 countries are now reporting cases of human infection with novel H1N1 flu. This number has been increasing over the past few weeks, but many of the cases reportedly had links to travel or were localized outbreaks without community spread. The WHO designation of a pandemic alert Phase 6 reflects the fact that there are now ongoing community level outbreaks in multiple parts of world.

WHO's decision to raise the pandemic alert level to Phase 6 is a reflection of the spread of the virus, not the severity of illness caused by the virus. It's uncertain at this time how serious or severe this novel H1N1 pandemic will be in terms of how many people infected will develop serious complications or die from novel H1N1 infection. Experience with this virus so far is limited and influenza is unpredictable. However, because novel H1N1 is a new virus, many people may have little or no immunity against it, and illness may be more severe and widespread as a result. In addition, currently there is no vaccine to protect against novel H1N1 virus.

In the United States, most people who have become ill with the newly declared pandemic virus have recovered without requiring medical treatment, however, CDC anticipates that there will be more cases, more hospitalizations and more deaths associated with this pandemic in the coming days and weeks. In addition, this virus could cause significant illness with associated hospitalizations and deaths in the fall and winter during the U.S. influenza season.

The latest numbers posted by CDC are 17, 855 confirmed cases and 45 deaths.

For more information on H1N1 Flu (Swine Flu), go to <http://www.cdc.gov/h1n1flu/>.

Delaware Influenza Surveillance:

Total Laboratory Confirmed Cases of Seasonal Influenza: 735

Influenza A: 451

Influenza B: 282

Influenza A&B: 2

Counties:

- **New Castle – 323**
- **Kent – 247**
- **Sussex – 165**

Age Range: 13 days – 94 years

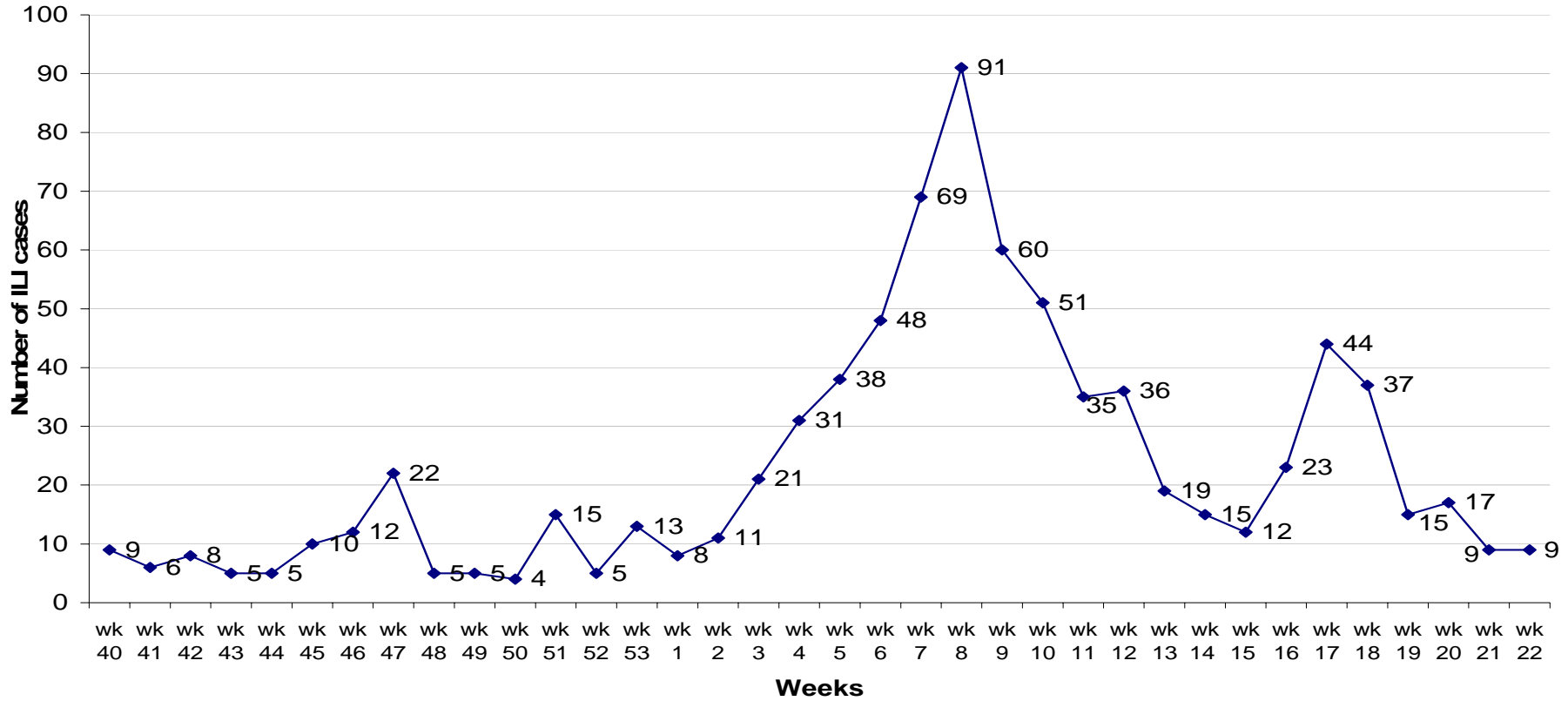
Deaths: 1 reported in week 13

Total Unconfirmed Cases: 132

Influenza Activity for Week 21: Widespread

- ➡ **No Activity:** No laboratory-confirmed cases of influenza and no reported increase in the number of cases of ILI.
- ➡ **Sporadic:** Small numbers or isolated cases of laboratory-confirmed influenza cases or a single laboratory-confirmed influenza outbreak has been reported, but there is no increase in cases of ILI.
- ➡ **Local:** Outbreaks of influenza or increases in ILI cases and recent laboratory-confirmed influenza in a single region of the state.
- ➡ **Regional:** Outbreaks of influenza or increases in ILI and recent laboratory confirmed influenza in at least 2 but less than half the regions of the state. (This level of activity does not apply for small states with 4 or fewer regions.)
- ➡ **Widespread:** Outbreaks of influenza or increases in ILI cases and recent laboratory-confirmed influenza in at least half the regions of the state.

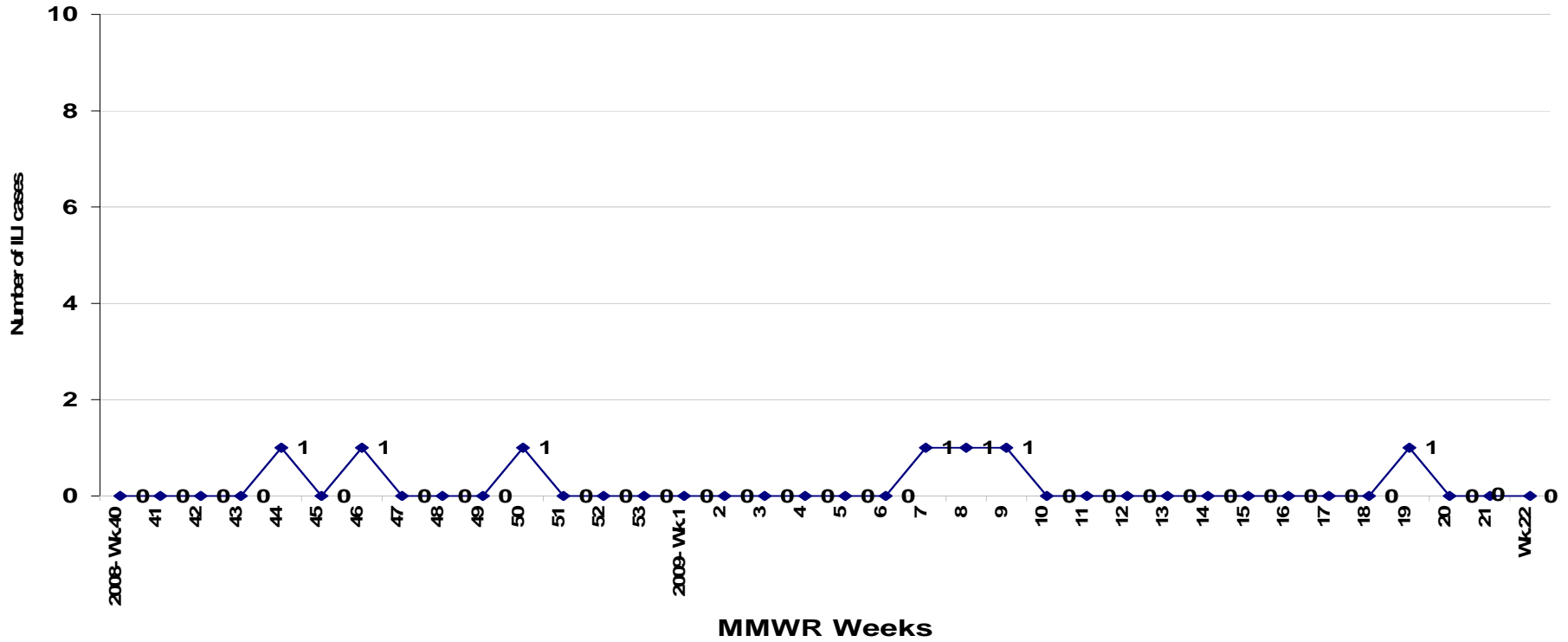
ILI cases reported from Sentinel providers 5 of 12 sentinel providers reporting



Note: This data is current as of distribution date and is subject to change.

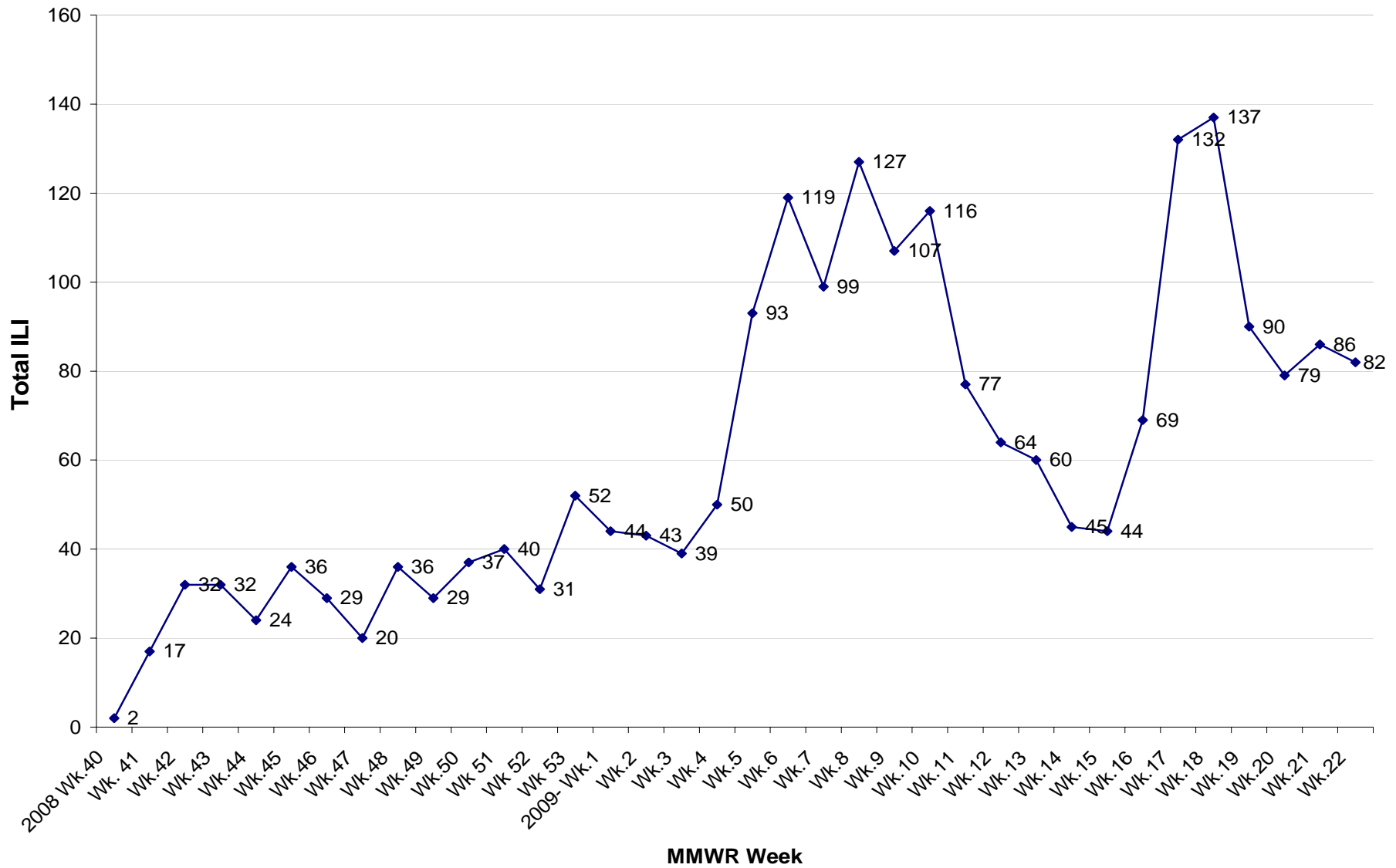
Starting with Week 16: Due to the H1N1 outbreak, ILI may be increased.

ILI cases reported from Corporations/LTCF
3 of 5* sites reporting
(*one organization that previously reported is no longer participating)



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Hospital ILI Cases 8 of 8 hospitals reporting

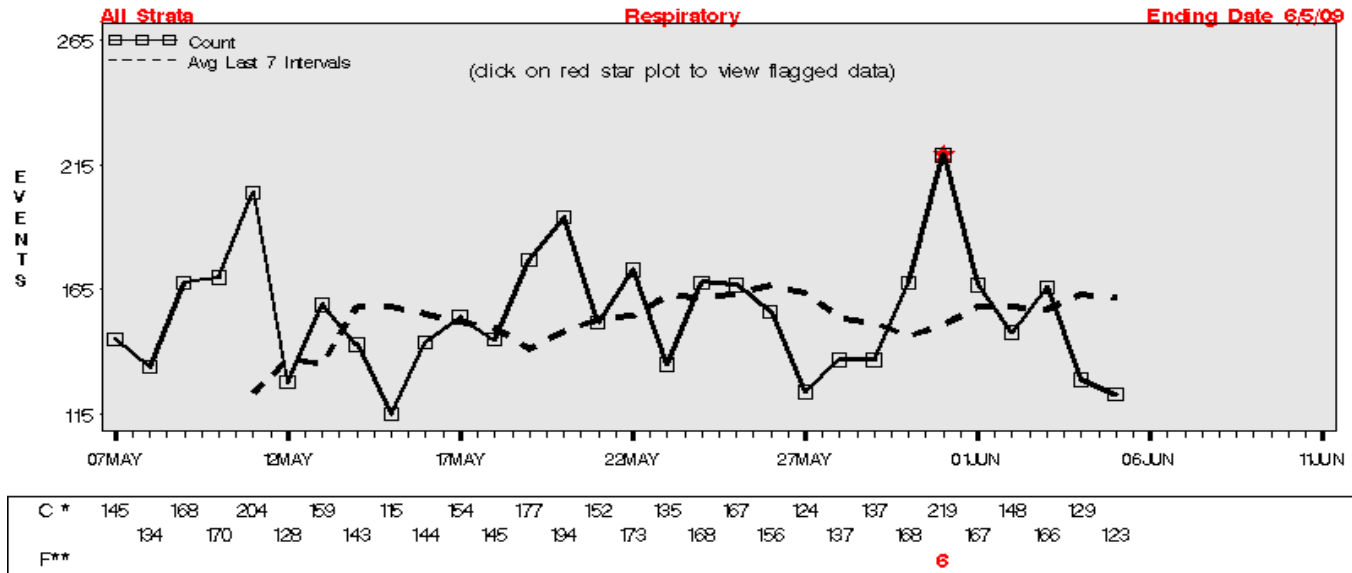


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Respiratory – Syndromic Surveillance

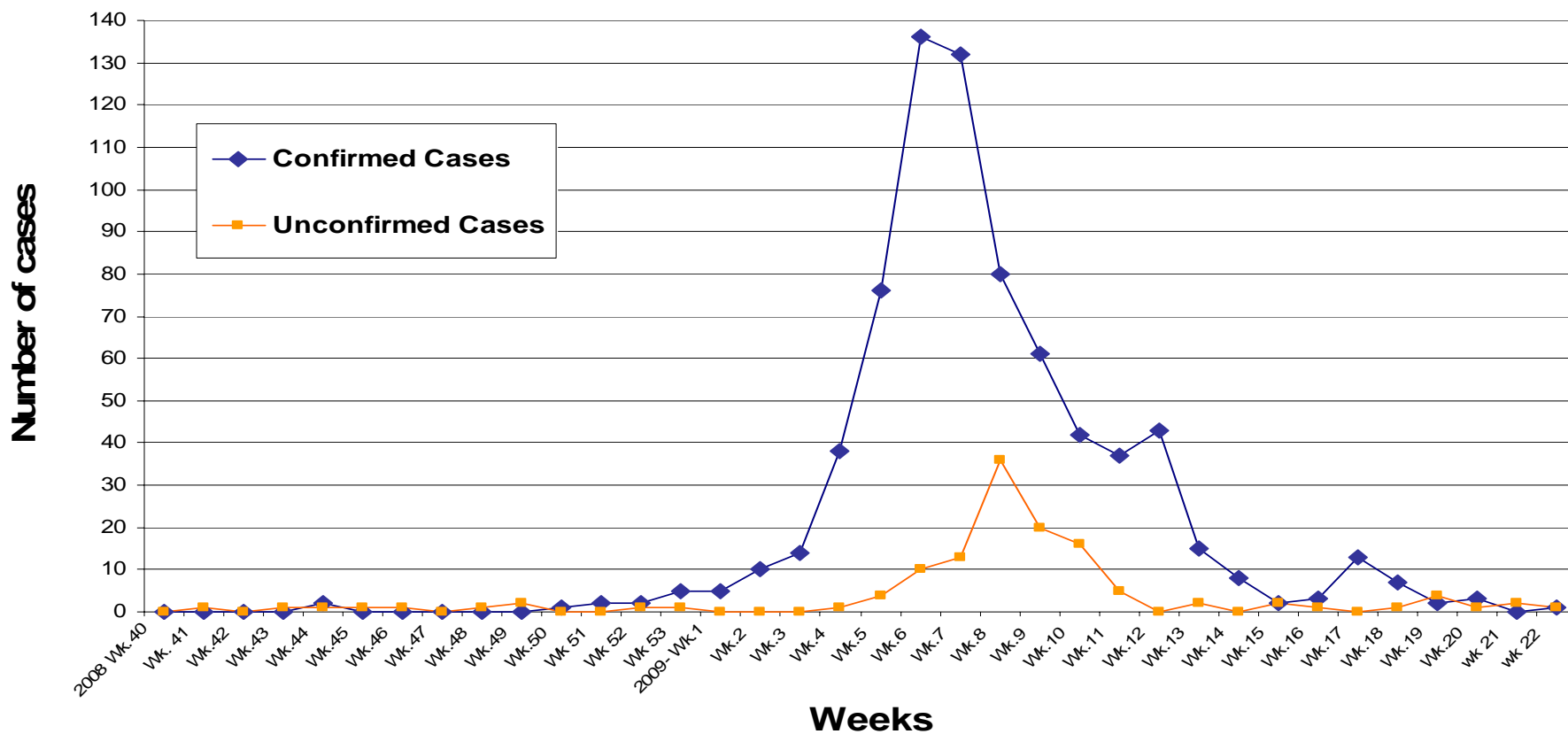
Early Aberration Reporting System (EARS)

Hospital Syndromic Surveillance



C1= Mild Sensitivity C2= Moderate Sensitivity C3= Ultra Sensitivity
 *C = total count (last three digits) **F are flags 1= C1 2= C2 3= C3 4= C1C3 5= C2C3 6= C1C2C3

2008-2009 Influenza season Confirmed and Unconfirmed Seasonal Influenza

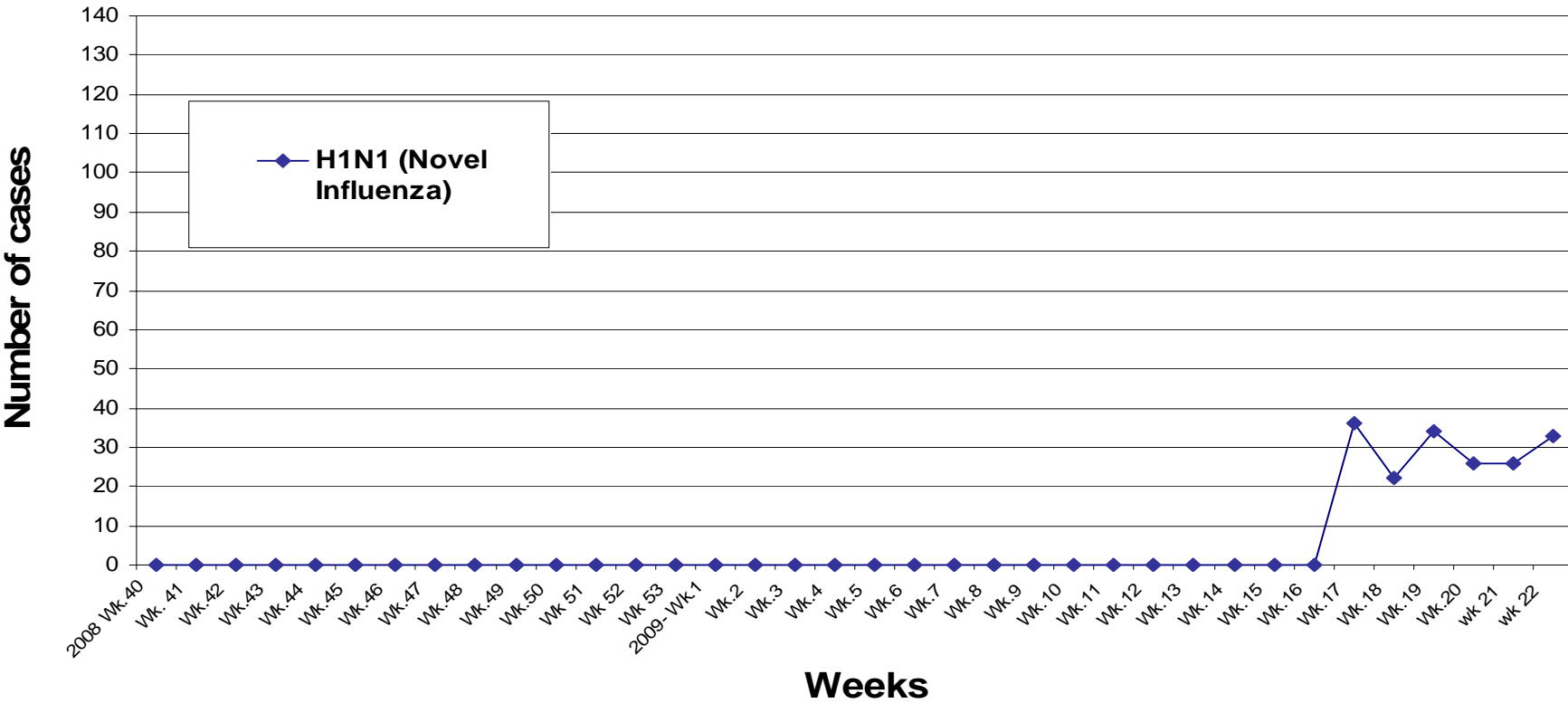


***NOTE:**

Confirmed cases: PCR (Polymerase Chain Reaction) positive or Influenza culture positive.

Unconfirmed cases: Rapid assay positive, not confirmed with PCR or culture.

**2008-2009 Influenza season
Confirmed H1N1 Novel Influenza**



****NOTE:**
H1N1 (Novel Influenza): PCR (Polymerase Chain Reaction) positive