



Indiana State Department of Health

Weekly Influenza Report

Week 12

Report Date: Friday, April 01, 2016

The purpose of this report is to describe the spread and prevalence of influenza-like illness (ILI) in Indiana. It is meant to provide local health departments, hospital administrators, health professionals and residents with a general understanding of the burden of ILI. Data from several surveillance programs are analyzed to produce this report. Data are provisional and may change as additional information is received, reviewed and verified. For questions regarding the data presented in this report, please call the ISDH Surveillance and Investigation Division at 317-233-7125.

WEEKLY OVERVIEW

Influenza-like Illness - Week Ending March 26, 2016	
ILI Geographic Distribution	Regional
ILI Activity Code	Minimal
Percent of ILI reported by sentinel outpatient providers	2.13%
Percent of ILI reported by emergency department chief complaints	1.88%
Percent positivity of influenza specimens tested at ISDH	78.95%
Number of influenza-associated deaths to date	46
Number of long-term care facility outbreaks	0
Number of school-wide outbreaks	0



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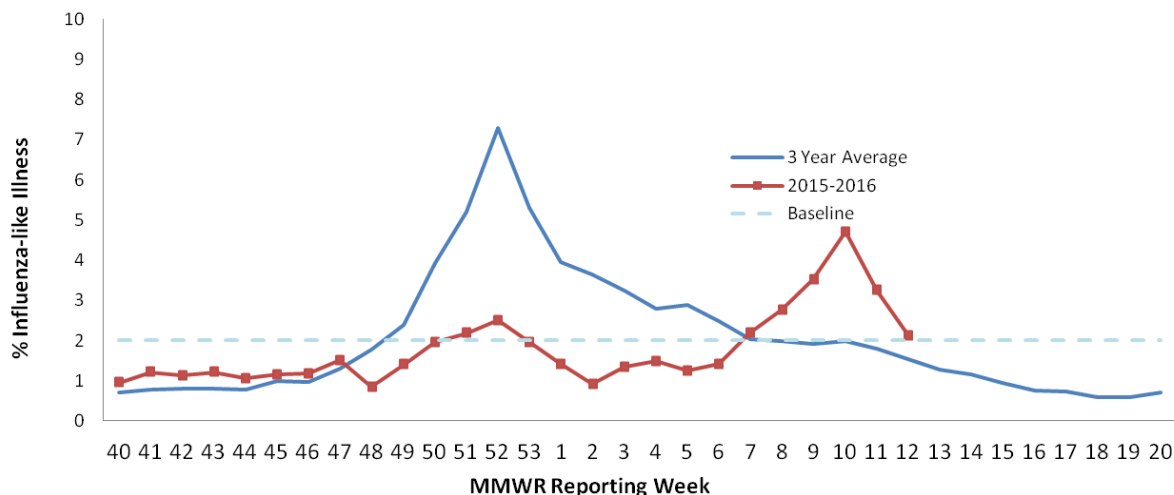
SENTINEL SURVEILLANCE SYSTEM

Data are obtained from sentinel outpatient providers participating in the U.S. Outpatient Influenza-like Illness Surveillance Network (ILINet). Data are reported on a weekly basis for the previous Morbidity and Mortality Weekly Report (MMWR) Week by the sentinel sites and are subject to change as sites back-report or update previously submitted weekly data.

Percent of ILI Reported by Type of Sentinel Outpatient Facility, Indiana, 2015-2016 Season			
MMWR Week	All Reporters %ILI (n)	Universities %ILI (n)	Non-Universities %ILI (n)
12	2.13% (22)	2.60% (9)	1.92% (13)
11	3.24 (22)	1.94 (8)	3.66 (14)
10	4.71 (26)	2.22 (10)	5.34 (16)

Percent of ILI Reported by Age Category in Sentinel Outpatient Facilities, Indiana, 2015-2016 Season		
Age Category, years	Total Number of ILI	Percent of ILI
0-4	26	22.03%
5-24	67	56.78
25-49	13	11.02
50-64	5	4.24
65+	7	5.93
Total	118	--

Percent of Patients with Influenza-like Illness (ILI) in Provider Clinics, Indiana, 2015-2016





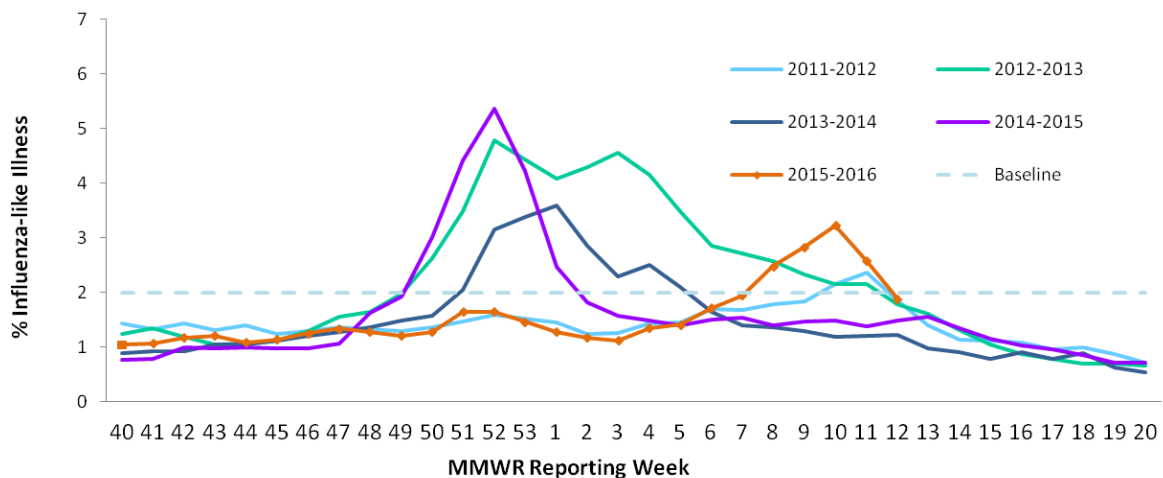
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SYNDROMIC SURVEILLANCE SYSTEM

Data are obtained from hospital emergency department chief complaint data through the Indiana Public Health Emergency Surveillance System (PHESS). Data are reported on a weekly basis for the previous Morbidity and Mortality Weekly Report (MMWR) Week and are subject to change as hospitals back-report or update previously submitted weekly data.

Percent of ILI Reported in Emergency Departments by District, Indiana, 2015-2016 Season		
	Previous MMWR Week	Current MMWR Week
Indiana	2.57%	1.88%
District 1	1.68	1.37
District 2	2.12	1.65
District 3	1.43	1.31
District 4	2.52	1.88
District 5	3.00	1.97
District 6	3.74	2.25
District 7	2.26	2.09
District 8	3.09	2.62
District 9	3.61	2.72
District 10	1.94	1.69

Percent of Patients with Influenza-Like Illness (ILI) Chief Complaint in Emergency Departments, Indiana, 2015-2016





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INFLUENZA-ASSOCIATED MORTALITY

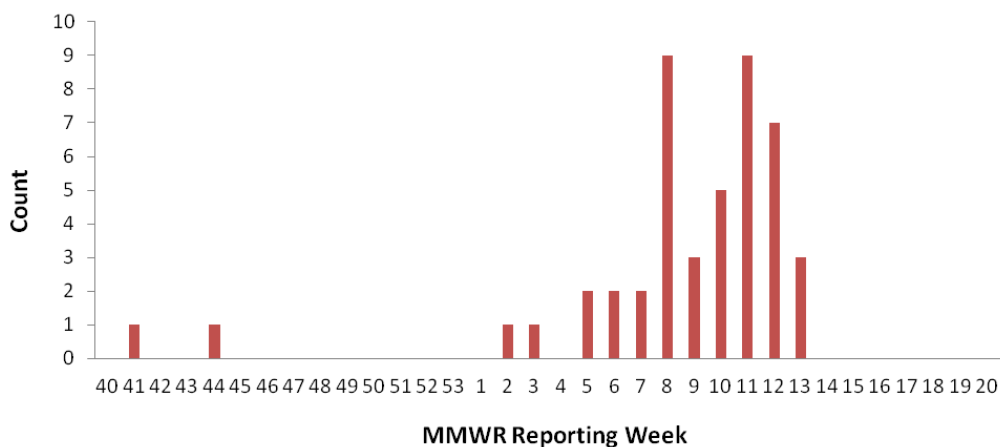
Data are obtained from the Indiana National Electronic Disease Surveillance System (I-NEDSS). Influenza-associated deaths are reportable within 72 hours of knowledge; however, not all cases are reported in a timely manner so data in this report are subject to change as additional cases are back-reported.

Number of Influenza-Associated Deaths for All Ages*, Indiana, 2015-2016 Season	
Age Category, years	Season Total
0-4	0
5-24	4
25-49	8
50-64	17
65+	17
Total	46

**Due to changes in the reporting rule as of 12/2015, influenza-associated deaths are reportable if either laboratory confirmed or listed as cause of death on death certificate. Therefore, case counts are not directly comparable to previous seasons in which influenza-associated deaths were only reportable by laboratory confirmation.*

Counties with ≥5 Laboratory Confirmed Influenza-Associated Deaths for All Ages, 2015-2016 Season			
County	Season Total	County	Season Total
Lake	10		
Marion	14		

Number of Reported Influenza-Associated Deaths by Week of Death, All Ages,
Indiana, 2015-16





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VIROLOGIC SURVEILLANCE

Circulating Influenza Viruses Detected by ISDH Laboratory*, Indiana, 2015-2016 Season				
PCR Result	Week 12		Season Total	
	Number	Percent of Specimens Received	Number	Percent of Specimens Received
2009 A/H1N1pdm virus	13	68.4%	209	37.9%
Influenza A/H3 seasonal virus	2	10.5%	69	12.5%
Influenza A/H1 seasonal virus	0	0%	0	0%
Influenza B seasonal virus	0	0%	32	5.8%
Influenza negative	3	15.8%	223	40.4%
Inconclusive	1	5.3%	7	1.3%
Unsatisfactory specimen [†]	0	0%	11	2.0%
Influenza Co-infection ^Δ	0	0%	1	<1%
Total	19	100%	552	100%

* Data obtained from the ISDH Laboratory via specimens submitted from the ISDH Sentinel Influenza Surveillance System and IN Sentinel Laboratories.

[†] Unsatisfactory specimens include specimens that leaked in transit, were too long in transit, or were inappropriately labeled.

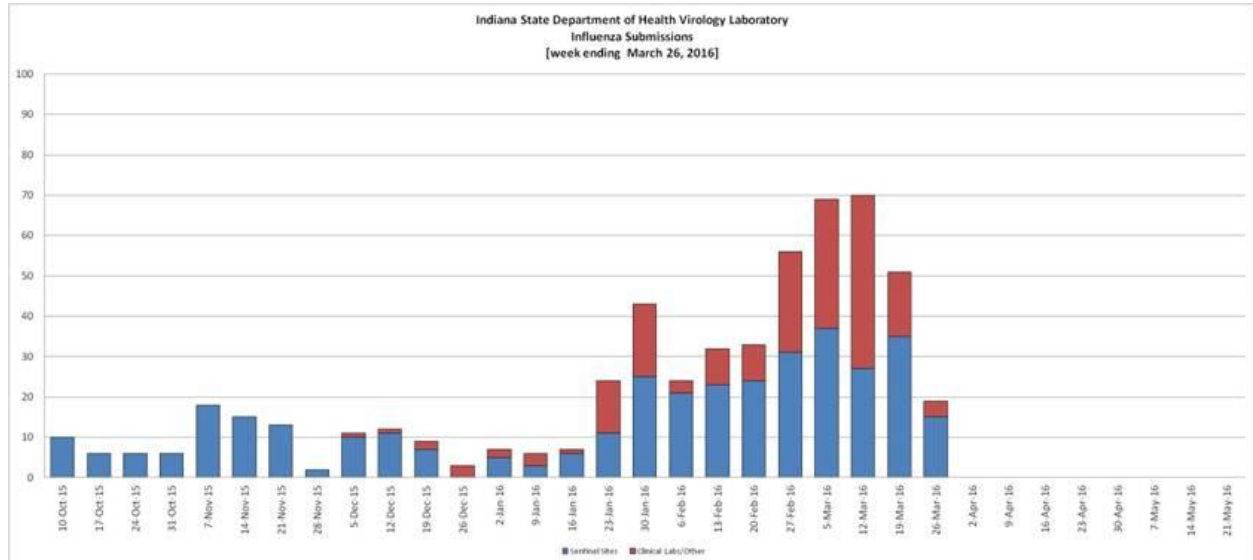
^Δ Influenza co-infection was influenza A/H3 and influenza A/H1N1pdm.

Circulating Non-Influenza Viruses Detected by the ISDH Laboratory, Indiana, 2015-2016 Season			
Result	Week 12	Season Total (Since 10/1/15)	Early Surveillance (9/1/15 - 9/30/15)
Adenovirus	0	6	0
Coronavirus 229E	0	0	0
Coronavirus HKU1	0	0	0
Coronavirus NL63	0	0	0
Coronavirus OC43	0	0	0
Enterovirus NOS	0	0	0
Enterovirus/Rhinovirus	0	2	1
Human Metapneumovirus	0	0	0
Parainfluenza 1 Virus	0	1	1
Parainfluenza 2 Virus	0	1	0
Parainfluenza 3 Virus	0	1	0
Parainfluenza 4 Virus	0	1	0
Rhinovirus	0	0	0
Respiratory Syncytial Virus	0	1	0
Total	0	13	2



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VIROLOGIC SURVEILLANCE (GRAPH)





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FLU REVIEW

Flu Vaccine Resources

- [National Infant Immunization Week \(NIIW\)](#) will be held April 16–23, 2016, to emphasize that protecting infants from vaccine-preventable diseases plays a vital role in promoting healthy communities. Promotional and educational materials are available on the [NIIW website](#).
- The American College of Obstetricians and Gynecologists (ACOG) just published a committee opinion titled “[Integrating Immunizations Into Practice](#),” highlighting the importance of immunization against vaccine-preventable diseases such as influenza, and encouraging women’s healthcare providers to offer augmented immunization services, including education, in order to increase vaccination rates. The [full article](#) also includes recommendations for obstetrician–gynecologists as well as tips for successful office immunization programs.

Flu News and Related Studies

- Influenza activity in the United States has decreased but remains elevated, with all ten U.S. regions reporting activity at or above their region-specific baseline levels; flu activity is expected to continue for several more weeks. View the [map](#) of weekly influenza activity in the U.S. and the latest [FluView report](#) for more about current influenza activity, trends, and impact throughout the United States (CDC).
- A collaborative study on the “[Global Role and Burden of Influenza in Pediatric Respiratory Hospitalizations, 1982-2012](#)” conducted by the CDC and global partners examined data from 350 sites in 60 countries, finding that influenza is responsible for about 10% of respiratory hospitalizations in all children younger than 18 years worldwide, with the highest proportion of flu respiratory hospitalizations occurring among children 5 years to 17 years of age ([PLOS Medicine](#)). An additional [CDC article](#) is also available.
- A cohort study of more than 50,000 pregnant women in Australia found that mothers who received seasonal trivalent influenza vaccination during pregnancy were significantly less likely to experience stillbirth compared with unvaccinated mothers; a 51% reduction in risk for vaccinated mothers was observed, indicating that receiving seasonal influenza immunization during pregnancy is safe ([Clinical Infectious Diseases](#)).

For Further Information, Visit:

www.in.gov/isdh/25462.htm

www.cdc.gov/flu

www.flu.gov