

Influenza (Flu) Surveillance Summary

Influenza (Flu) Surveillance in Indiana

Week 46 (November 15-21, 2009) Summary

Burden of Influenza-Like Illness (ILI) in the Community

- While the percentage of ILI reported by the emergency department surveillance (ED) system has continued to decrease, the current rate (4.3%) remains above the seasonal peak experienced during the 2008/9 influenza season.
- The percent of patients presenting at sentinel providers with ILI (7.6%) remained at a high level.
 - Younger populations (0-25 years of age) had the highest tendency (75.7% of the patient population) to seek care for ILI at sentinel provider clinics.
- During Week 45, the percentage of ILI reported by the sentinel system began to decrease as the emergency department data that continued to decrease.

Severity of Influenza-Like Illness and/or Pneumonia in the Community

- The rate of ILI and/or pneumonia-related hospitalizations per 100 inpatient beds decreased by 17% compared to the weighted moving average from the previous three weeks.
 - All age groups experienced a decreased rate of ILI and/or pneumonia-related hospitalizations per 100 inpatient beds compared to the weighted moving averaged from the previous three weeks.
 - The largest decreases occurred in the 0-18 and 19-24 year old age groups (-36% and -60%, respectively).
- 29% of reporting hospitals stated that the number of ILI-related hospitalizations is currently "slightly elevated" or "elevated" compared to previous years. This is compared to 53% during the previous reporting week.
 - 6% of hospitals (1/18) with "slightly elevated" or "elevated" burdens of ILI-related hospitalizations are reporting that they are having increased difficulty (4 or 5) with managing this patient population.
- Eight confirmed influenza-related deaths were reported during Week 46 (total of 35 since June 1, 2009).
 - All eight were confirmed 2009 H1N1 deaths (total of 33 since June 1, 2009).

Effect of Influenza-like Illness on Populations at Risk

- ILI-related absentee rates in health care personnel decreased by 43.5% compared to the weighted moving average from the previous three weeks.
 - 0.56 compared to 1.00 ILI-related absences per 100 employees.

Laboratory and Vaccination Information

- During Week 46, 100% (36/36) of specimens that were positive for influenza were 2009 H1N1.

- Since September 1, 2009, 98.5% (450/457) of specimens that were positive for influenza were 2009 H1N1.
 - Other respiratory viruses are circulating in addition to influenza (identified during Week 46—Echovirus, Enterovirus NOS, Influenza B virus).
 - As of November 17, a total of 564,094 2009 H1N1 vaccinations had been given in Indiana.
 - Persons 6 months to 24 years of age have received 61% of the vaccinations.
 - According to CHIRP data, 15.7% of the estimated number of “high risk” persons in Indiana have received the 2009 H1N1 vaccine, including 40.1% of health care and EMS workers and 21.8% of pregnant women.
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State health officials say they will be providing a weekly update on influenza (flu) activity in Indiana each Wednesday, starting September 23, 2009. This update will include general information on flu activity, based on surveillance across the state, but will NOT include flu case counts on either the state or the county level. A summary of influenza surveillance in Indiana will be posted on this site every Wednesday.

The Indiana State Health Department will be monitoring all influenza activity in the state, both seasonal influenza and the 2009 H1N1 influenza A through the use of influenza sentinel surveillance and the Public Health Emergency Syndromic System (PHESS). Through this system, data is collected from hospital emergency departments on a daily basis and analyzed by the State Health Department’s epidemiologists. State health officials will also be tracking hospitalizations from influenza-like illnesses and pneumonia and flu-related deaths and reporting that information on a statewide level.

Indiana has 58 influenza sentinel sites distributed around the state in outpatient settings. When individuals seek medical care for influenza-like illness at the sentinel sites, the practitioner performs a nasal swab and sends it to the state laboratory. The state laboratory tests the swab for influenza A and if it is positive, the laboratory does further testing to determine the subtype of influenza. This allows state health officials to determine what types of influenza viruses are circulating.

During the spring of 2009, as the novel H1N1 influenza was beginning to spread across the United States, Indiana confirmed its first case after a patient was seen with influenza-like illness at a flu sentinel site and had routine testing as part of this surveillance system. Since the pandemic was declared in June 2009, the State Health Department has increased the number of sentinel sites across the state to improve surveillance.