

Weekly Influenza & Respiratory Activity: Statistics

updated 1/5/12

All data are preliminary and may change as more reports are received.

December 25 - 31 (week 52 of 2011)

Influenza Activity Surveillance

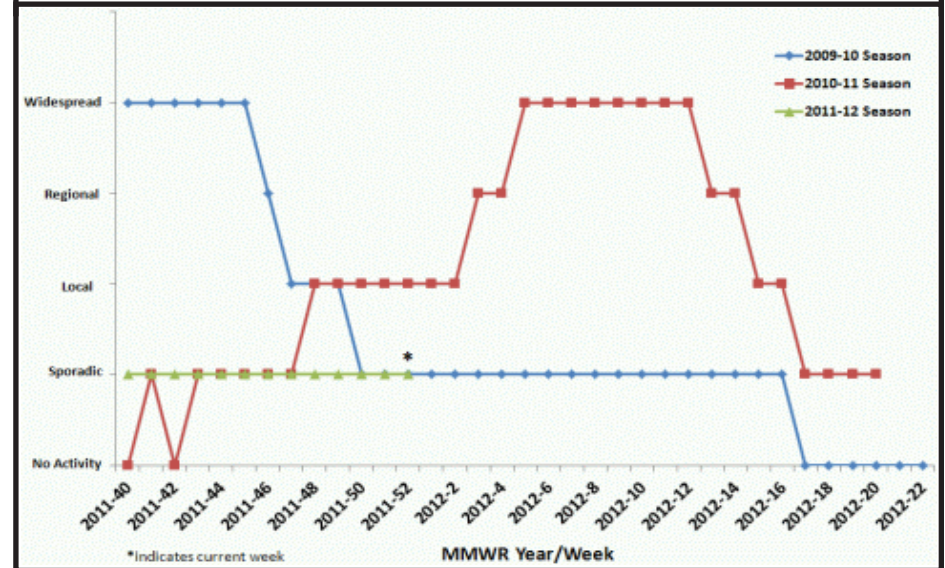
- The percentage of tests positive for influenza during week 52 as reported from the MN Lab System (MLS) Laboratory Influenza Surveillance Program:
 - Rapid influenza testing: 3.6% positive
 - PCR testing: 2.1% positive
 - Viral culture: no positives
- 3 people were hospitalized with laboratory-confirmed influenza during week 52. Since the start of the influenza season, 23 persons have been hospitalized with laboratory-confirmed influenza. ([Hospital Data](#))
- No deaths were identified during week 52. Since the start of the influenza season, 3 influenza-related deaths have been reported. ([Death Data](#))
- 1 long-term care facility (defined as skilled nursing facilities) reported a confirmed outbreak of influenza during week 52. Since the start of the season, 2 outbreaks of influenza have been reported. ([Long-Term Care Data](#))
- No schools reported outbreaks of influenza-like illness (ILI) during week 52. Since the start of the season, 14 outbreaks of ILI have been reported. ([School Data](#))
- The percentage of influenza-like illness visits to outpatient clinics involved in the U.S. Outpatient Influenza-like Illness Surveillance (ILINet) was below the regional baseline at 0.68%. ([Doctor's Office Visits Data](#))

Circulating Respiratory Pathogen Surveillance ([Respiratory Pathogen Data](#))

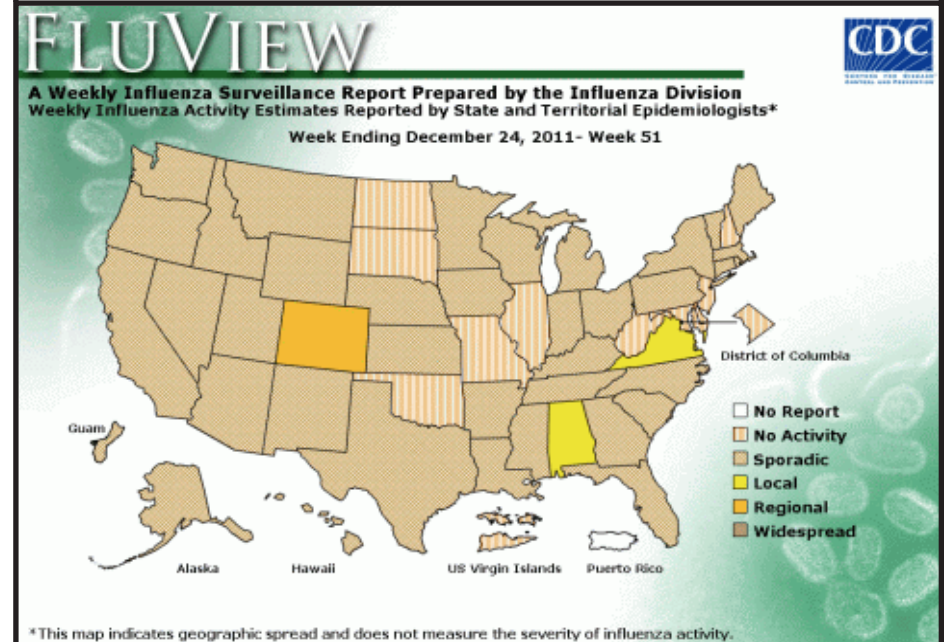
- Of specimens tested from 4 outpatient sites for circulating viral respiratory pathogens in the previous 3 weeks for which data are available:
 - 20% were positive for parainfluenza virus 1
 - 12% were positive for adenovirus
 - 8% were positive for rhinovirus
 - 3% were positive for respiratory syncytial virus (RSV)
- Of specimens positive for a viral pathogen at Minnesota's 6 virology laboratories during week 52:
 - 59 were positive for respiratory syncytial virus (RSV)
 - 12 were positive for adenovirus
 - 3 were positive for cytomegalovirus (CMV)
 - 3 were positive for parainfluenza virus 1



WEEK 52 = SPORADIC INFLUENZA ACTIVITY IN MINNESOTA

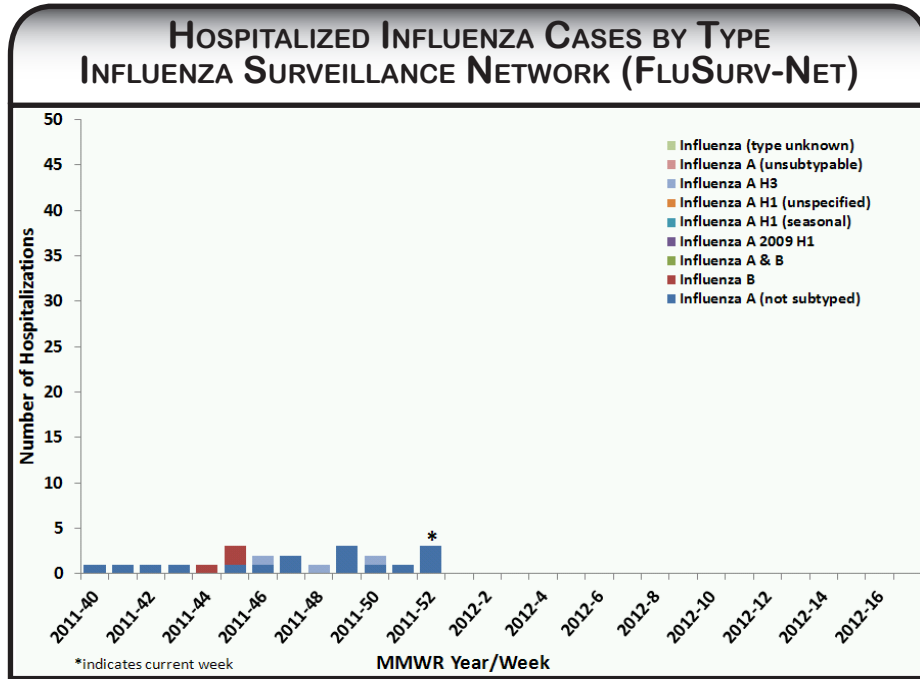


WEEKLY U.S. INFLUENZA SURVEILLANCE REPORT



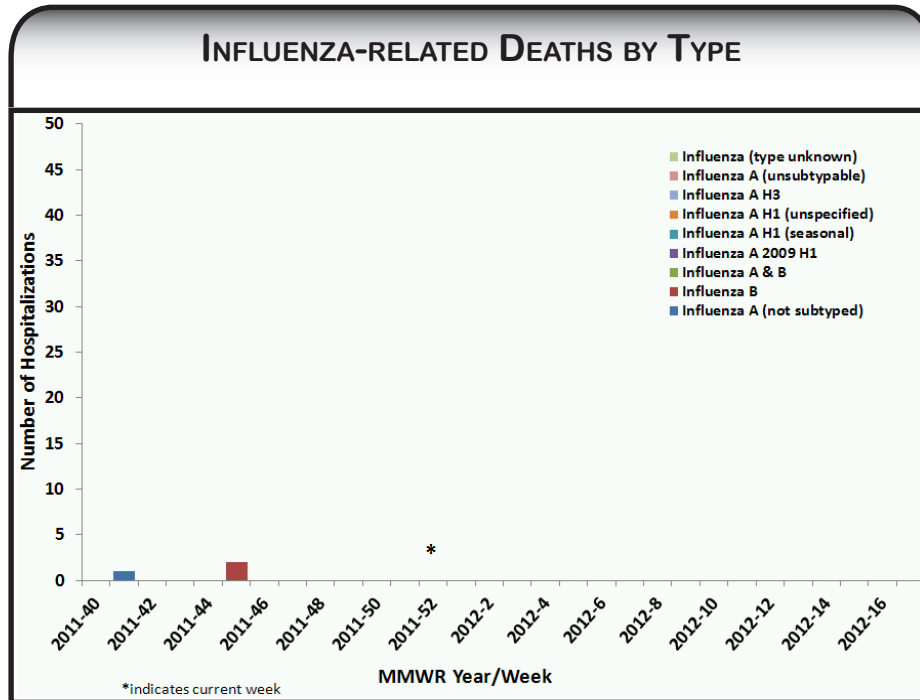
Hospitalized Influenza Surveillance Data

Hospitalized influenza cases are based on disease reports of laboratory-positive influenza (via DFA, IFA, viral culture, EIA, rapid test, paired serological tests, or RT-PCR) and specimens from hospitalized patients with ILI submitted to MDH by hospitals and laboratories. Due to the need to confirm reports and reporting delays, consider current week data preliminary.



Influenza-associated Deaths

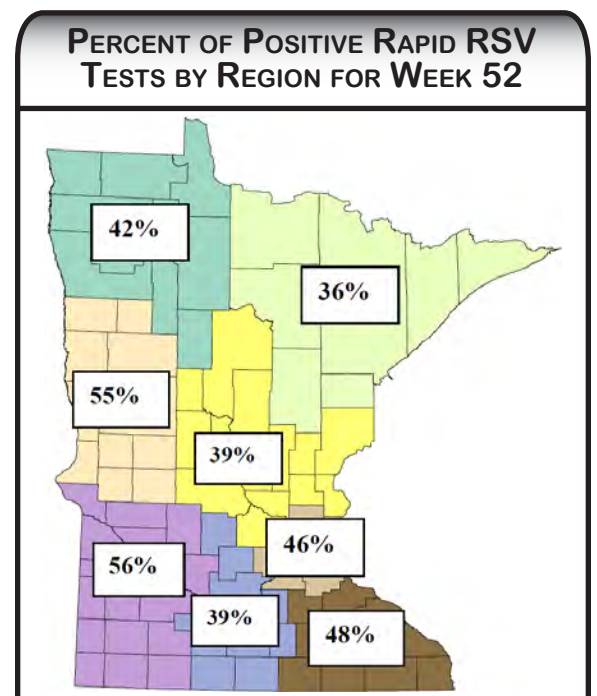
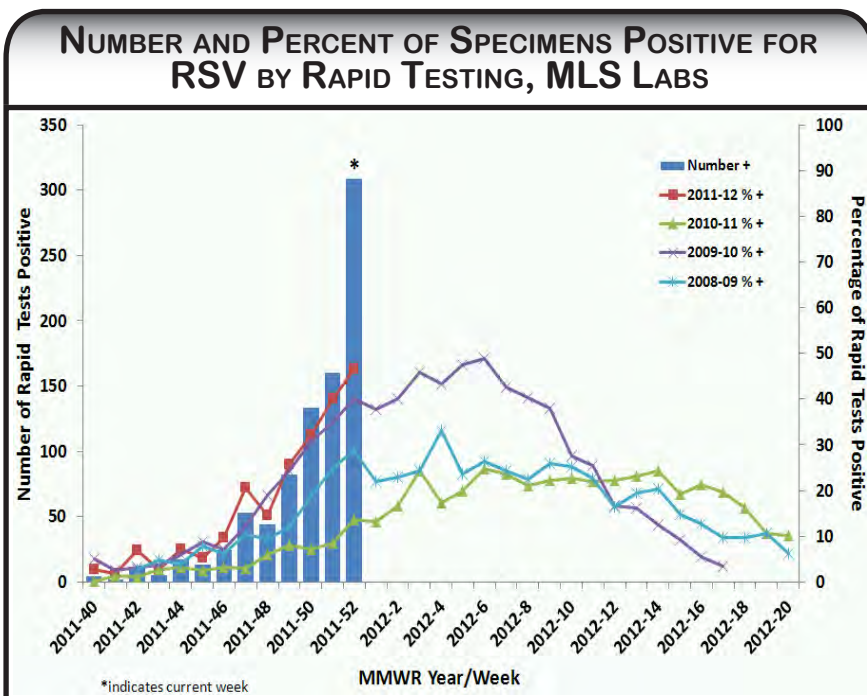
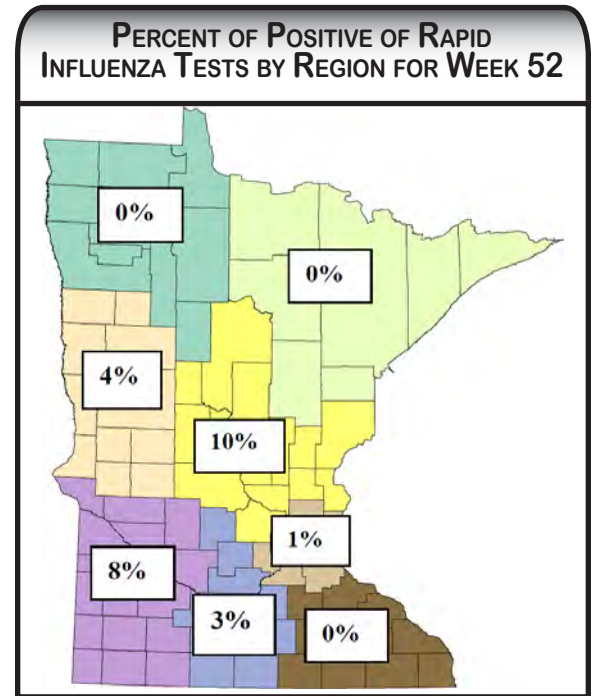
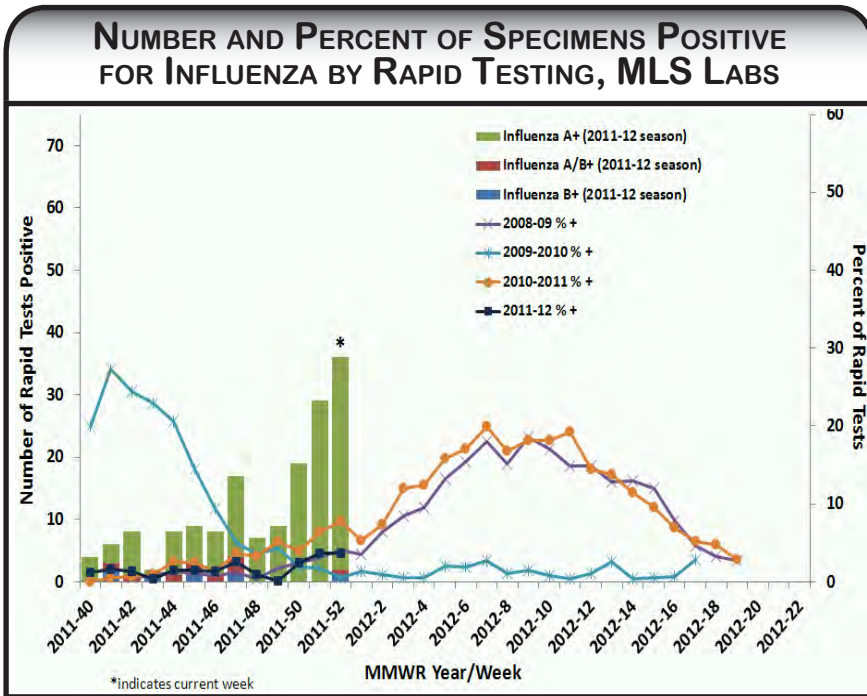
Influenza-associated deaths are reported through several surveillance systems including hospital-surveillance, Unexplained Deaths and Critical Illnesses (UNEX), Medical Examiner Infectious Deaths (Med-X) surveillance, death certificate review, nursing home outbreaks, as well as other sources. It includes both hospitalized and non-hospitalized cases with laboratory-positive influenza and symptoms of an infectious process consistent with influenza without recovery to baseline prior to death. In a small number of cases there may not be laboratory-positive influenza results due to the lack of specimens taken, in which case the person must have influenza noted as a cause of death on the death certificate or the person had direct contact with a laboratory-confirmed influenza case.



Laboratory Testing Data

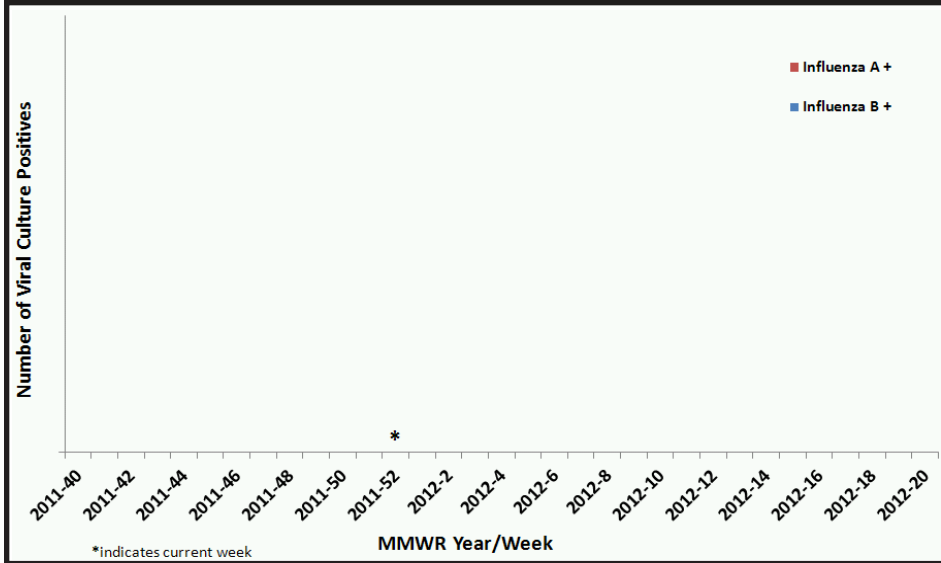
The MN Lab System (MLS) Laboratory Influenza Surveillance Program is made up of more than 310 clinic- and hospital-based laboratories, voluntarily submitting testing data on a weekly basis. These laboratories perform rapid testing for influenza and Respiratory Syncytial Virus (RSV). Significantly fewer labs perform viral culture testing (6 labs) for influenza, RSV, and other respiratory viruses. Five laboratories perform PCR testing for influenza and three also perform PCR testing for other respiratory viruses. The MDH Public Health Laboratory also provides further characterization of submitted influenza isolates to determine the hemagglutinin serotype to indicate vaccine coverage.

Tracking the laboratory results assists healthcare providers with patient diagnosis of influenza-like illness and provides an indicator of the progression of the influenza season as well as prevalence of disease in the community

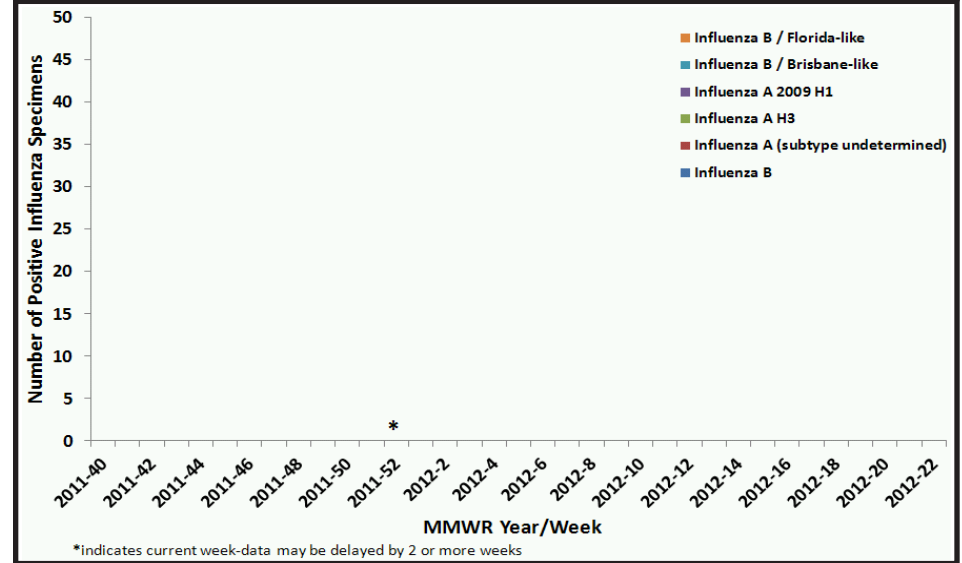


Laboratory Testing Data, Continued

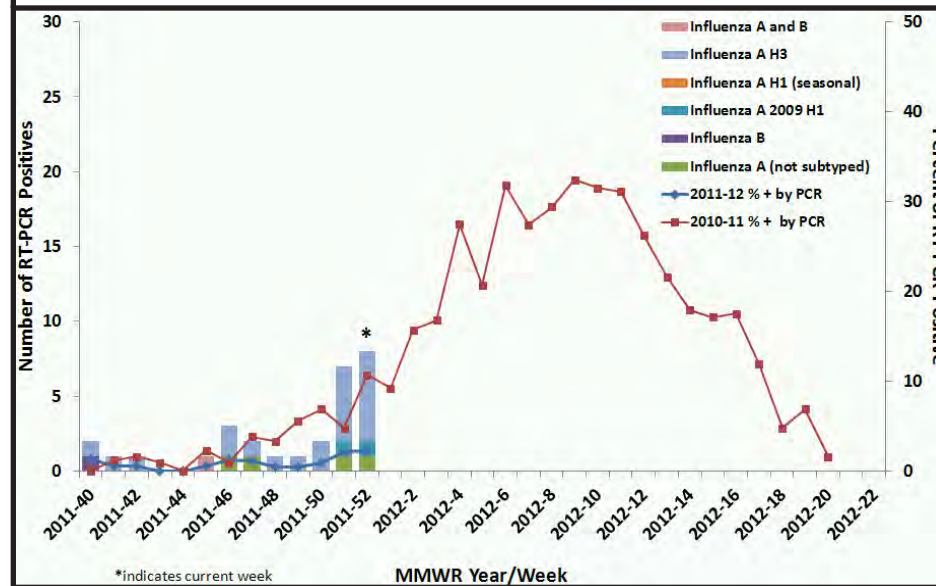
NUMBER AND PERCENT OF SPECIMENS POSITIVE FOR INFLUENZA BY VIRAL CULTURE, MINNESOTA VIROLOGY LABS

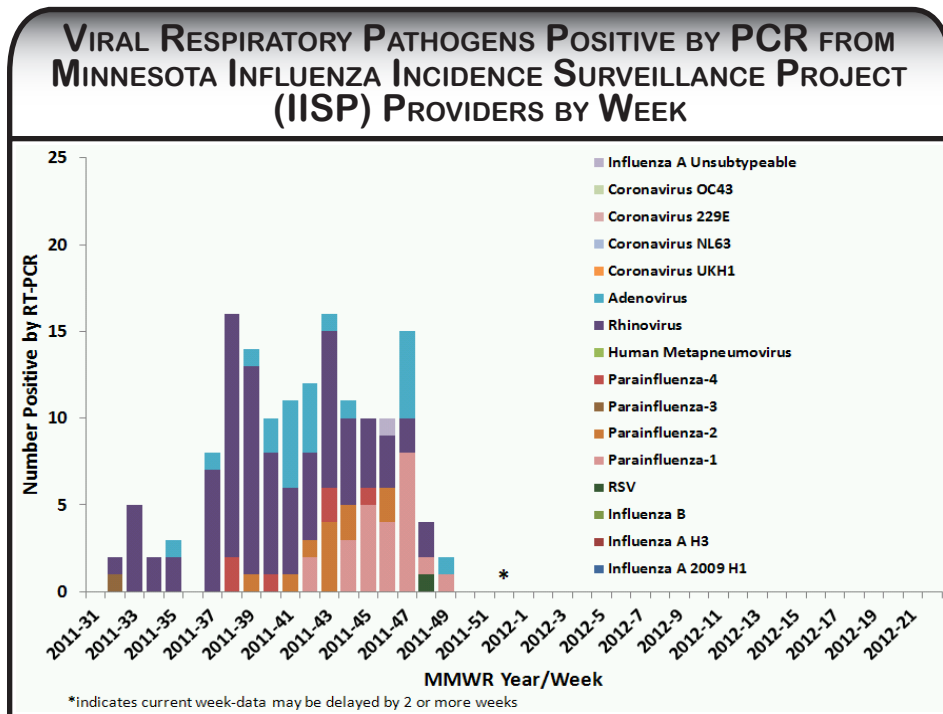
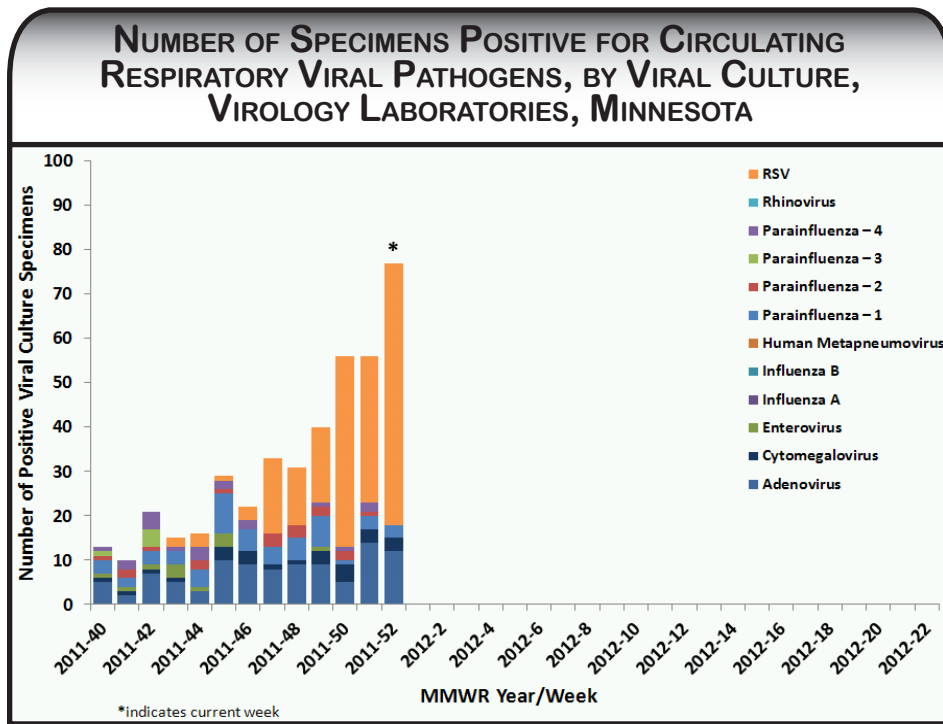


NUMBER AND SUBTYPE OF POSITIVE INFLUENZA ISOLATES, MDH-PHL



NUMBER AND PERCENT POSITIVE FOR INFLUENZA BY RT-PCR AMONG LABORATORIES, MINNESOTA

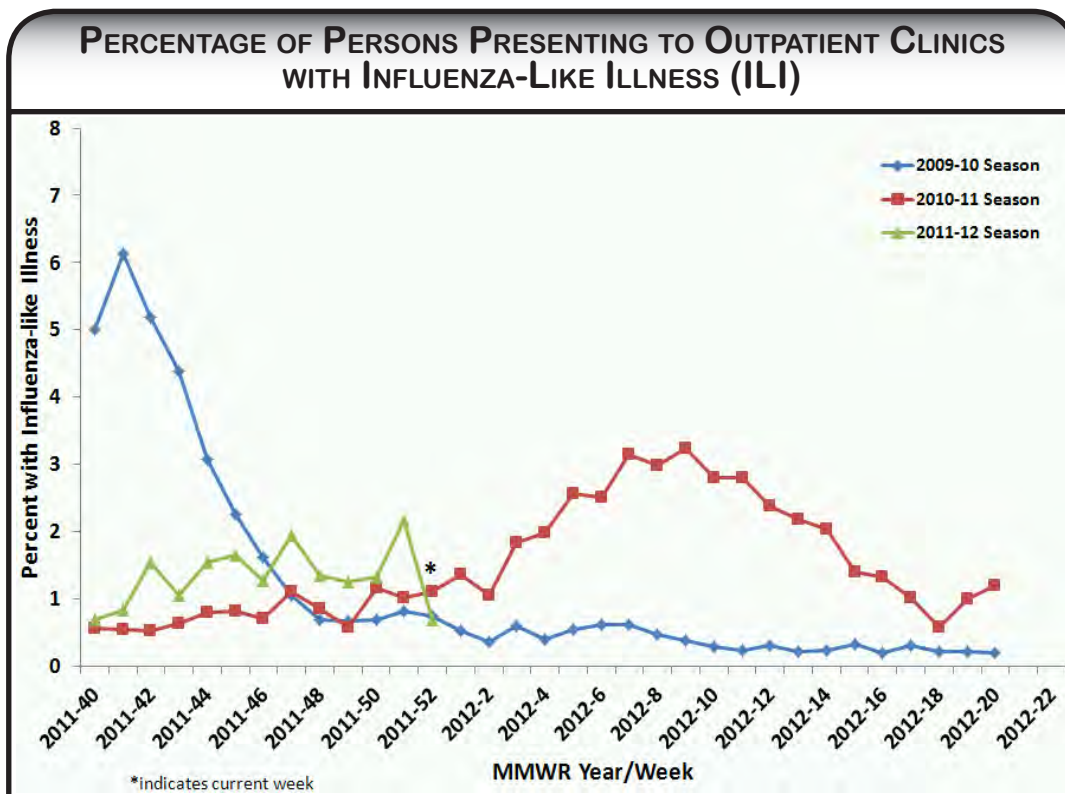




Doctor's Office Visits

0.68% of patients presented with ILI at sentinel sites in Minnesota during week 52.

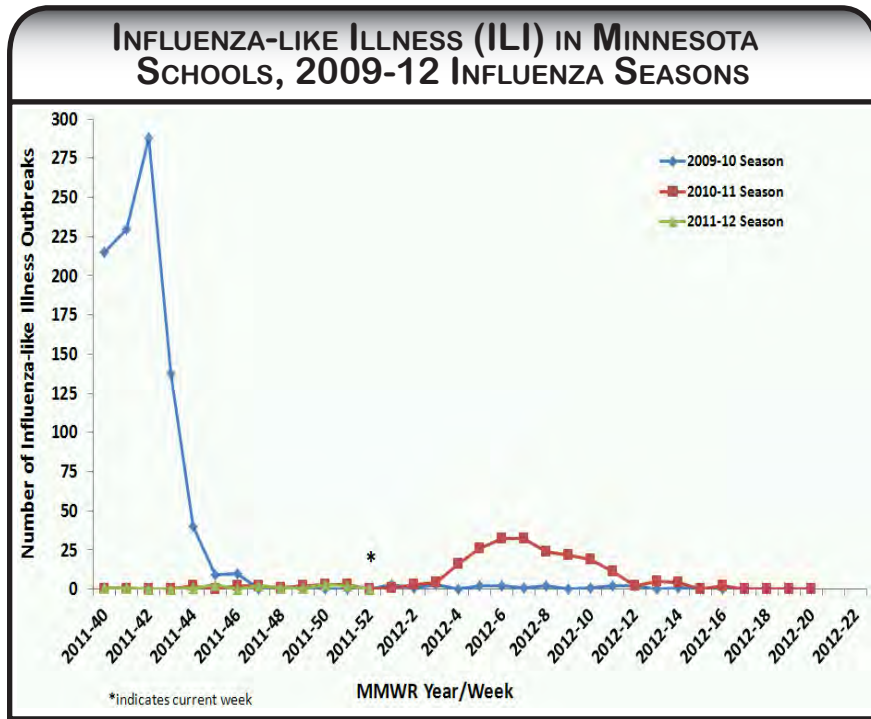
Note: data are preliminary



School Outbreaks

No schools reported outbreaks during week 52.

K-12 schools report an outbreak of influenza-like illness (ILI) when the number of students absent with ILI reaches 5% of total enrollment or three or more students with ILI are absent from the same elementary classroom.



Long-Term Care (LTC) Outbreaks

1 LTC facility reported an outbreak during week 52.

LTC facilities report to MDH when they suspect an outbreak of influenza in their facility. Laboratory confirmed outbreaks are reported here.

