

Current Week's Data at a Glance: Feb 23 - Mar 1, 2014 (Week 9)

Oregon Influenza-Like Illness (ILI) Activity Level¹	Minimal
Oregon Influenza Activity Geographic Spread²	Local
Percent of outpatient visits for ILI	0.48%
Positive influenza tests³	3
Influenza-associated hospitalizations⁴	3
Reported ILI/Influenza outbreaks	1
Influenza-associated pediatric mortality	0
Respiratory Syncytial Virus (RSV) activity⁵	28%

¹Levels are determined by CDC. Based on proportion of outpatient visits— levels include minimal, low, moderate, and high.

²Levels for geographic spread include no activity, sporadic, local, regional, and widespread.

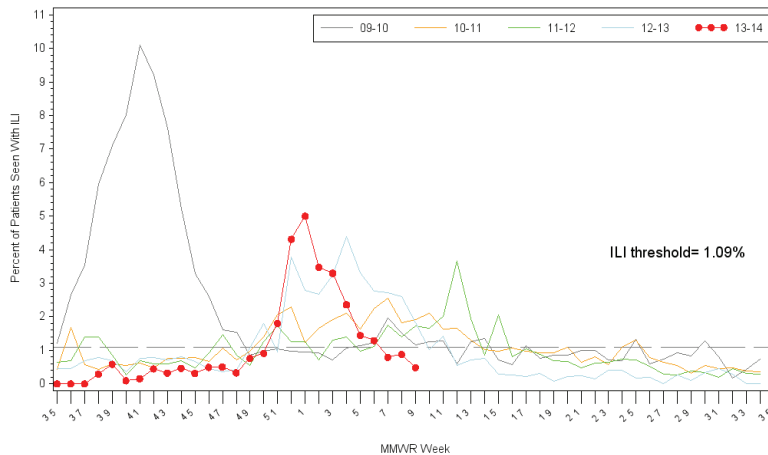
³Reported by state public health lab (OSPHL) from outbreaks, tri-county hospitalizations, and sentinel ILI surveillance; includes only current week positive tests.

⁴Based on hospitalization surveillance in Clackamas, Multnomah, and Washington counties only.

⁵Percent positivity based on data from Oregon's RSV Laboratory Surveillance System.

Oregon Outpatient Influenza-Like Illness Surveillance Network (ILINet)

Percent of Outpatients with Influenza-like Illness (ILI)
2009-2010, 2010-2011, 2011-2012, 2012-2013, 2013-2014



Surveillance weeks run from Sunday through Saturday
Sentinel providers report the number of patients seen with influenza-like illness as well as total patients seen each week.

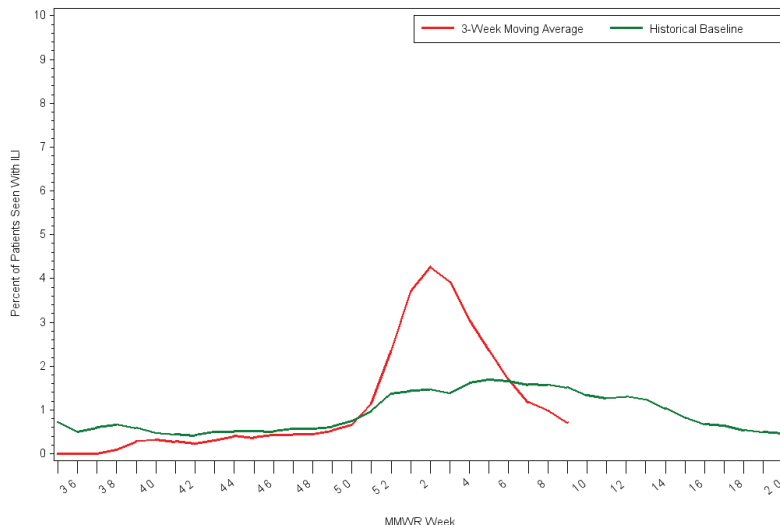
ILINet: Oregon's Outpatient Influenza-like Illness Surveillance Network

Oregon's outpatient influenza-like illness (ILI) network comprises 24 voluntary healthcare providers from across Oregon who report the number of patients with influenza-like illness as well as total number of patient visits for each week during the surveillance season. **The percent of outpatients seen with ILI for week 9 of 2014 was 0.48% which is below Oregon's seasonal threshold of 1.09%.***

Note: ILI is defined as fever ($\geq 100^{\circ}\text{F}$) and cough or sore throat. *The ILI baseline (threshold) is calculated as the mean percentage of visits for ILI during non-influenza weeks (weeks 21-39) with two standard deviations, and is based on the three previous years of data.

Oregon Health Authority, Acute and Communicable Disease Prevention 03MAR14

Oregon Outpatient Influenza-Like Illness Surveillance Network (ILINet)
3-Week Moving Average of Percent of Outpatients with Influenza-like Illness (ILI)



The 3-week moving average for percent of outpatients seen with ILI is 0.72%, which is below the historical moving average baseline for this week.

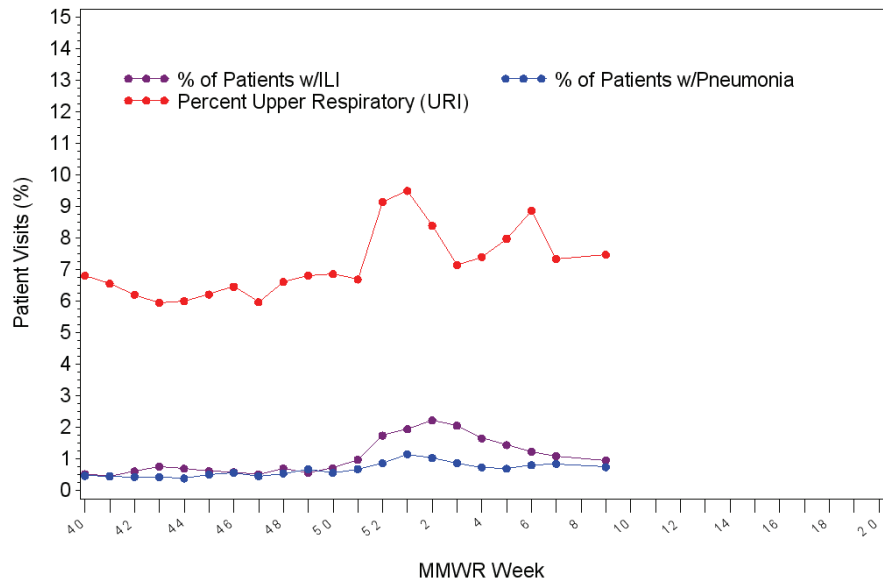
The 3-week moving average does not show actual weekly % ILI, but an average that includes the current week and preceding 2 weeks, and is used to smooth out fluctuations in the data. The historical baseline is the average 3-week moving averages over the preceding four flu seasons.

All FluBites data provided are preliminary, and may change as additional reports are received.

OCHIN Influenza-like Illness Surveillance: Oregon Public Health Division also receives discharge diagnoses data from OCHIN Inc., a collaborative comprising 22 member organizations of federally qualified health centers (FQHC) and rural health centers in Oregon, representing 103 clinics throughout the state. **The percent of outpatient visits for ILI was 0.97% during week 9, 2014.**

Note: Typically, OCHIN reports of ILI are one week *behind* ILINet reports. However, we're reporting week 9 data this week due to the late publication of FluBites from week 9. Respiratory illness categories for OCHIN data are based on ICD-9 diagnostic codes and reason for visit.

Oregon Outpatient ILI/URI/Pneumonia Surveillance, OCHIN 2013-2014



Categories are based on ICD-9 diagnosis codes, combinations of codes, and reason for visit.

Laboratory Surveillance. The Oregon State Public Health Laboratory (OSPHL) is performing influenza typing and sub-typing by PCR on specimens from the following groups of patients:

- Patients seen by Oregon Sentinel providers from ILINet.
- Patients hospitalized with influenza-like illness in the Portland Tri-County area (Multnomah, Clackamas and Washington counties) as part of the CDC-funded study, The Influenza Hospitalization Network (FluSurv-NET).
- Patients identified as part of an outbreak of respiratory illness. Please report clusters of respiratory illness to the on-call ACDP epidemiologist at (971-673-1111), who will then make decisions about the need for testing at the OSPHL.

Tables 1 and 2 show the current week and cumulative totals (since **Oct. 1, 2013**) for influenza and other respiratory virus specimens tested at OSPHL.

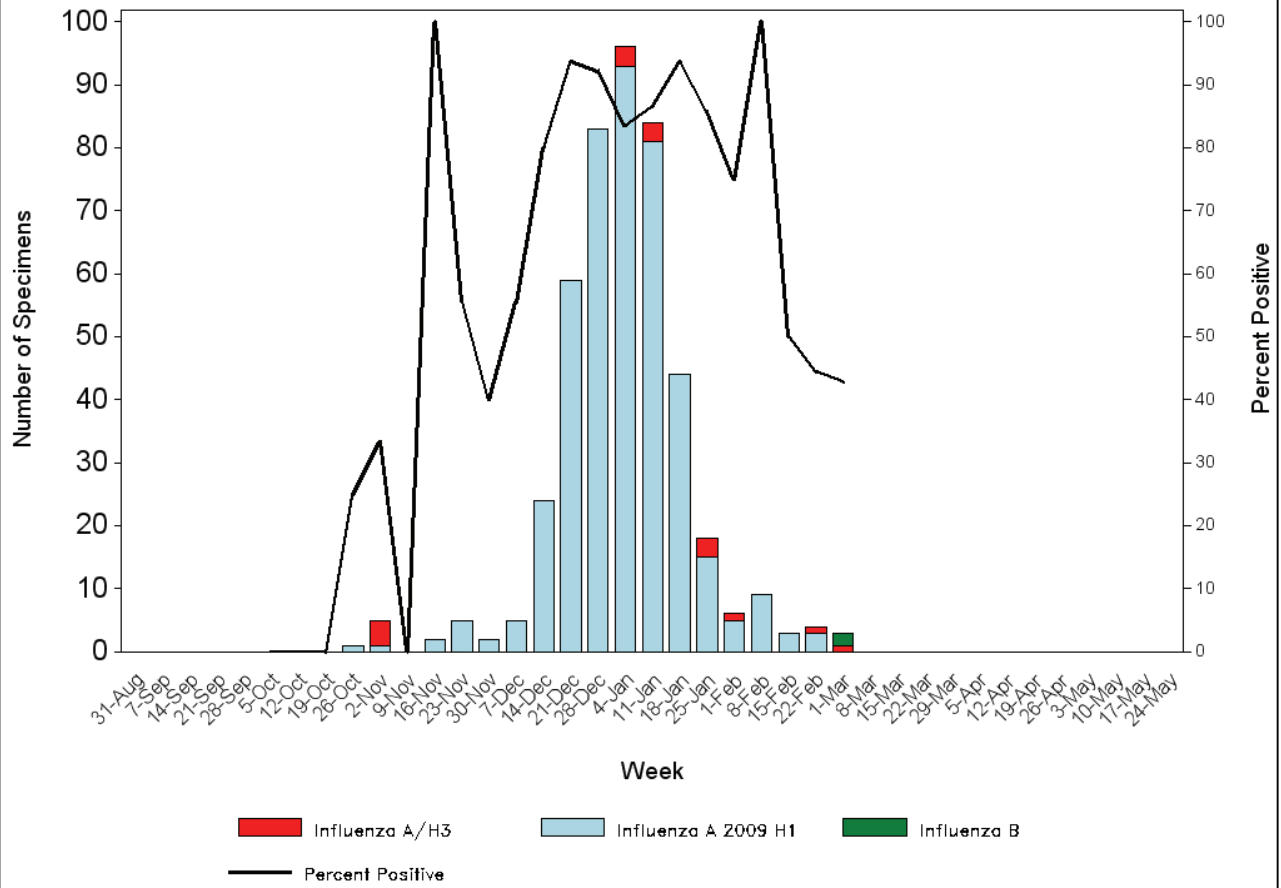
Table 1. Oregon State Public Health Laboratory Influenza Specimen Type and Subtype, 2013-14.

	Current Week	Cumulative
Influenza A	1 (14%)	451 (81%)
2009 H1N1	0	435 (48%)
Seasonal A H3	1 (14%)	16 (3%)
Not subtyped	0	0
Influenza B	2 (29%)	2 (<1%)
Undetected	4 (57%)	106 (19%)
Total Tested	7	559

Table 2. Oregon State Public Health Laboratory Non-Influenza Respiratory Viruses, 2013-14 .

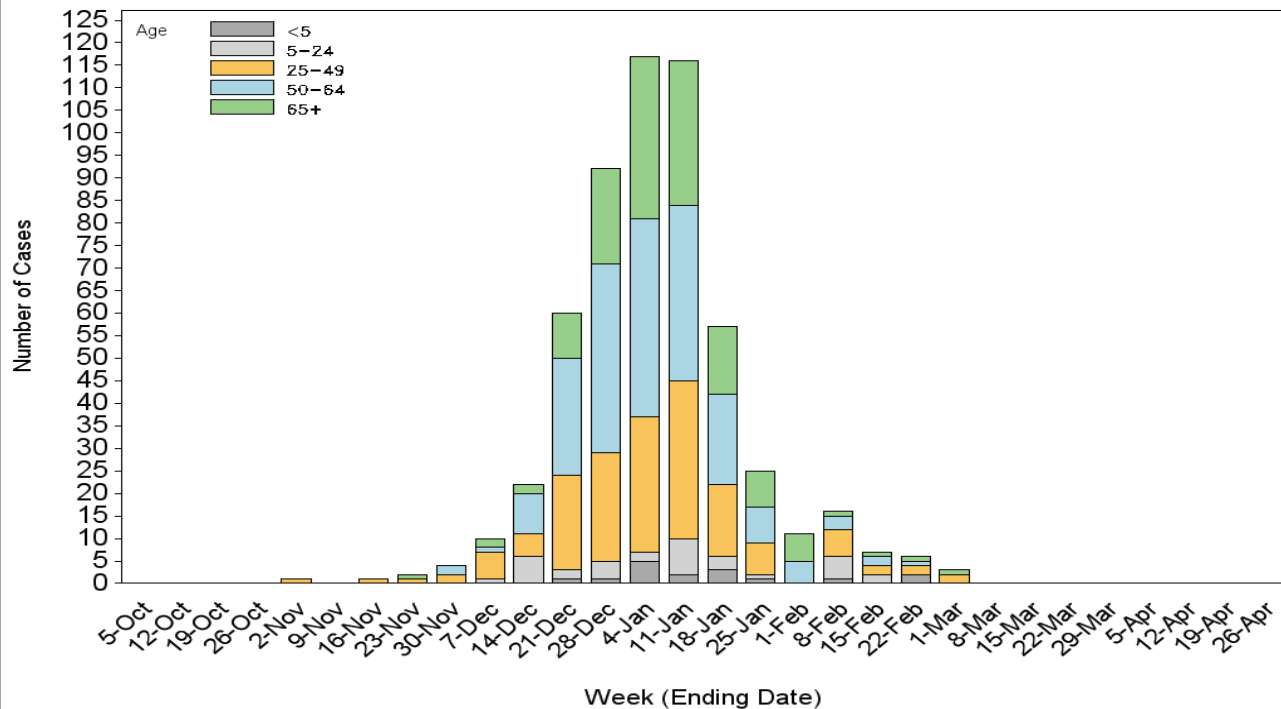
	Current Week	Cumulative
Adenovirus	3 (75%)	13 (11%)
Parainfluenza type 1	0	7 (6%)
Parainfluenza type 2	0	0
Parainfluenza type 3	0	1 (1%)
Human Metapneumovirus	0	3 (3%)
RSV	0	0
Total Tested	4	117

Number and Percent Positive for Influenza by PCR, OSPHL 2013-2014



Hospitalizations: In Clackamas, Multnomah, and Washington counties, five hundred and fifty (550) total reported hospitalizations occurred up to MMWR week 9, with 3 occurring in week 9 of 2014. The total number of hospitalizations reported so far this season (in the metro counties) exceeds the number reported during the 2009 pandemic.

Portland Metro Area Influenza-Associated Hospitalizations by Week and Age Group, 2013-2014



Outbreaks: One ILI/influenza outbreaks were reported for week 9. Eleven total ILI/influenza outbreaks have been reported since October 1.

US Data (from CDC FluView): During week 9 (February 23–March 1, 2014), influenza activity continued to decrease in the United States.

o **Viral Surveillance:** Of 6,748 specimens tested and reported during week 9 by U.S. World Health Organization (WHO) and National Respiratory and Enteric Virus Surveillance System (NREVSS) collaborating laboratories, 587 (8.7%) were positive for influenza.

o **Pneumonia and Influenza Mortality:** The proportion of deaths attributed to pneumonia and influenza (P&I) was above the epidemic threshold.

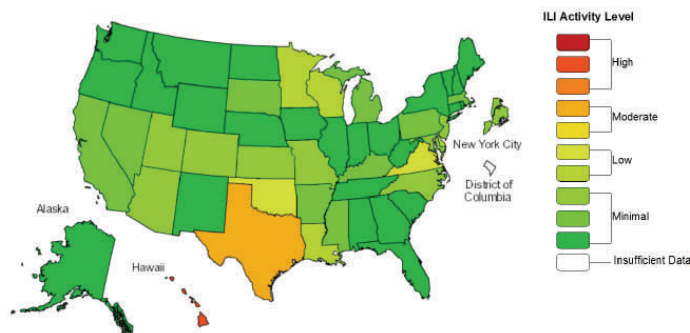
o **Influenza-associated Pediatric Deaths:** Four influenza-associated pediatric deaths were reported.

o **Influenza-associated Hospitalizations:** A season-cumulative rate of 28.5 laboratory confirmed influenza-associated hospitalizations per 100,000 population was reported.

o **Outpatient Illness Surveillance:** The proportion of outpatient visits for influenza-like illness (ILI) was 2.0%, which is at the national baseline. Five of 10 regions reported ILI at or above region-specific baseline levels. One state experienced high ILI activity; one state experienced moderate ILI activity; six states experienced low ILI activity; 42 states and New York City experienced minimal ILI activity, and the District of Columbia had insufficient data.

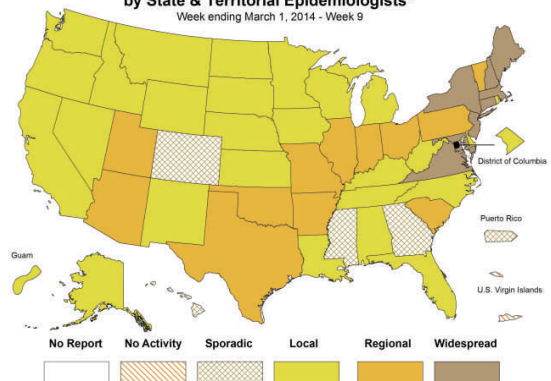
o **Geographic Spread of Influenza:** The geographic spread of influenza in eight states was reported as widespread; 12 states reported regional influenza activity; the District of Columbia, Guam, and 26 states reported local influenza activity; Puerto Rico and four states reported sporadic influenza activity, and the U.S. Virgin Islands reported no influenza activity.

**Influenza-Like Illness (ILI) Activity Level Indicator Determined by Data Reported to ILINet
2013-14 Influenza Season Week 9 ending Mar 01, 2014**



Map above left: This map uses the proportion of outpatient visits to ILINet sentinel providers for influenza-like illness to measure the ILI activity level within a state. It does not, however, measure the extent of geographic spread of flu within a state. Therefore, outbreaks occurring in a single city could cause the state to display high activity levels.

**Weekly Influenza Activity Estimates Reported by State & Territorial Epidemiologists*
Week ending March 1, 2014 - Week 9**



Map above Right: This map measures the geographic spread of influenza viruses, but does not measure the intensity of influenza activity.

Additional resources:

- CDC Weekly Surveillance Report: <http://www.cdc.gov/flu/weekly>
- Recognizing and Diagnosing Influenza A H7N9 and MERS-CoV: <http://1.usa.gov/1hrBtvc>
- MMWR on interim estimates of current season vaccine effectiveness: http://www.cdc.gov/mmwr/preview/mmwrhtml/mm6307a1.htm?s_cid=mm6307a1_e