



# 2016-2017 Influenza Report Week 13 March 26 – April 1, 2017

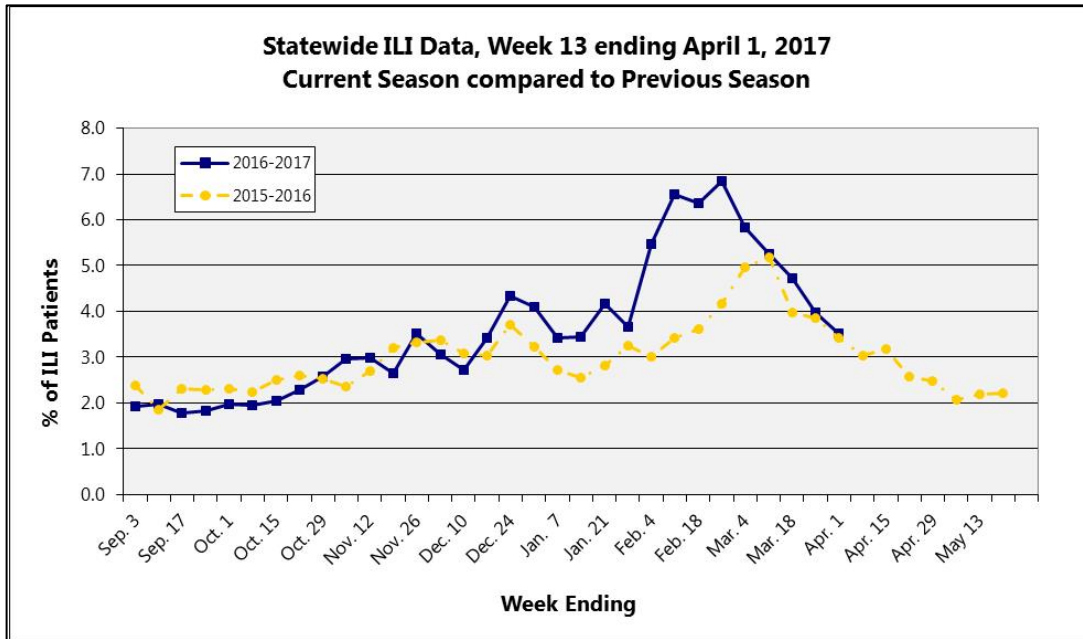
## About our flu activity reporting

MSDH relies upon selected sentinel health practitioners across the state to report the percentage of total patient visits consistent with an influenza-like illness (ILI: fever of 100°F or higher AND cough and/or sore throat). Also, providers are supplied with specimen collection kits. Samples are submitted to the Mississippi Public Health Laboratory for influenza PCR testing. Reports are used to estimate the state's ILI rate and the magnitude of the state's influenza activity. Reports represent only the distribution of flu in the state, not an actual count of all flu cases statewide. **Information is provisional only and may change depending on additional reporting from sentinel providers.**

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**State ILI Surveillance**



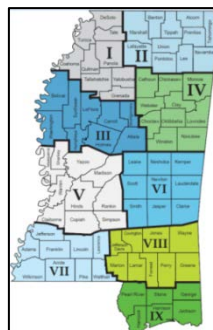
During week **13** (03/26/17 - 04/01/17), the state ILI rate (**3.5%**) **decreased** from the previous week (**4.0%**), and was **comparable** to this time last year (**3.4%**). |

**Figure 1**

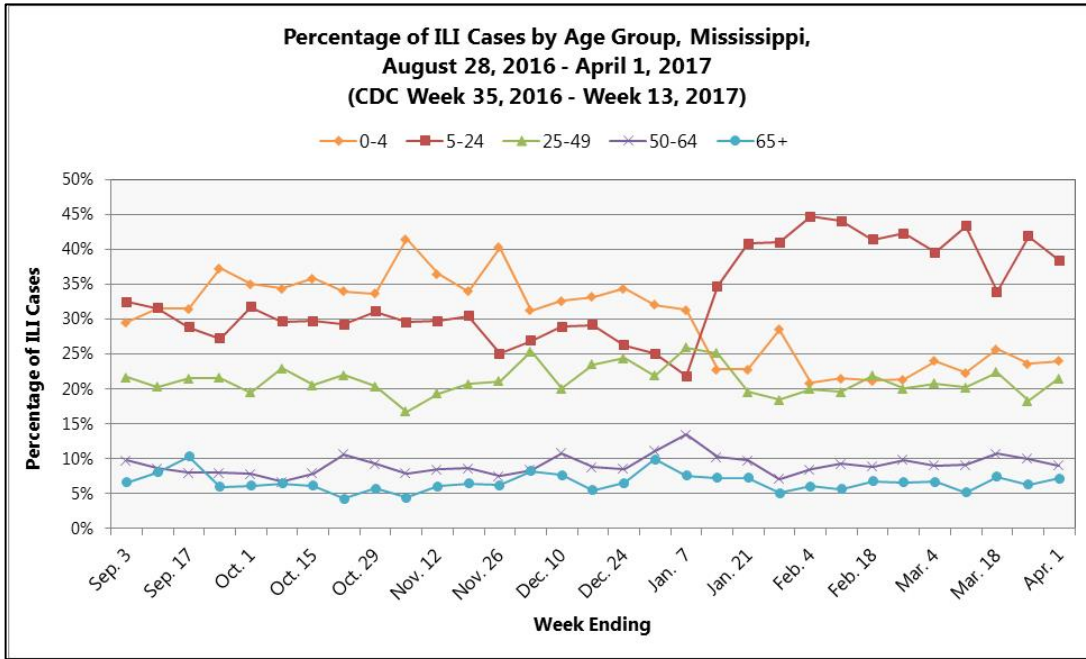
Total number of patients seen by sentinel providers in the last three weeks. | **Table 1**

2016-2017 Influenza Season					
CDC Week	Week Ending	Number of ILI Reports	Total patients	ILI symptoms	ILI Rate (%)
<b>13</b>	<b>Apr. 01</b>	135	18338	643	<b>3.5%</b>
12	Mar. 25	137	20391	810	4.0%
11	Mar. 18	137	17470	823	4.7%

During week **13**, **three** districts (2, 3, and 4) had an increase in ILI activity, while **four** districts (1, 6, 8, and 9) had a decrease. **Two** districts (5 and 7) remained about the same. *Information is provisional only and may change depending on additional reporting from sentinel providers.* | **Table 2**



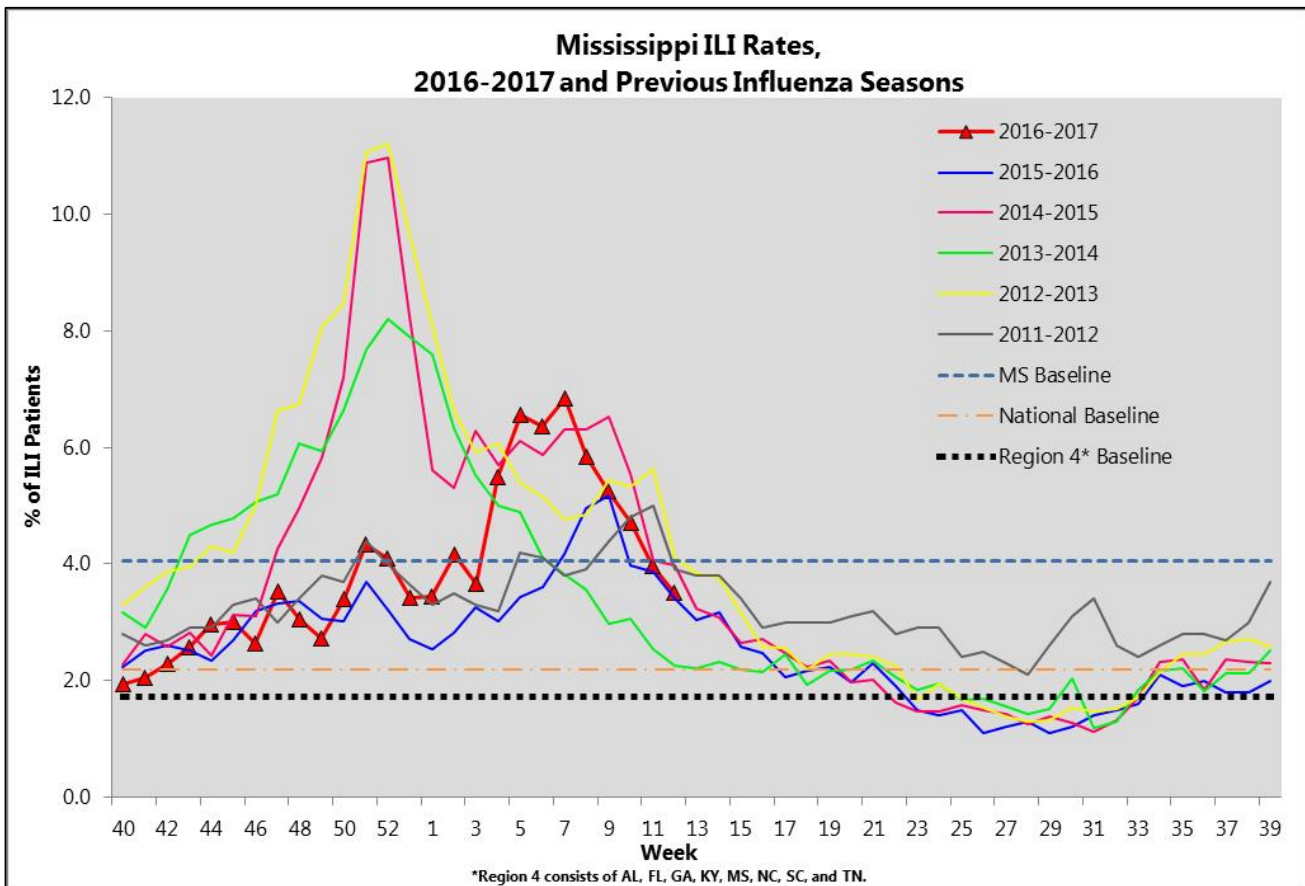
MSDH District ILI Rates (%) 2016-2017		
District	Week 12	Week 13
State	4.0	3.5
I	5.8	3.9
II	2.0	3.9
III	3.0	3.9
IV	2.4	3.1
V	2.2	2.3
VI	6.7	4.6
VII	3.3	3.6
VIII	3.4	2.7
IX	5.4	4.3



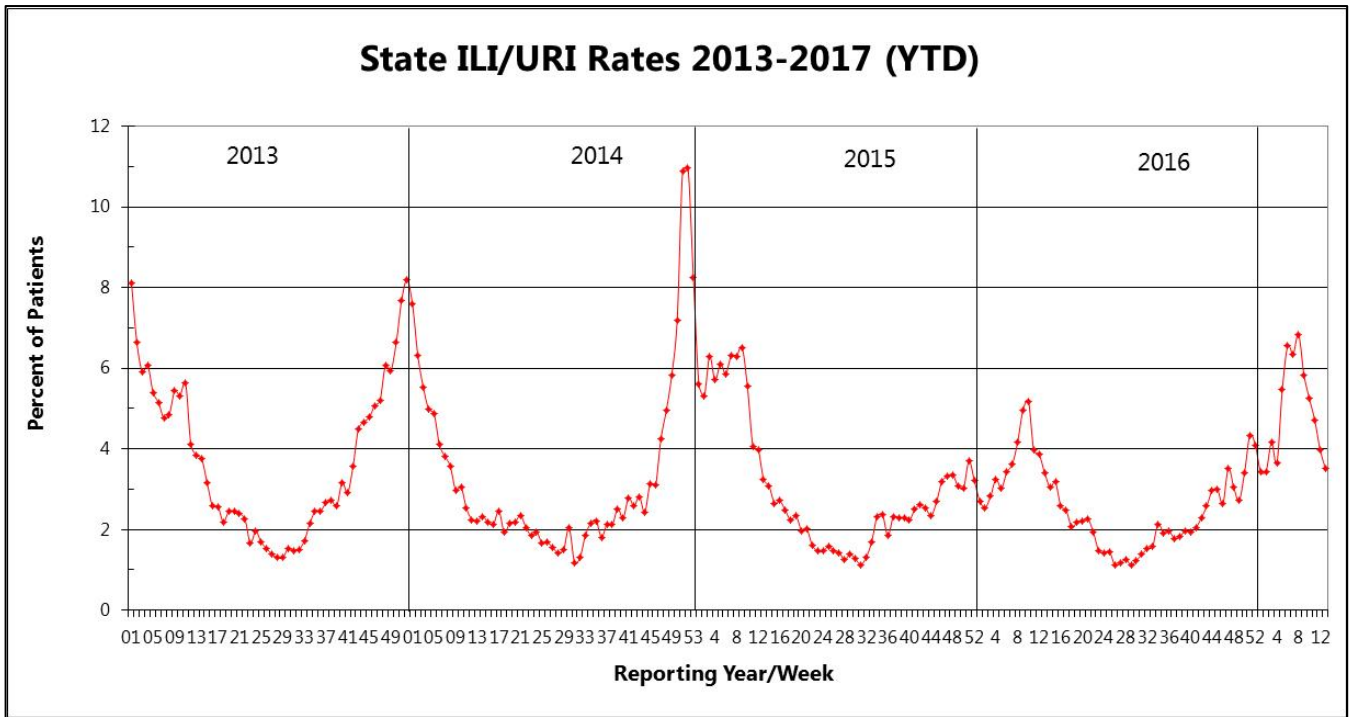
Overall, the percentage of reported ILI cases has been highest among those in the **0-4** and **5-24 years**. During week **13** though, the percentage of reported ILI cases continued

to be highest among those in the **5-24 years** of age group. | [Figure 2](#)

The 2016-17 state ILI rate was **above** the national and Region 4 baselines, but was **below** the state baseline for week **13**. | [Figure 3](#)

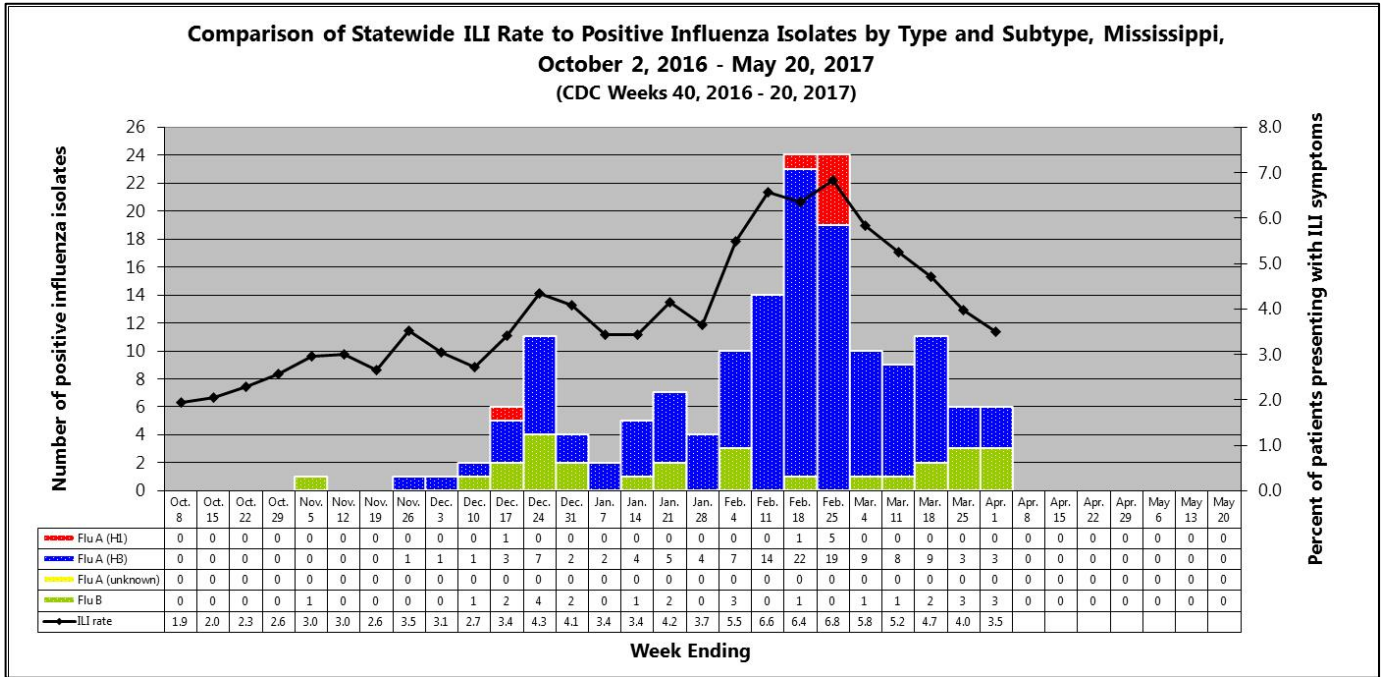


Mississippi ILI Rates 2013-2017 | [Figure 4](#)



### Flu Testing Reports

From week **40** (week ending Oct. 8<sup>th</sup>) through week **13** (week ending April 1<sup>st</sup>), **158** laboratory confirmed influenza samples were identified by the MSDH Public Health Laboratory. One hundred twenty-four (78%) samples were identified as influenza A (H3), 27 (17%) were identified as influenza B, and seven (4%) were identified as influenza A (H1). | [Figure 5](#)



The influenza cases were identified from the following counties: Alcorn (3), Attala (2), Choctaw (2), Coahoma (9), Copiah (4), Covington (2), DeSoto (1), Forrest (3), George (3), Harrison (2), Hinds (5), Holmes (2), Jackson (2), Jones (3), Lafayette (5), Lauderdale (3), Lawrence (1), Leake (2), Lee (4), Leflore (3), Lincoln (14), Lowndes (9), Madison (2), Marion (2), Marshall (5), Monroe (5), Neshoba (7), Newton (4), Oktibbeha (10), Pearl River (2), Perry (1), Pike (4), Pontotoc (3), Quitman (1), Rankin (3), Sharkey (1), Simpson (2), Tallahatchie (3), Tate (2), Tippah (4), Warren (2), Washington (4), Webster (2), and Winston (5).

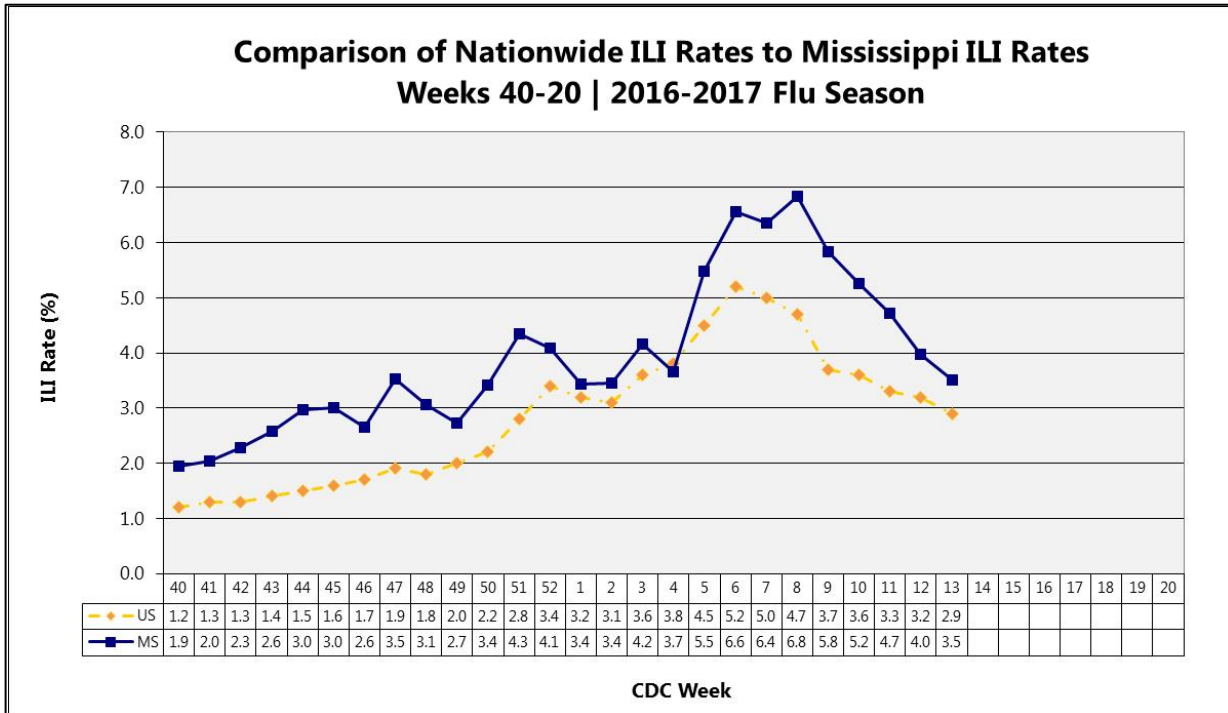
### National and Mississippi Pediatric Mortality Surveillance

Nationally, **seven** influenza-associated pediatric deaths were reported to CDC during week **13**. Two deaths were associated with an influenza A (H3) virus and occurred during weeks 50 and 11 (weeks ending December 17<sup>th</sup>, 2016, and March 18<sup>th</sup>, 2017, respectively). One death was associated with an influenza A virus for which no subtyping was performed and occurred during week 13 (week ending April 1<sup>st</sup>). Four deaths were associated with an influenza B virus and occurred during weeks 01, 07, 10, and 12 (weeks ending January 7<sup>th</sup>, February 18<sup>th</sup>, March 11<sup>th</sup>, and March 25<sup>th</sup>, respectively). **68** influenza-associated pediatric deaths have been reported during the 2016-2017 season.

Mississippi has had **one** influenza-associated pediatric death reported during this influenza season. For additional information on influenza-associated pediatric deaths, please refer to the [CDC's FluView](#).

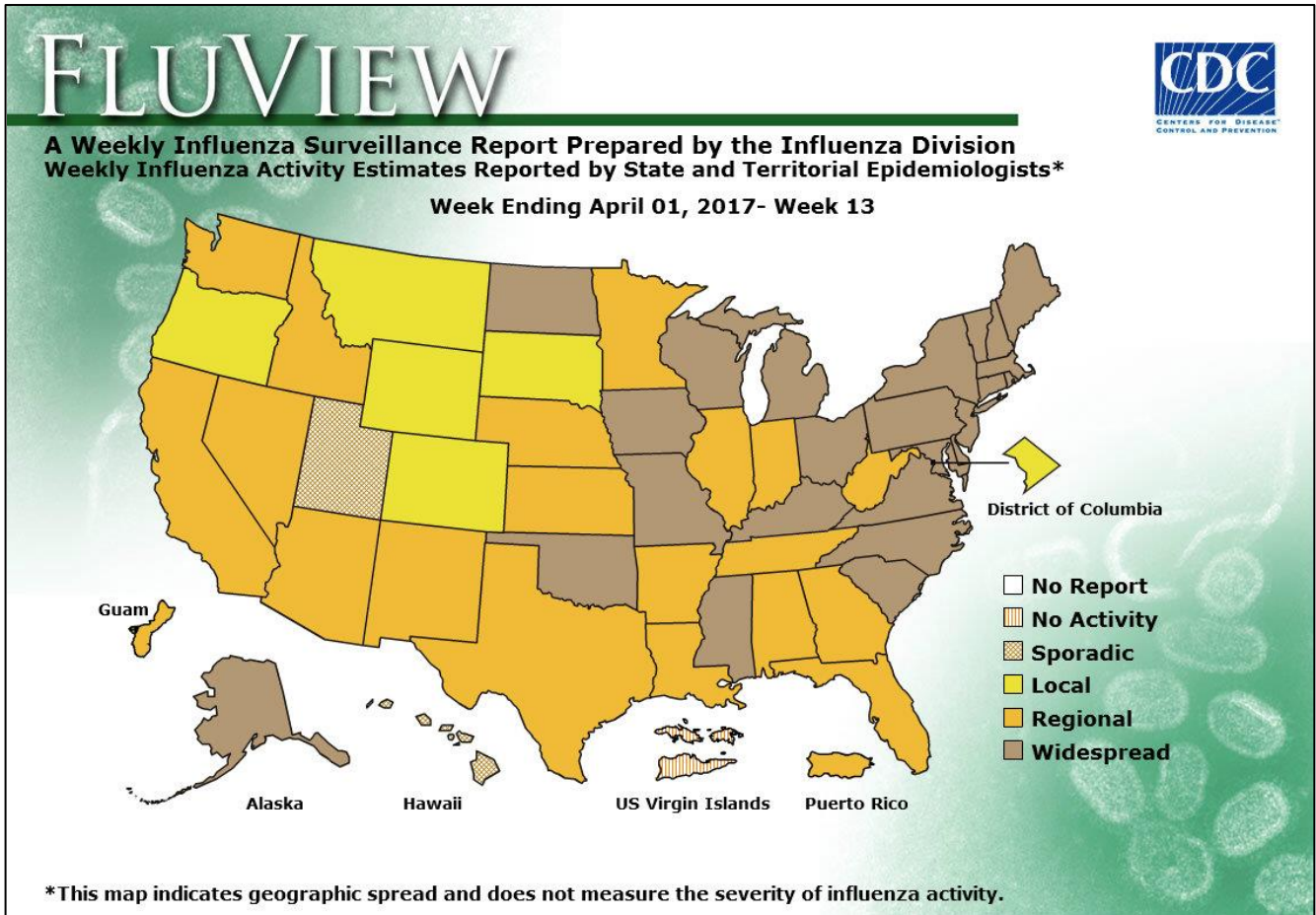
**National ILI Surveillance**

For week **13**, the MS ILI rate (3.5%) was **slightly above** the national ILI rate (2.9%), but continued to follow the downward trend. | [Figure 6](#)



US ILI rates from the Centers for Disease Control and Prevention: <http://www.cdc.gov/flu/weekly/>.

During week **13**, influenza activity **decreased** but **remained elevated** in the United States.<sup>1</sup> | [Figure 7](#)



<sup>1</sup>For up-to-date information on flu activity nationwide, please refer to the CDC’s website:  
<http://www.cdc.gov/flu/weekly/fluactivitysurv.htm>.

Mississippi reported “**Widespread**” for the influenza activity during week **13**. | **Table 3**

Level of Flu Activity	Definition
<b>No Activity</b>	Overall clinical activity remains low and there are no lab confirmed cases.
<b>Sporadic</b>	Isolated cases of lab confirmed influenza in the state; ILI activity is not increased <u>OR</u> A lab-confirmed outbreak in a single institution in the state; ILI activity is not increased.
<b>Local</b>	Increased ILI within a single region <b>AND</b> recent (within the past 3 weeks) laboratory evidence of influenza in that region. ILI activity in other regions is not increased <u>OR</u> two of more institutional outbreaks (ILI or lab confirmed) within a single region <b>AND</b> recent (within the past 3 weeks) lab confirmed influenza in that region. Other regions do not have increased ILI and virus activity is no greater than sporadic in those regions
<b>Regional</b>	Increased ILI in at least 2 regions but fewer than half of the regions <b>AND</b> recent (within the past 3 weeks) lab confirmed influenza in the affected regions <u>OR</u> Institutional outbreaks (ILI or lab confirmed) in at least 2 regions but fewer than half of the regions <b>AND</b> recent lab confirmed influenza in the affected regions.
<b>Widespread</b>	Increased ILI and/or institutional outbreaks (ILI or lab confirmed) in at least half of the regions <b>AND</b> recent (within the past 3 weeks) lab confirmed influenza in the state.

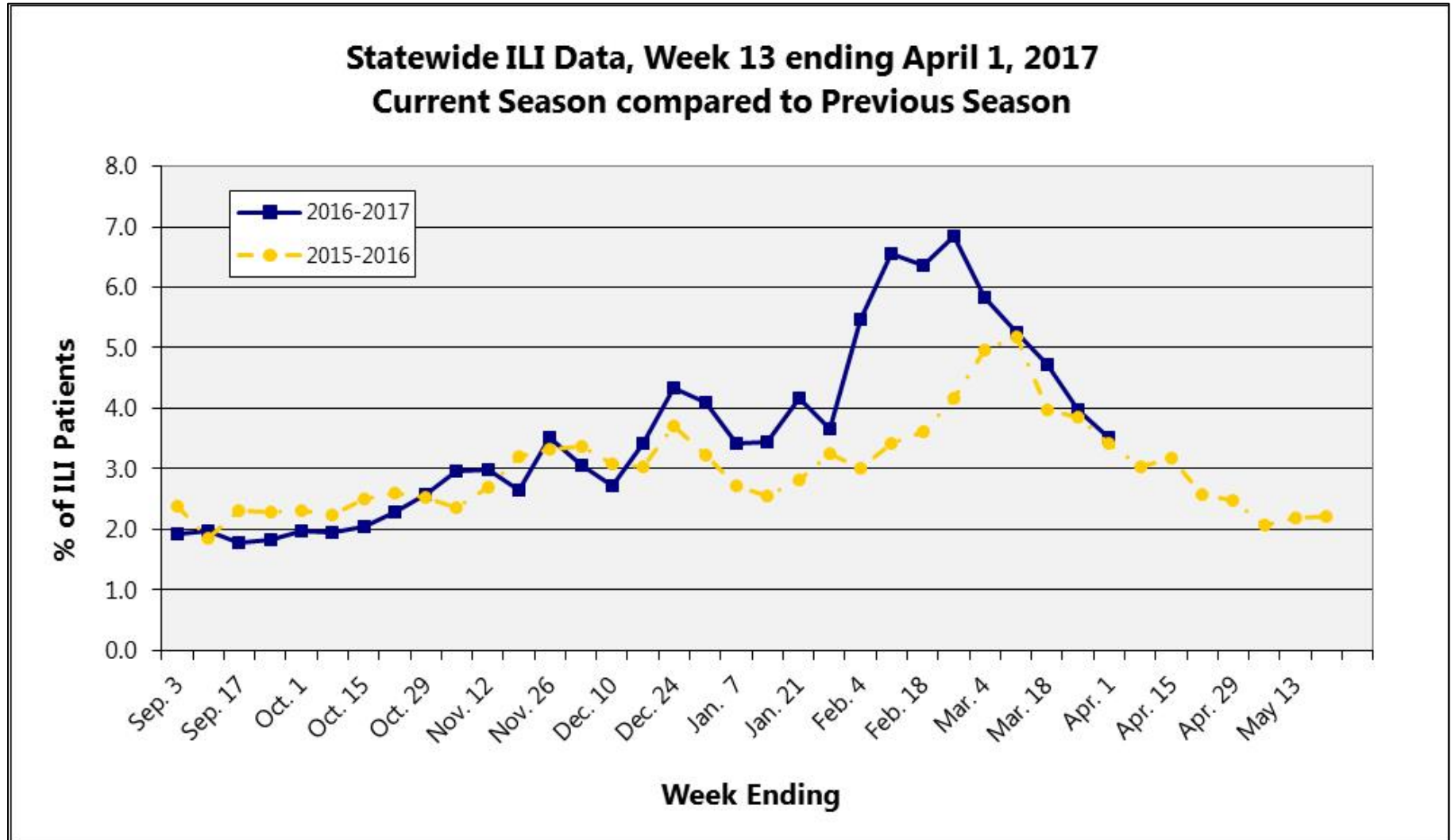
**Additional influenza information:**

<b>Centers for Disease Control and Prevention</b>	<a href="http://cdc.gov/flu/">http://cdc.gov/flu/</a>
<b>Centers for Disease Control and Prevention FluView</b>	<a href="http://www.cdc.gov/flu/weekly/">http://www.cdc.gov/flu/weekly/</a>
<b>Flu.gov</b>	<a href="http://www.flu.gov/">http://www.flu.gov/</a>
<b>MSDH Flu and Pneumonia</b>	<a href="http://msdh.ms.gov/msdhsite/_static/14,0,199.html">http://msdh.ms.gov/msdhsite/_static/14,0,199.html</a>
<b>World Health Organization FluNet</b>	<a href="http://www.who.int/influenza/gisrs_laboratory/flunet/en/">http://www.who.int/influenza/gisrs_laboratory/flunet/en/</a>

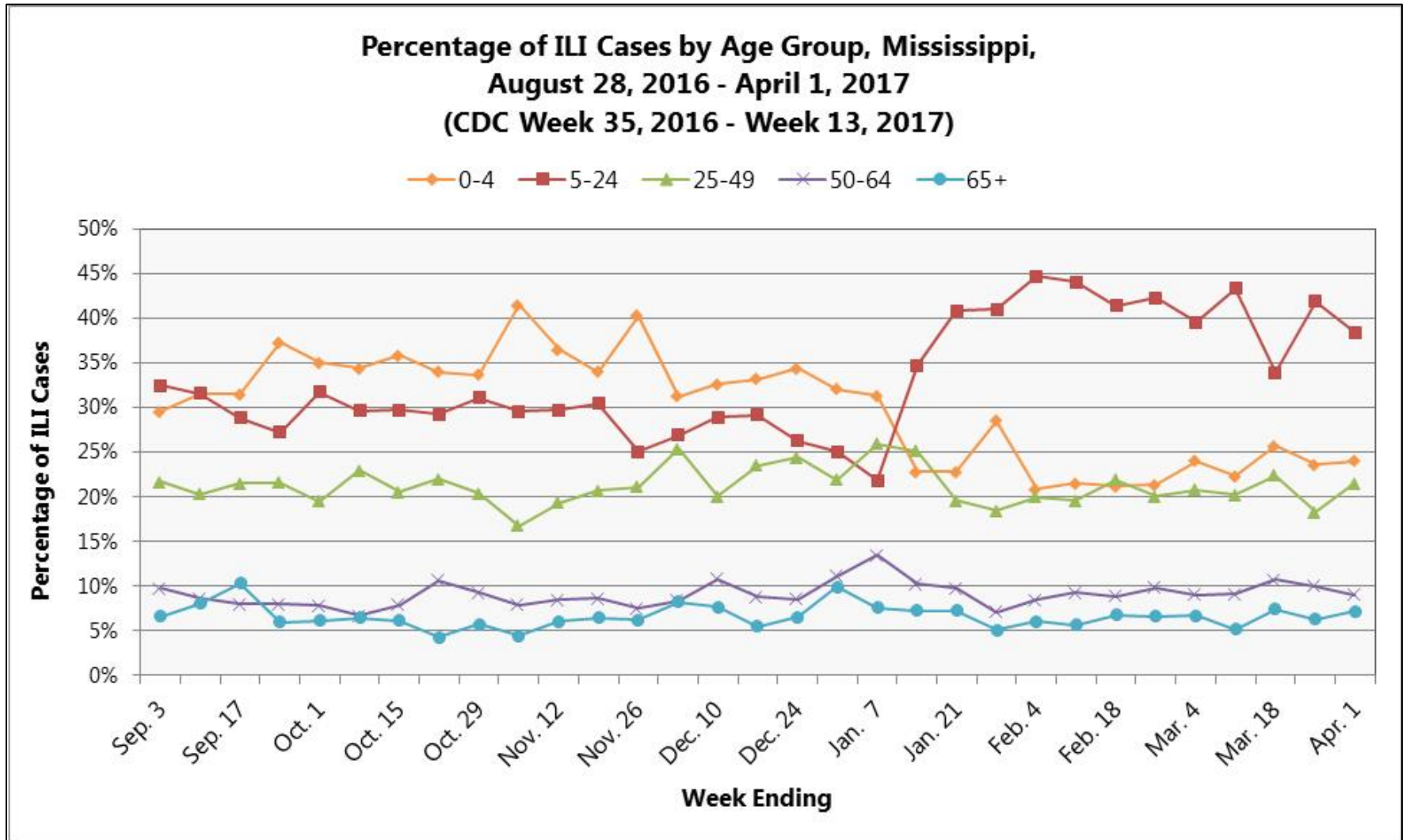


## Appendix

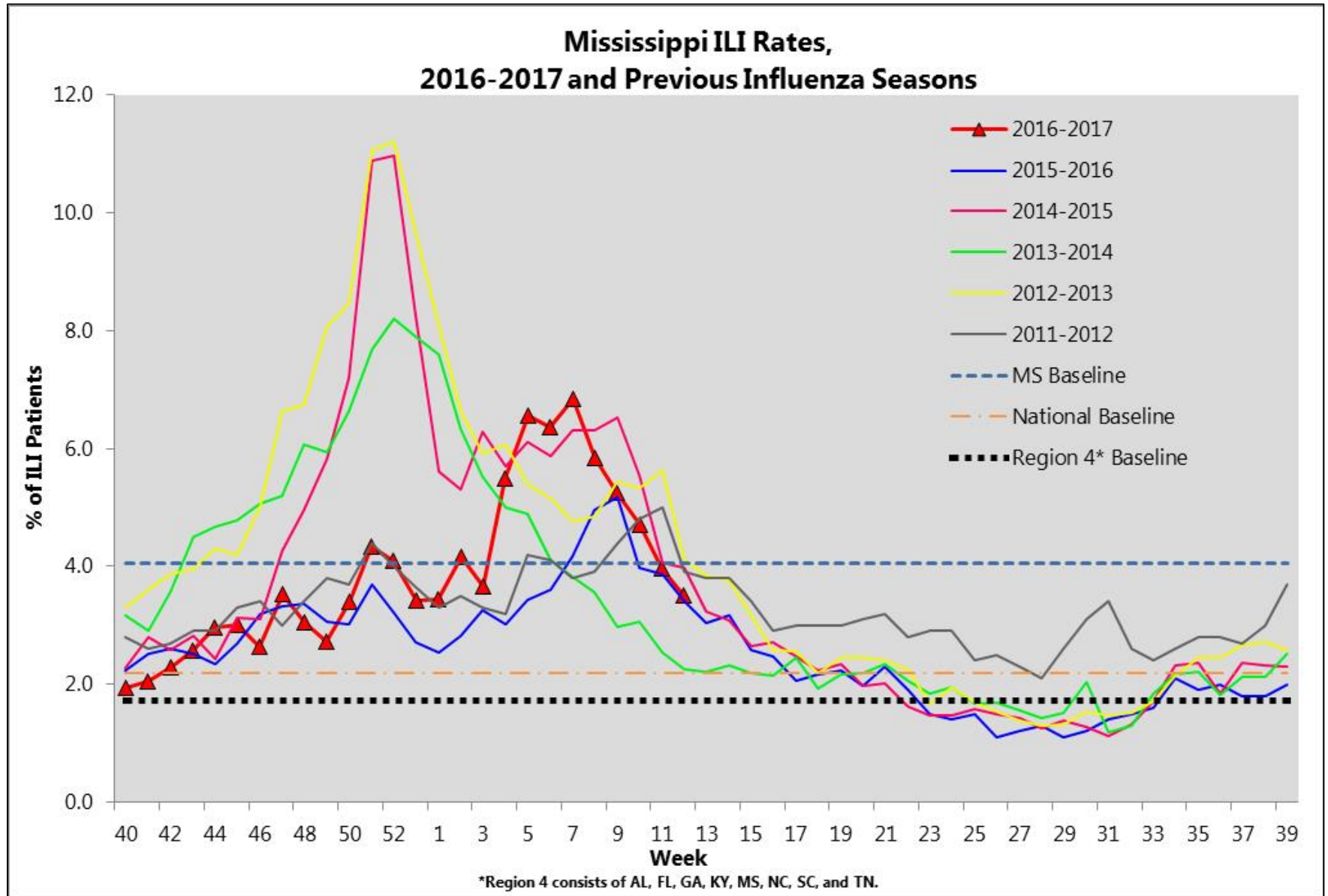
Figure 1



**Figure 2**



**Figure 3**



**Figure 4**

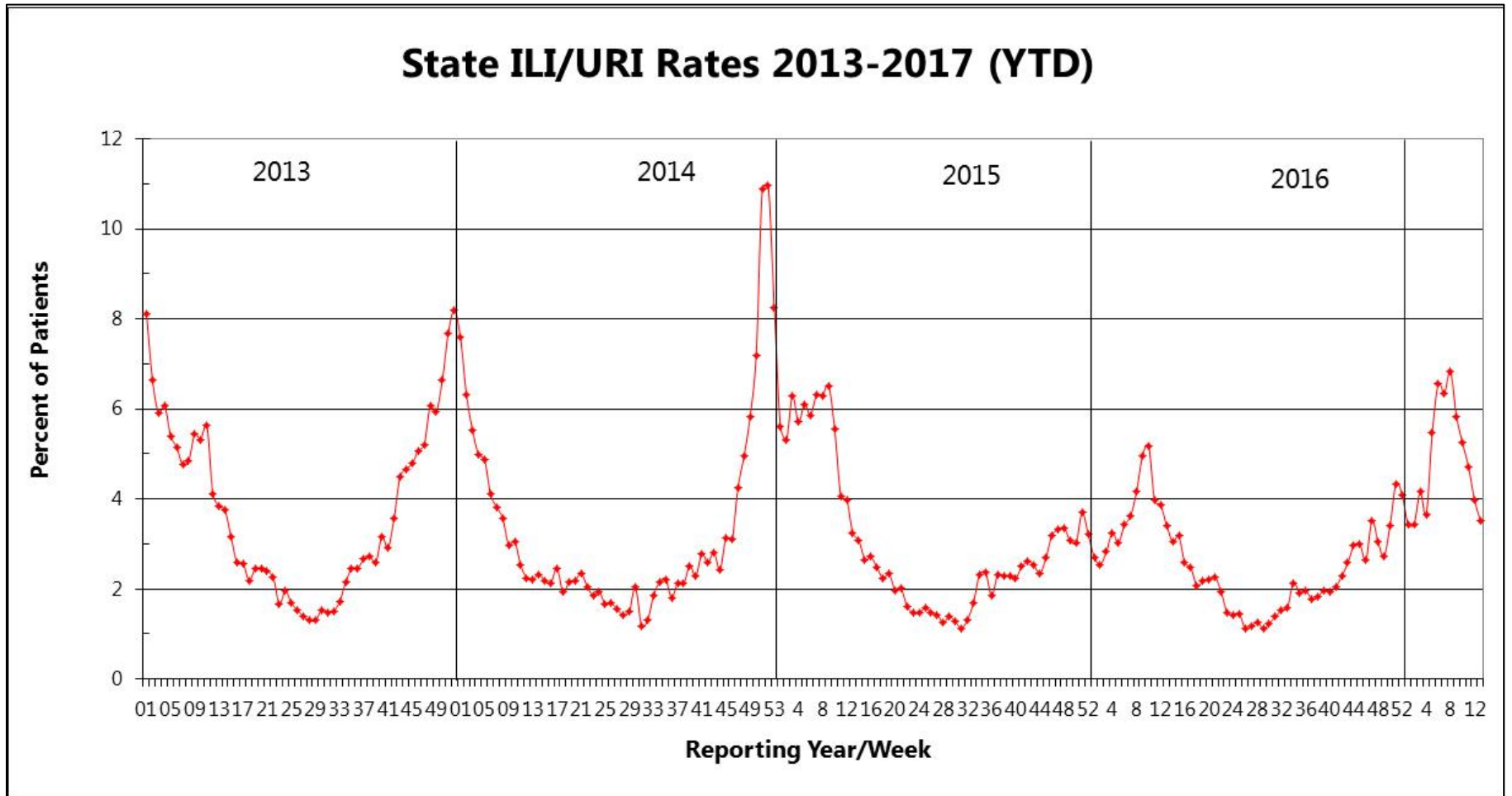


Figure 5

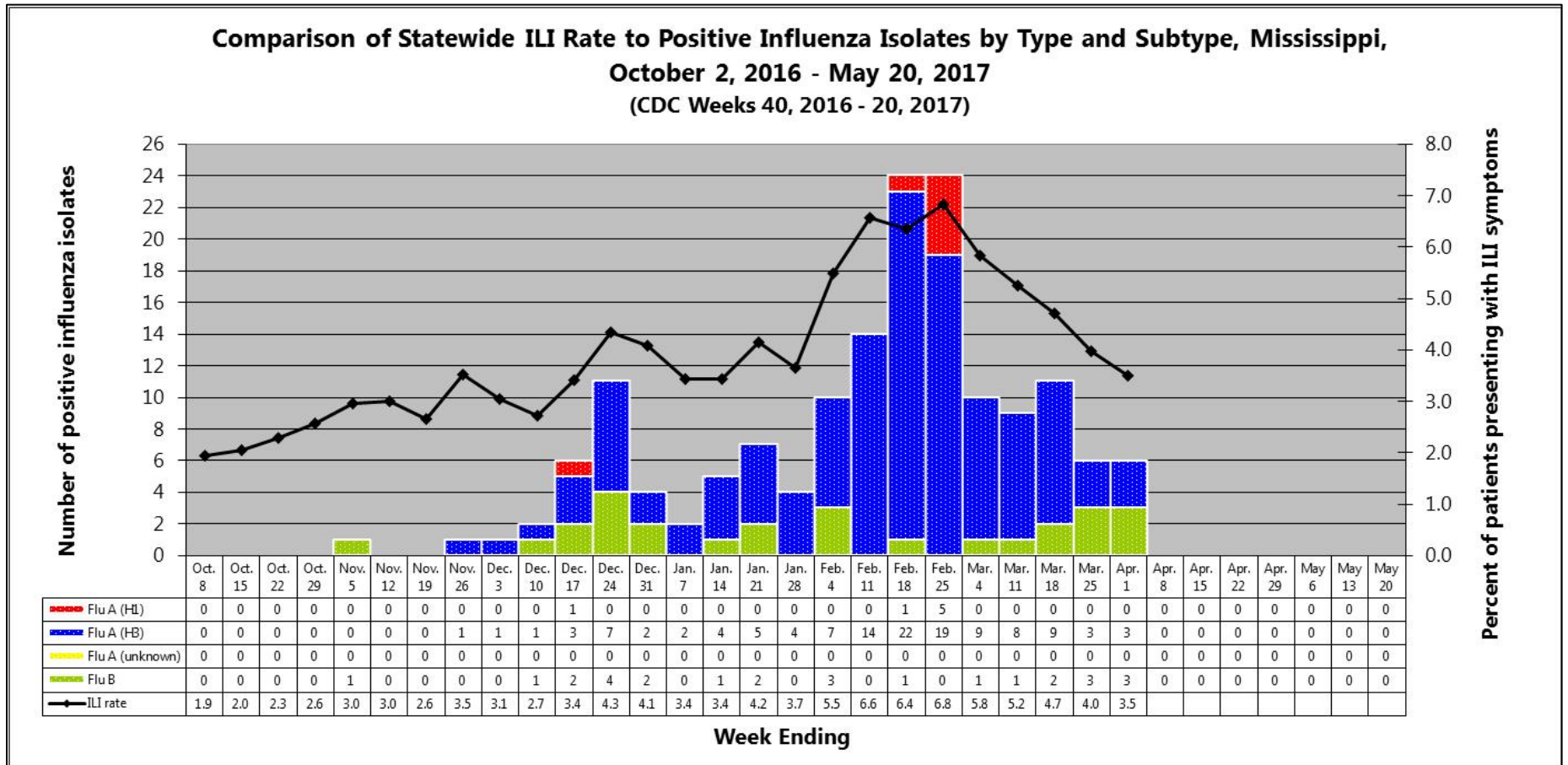


Figure 6

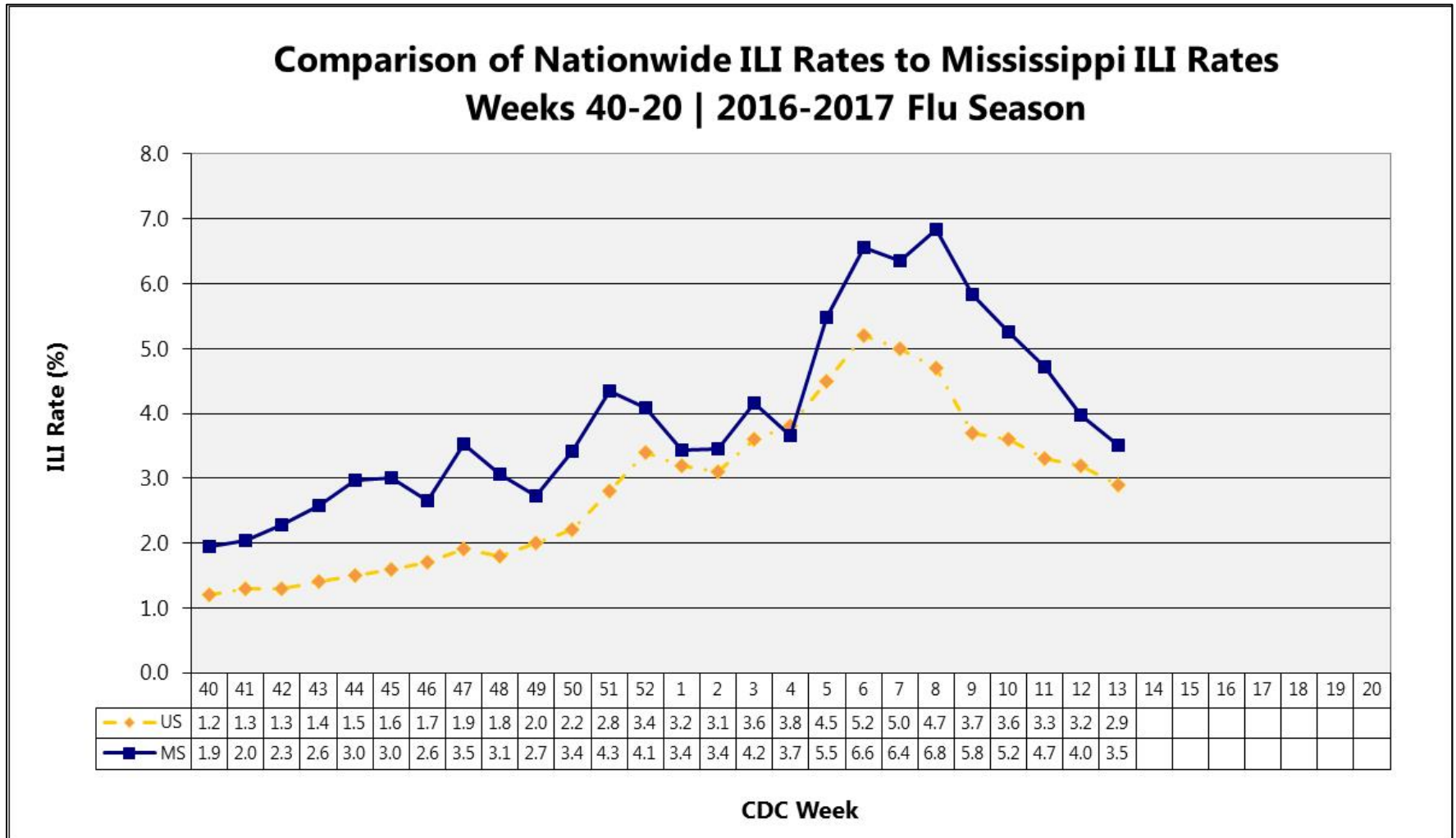


Figure 7

