



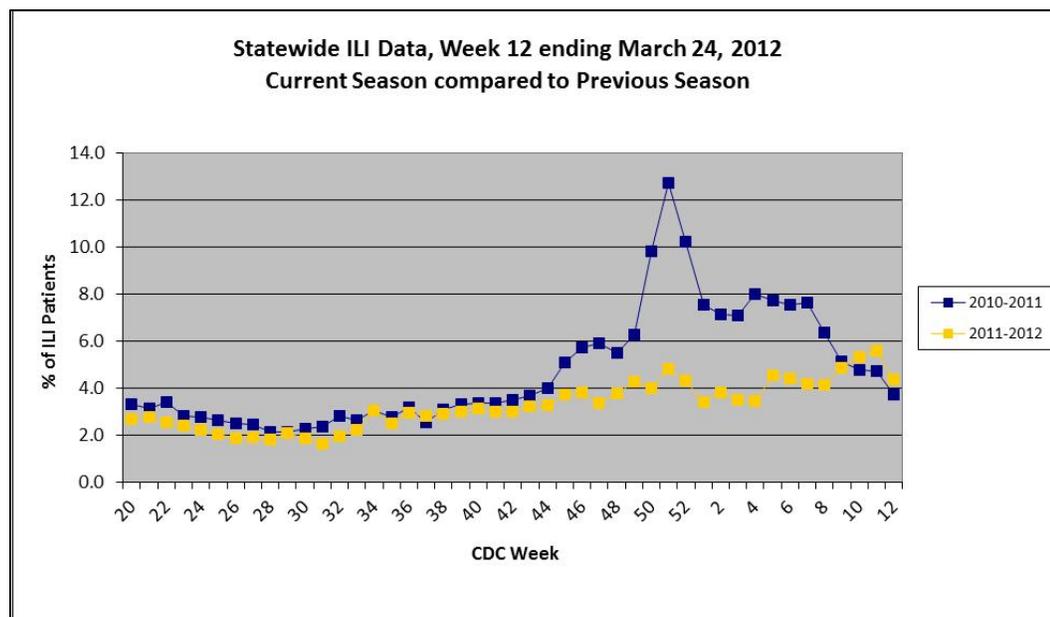
2011-2012 Influenza Report Week 12

March 18 – March 24, 2012

About our flu activity reporting

MSDH relies upon selected sentinel health practitioners across the state to report the percentage of non-trauma visits consistent with an influenza-like illness (ILI: fever > 100°F 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.**

State ILI Surveillance



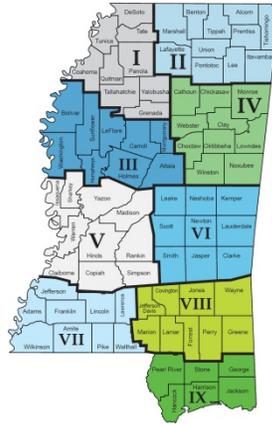
For week 12 (03/18/2012-03/24/2012), the overall state ILI rate (**4.4%**) **decreased** from last week (**5.6%**), but was higher than this time last year (**3.7%**). |

Figure 1

Total number of non-trauma patients treated by sentinel providers in the last three weeks. | **Table 1**

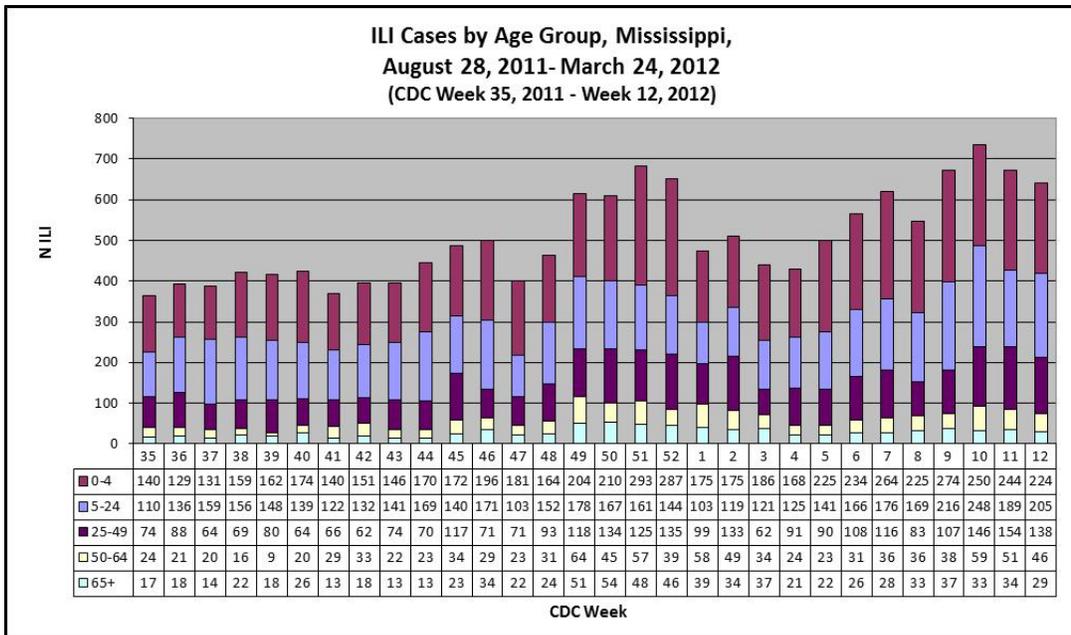
2011-2012 Influenza Season				
CDC Week	Week Ending	Non-trauma patients	ILI symptoms	ILI Rate (%)
12	Mar. 24	13885	607	4.4%
11	Mar. 17	13412	748	5.6%
10	Mar. 10	15982	848	5.3%

During week **12**, **one** district (3) had an increase in ILI activity, while **six** districts (1, 2, 4, 6, 7, and 8) had a decrease. **Two** districts (5 and 9) remained about the same. *Information is provisional only and may change depending on additional reporting from sentinel providers.* / **Table 2**



Map – MS Public Health Districts

MSDH District ILI Rates (%) 2011-2012		
District	Week 11	Week 12
State	5.6	4.4
I	7.2	4.3
II	5.1	3.2
III	0.0	4.4
IV	7.6	5.0
V	1.3	1.3
VI	12.4	8.3
VII	5.8	4.3
VIII	10.8	7.1
IX	2.9	3.3

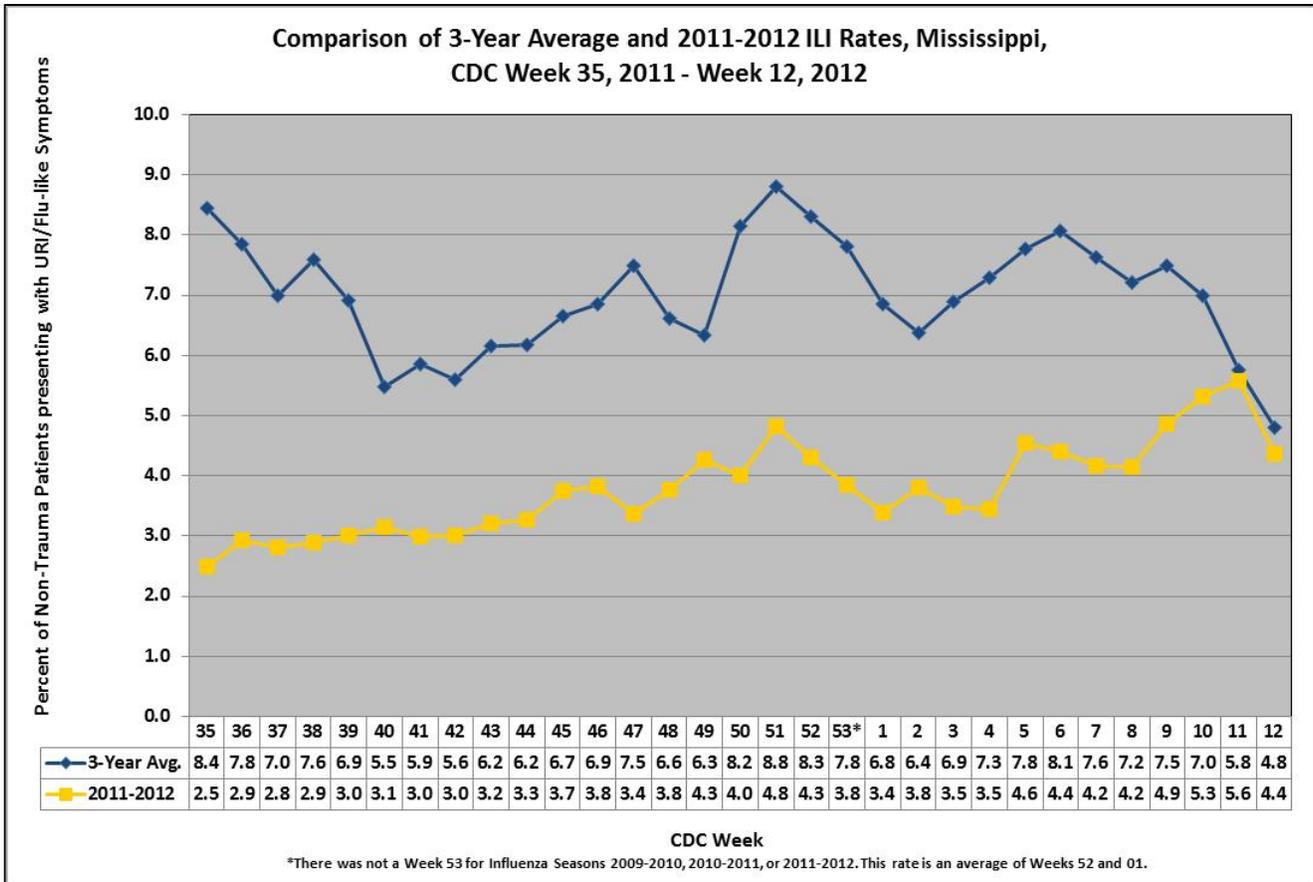


The number of reported ILI cases has been highest among people in the 0 to 4 years of age group, followed by those in the 5 to 24 years of age group. During Week

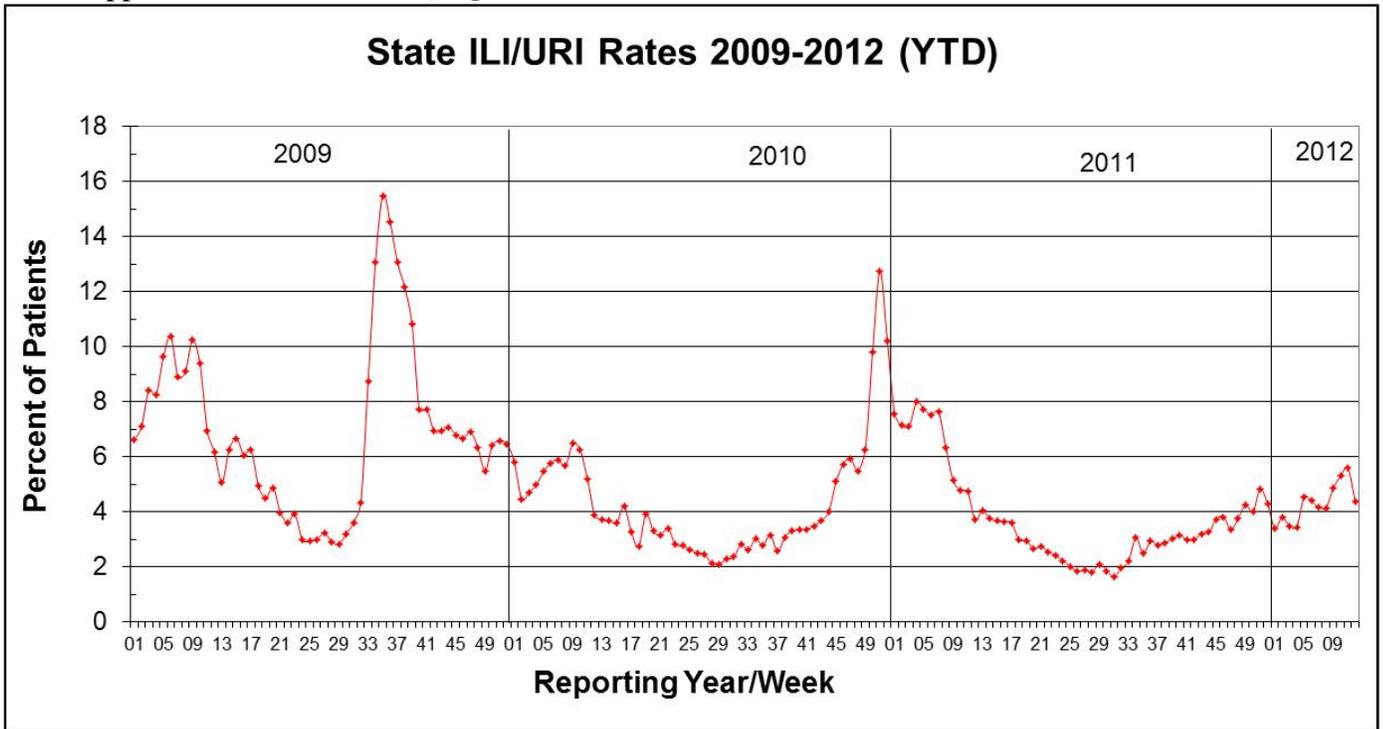
12, the number of reported ILI cases was highest among individuals in the **0 to 4 years** of age group. |

Figure 2

The 2011-12 state ILI rate was **comparable** to baseline for week **12**. | **Figure 3**



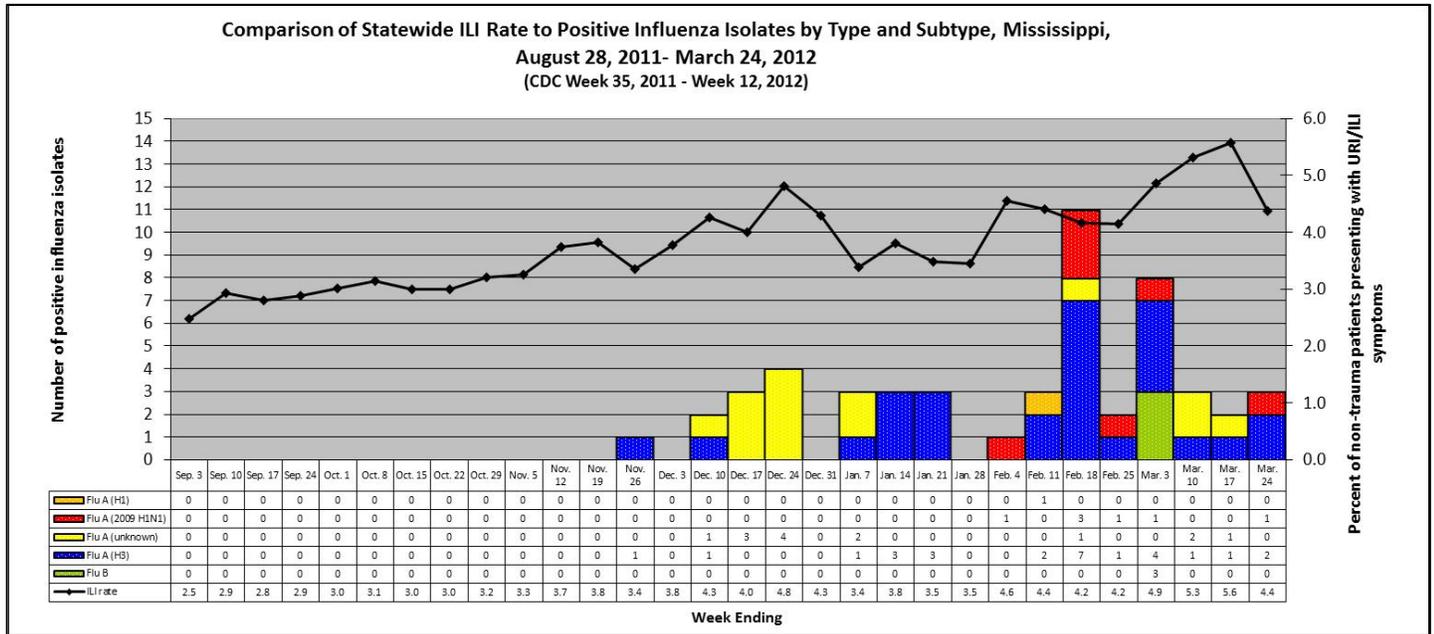
Mississippi ILI Rates 2009-2012 | **Figure 4**



Flu testing Reports

From week **35** (week ending September 3rd) through week **12** (week ending March 24th), fifty-two (**52**) positive influenza samples were identified by MSDH. Forty-nine were influenza A and three were influenza B. Twenty-seven were subtyped as influenza A (H3) and eight were subtyped as influenza A (H1). Fourteen samples did not have subtyping performed.

The influenza cases were identified from the following counties: Benton, Calhoun (4), Chickasaw, Coahoma, Copiah (2), Covington, DeSoto (2), Forrest, Harrison (3), Hinds (4), Lawrence, Leflore, Lincoln, Marshall (9), Monroe, Neshoba, Oktibbeha, Panola, Prentiss, Rankin (2), Stone, Tate (2), and Yazoo (10). | **Figure 5**



National ILI Surveillance

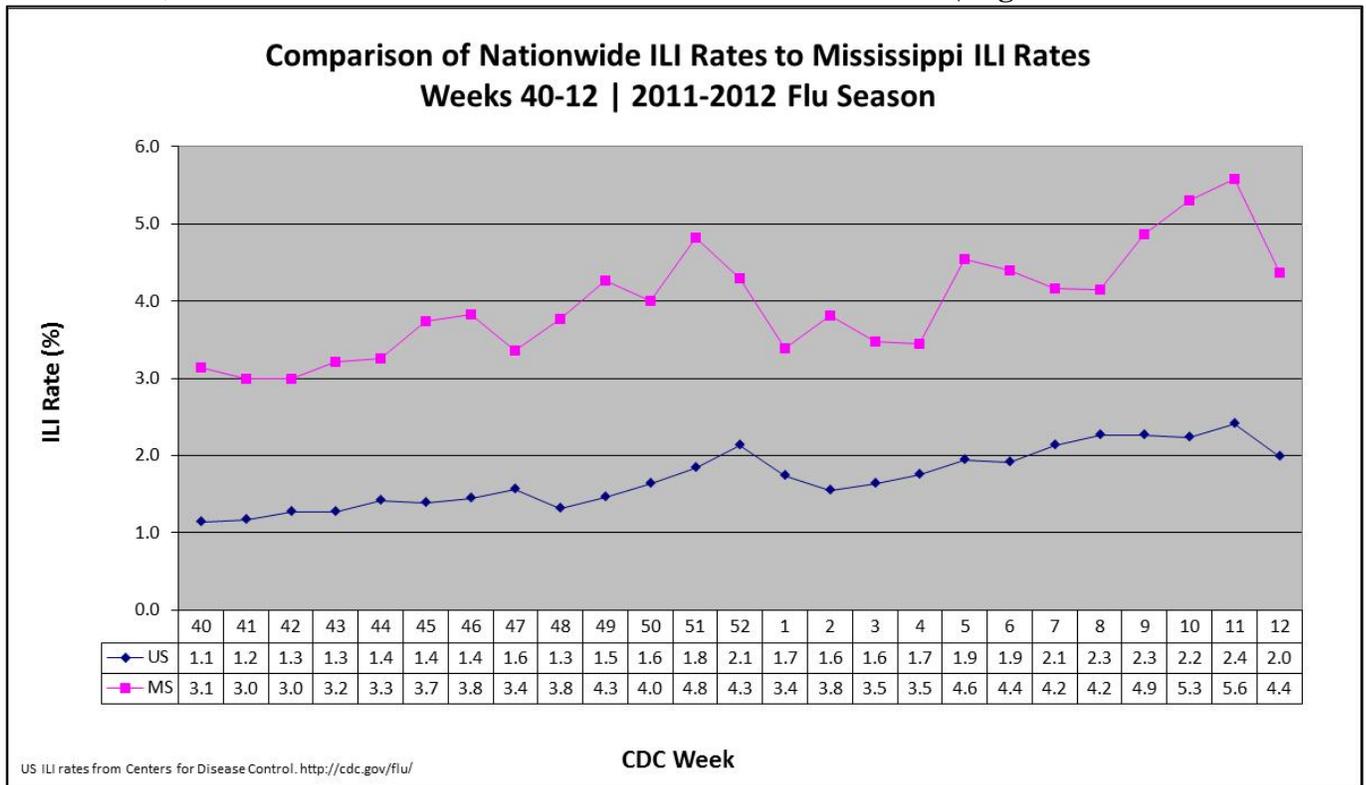
Nationally, there were **four** influenza-associated pediatric deaths reported to CDC during week **12** and were associated with 2009 H1N1 and three influenza A viruses for which the subtype was not determined. The deaths occurred during week **09** (week ending March 3, 2012) and week **10** (week ending March 10, 2012). This brings the total number of influenza-associated pediatric deaths reported during the 2011-2012 season to twelve.

Mississippi has had no reported influenza-associated pediatric deaths during this influenza season.

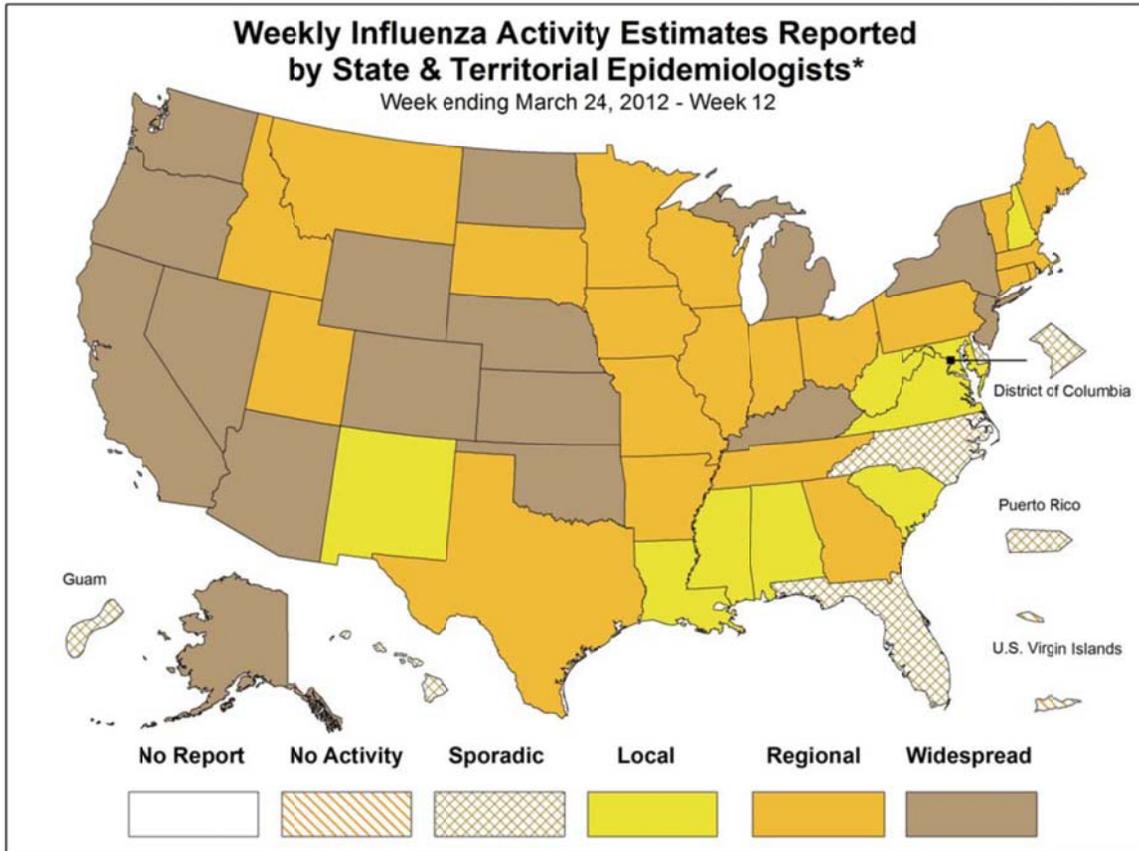
Mississippi reported “**Local**” activity for week 12. | **Table 4**

Level of Flu Activity	Definition
No Activity	Overall clinical activity remains low and there are no lab confirmed cases.
Sporadic	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.
Local	Increased ILI within a single region AND 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 AND 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
Regional	Increased ILI in at least 2 regions but fewer than half of the regions AND 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 AND recent lab confirmed influenza in the affected regions.
Widespread	Increased ILI and/or institutional outbreaks (ILI or lab confirmed) in at least half of the regions AND recent (within the past 3 weeks) lab confirmed influenza in the state.

For week 12, the MS ILI rate continued to remain **above** the national rate. | **Figure 6**



During week **12**, influenza activity was elevated in some areas of the United States, but remained relatively low nationally.¹ | **Figure 7**



* This map indicates geographic spread & does not measure the severity of influenza activity

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

Additional information:

Centers for Disease Control and Prevention	http://cdc.gov/flu/
Flu.gov	http://www.flu.gov/
MSDH Flu and Pneumonia	http://msdh.ms.gov/msdhsite/_static/14,0,199.html
Google Flu Trends	http://www.google.org/flutrends/
World Health Organization FluNet	http://www.who.int/csr/disease/influenza/influenzanetwork/flunet/en/

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Appendix

Figure 1

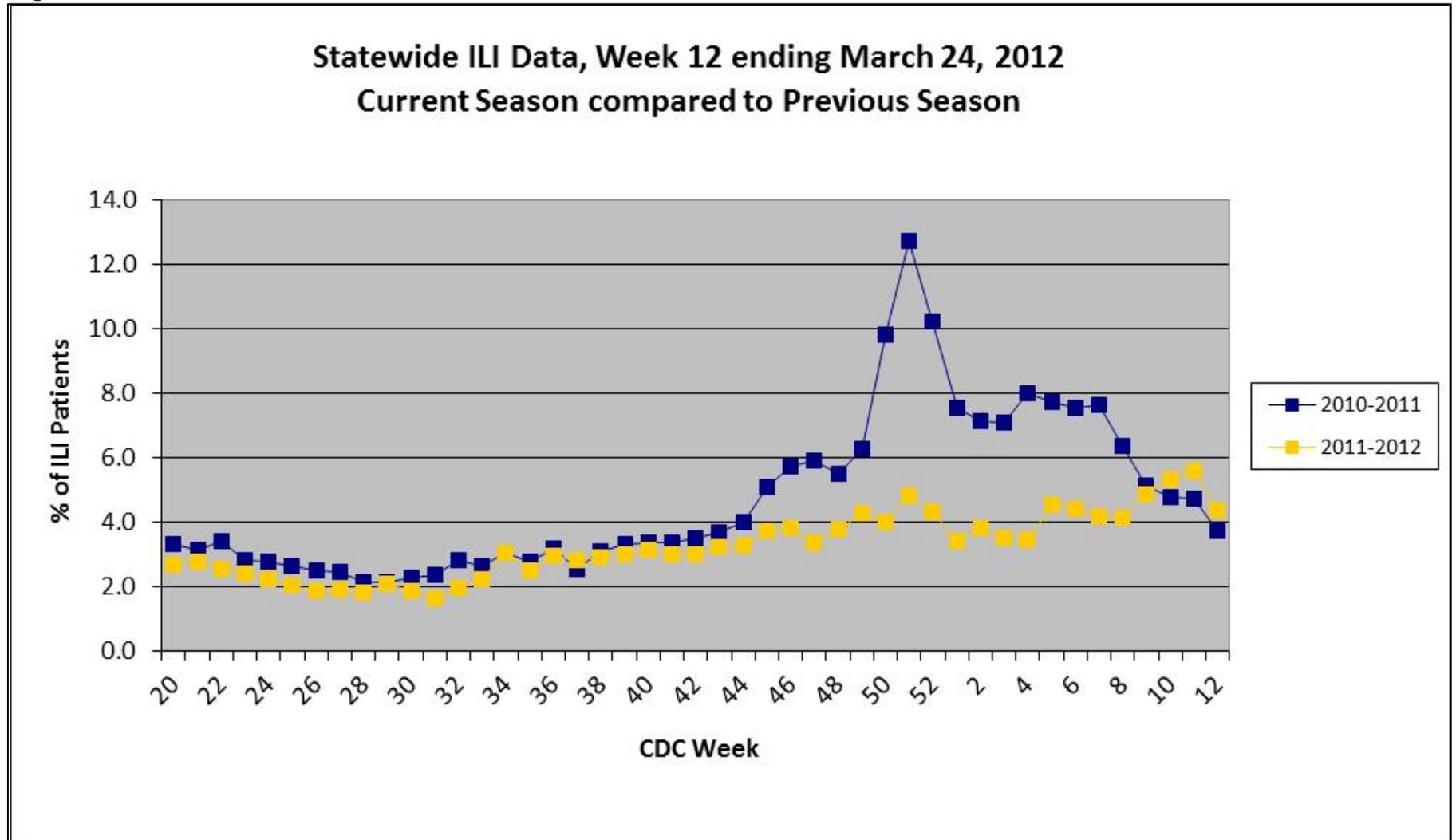


Figure 2

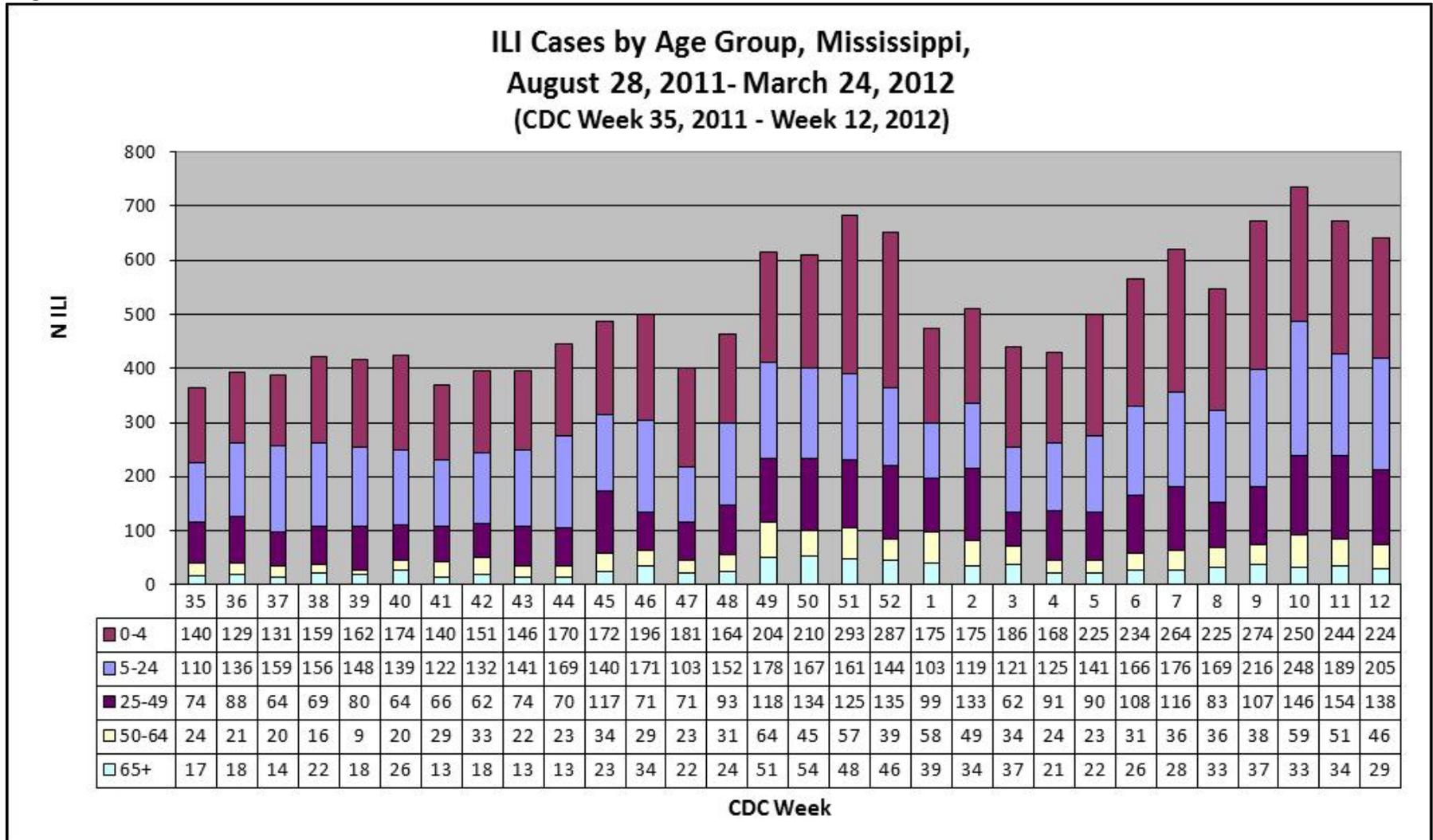


Figure 3

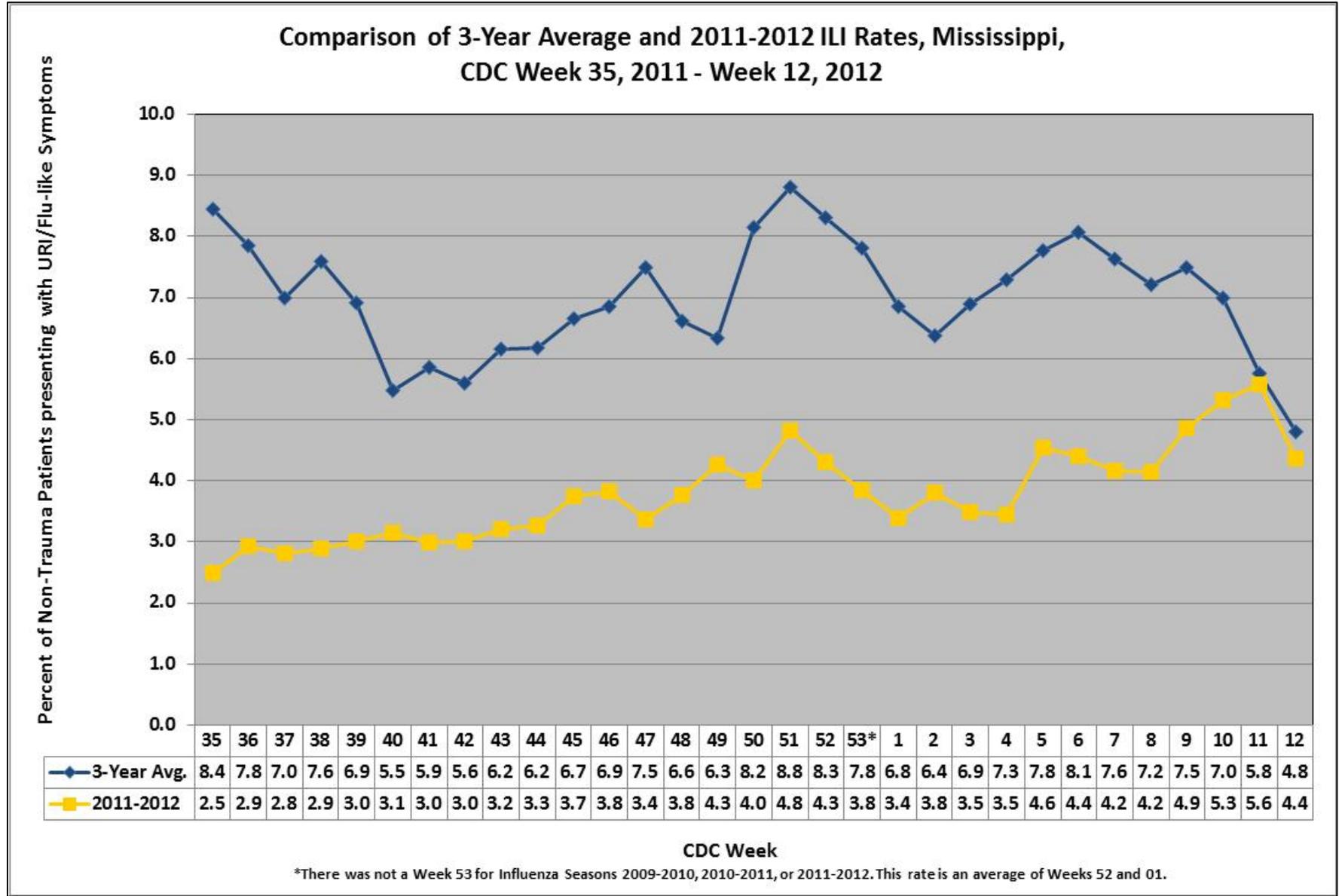


Figure 4

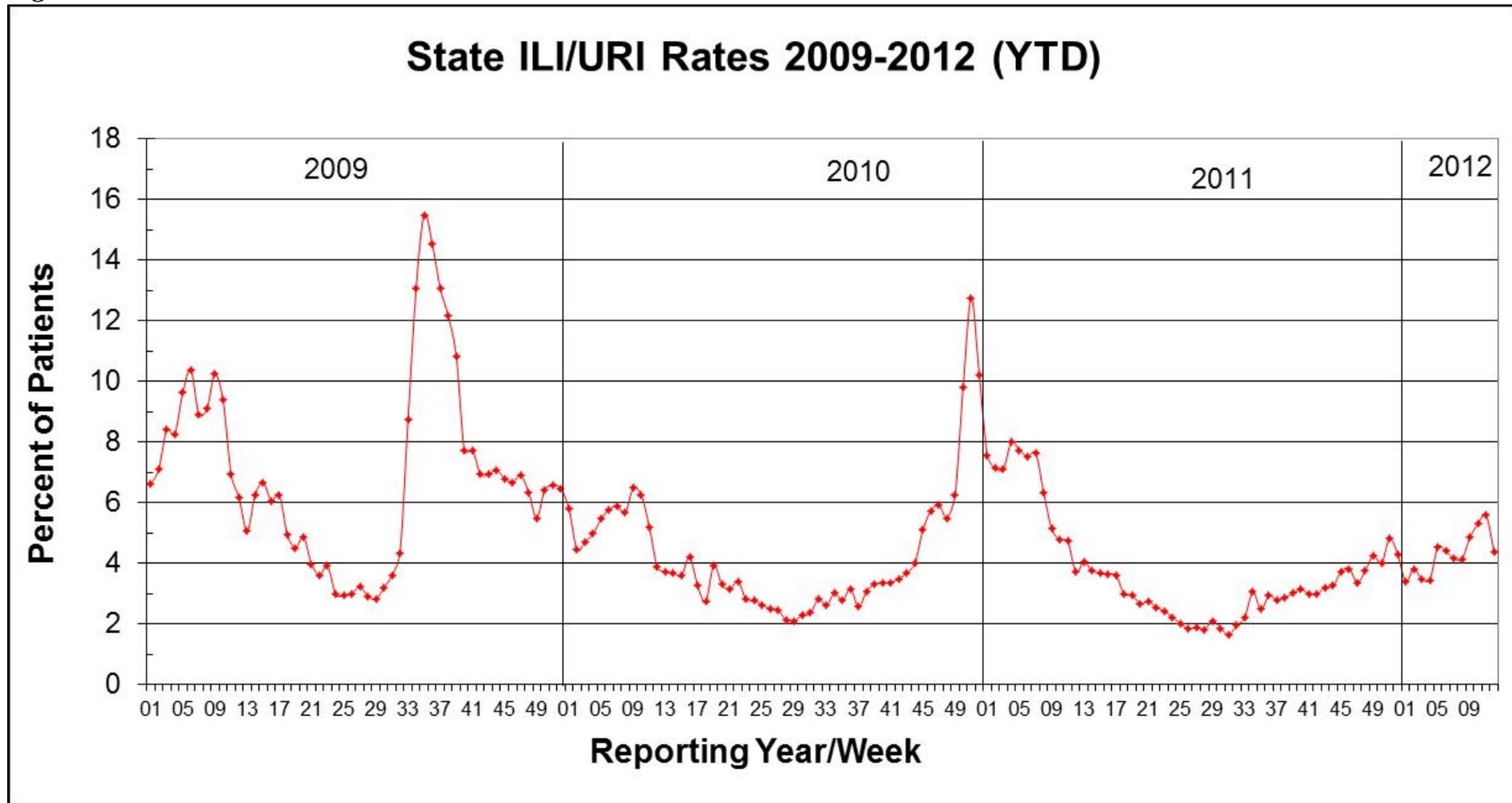


Figure 5

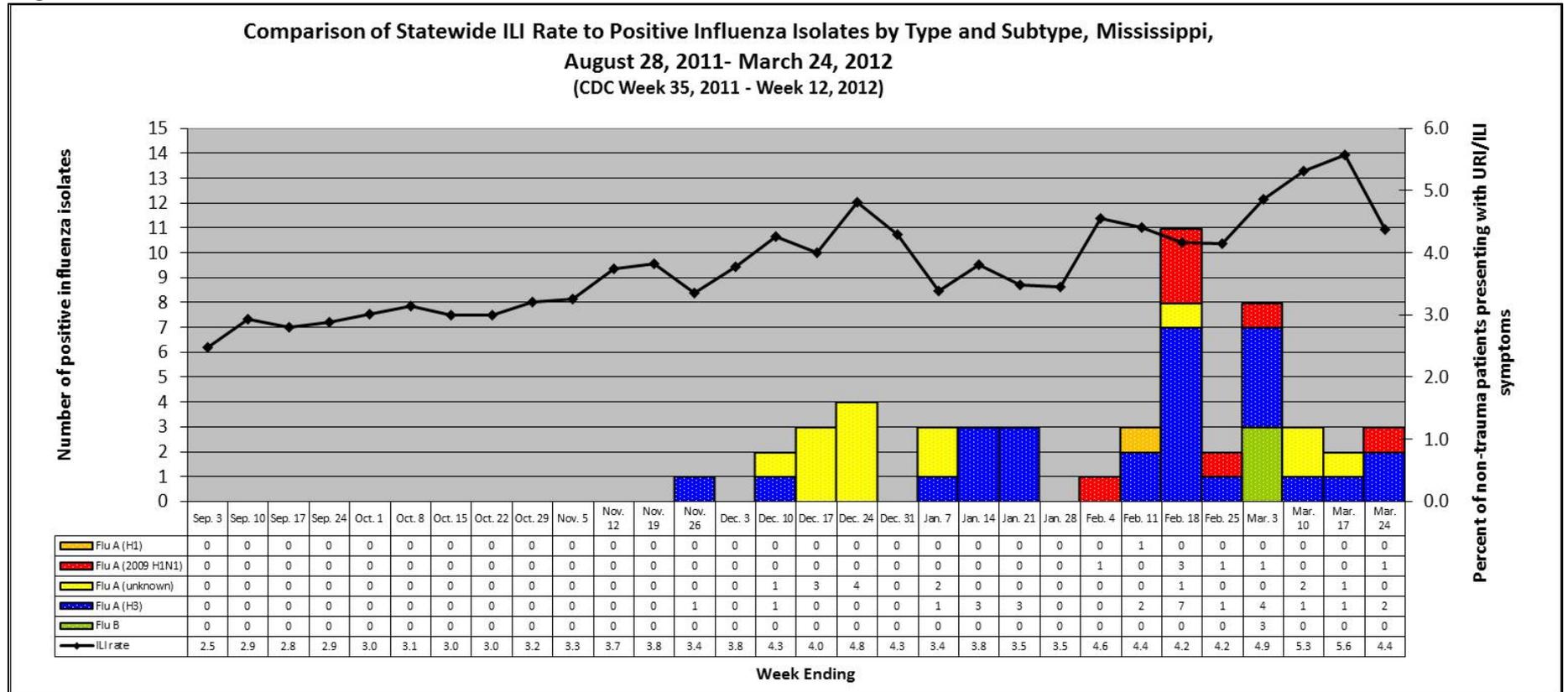


Figure 6

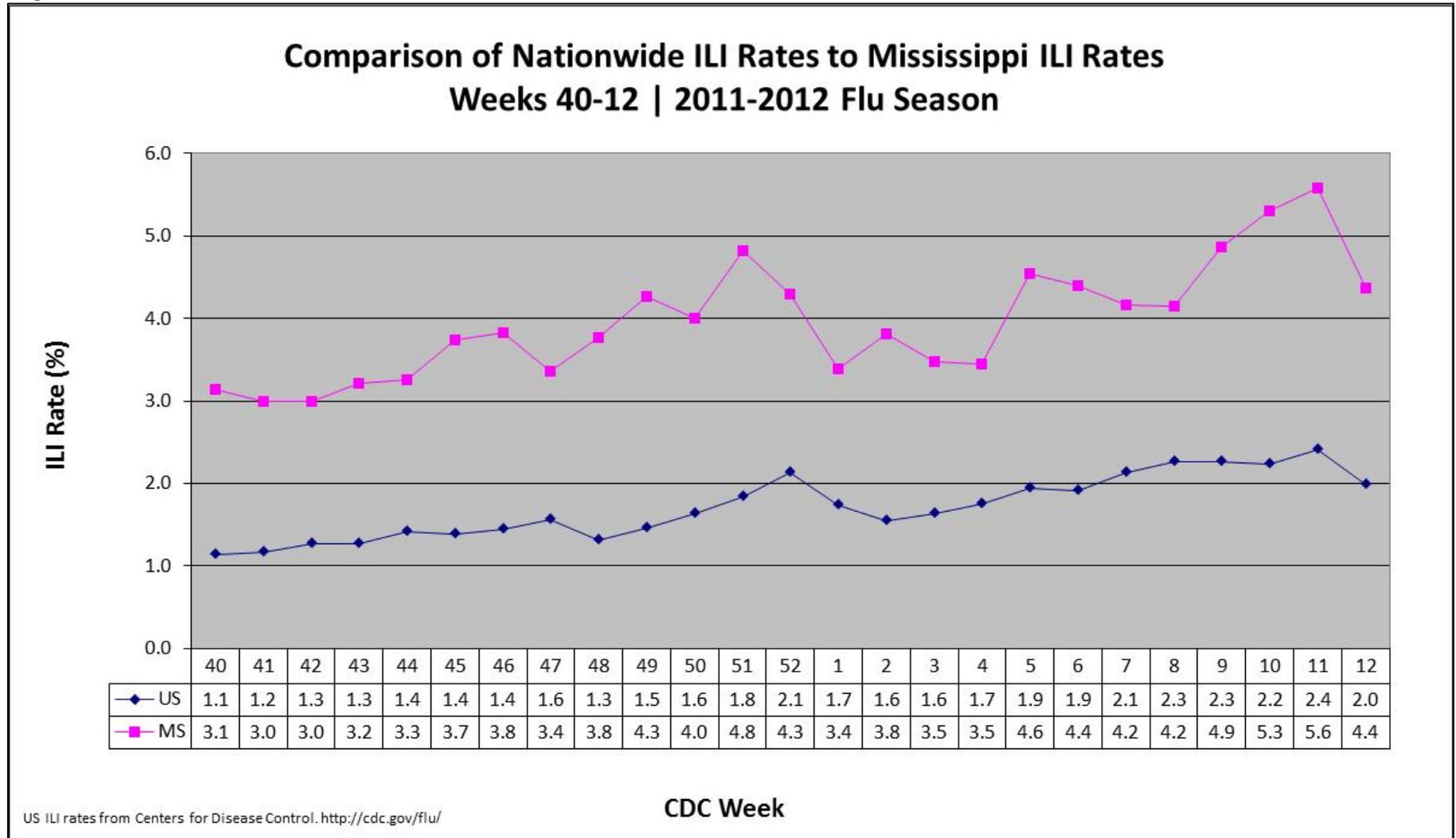
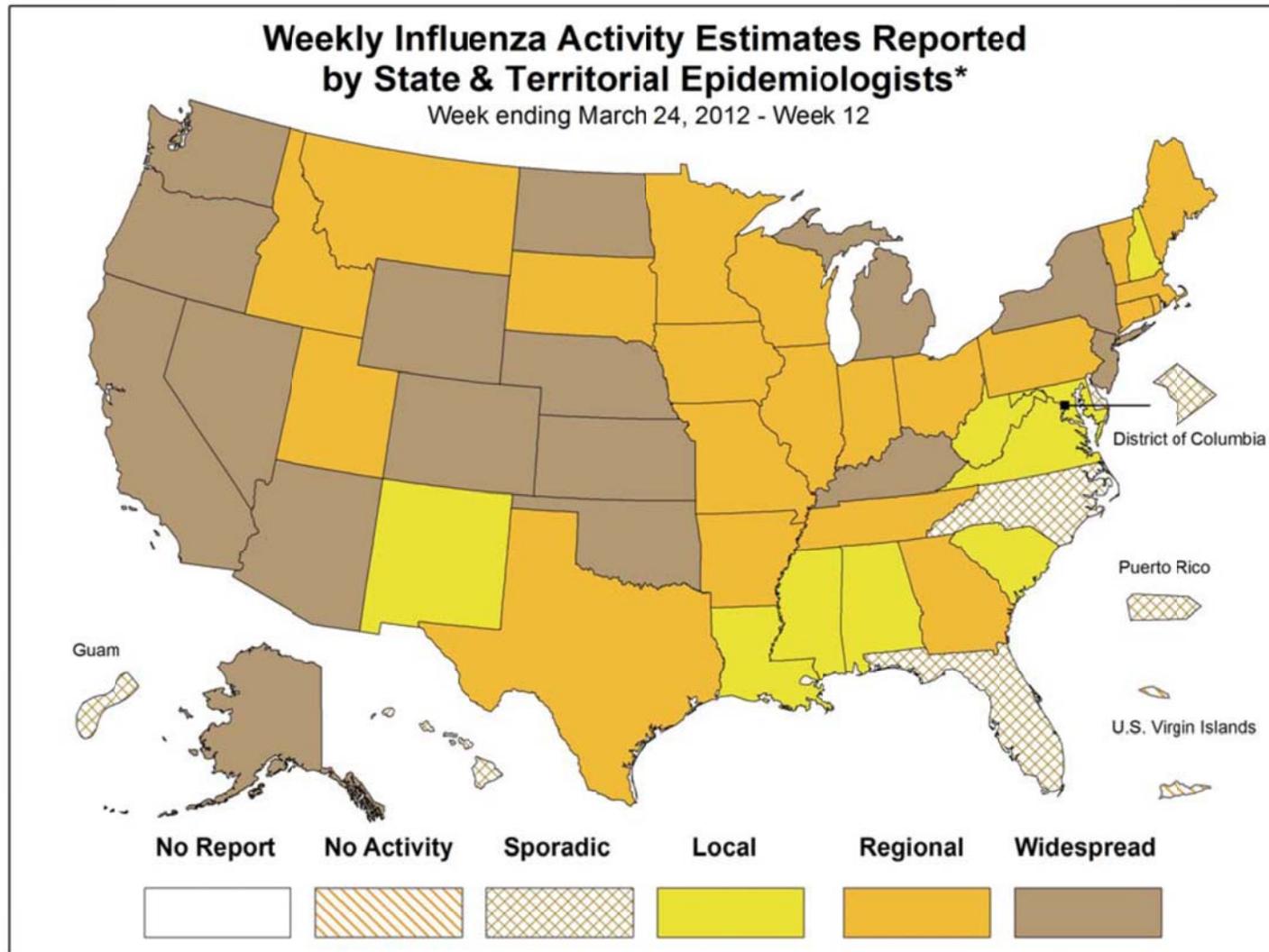


Figure 7



* This map indicates geographic spread & does not measure the severity of influenza activity