



# 2014-2015 Influenza Report Week 09

March 1, 2015 – March 7, 2015

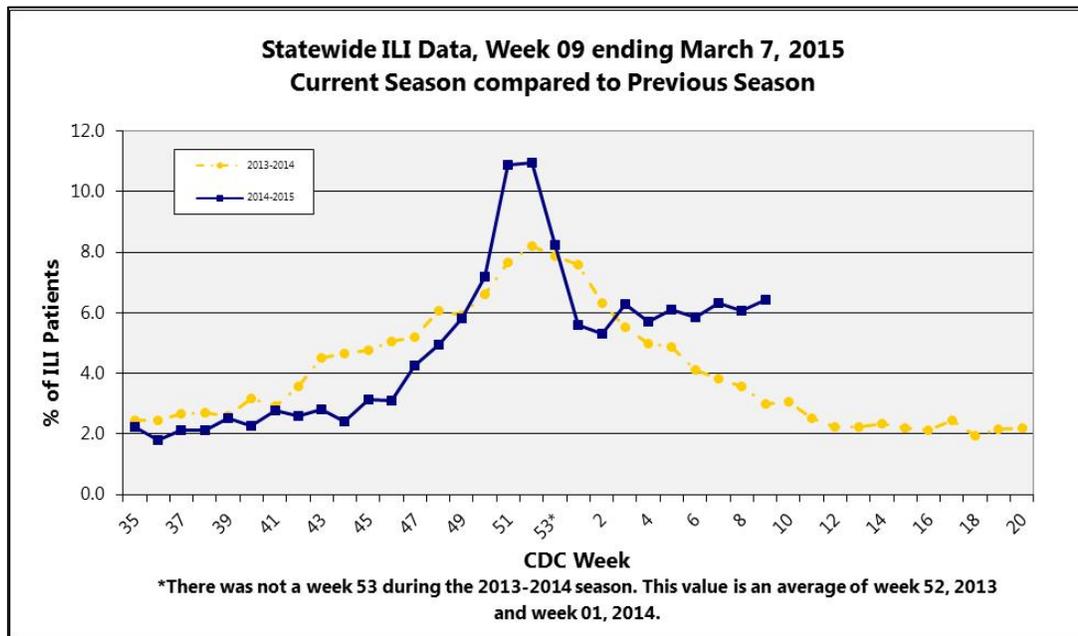
## About our flu activity reporting

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**



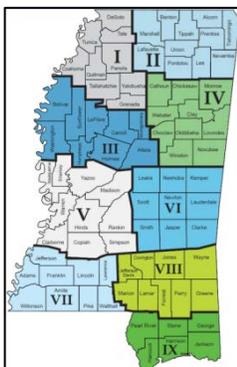
During week **09** (03/01/15-03/07/15), the overall state ILI rate (**6.4%**) was **comparable** to the previous week (**6.1%**), but was higher than this time last year (**3.0%**).

| [Figure 1](#)

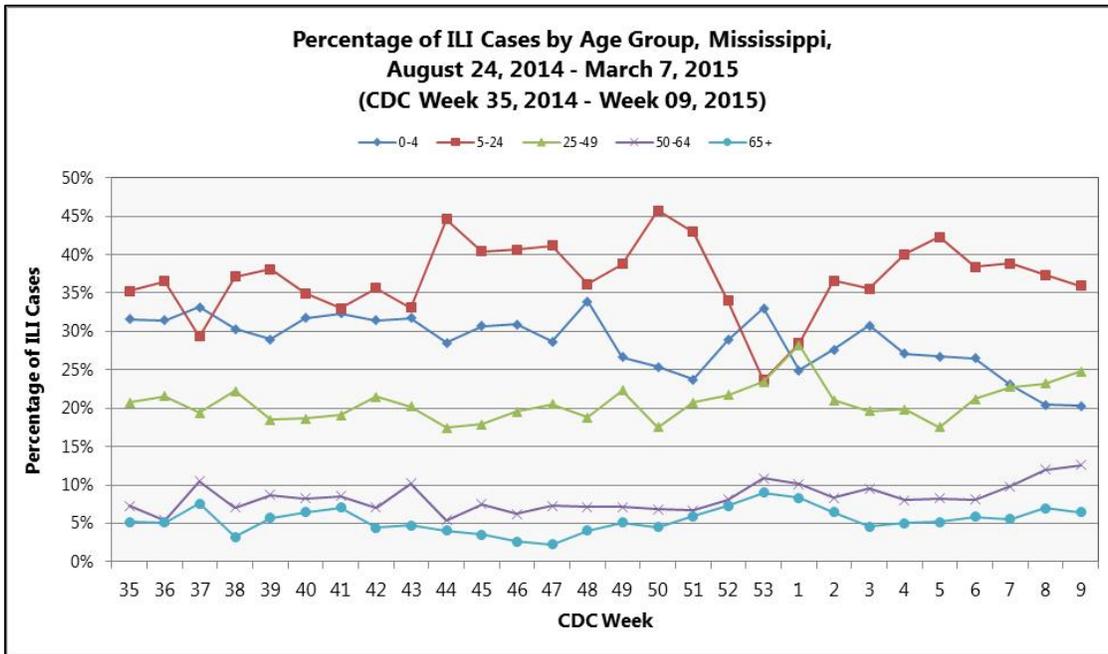
Total number of patients treated by sentinel providers in the last three weeks. | **Table 1**

2014-2015 Influenza Season					
CDC Week	Week Ending	Number of ILI Reports	Total patients	ILI symptoms	ILI Rate (%)
<b>09</b>	<b>Mar. 07</b>	<b>124</b>	<b>16441</b>	<b>1058</b>	<b>6.4%</b>
08	Feb. 28	145	20338	1232	6.1%
07	Feb. 21	145	20225	1277	6.3%

During week **09**, **three** districts (3, 8, and 9) had an increase in ILI activity, while **three** districts (2, 4, and 5) had a decrease. **Three** districts (1, 6, and 7) remained about the same. *Information is provisional only and may change depending on additional reporting from sentinel providers.* | **Table 2**



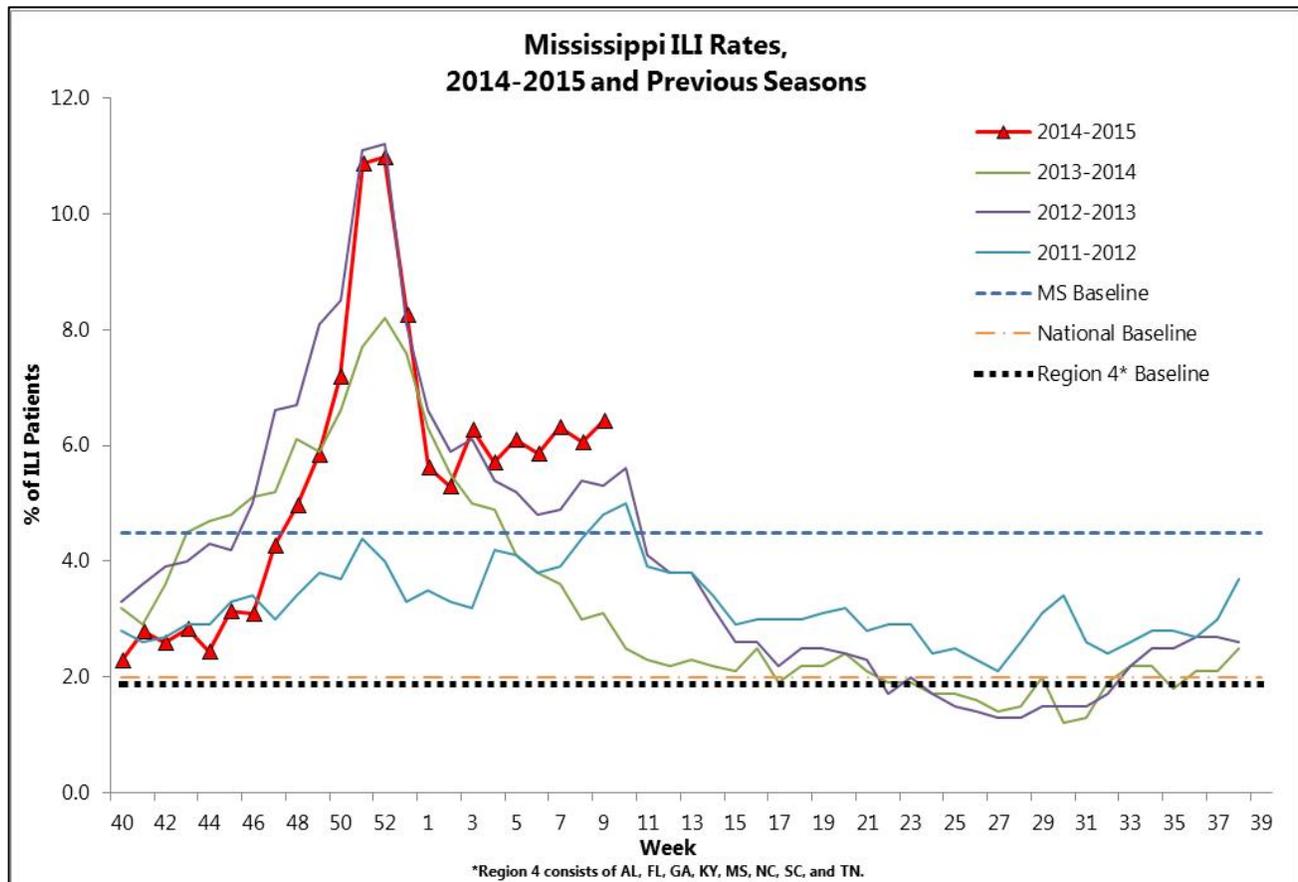
MSDH District ILI Rates (%) 2014-2015		
District	Week 08	Week 09
State	6.1	6.4
I	1.5	1.0
II	4.8	3.8
III	5.5	7.7
IV	5.5	1.9
V	7.3	4.9
VI	12.0	11.7
VII	6.5	6.5
VIII	5.1	5.9
IX	6.6	9.2



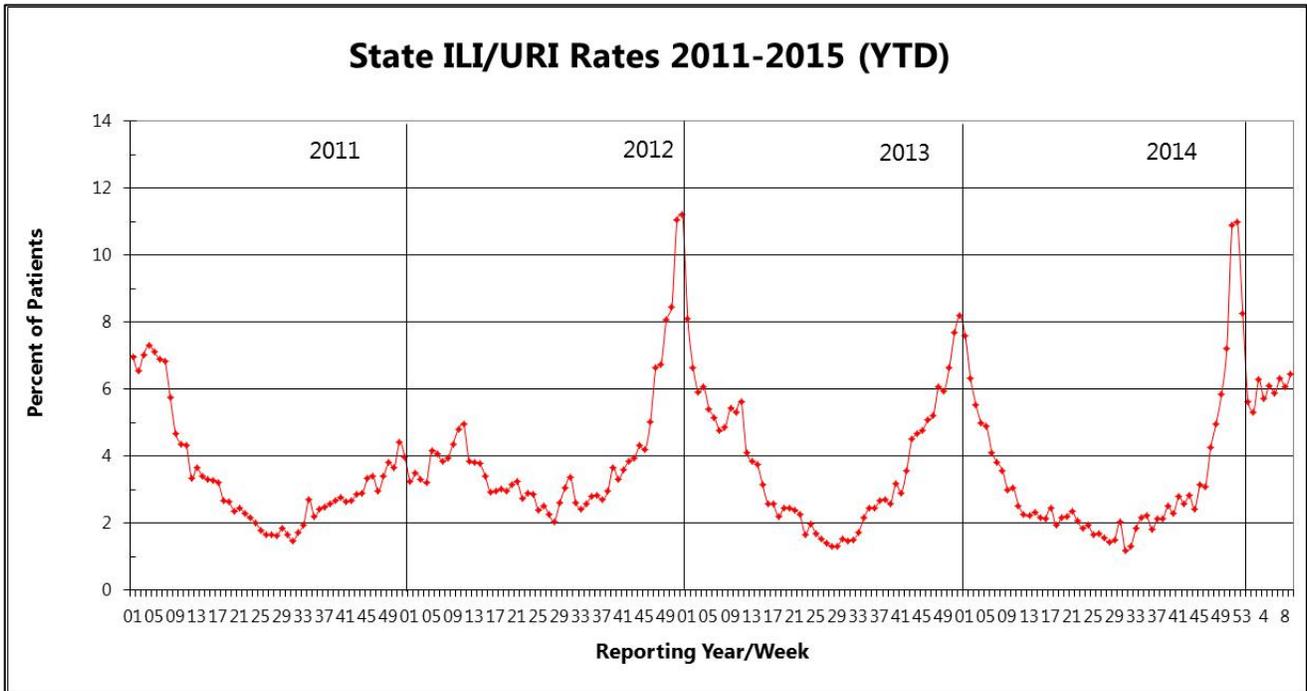
Since week 35, the percentage of reported ILI cases has been highest among those in the **5-24 years** of age group. This trend continued

into week **09**. | [Figure 2](#)

The 2014-15 state ILI rate was **above** the national, Region 4, and state baselines for week **09**. | [Figure 3](#)



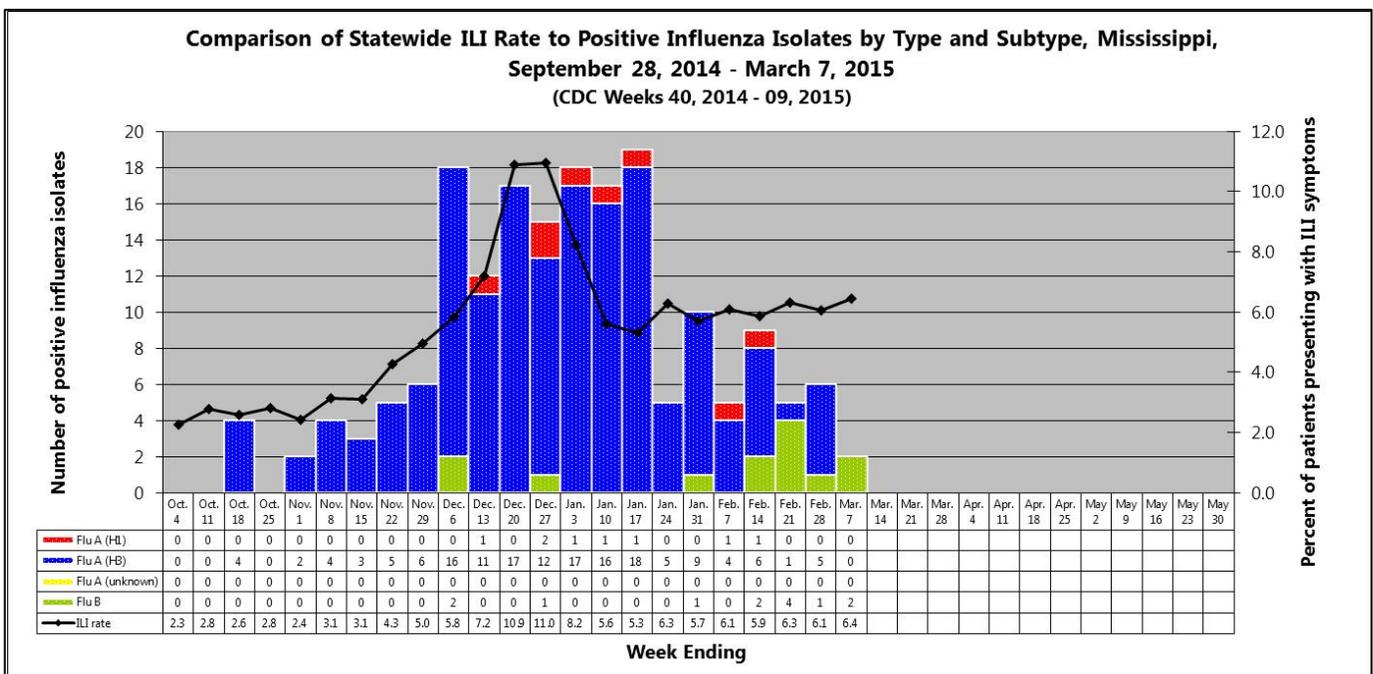
Mississippi ILI Rates 2011-2015 | [Figure 4](#)



### Flu Testing Reports

From week **40** (week ending October 4<sup>th</sup>) through week **09** (week ending March 7<sup>th</sup>), 182 positive influenza samples were identified by MSDH. One hundred sixty-one samples were identified as influenza A (H3), eight as influenza A (H1), and thirteen were identified as influenza B.

The influenza cases were identified from the following counties: Alcorn (1), Attala (4), Benton (5), Bolivar (3), Choctaw (1), Coahoma (1), Copiah (3), Covington (2), DeSoto (2), Forrest (1), Franklin (3), Harrison (13), Hinds (3), Holmes (2), Humphreys (1), Itawamba (3), Jackson (1), Jefferson (2), Jefferson Davis (1), Jones (5), Kemper (3), Lafayette (3), Lauderdale (6), Leake (2), Lee (3), Leflore (1), Lowndes (4), Madison (9), Marion (5), Marshall (10), Monroe (5), Neshoba (4), Noxubee (3), Oktibbeha (3), Pearl River (3), Pike (2), Pontotoc (1), Prentiss (5), Rankin (7), Simpson (8), Sunflower (2), Tallahatchie (3), Tate (4), Tishomingo (2), Union (1), Warren (2), Washington (7), Webster (6), Wilkinson (3), and Yazoo (6). Two cases were from unidentified counties. | [Figure 5](#)



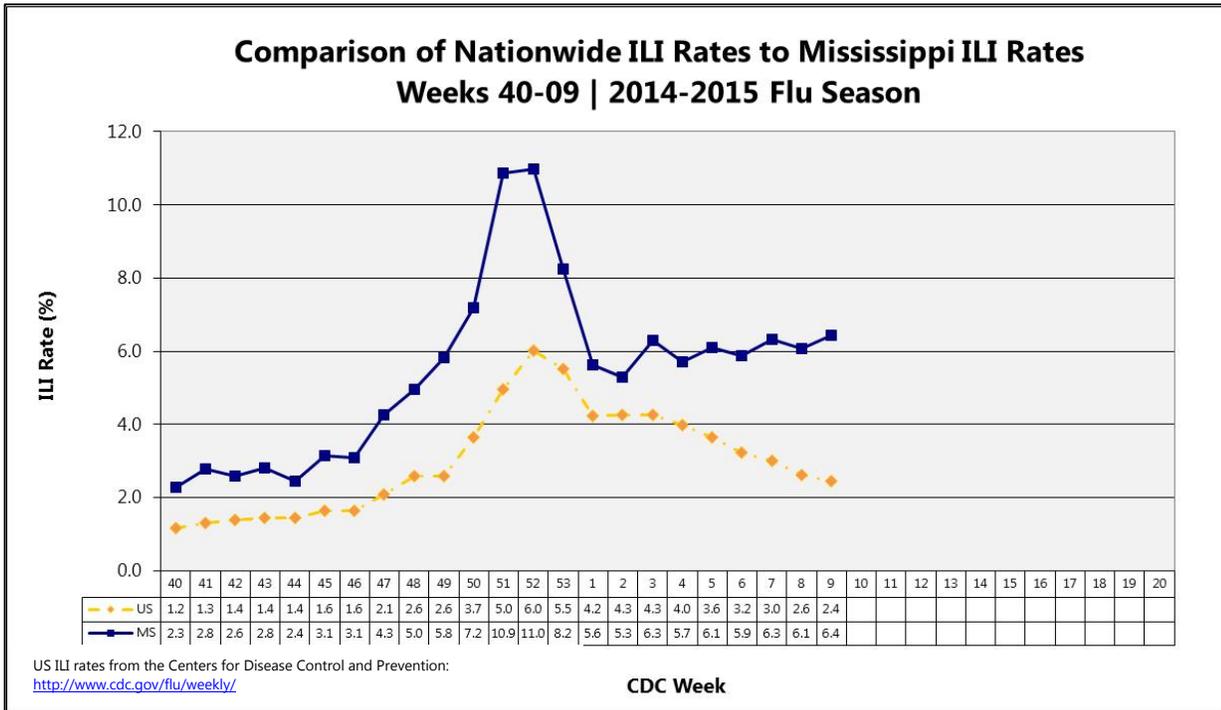
### National and Mississippi Pediatric Mortality Surveillance

Nationally, **seven** influenza-associated pediatric deaths were reported to CDC during week **09**. One death was associated with an influenza A (H3) virus and occurred during week 08 (week ending February 28<sup>th</sup>). Two deaths were associated with an influenza A virus for which no subtyping was performed and occurred during weeks 05 and 08 (weeks ending February 7<sup>th</sup> and February 28<sup>th</sup>, respectively). Four deaths were associated with an influenza B virus and occurred during week 08. To date, **104** influenza-associated pediatric deaths have been reported nationally during the 2014-2015 influenza season.

Mississippi has had **one** influenza-associated pediatric death reported during this influenza season. The death occurred during week 10 (week ending March 14<sup>th</sup>). For additional information on influenza-associated pediatric deaths, please refer to the [CDC's FluView](#).

**National ILI Surveillance**

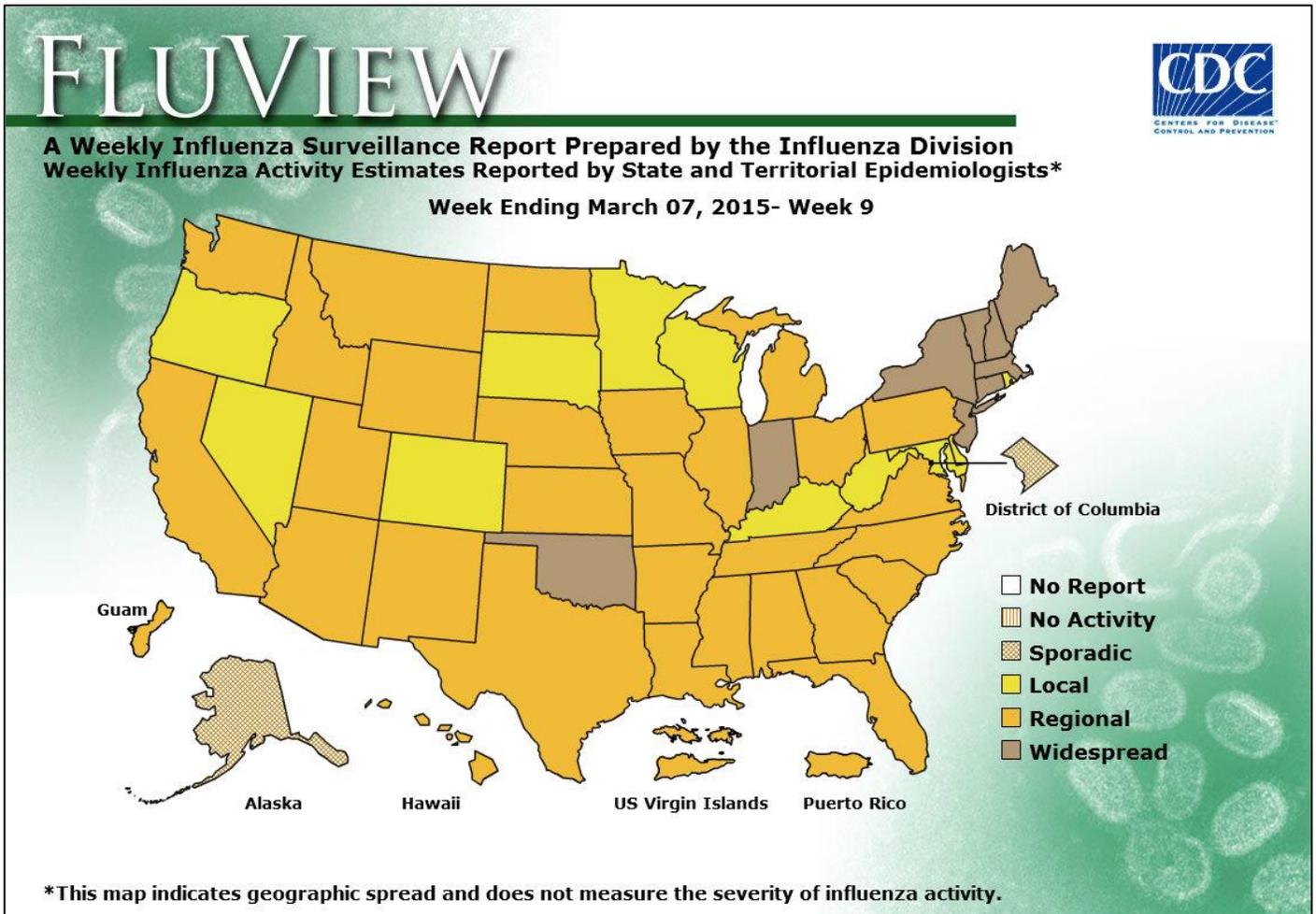
For week **09**, the MS ILI rate (6.4%) remained **above** the national ILI rate (2.4%). | [Figure 6](#)



Mississippi reported “**Regional**” flu activity for week **09**. | [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.

During week **09**, influenza activity **continued to decrease**, 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>.

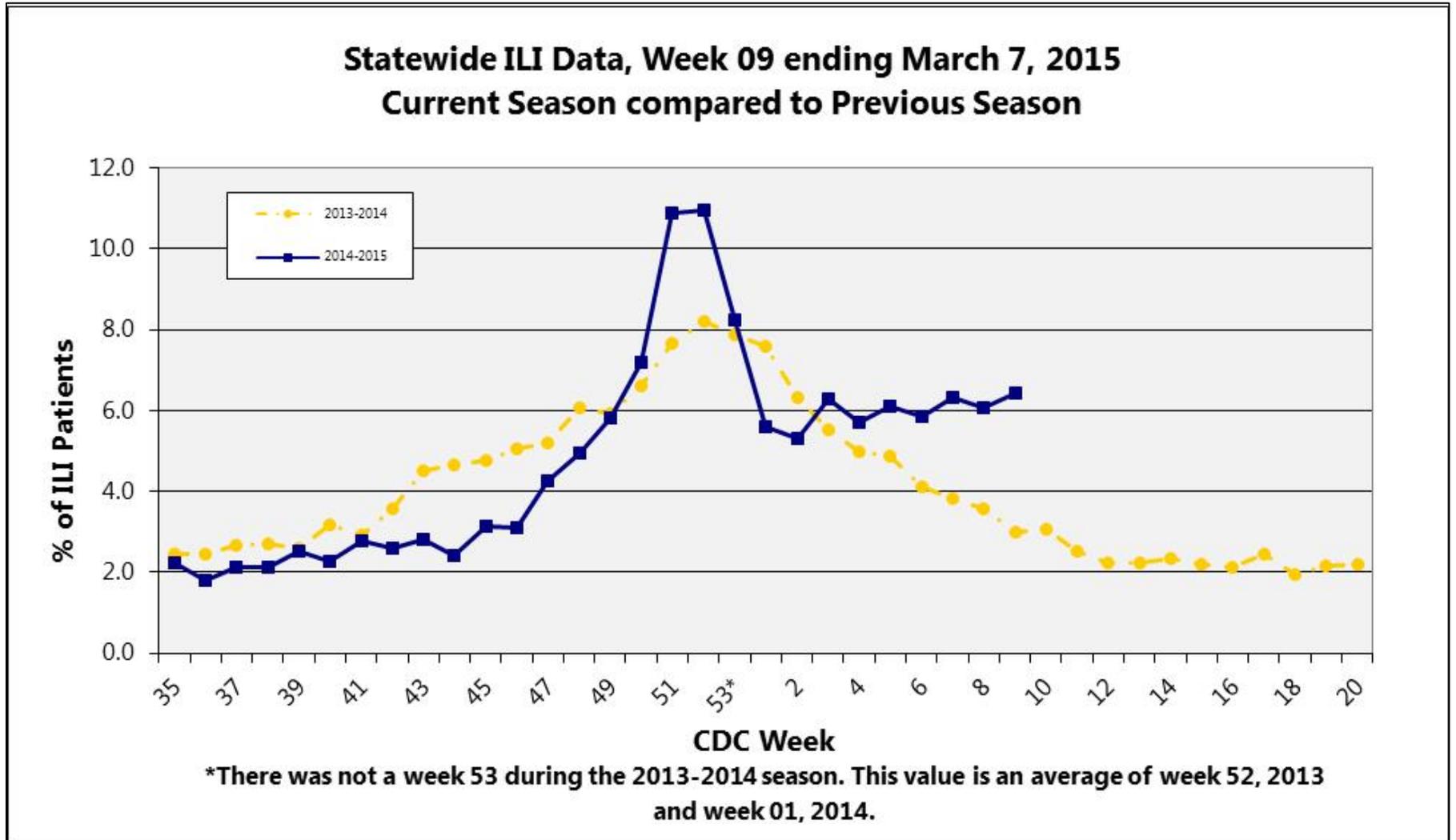
**Additional information:**

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

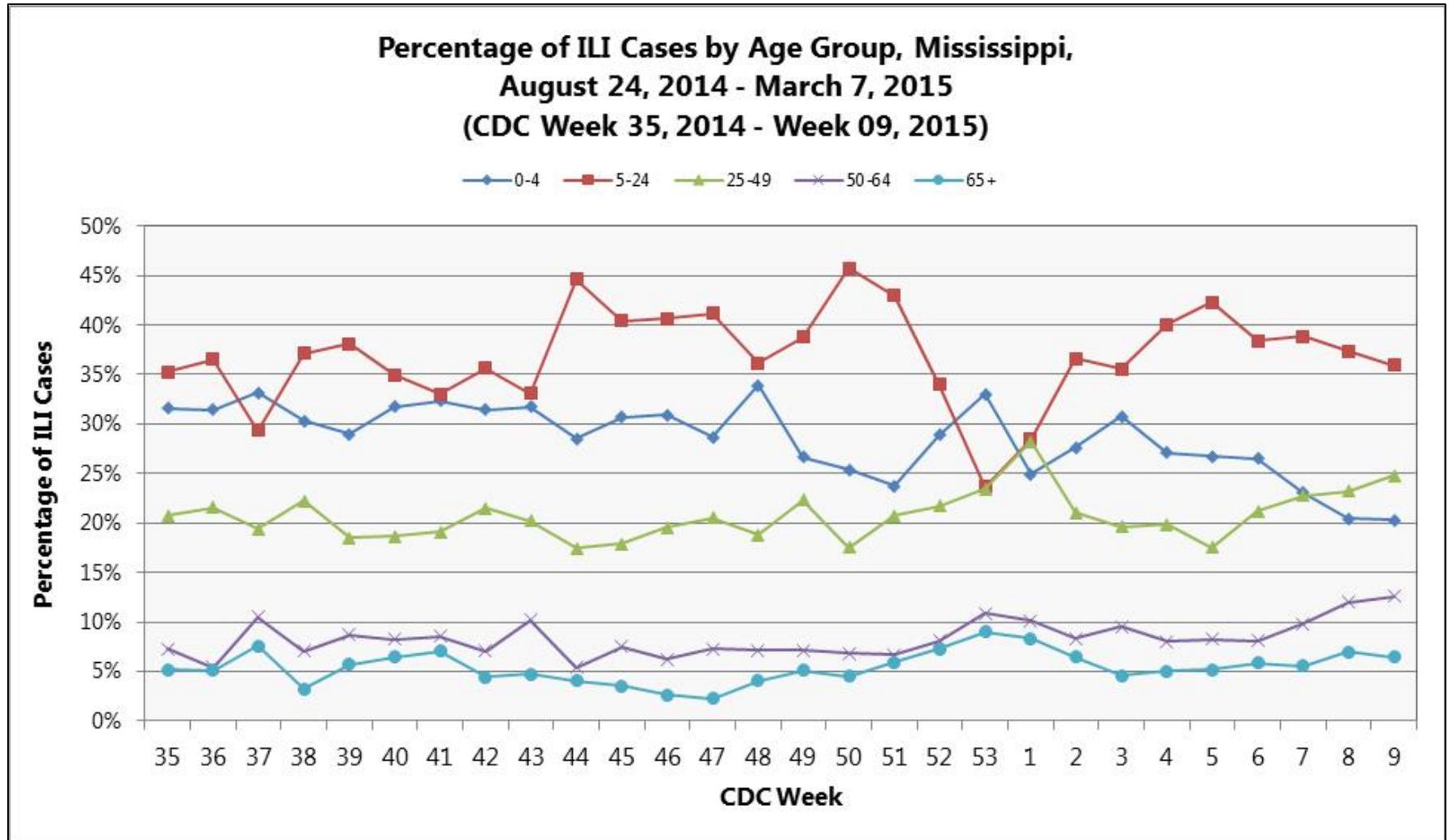
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## Appendix

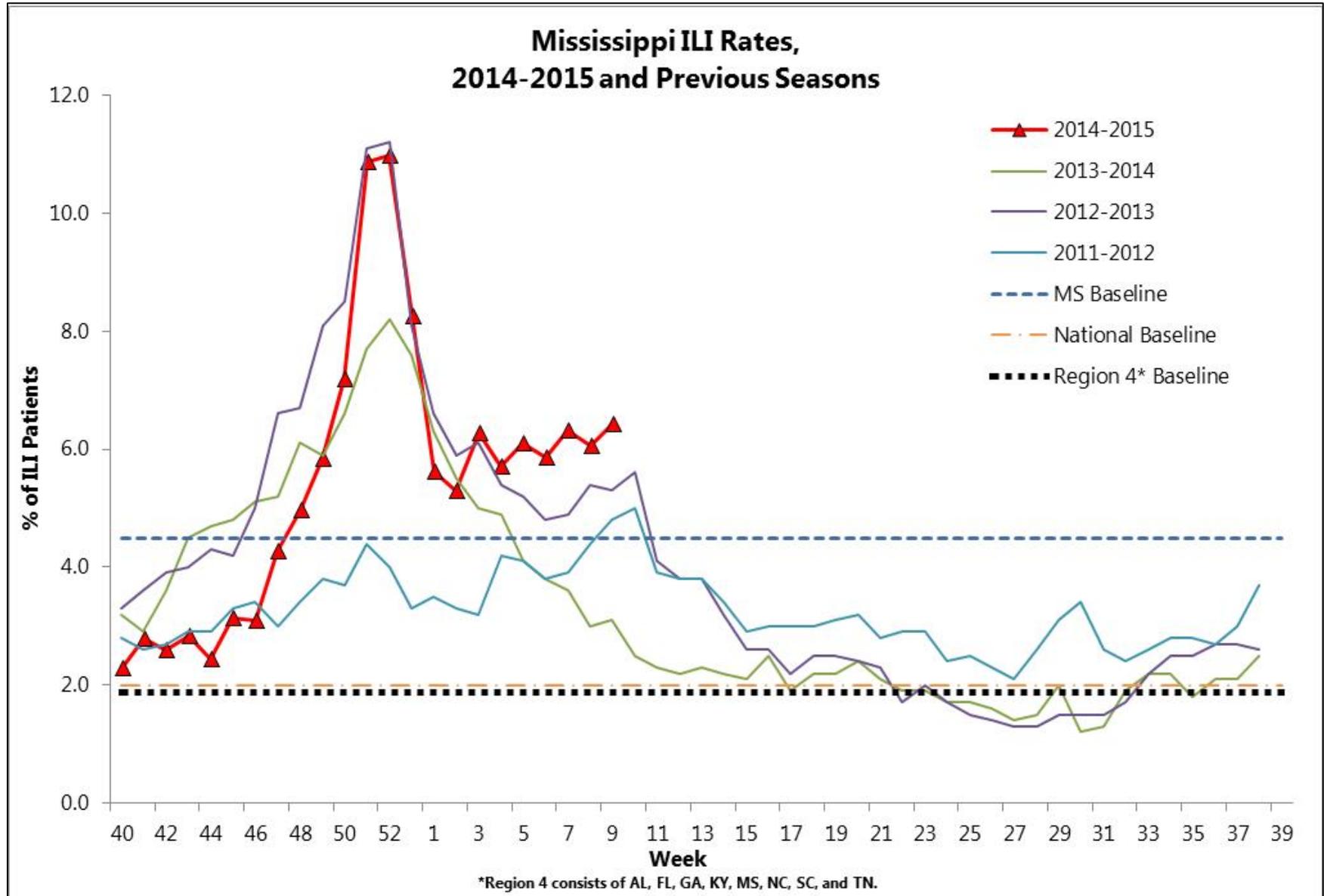
Figure 1



**Figure 2**



**Figure 3**



**Figure 4**

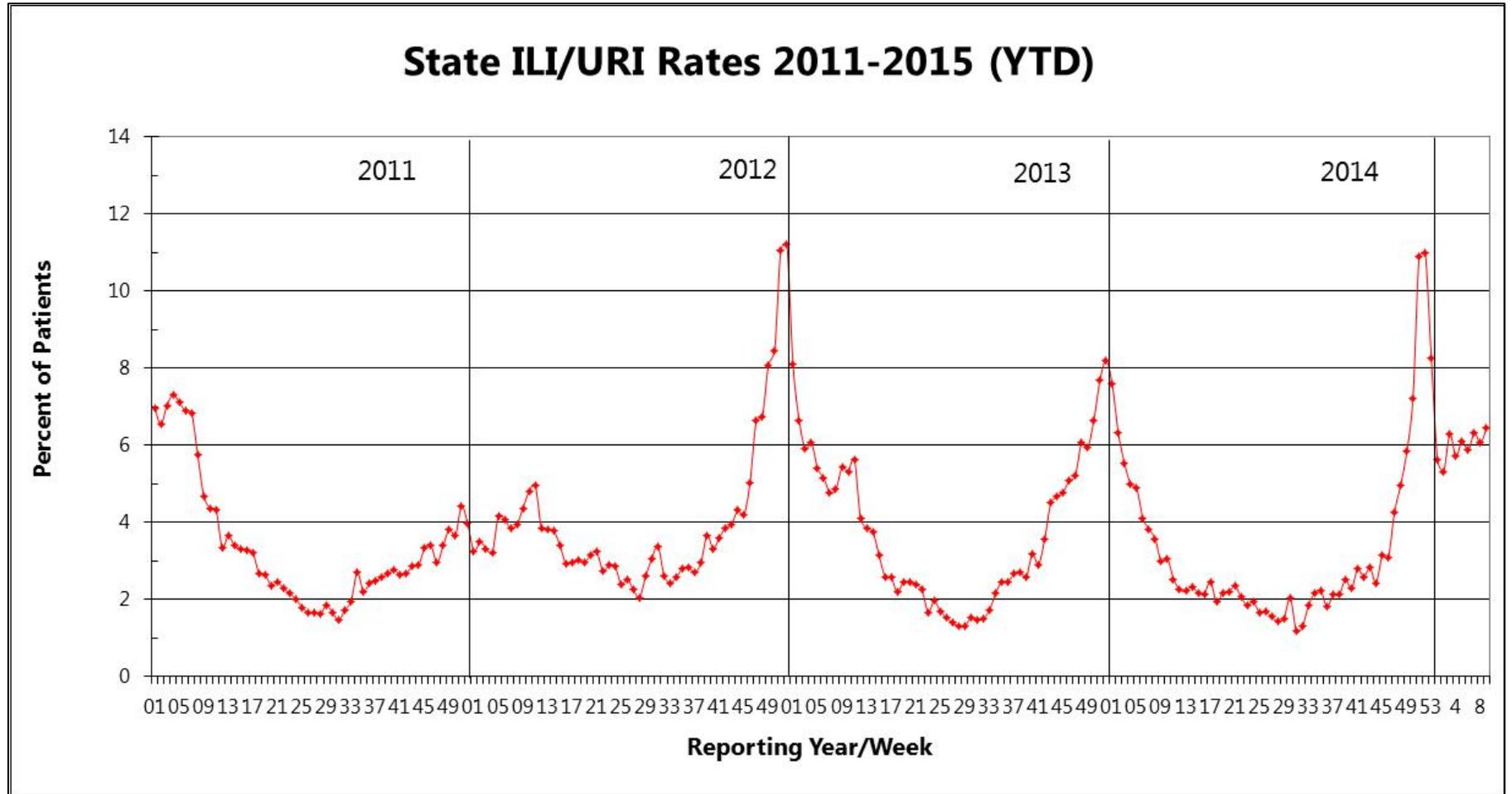


Figure 5

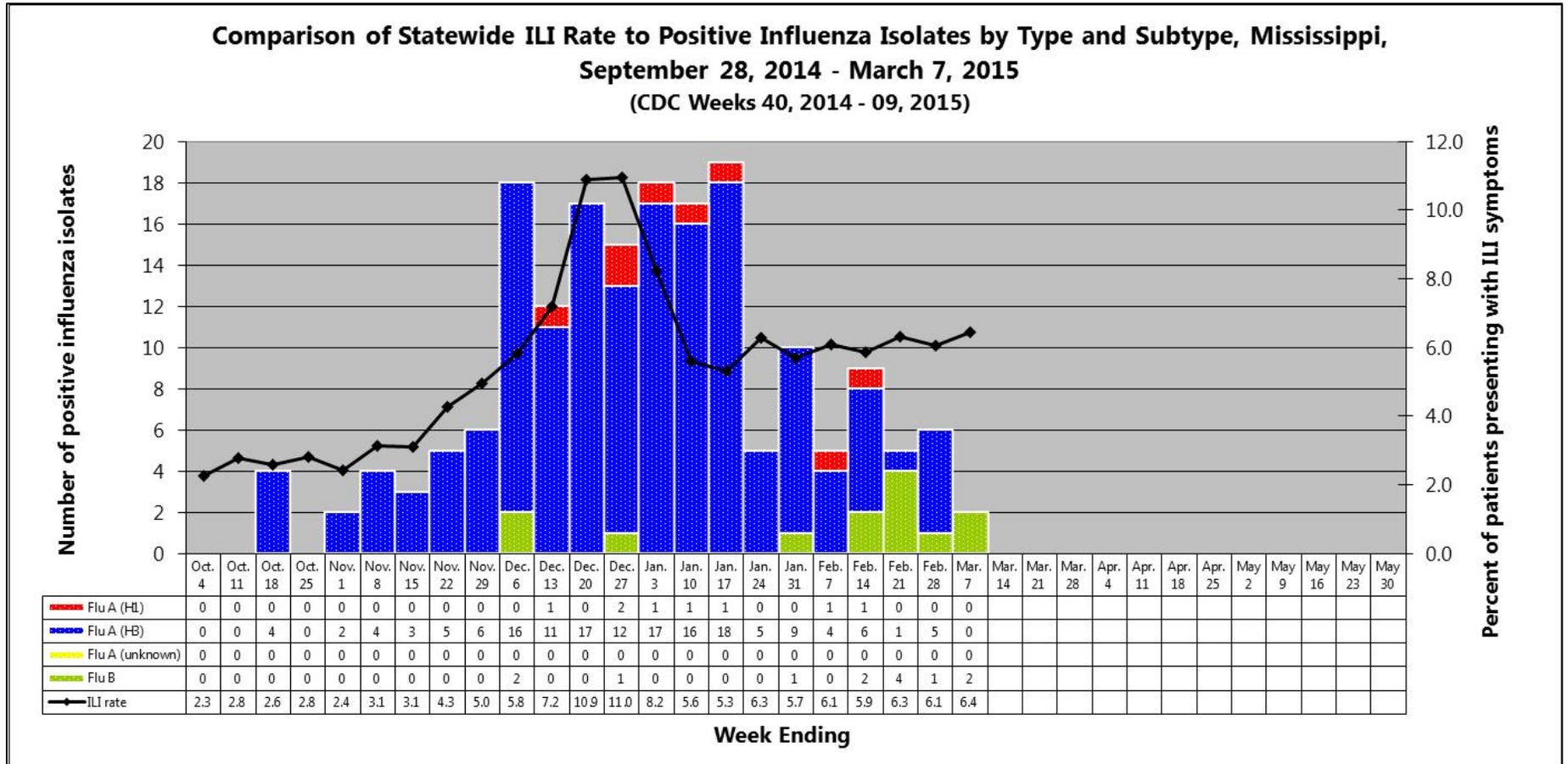


Figure 6

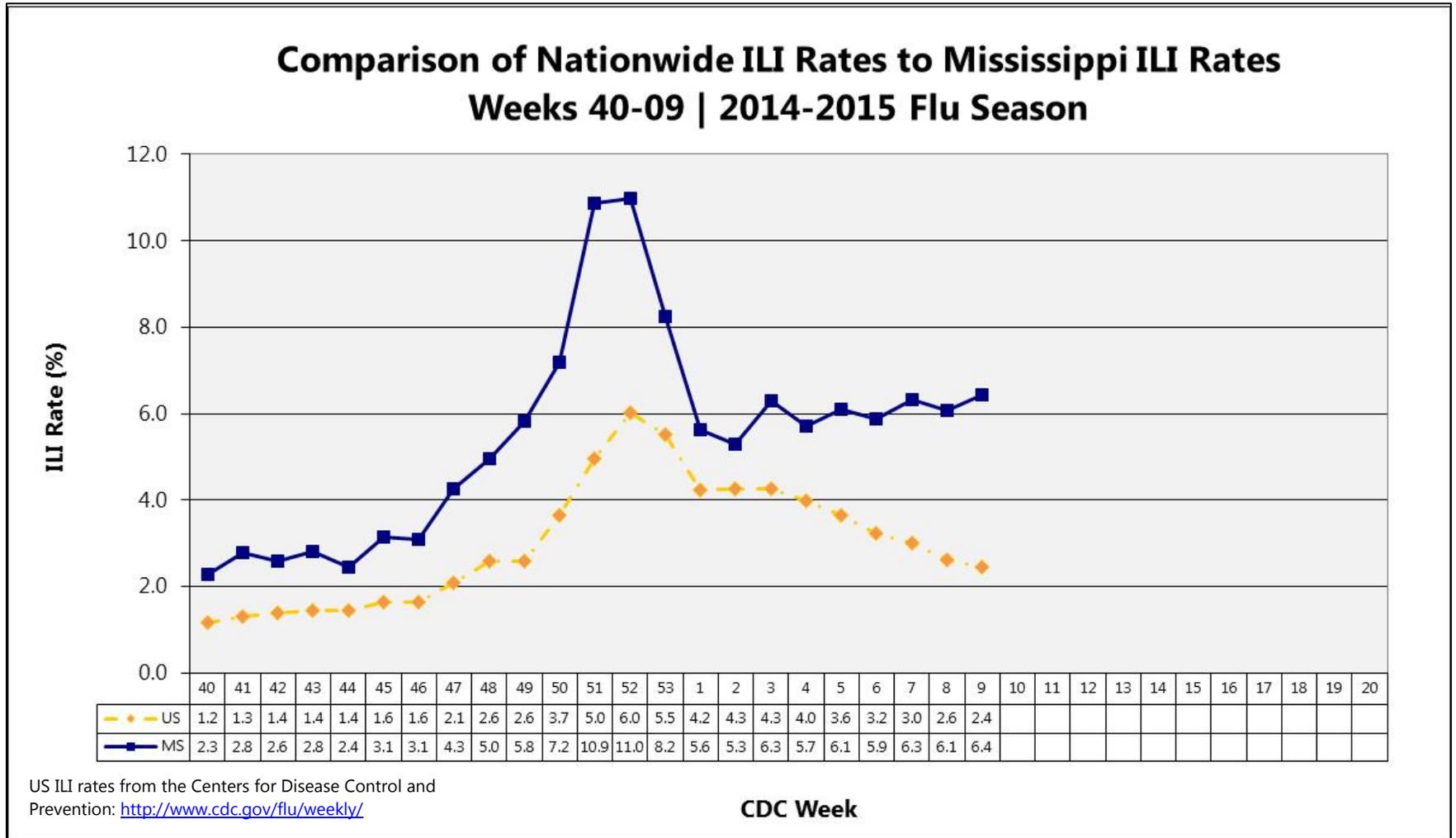


Figure 7

