



2013-2014 Influenza Season, Influenza Update for Week 20*

The week ending on Saturday, 05/17/2014

Influenza activity continues to decrease throughout Connecticut and has been reclassified geographically from “widespread” to “regional” during the end of the second wave of flu activity (see Figure 1). The Department of Public Health (DPH) uses multiple surveillance systems to monitor circulating flu viruses throughout the year. All data are considered preliminary and updated with available information each week starting in October and ending in May.

- Statewide emergency department visits attributed to the “fever/flu syndrome” have recently decreased after continuing at a level near or above 5% statewide during the previous eighteen weeks; generally considered the minimum threshold when there are elevated influenza-associated ED visits (Figure 1).
- The percentage of outpatient visits with influenza-like illness (ILI) has remained at a level above 1% statewide for the last twenty-three weeks; generally considered the baseline when there are increased influenza-associated visits in the outpatient setting (Figure 2).
- The percentage of unscheduled hospital admissions due to pneumonia has recently decreased after remaining at a level above 4% statewide during the previous twenty-three weeks (Figure 3).
- A total of 1,889 hospitalized patients with laboratory-confirmed influenza have been reported. A total of 266 hospitalizations were associated with Type A (2009 H1N1) influenza, 131 with Type A (H3N2), 1,121 with Type A (subtype unspecified), and 371 with Type B influenza. A total of 37 influenza-associated deaths greater than 30 years of age have also been reported (Figures 4 & 5).
- A total of 6,690 positive influenza reports have been reported for the current season. Influenza was reported in all 8 Connecticut counties: New Haven (2,045 reports), Hartford (1,739), Fairfield (1,676), New London (284), Windham (283), Tolland (238), Middlesex (215), and Litchfield (210). Of the 6,690 positive influenza reports: 1,373 were Type A (2009 H1N1), 502 were Type A (H3N2), 3,548 Type A (subtype unspecified), 1,198 influenza B viruses, and 69 of unknown type (Figures 6 & 7).

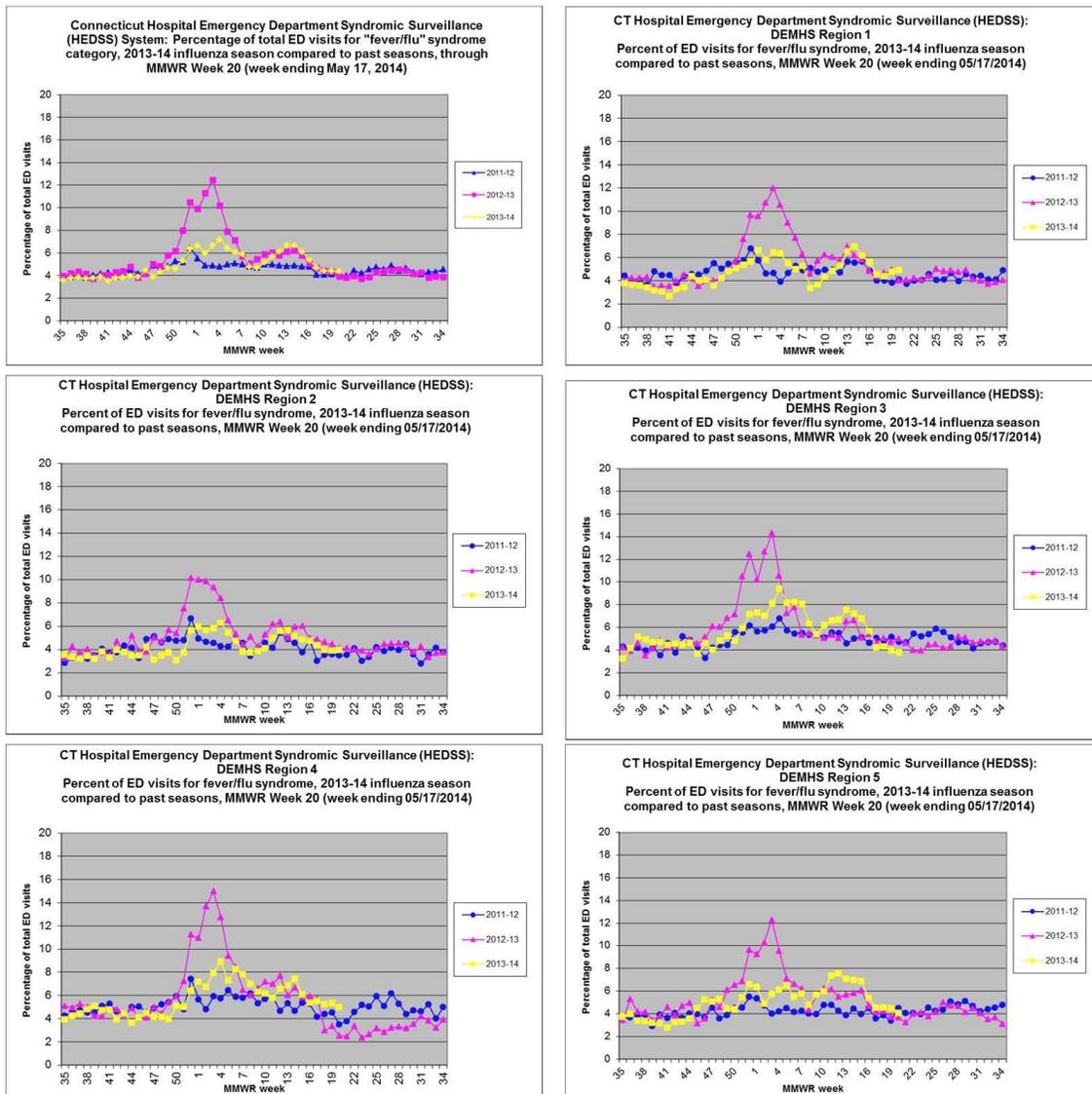
This will be our last routine weekly influenza update for the 2013-14 season; a final season summary report will be available before the start of the next season.

**Week numbers refer to the Morbidity and Mortality Weekly Report 2013 calendar used by the federal Centers for Disease Control and Prevention for national disease surveillance.*

The Hospital Emergency Department Syndromic Surveillance (HEDSS) System receives daily electronic reports on ED visits from more than half of Connecticut's acute care hospitals. Data include a listing of total patient visits with information on their chief complaint, including fever/flu.

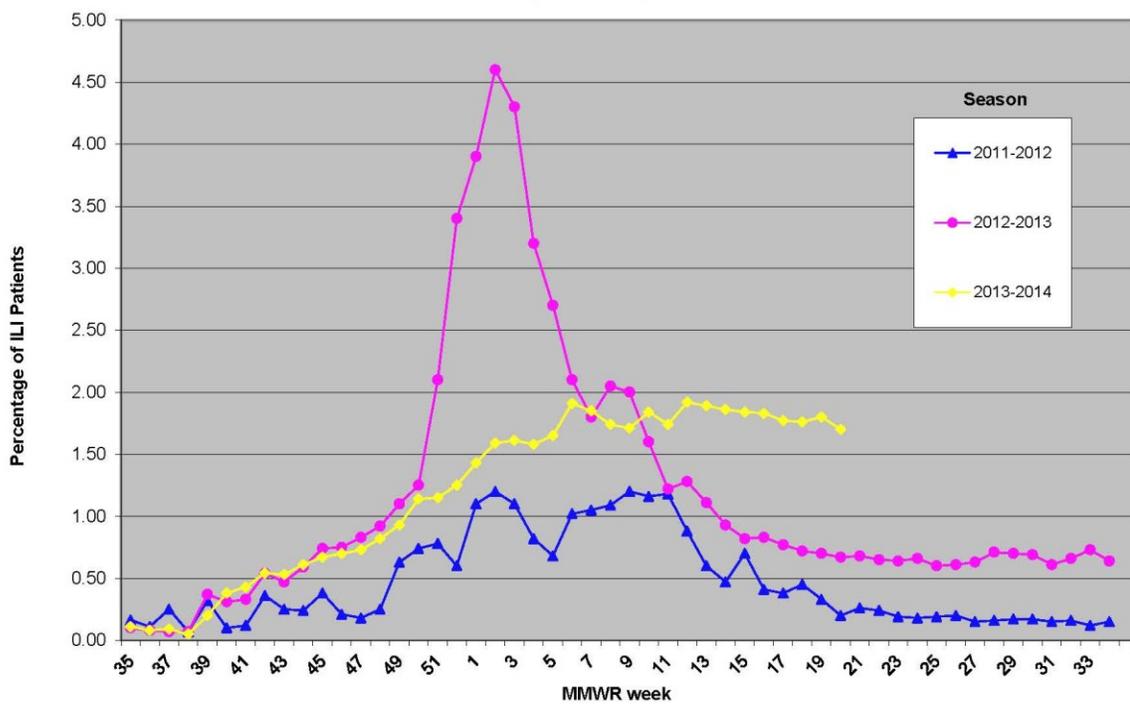
Figure 1
CT Hospital Emergency Department Syndromic Surveillance (HEDSS):
Percent of ED visits for fever/flu syndrome compared to past seasons
MMWR Week 20 (week ending 05/17/2014)

Department of Emergency Management and Homeland Security (DEMHS) Planning Regions



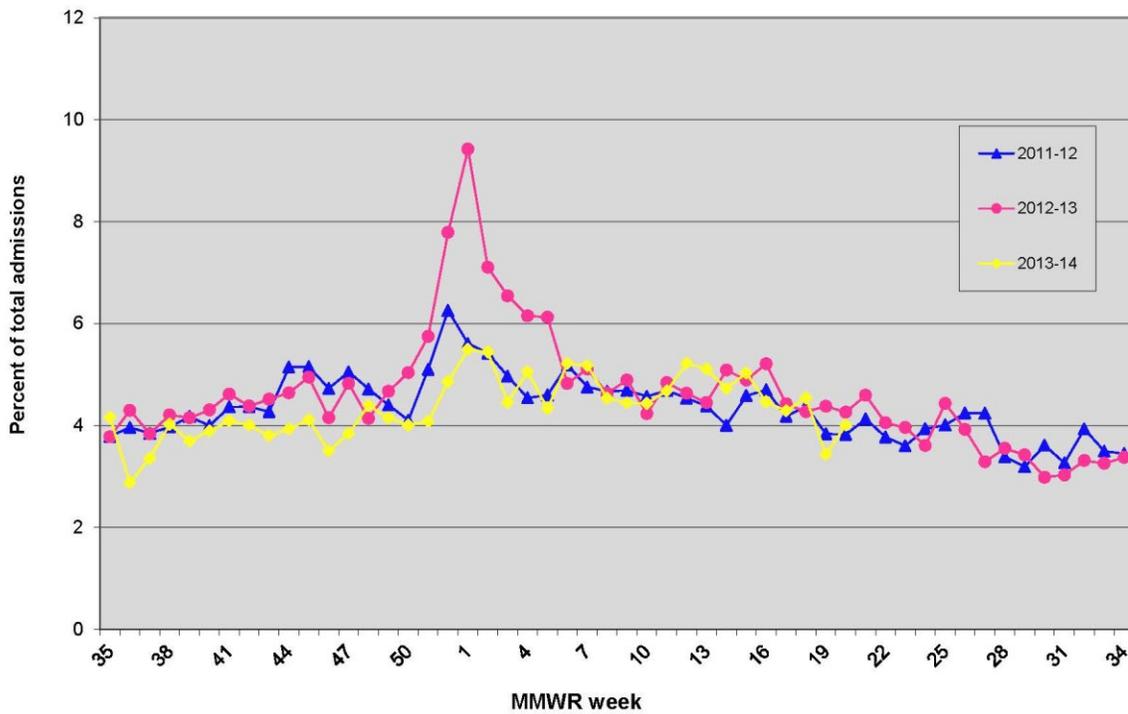
Sentinel Provider Surveillance System: Reporting of influenza-like illness (ILI) is conducted through a statewide network of volunteer outpatient providers known as ILINet. The proportion of patients exhibiting ILI is reported to the DPH on a weekly basis. ILI is defined as a cough or sore throat in the absence of a known cause, and the presence of a fever > 100° F.

Figure 2. Outpatient Influenza-Like Illness Surveillance Network (ILINet), Percentage of Patients with Influenza-Like Illness (ILI); 2011-12, 2012-13, 2013-14



The **Hospital Admissions Syndromic Surveillance (HASS) System**, receives daily electronic reports from all 32 acute care hospitals in Connecticut. Information on unscheduled admissions, including those for pneumonia that may be associated with influenza infections, is submitted.

Figure 3: Connecticut Hospital Admissions Syndromic Surveillance (HASS) System, Percent of total statewide admissions for pneumonia; 2011-12, 2012-13, 2013-14



Influenza-associated Hospitalizations: In Connecticut, influenza-associated hospitalizations and deaths are reportable. Data collected describe the more serious illnesses associated with influenza infections.

Figure 4. Hospitalized Patients (n = 1889) with Positive Laboratory Tests by Influenza Subtype and Week, Connecticut (as of 5/22/2014)

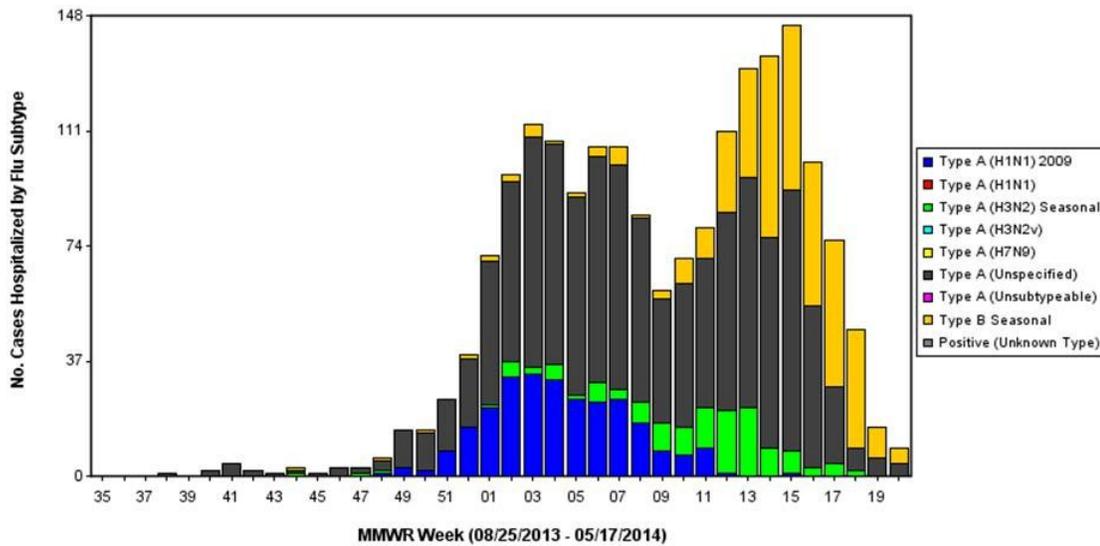
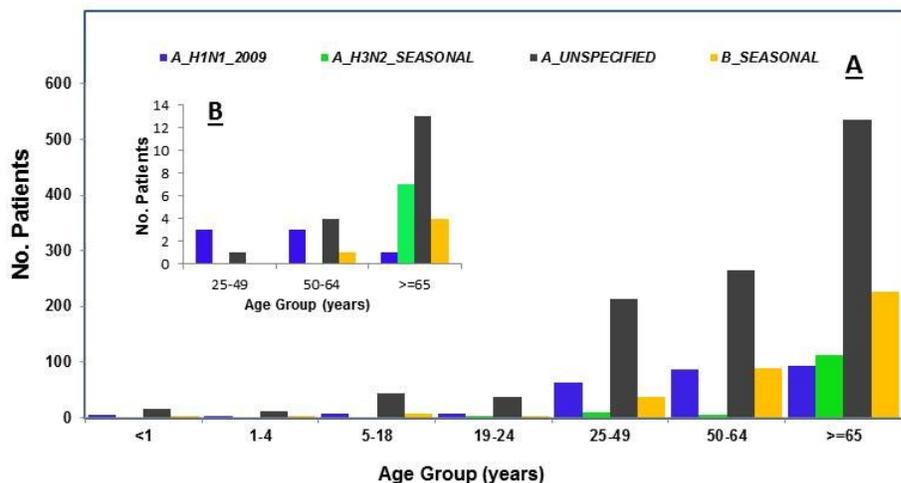


Figure 5. Hospitalized Patients (n=1889, A) and Flu-Associated Deaths (n=37, B) with Positive Laboratory Tests by Influenza Subtype and Age Group, Connecticut, as of 5/22/2014



Laboratory Surveillance: Positive influenza tests are laboratory reportable findings in Connecticut. The DPH tracks these results to determine what types, subtypes, and strains are circulating.

Figure 6. Positive Laboratory Tests (n = 6690) by Influenza Subtype and Week, Connecticut (as of 5/22/2014)

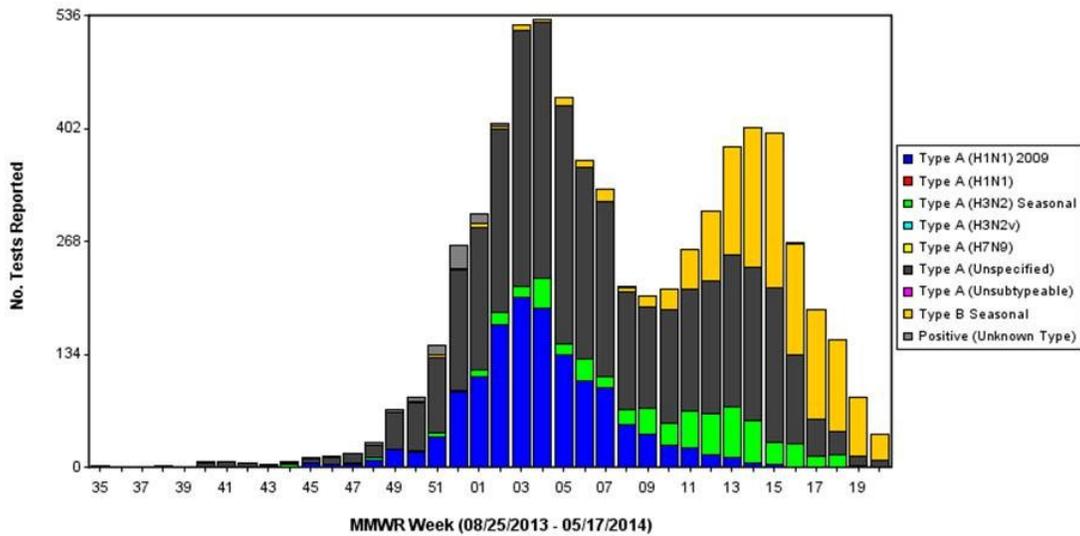


Figure 7. Proportion of Cumulative Positive Laboratory Tests (n = 6690) by Influenza Subtype, Connecticut (as of 5/22/2014)

