

**STATE OF CONNECTICUT DEPARTMENT OF PUBLIC HEALTH  
PRELIMINARY INFLUENZA ACTIVITY REPORT  
For Week 53 (week ending January 3, 2009)**



Preliminary influenza data reviewed from the week ending January 3<sup>rd</sup>, revealed that an increasing level of activity was observed during the 14th week of the official 2008-2009 influenza season. These data include a total of 80 laboratory confirmed test results from various Connecticut hospitals that reveal the presence of both type A and type B flu viruses and include reports from all 8 (Fairfield, Hartford, Litchfield, Middlesex, New Haven, New London, Tolland, and Windham) Connecticut counties (see Table 1, Figure 1). The increased level of flu activity in Fairfield County and throughout Connecticut has resulted in an upgrade of classification from “sporadic” to “local.” The DPH laboratory has culture-confirmed the presence of influenza virus in 8 clinical specimens. Characterization of these isolates reveals the presence of the influenza A (H1N1) subtype in 4 specimens, the influenza A (H3N2) subtype in 1 specimen, and influenza B in 3 specimens (see Figure 2). Clinicians should be aware of oseltamivir resistance among many flu A (H1N1) strains. Although influenza activity is increasing in Connecticut, the total number of laboratory confirmed test reports received to date are lower than those observed during the last 5 seasons (see Figures 3a & 3b).

Six additional indicators of flu activity are being monitored throughout these initial weeks of the 2008-2009 flu season. Information on respiratory outbreaks and laboratory confirmed influenza cases in long-term care facilities are shown in Figure 4. Data on Connecticut residents presenting with influenza-like-illness (ILI) as reported by participants of the United States Outpatient Influenza-like Illness Surveillance Network (ILINet) (formerly known as the U.S. Influenza Sentinel Provider Surveillance Network) are shown in Figure 5. These reporting sites also include participants in the Connecticut Influenza Super Sentinel Surveillance Pilot Project organized this year to provide additional information on outpatient ILI activity.

Data on emergency department visits from our Hospital Emergency Department Syndromic Surveillance (HEDSS) System are also analyzed. One category in particular, fever/flu, has been shown to correlate well with influenza activity (see Figure 6). Patients with more severe illness who are admitted into Connecticut hospitals are tracked by the Connecticut Hospital Admissions Syndromic Surveillance (HASS) System. Data on one category, total statewide pneumonia admissions, correlates with flu activity (see Figure 7). Finally, selected mortality data are monitored each week including pneumonia and influenza deaths from Connecticut cities that participate in the U.S. 122 Cities Mortality Reporting System (see Figure 8), and reports of influenza associated pediatric deaths (none reported to date this flu season). All 6 surveillance systems provide additional evidence that Connecticut is currently experiencing a low level of flu activity as compared with recent influenza seasons.

The CDC has posted its 14th national influenza activity map showing initial “sporadic” flu activity in 30 states, “local” flu activity in 11 states, and a higher “regional” level of activity in 4 states. The most recent CDC weekly influenza activity map can be viewed at:

<http://www.cdc.gov/flu/weekly/usmap.htm>

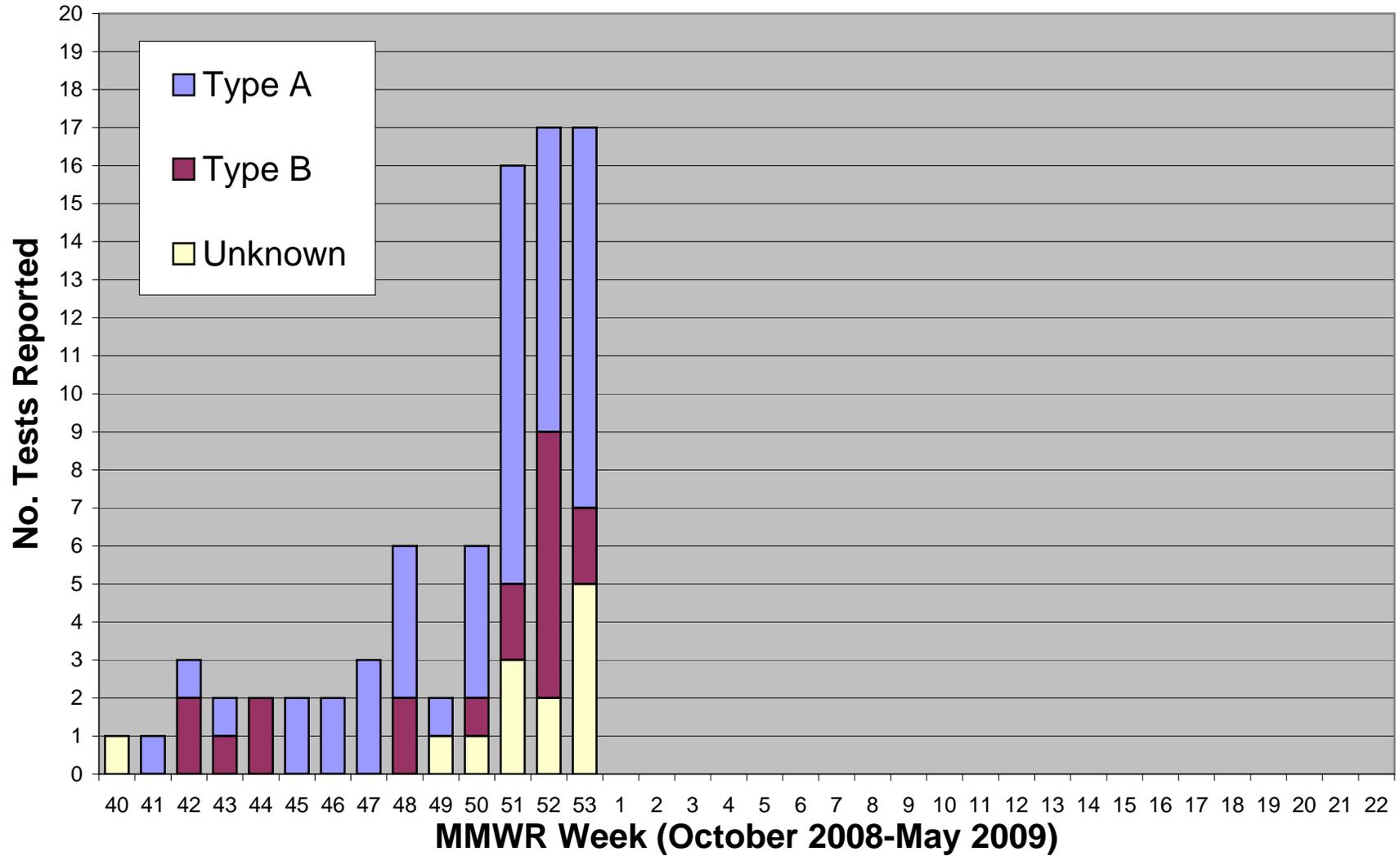
If you have any questions concerning this report, please contact Alan Siniscalchi or Maria Andrews at the Department of Public Health, Epidemiology and Emerging Infections Program, by calling 860-509-7994.

**TABLE 1: Connecticut Department of Public Health  
2008-2009 Laboratory Confirmed Influenza Testing  
For Week 53 (week ending January 3, 2009)**

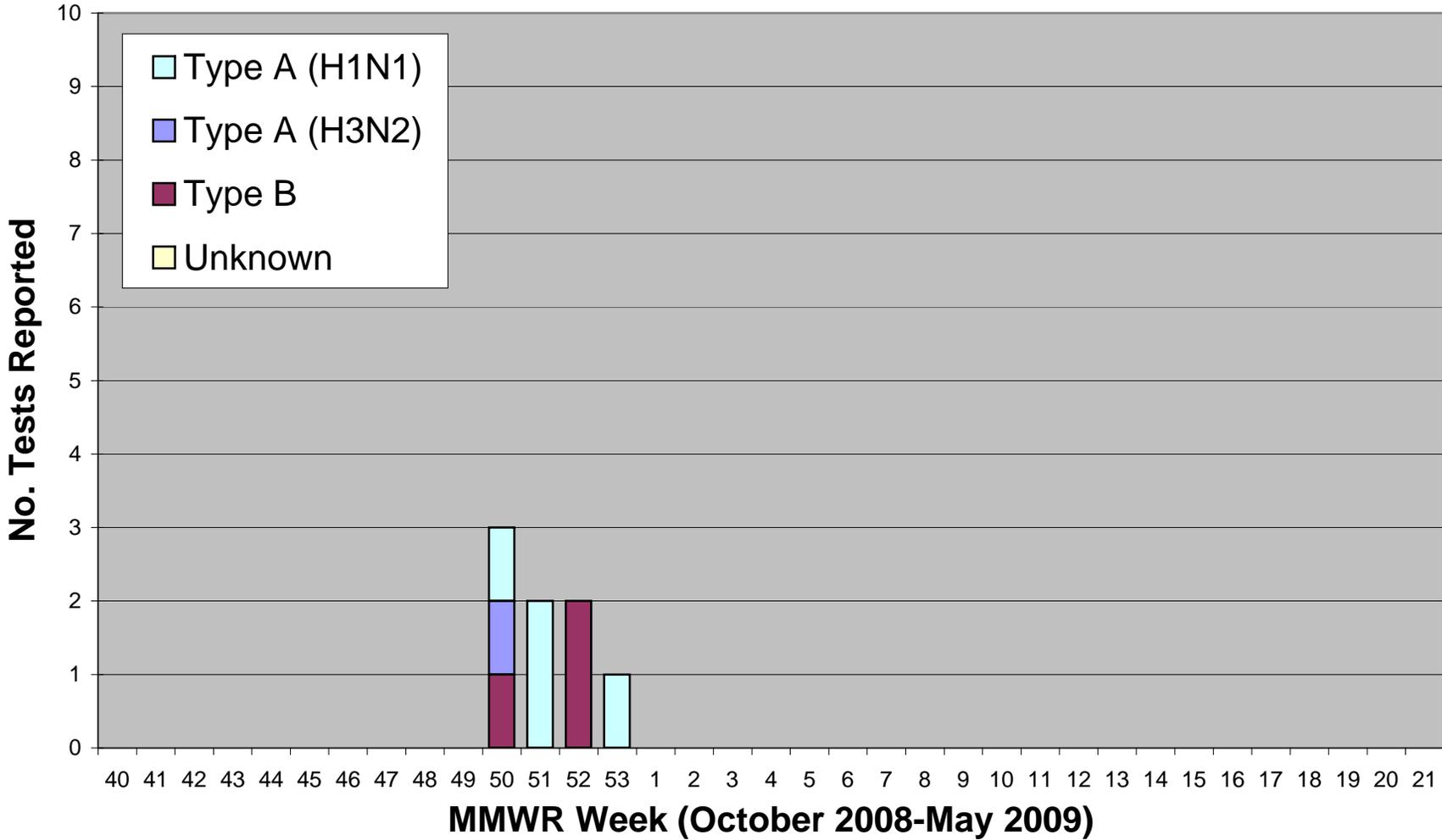
Results by		Previous	New	Total
<b>TEST:</b>	Culture	5	3	8
	Rapid Test	53	19	72
<b>FLU TYPE:</b>	Type A	36	12	48
	Type B	14	5	19
	Unknown	8	5	13
<b>COUNTY:</b>	Fairfield	13	10	23
	Hartford	12	2	14
	Litchfield	5	2	7
	Middlesex	4	0	4
	New Haven	16	5	21
	New London	1	1	2
	Tolland	1	0	1
	Windham	6	2	8
<b>GENDER:</b>	Female	27	9	36
	Male	31	13	44
<b>Total</b>		<b>58</b>	<b>22</b>	<b>80</b>

Age:	Previous	New	Total	Week	Dates - 2009	Total
0-4	5	3	8	1	January 4 - 10	
5-24	13	7	20	2	January 11-17	
25-64	23	9	32	3	January 18-24	
≥65	17	3	20	4	January 25-31	
Age Range: <1 – 88 Average Age: 40.5				5	February 1-7	
				6	February 8-14	
				7	February 15-21	
				8	February 22-28	
				9	March 1-7	
				10	March 8-14	
				11	March 15-21	
				12	March 22-28	
				13	March 29- April 4	
				14	April 5-11	
				15	April 12-18	
				16	April 19-25	
				17	April 26- May 2	
				18	May 3- 9	
				19	May 10-16	
				20	May 17-23	
				21	May 24-30	
				22	May 31- June 6	
				53	Dec. 28- Jan. 3	17

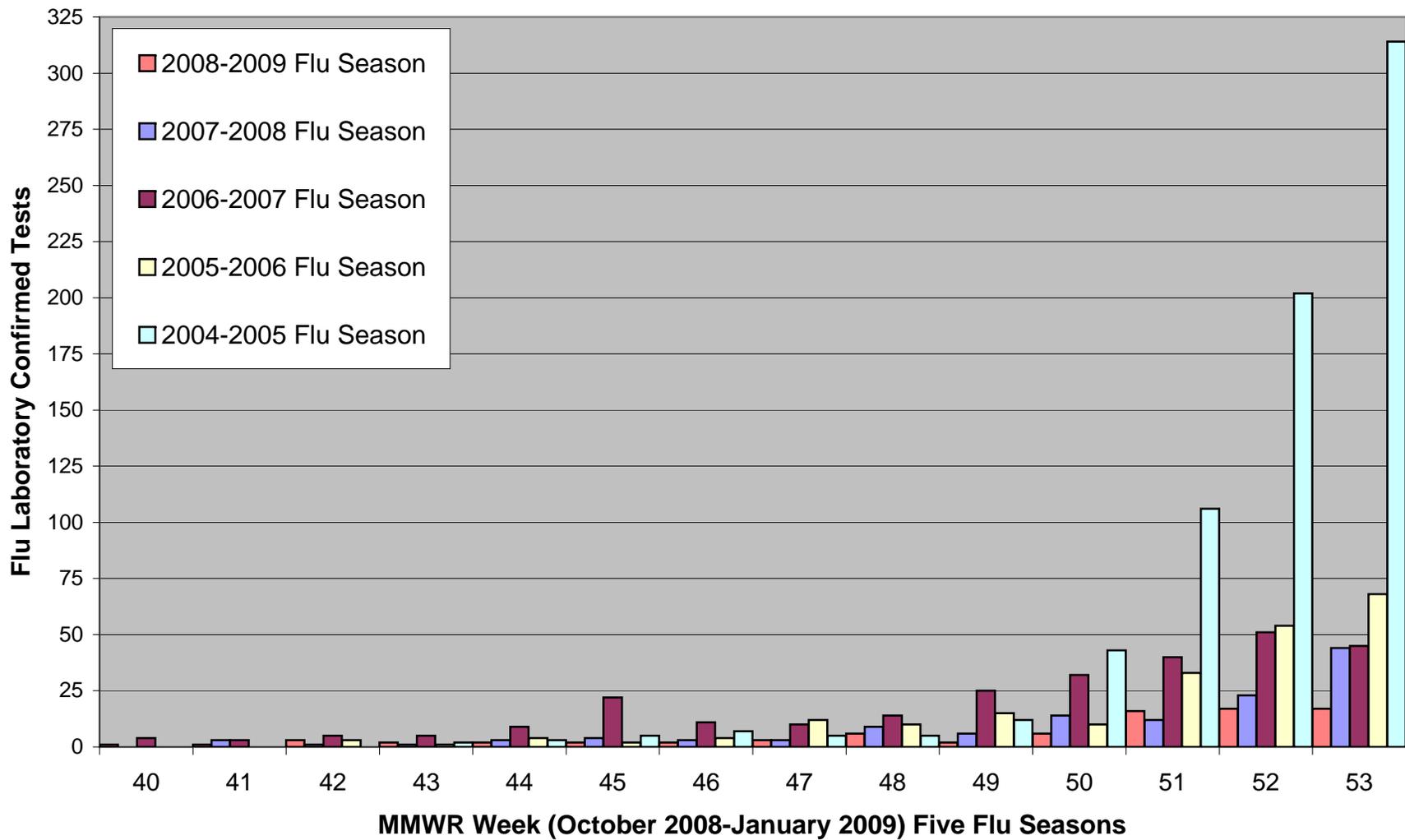
**Figure 1. Laboratory Confirmed Tests by Flu Type, Connecticut, 2008-2009 Influenza Season**



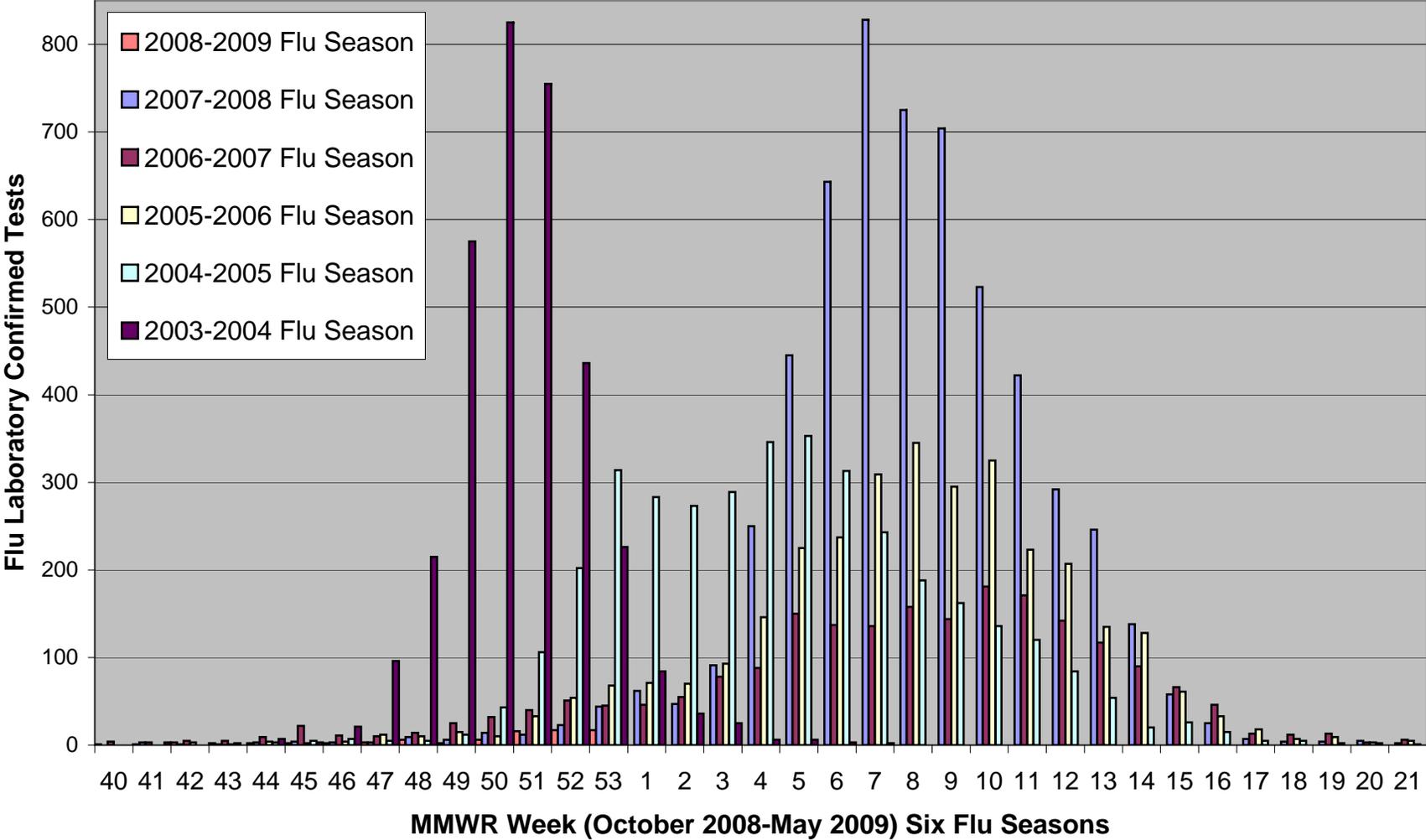
**Figure 2. Department of Public Health Laboratory Culture  
Confirmed Tests by Flu Type,  
Connecticut, 2008-2009 Flu Season**



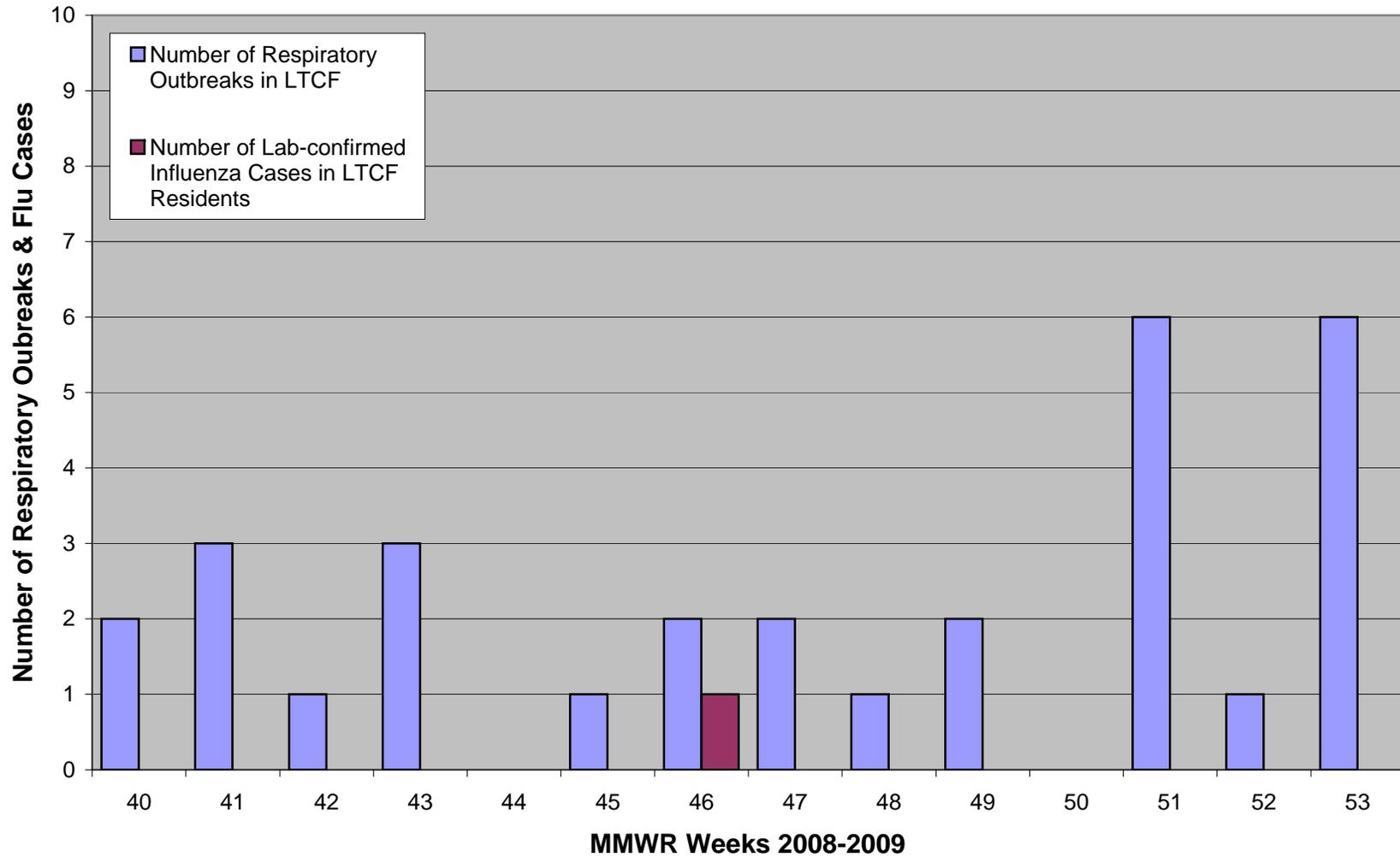
**Figure 3a. Laboratory Confirmed Tests by Flu Season  
Connecticut, 2004-2009**



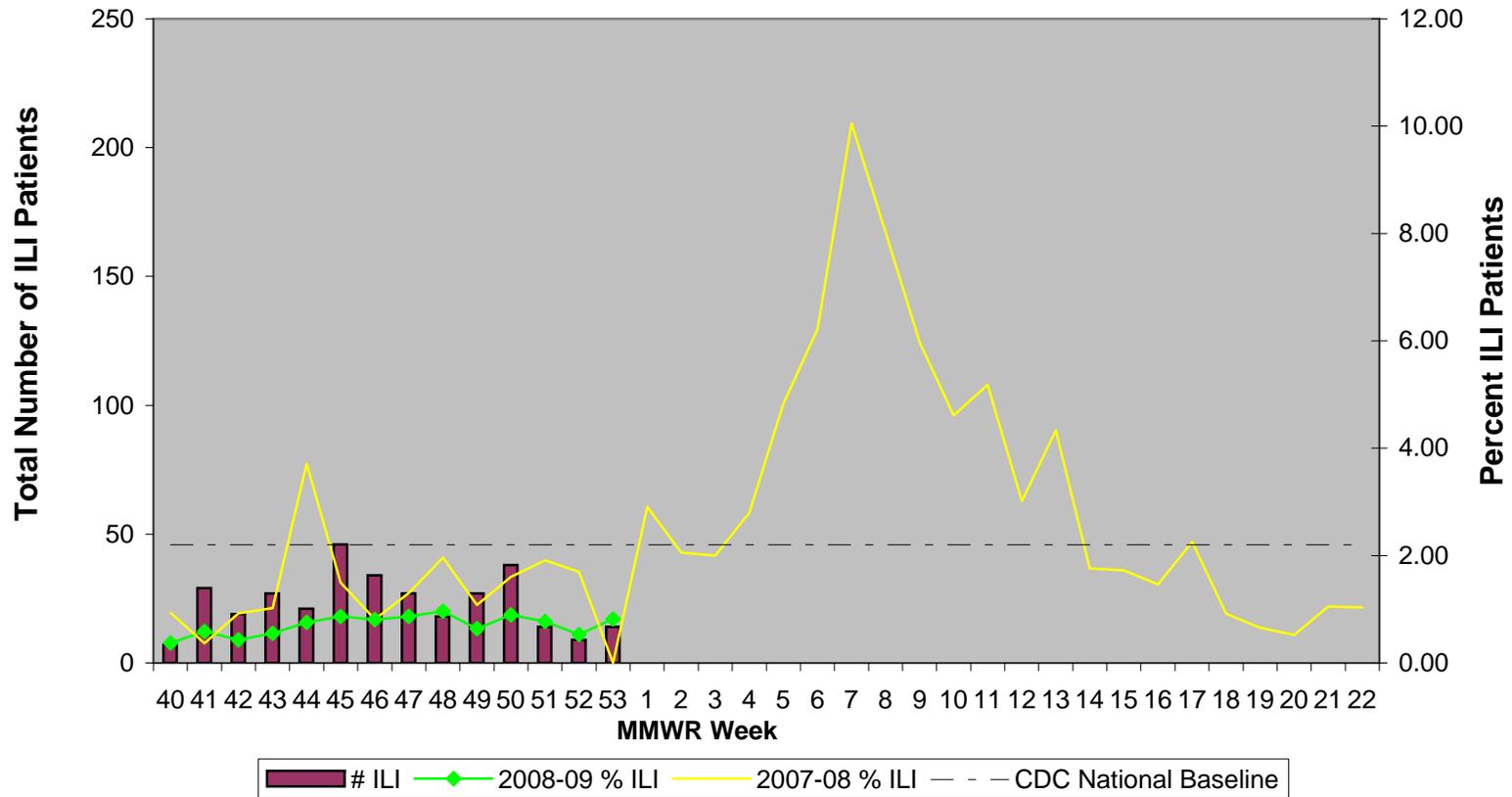
**Figure 3b. Laboratory Confirmed Tests by Flu Season  
Connecticut, 2003-2009**



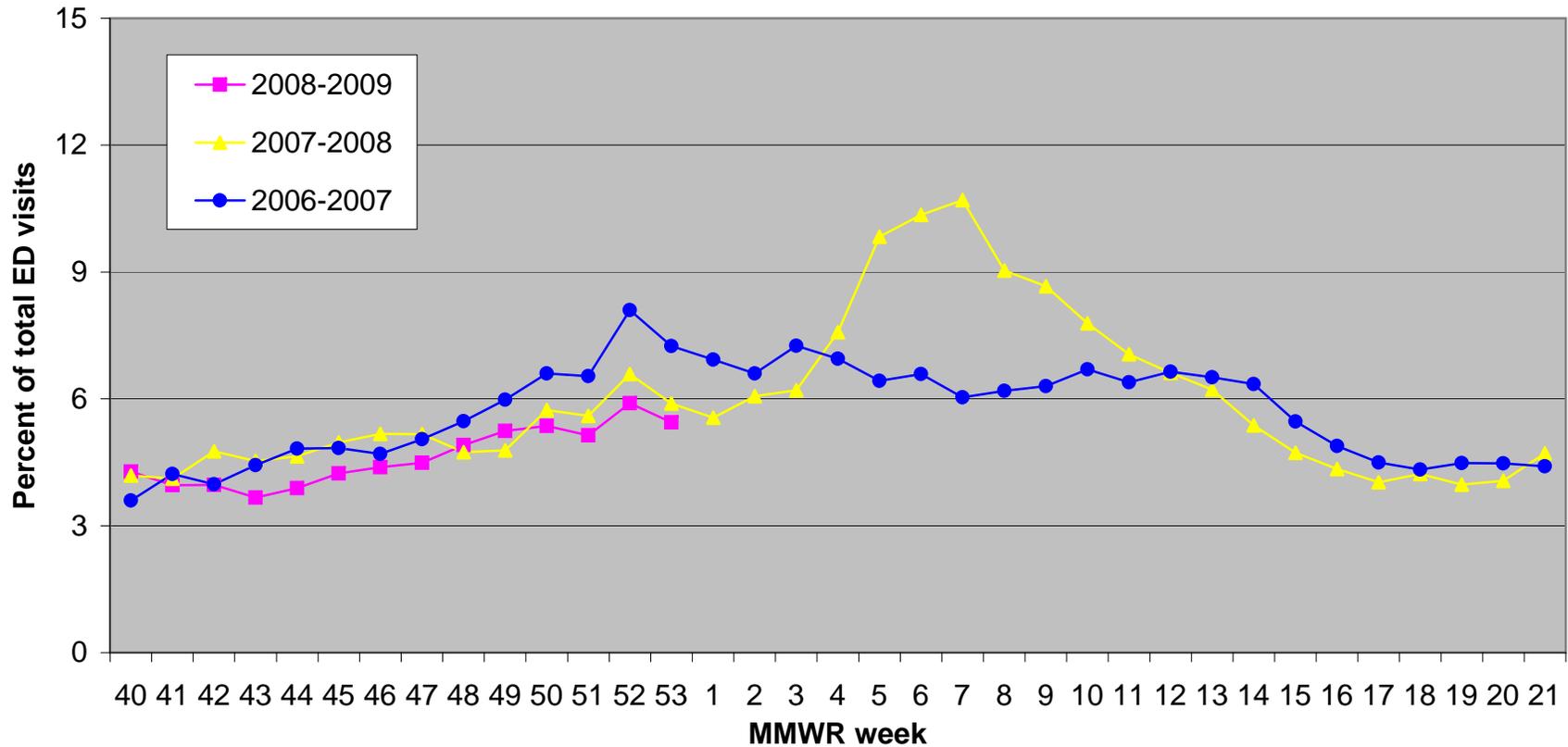
**Figure 4. Respiratory Outbreaks & Influenza in Long-term Care Facilities (LTCF), Connecticut, 2008-2009 Influenza Season**



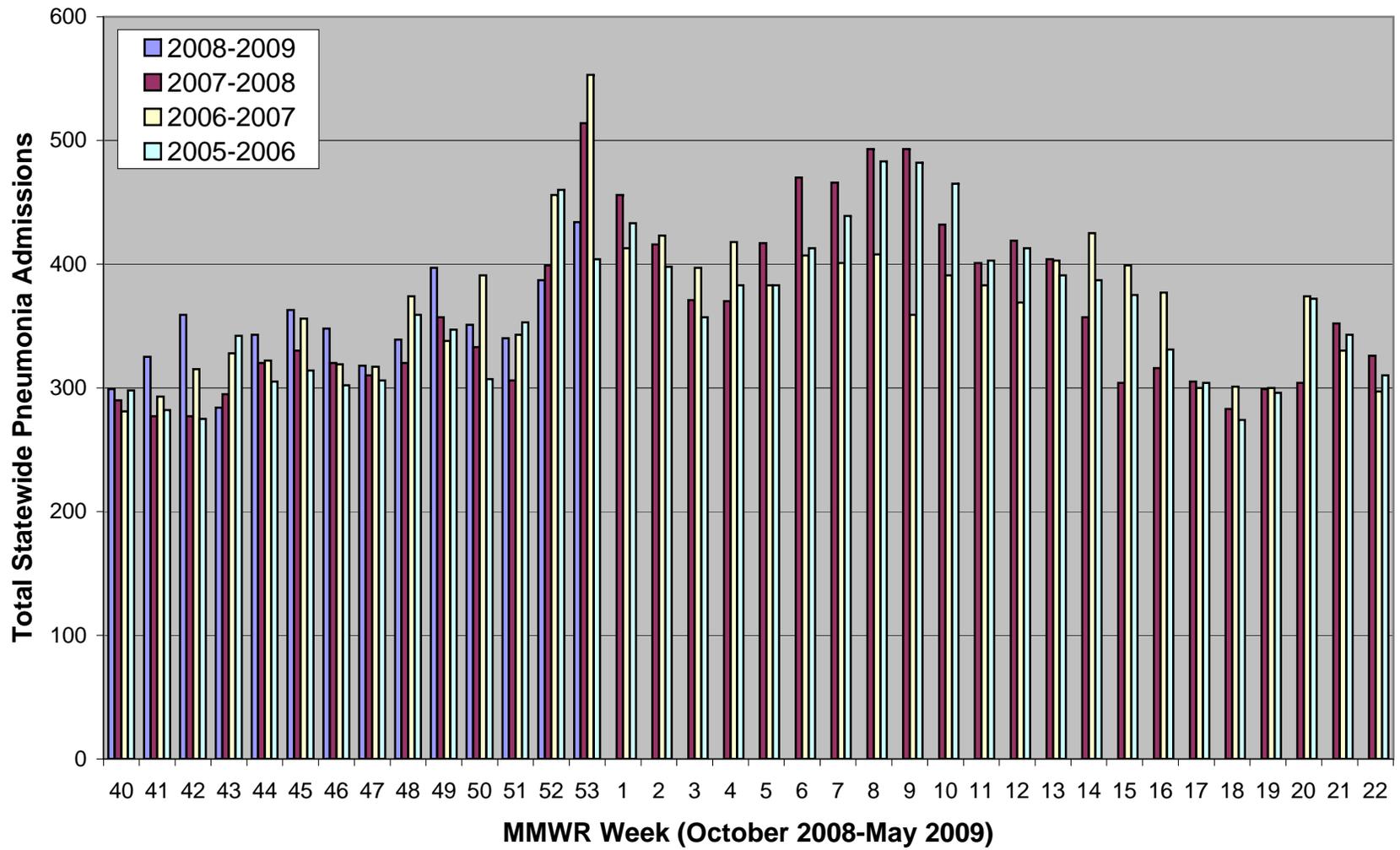
**Figure 5. Outpatient Influenza-Like Illness Surveillance Network (ILINet),  
Statewide Visits of Patients with Influenza-Like Illness (ILI), Connecticut,  
2007-2009**



**Figure 6. Hospital Emergency Department Syndromic Surveillance (HEDSS) System, Statewide "Fever/Flu" Visits by Flu Season, Connecticut, 2006-2009**



**Figure 7. Hospital Admissions Syndromic Surveillance (HASS) System, Connecticut Statewide Pneumonia Admissions by Flu Season; 2005-2009**



**Figure 8. CDC 122 Cities Surveillance: Pneumonia & influenza Deaths in Selected Connecticut Cities, 2007-2008 & 2008-2009 Flu Seasons**

