



Iowa Influenza Surveillance Network (IISN)

Influenza-like Illness (ILI) and Other Respiratory Viruses

Weekly Activity Report



For the week ending March 18th, 2017 - Week 11

All data presented in this report are provisional and may change as additional reports are received

Quick Stats	
Percent of outpatient visits for ILI ¹	0.64% (baseline 1.8%)
Percent of influenza rapid test positive	21.31% (342/1605)
Percent of RSV rapid tests positive	20.91% (46/220)
Percent school absence due to illness ²	2.36%
Number of schools with ≥10% absence due to illness	2
Influenza-associated hospitalizations ³	37/5867 inpatients surveyed
Influenza-associated mortality -all ages (Cumulative) ⁴	101
Influenza-associated pediatric mortality (Cumulative)	0

¹ ILI: Influenza-like illness is defined as a fever of ≥100° F as well as cough and/or sore throat.
² Percent school absence due to illness are reported through a weekly survey of Iowa sentinel schools
³ Hospitalizations due to influenza are voluntarily reported through a weekly survey of Iowa sentinel hospitals
⁴ Deaths in which influenza is listed on the death certificate. This is an underestimate of influenza-related deaths.
 Cumulative is 10/2/2016-current week.

Iowa Influenza Geographic Spread ⁵
No Activity
Sporadic
Local
Regional
Widespread

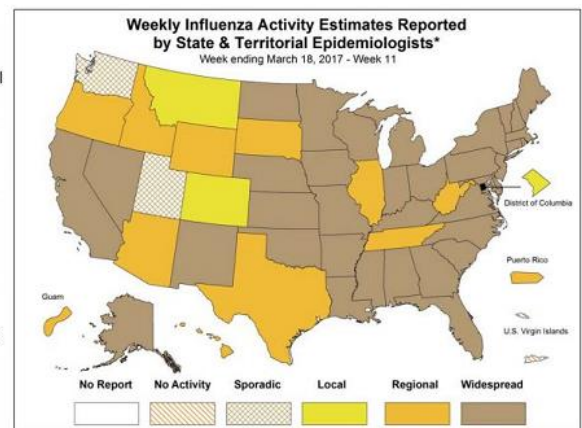
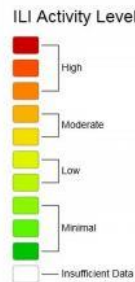
⁵This is based on CDC's activity estimates definition www.cdc.gov/flu/weekly/overview.htm

Iowa statewide activity summary:

Surveillance indicates that influenza activity is decreasing, however cases of influenza continue to be identified in all six regions of the state. For this reporting week, the State Hygienic Laboratory confirmed 25 influenza A(H3), two influenza B(Victoria Lineage), and nine influenza B(Yamagata Lineage) viruses from submitted samples. 37 influenza-related hospitalizations were reported from sentinel hospitals during this reporting week. The proportion of outpatient visits due to influenza-like illness (ILI) was 0.64 percent, which is below the regional baseline of 1.8. In this reporting week, 13 adenovirus, one parainfluenza virus type 1, three parainfluenza virus type 2, 13 parainfluenza virus type 3, one parainfluenza virus type 4, 58 rhinovirus/ enterovirus, 41 RSV, 31 hMPV and 13 coronavirus were detected from surveillance sites.

National activity summary - (CDC)-Last Updated in Week 11:

Influenza-Like Illness (ILI) Activity Level Indicator Determined by Data Reported to ILINet
 2016-17 Influenza Season Week 11 ending Mar 18, 2017



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

Synopsis: During week 11 (March 12-March 18, 2017), influenza activity decreased but remained elevated in the United States.

Viral Surveillance: The most frequently identified influenza virus type reported by public health laboratories during week 11 was influenza A (H3). The percentage of respiratory specimens testing positive for influenza in clinical laboratories decreased.

Pneumonia and Influenza Mortality: The proportion of deaths attributed to pneumonia and influenza (P&I) was above the system-specific epidemic threshold in the National Center for Health Statistics (NCHS) Mortality Surveillance System.

Influenza-associated Pediatric Deaths: Two influenza-associated pediatric deaths were reported.

Outpatient Illness Surveillance: The proportion of outpatient visits for influenza-like illness (ILI) was 3.2 percent, which is above the national baseline of 2.2 percent. Seven of ten regions reported ILI at or above their region-specific levels. 12 states experienced high ILI activity; six states experienced moderate ILI activity; nine states experienced low ILI activity; New York City, Puerto Rico and 23 states experienced minimal ILI activity and the District of Columbia had insufficient data.

Geographic Spread of Influenza: The geographic spread of influenza in 36 states was reported as widespread; Guam, Puerto Rico and 10 states were reported as regional; the District of Columbia and two states reported local activity; two states reported sporadic activity; and the U.S. Virgin Islands reported no activity.

Detailed information can be found online at www.cdc.gov/flu/weekly/.

International activity summary - (WHO):

Influenza activity in the temperate zone of the northern hemisphere appeared to decrease. Influenza activity in many countries, especially in Europe and East Asia, already peaked. The predominant strain of influenza worldwide is influenza A(H3). Detailed information can be found online at www.who.int/influenza/surveillance_monitoring/updates/latest_update_GIP_surveillance/en/. It was last updated 3/20/2017.

Laboratory surveillance program:

The State Hygienic Laboratory (SHL) is the primary lab for influenza testing and reporting in Iowa. SHL reports the number of tests performed and the type and sub-type of positive tests to the influenza surveillance network several times every week. In addition, SHL surveys clinical and reference labs on a weekly basis for the number of rapid-antigen tests performed, the number positive and the positive non-influenza virus tests. This report also includes the positive non-influenza virus tests reported from the Dunes Medical Laboratories at Mercy Medical Center in Sioux City.

Table 1: Influenza A viruses detected by SHL by age group

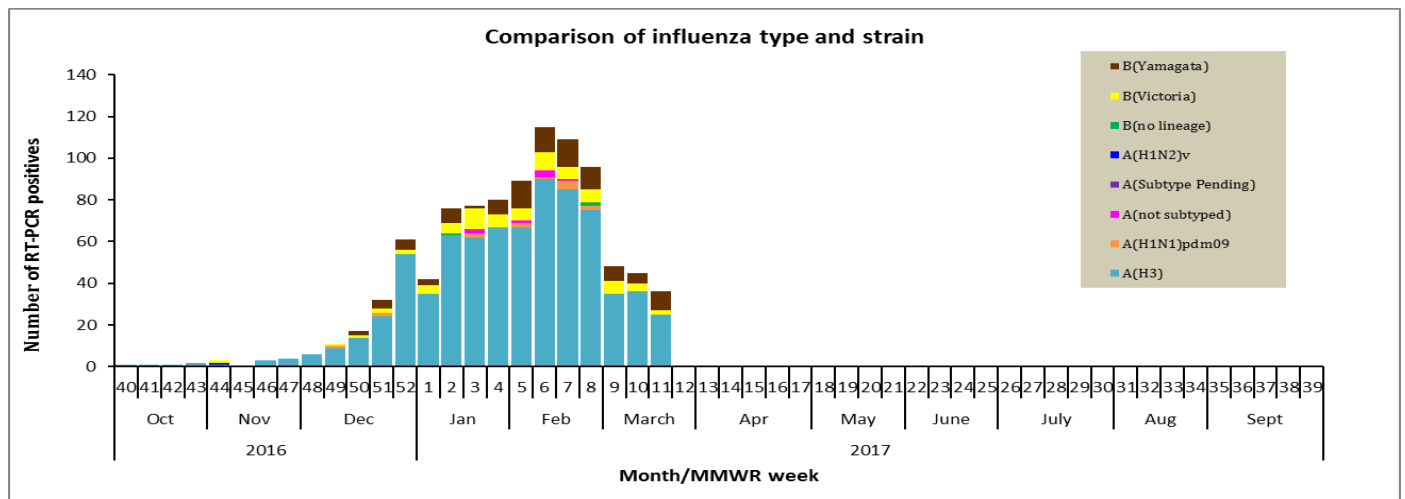
Age Group	CURRENT WEEK					CUMULATIVE (10/2/16 – CURRENT WEEK)				
	Flu A					Flu A				
	A(H1N1)pdm09	A(H3)	A(H1N2v)	Subtype Pending	Not subtyped	A(H1N1)pdm09	A(H3)	A(H1N2v)	Subtype Pending	Not subtyped
0-4	0(0%)	0(0%)	0(0%)	0(0%)	0(0%)	4(29%)	31(4%)	0(0%)	0(0%)	0(0%)
5-17	0(0%)	0(0%)	0(0%)	0(0%)	0(0%)	2(14%)	49(6%)	0(0%)	0(0%)	0(0%)
18-24	0(0%)	0(0%)	0(0%)	0(0%)	0(0%)	0(0%)	113(15%)	0(0%)	0(0%)	1(14%)
25-49	0(0%)	1(4%)	0(0%)	0(0%)	0(0%)	4(29%)	62(8%)	0(0%)	0(0%)	2(29%)
50-64	0(0%)	0(0%)	0(0%)	0(0%)	0(0%)	2(14%)	84(11%)	1(100%)	0(0%)	1(14%)
>64	0(0%)	24(96%)	0(0%)	0(0%)	0(0%)	2(14%)	421(55%)	0(0%)	0(0%)	3(43%)
Total	0	25	0	0	0	14	760	1	0	7

*Counts of three or less are sometimes suppressed to protect confidentiality. Note that counts may not add up to the total due to missing age information
Only cases of Iowa residents are included
"Not subtyped" column is due to weak detections. This can be due to poor collection, timing of collection or stage of infection.

Table 2: Influenza B viruses detected by SHL by age group

Age Group	CURRENT WEEK			CUMULATIVE (10/2/16 – CURRENT WEEK)		
	Flu B			Flu B		
	Victoria Lineage	Yamagata Lineage	Lineage Pending	Victoria Lineage	Yamagata Lineage	Lineage Pending
0-4	0(0%)	0(0%)	0(0%)	6(8%)	6(6%)	1(33%)
5-17	0(0%)	2(22%)	0(0%)	28(39%)	28(26%)	1(33%)
18-24	0(0%)	0(0%)	0(0%)	14(20%)	12(12%)	1(33%)
25-49	0(0%)	2(22%)	0(0%)	12(17%)	14(14%)	0(0%)
50-64	0(0%)	1(11%)	0(0%)	4(6%)	18(18%)	0(0%)
>64	2(100%)	4(44%)	0(0%)	7(10%)	23(23%)	0(0%)
Total	2	9	0	71	99	3

*Counts of three or less are sometimes suppressed to protect confidentiality. Note that counts may not add up to the total due to missing age information
Only cases of Iowa residents are included



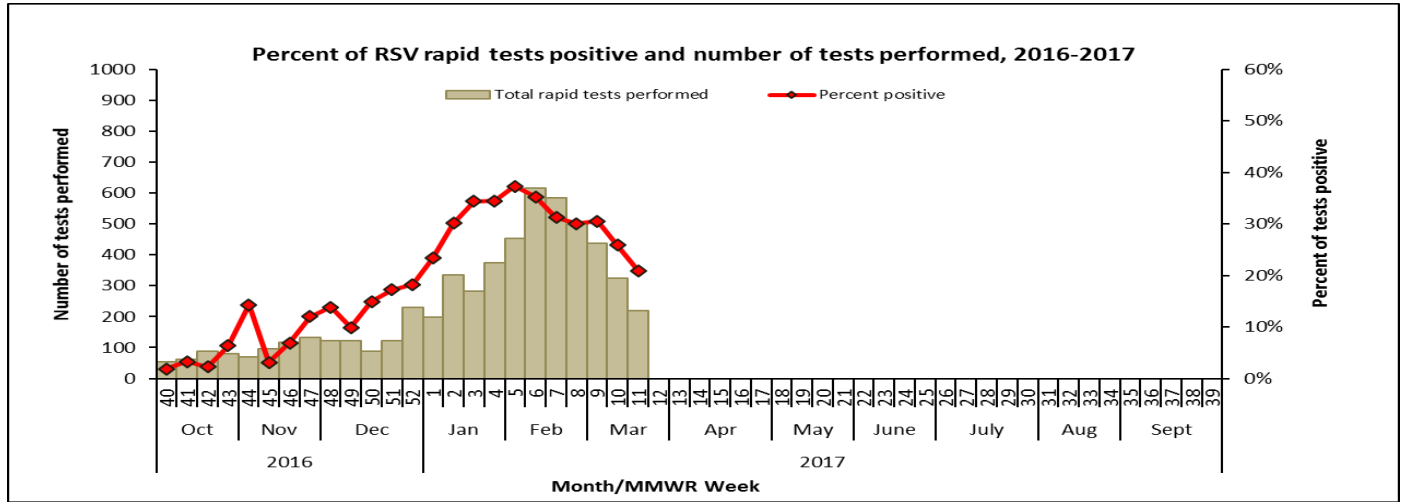
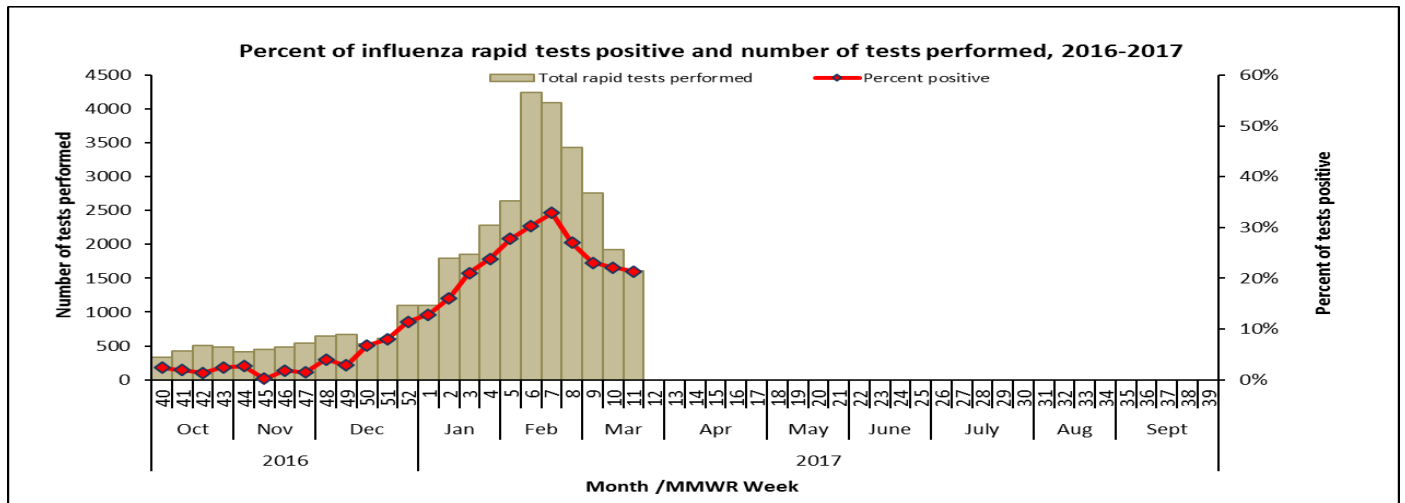
Rapid influenza and RSV test surveillance:

The State Hygienic Laboratory (SHL) runs a weekly web-based survey program where laboratorians report the number of influenza and respiratory syncytial virus (RSV) rapid tests performed and the number of tests positive. This table includes only the number of patients tested for influenza or RSV at laboratory surveillance sites throughout the state. This table does not provide case counts.

Table 2: Percent of influenza rapid tests positive and number of tests performed by region for the present week

REGION*	RAPID ANTIGEN INFLUENZA TESTS				RAPID ANTIGEN RSV TESTS		
	Tested	Flu A	Flu B	% Positive	Tested	Positive	% Positive
Region 1 (Central)	280	48	27	27	37	12	32
Region 2 (NE)	109	10	16	24	15	6	40
Region 3 (NW)	409	39	56	23	70	11	16
Region 4 (SW)	100	11	15	26	12	2	17
Region 5 (SE)	125	7	9	13	16	3	19
Region 6 (Eastern)	582	34	70	18	70	12	17
Total	1605	149	193	21	220	46	21

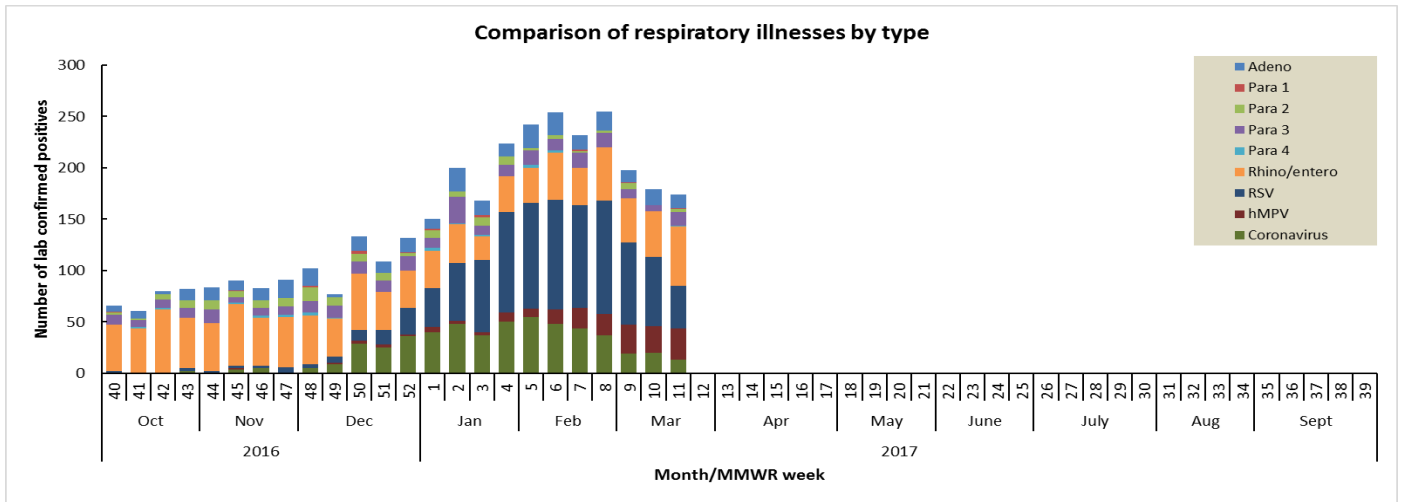
*Region 1- Boone, Calhoun, Carroll, Dallas, Greene, Grundy, Hamilton, Hardin, Jasper, Marshall, Polk, Poweshiek, Story, Tama, Warren, Webster; Region 2- Allamakee, Bremer, Butler, Cerro Gordo, Chickasaw, Emmet, Fayette, Floyd, Franklin, Hancock, Howard, Humboldt, Kossuth, Mitchell, Winnebago, Winneshiek, Worth, Wright; Region 3- Buena Vista, Cherokee, Clay, Crawford, Dickinson, Ida, Lyon, Monona, O'Brien, Osceola, Palo Alto, Plymouth, Pocahontas, Sac, Sioux, Woodbury; Region 4- Adair, Adams, Audubon, Cass, Clarke, Decatur, Fremont, Guthrie, Harrison, Madison, Mills, Montgomery, Page, Pottawattamie, Ringgold, Shelby, Taylor, Union; Region 5- Appanoose, Davis, Des Moines, Henry, Jefferson, Keokuk, Lee, Louisa, Lucas, Mahaska, Marion, Monroe, Muscatine, Van Buren, Wapello, Washington, Wayne; Region 6- Benton, Black Hawk, Buchanan, Cedar, Clayton, Clinton, Delaware, Dubuque, Iowa, Jackson, Johnson, Jones, Linn, Scott.



Non-influenza respiratory viruses:

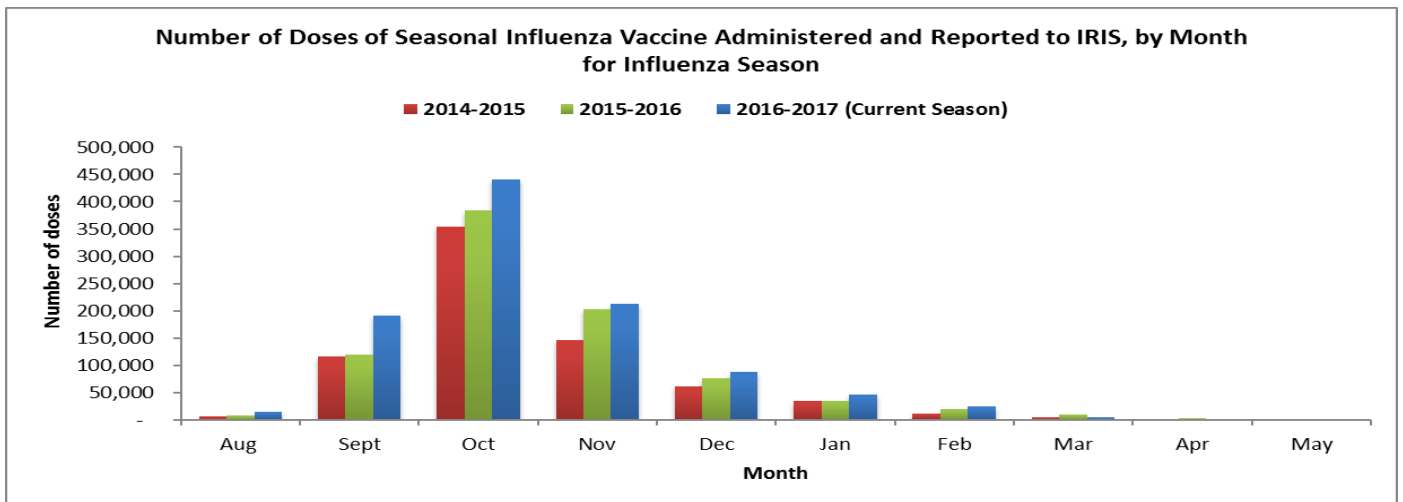
The State Hygienic Laboratory (SHL) runs a weekly web-based survey program where laboratorians report the number of positive tests for non-influenza respiratory viruses. This table also includes the positive non-influenza virus tests reported from the Dunes Medical Laboratories at Mercy Medical Center in Sioux City. The table includes only the number of positive tests at laboratory surveillance sites throughout the state. The table does not provide case counts.

Viruses	CURRENT WEEK	CUMULATIVE (10/2/16 – CURRENT WEEK)
Adenovirus	13	316
Parainfluenza Virus Type 1	1	15
Parainfluenza Virus Type 2	3	131
Parainfluenza Virus Type 3	13	267
Parainfluenza Virus Type 4	1	25
Rhinovirus/Enterovirus	58	1060
Respiratory syncytial virus (RSV)	41	946
Human metapneumovirus (hMPV)	31	179
Coronavirus	13	527
Total	174	3466



Seasonal influenza vaccination:

Seasonal influenza vaccination data in Iowa is based on doses reported to the Iowa Immunization Registry Information System (IRIS). IRIS is a confidential, computerized, population-based system that tracks immunization for children, adolescents and adults who are seen in a variety of public and private healthcare provider sites throughout the state of Iowa. For more information on the immunization data, contact Kim Tichy, IRIS coordinator at 515-281-4288 or kimberly.tichy@idph.iowa.gov.

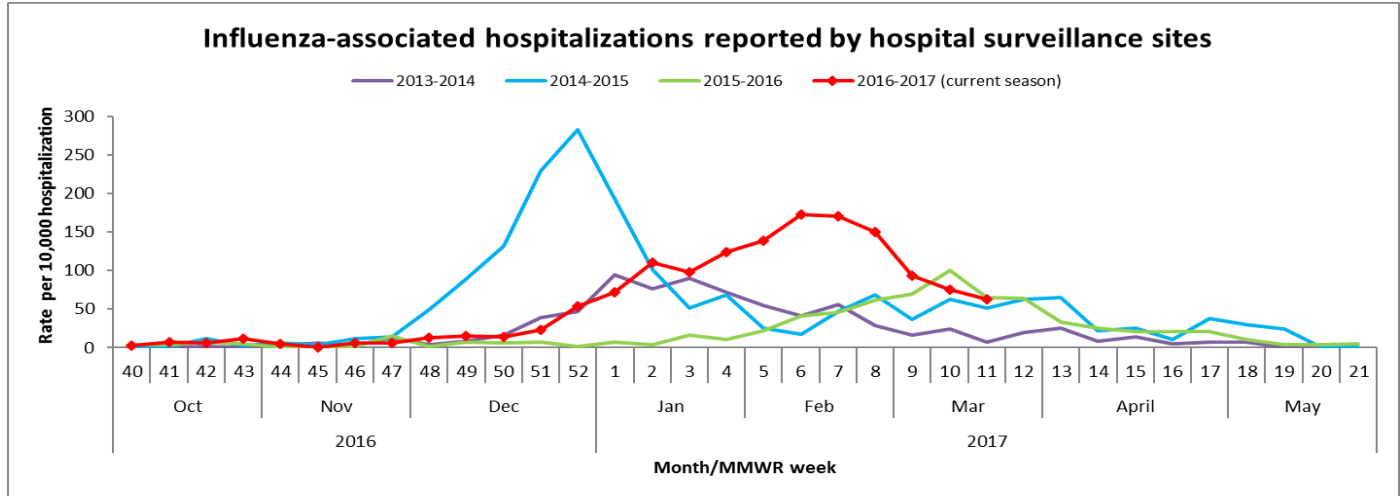
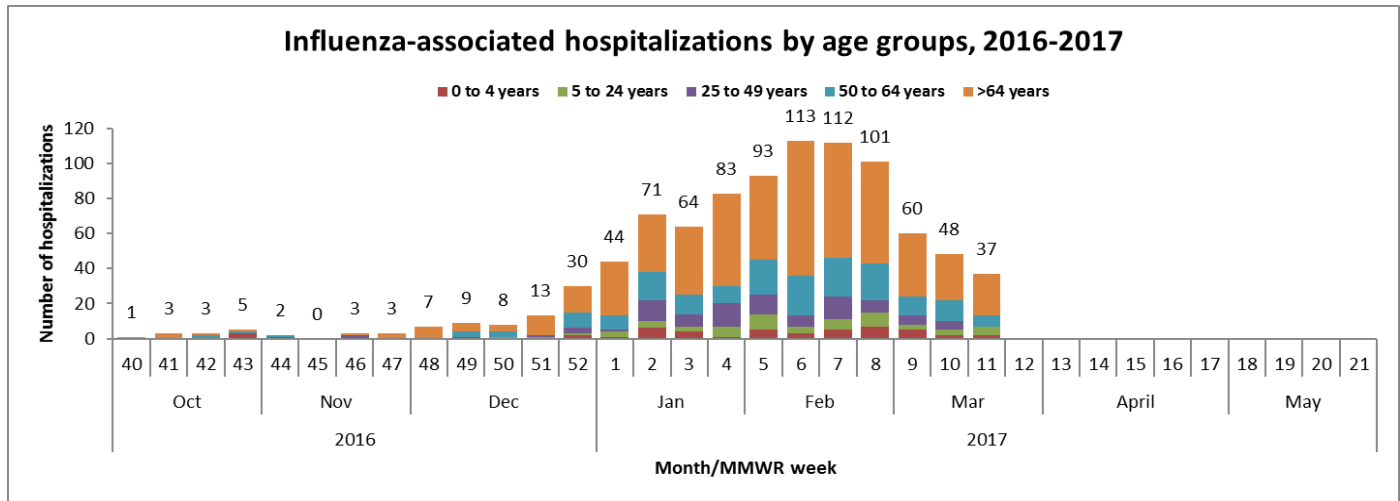


Note: The data for the 2016-2017 season is only up to the current week and there is a lag between the vaccine administration date and the date reported to the IRIS. The current season's data will be adjusted as additional data is received.

Influenza-associated hospitalizations:

Sentinel hospitals that participate in IISN voluntarily track and report the number of influenza-associated hospitalizations and the total number of inpatients each week. Of the 126 hospitals across the state of Iowa, 27 sentinel hospitals participate in weekly surveillance of influenza-associated hospitalizations for the IISN. Iowa hospitals interested in joining this surveillance program should contact Scott Seltrecht at 515-281-4985 or Scott.Seltrecht@idph.iowa.gov for more information.

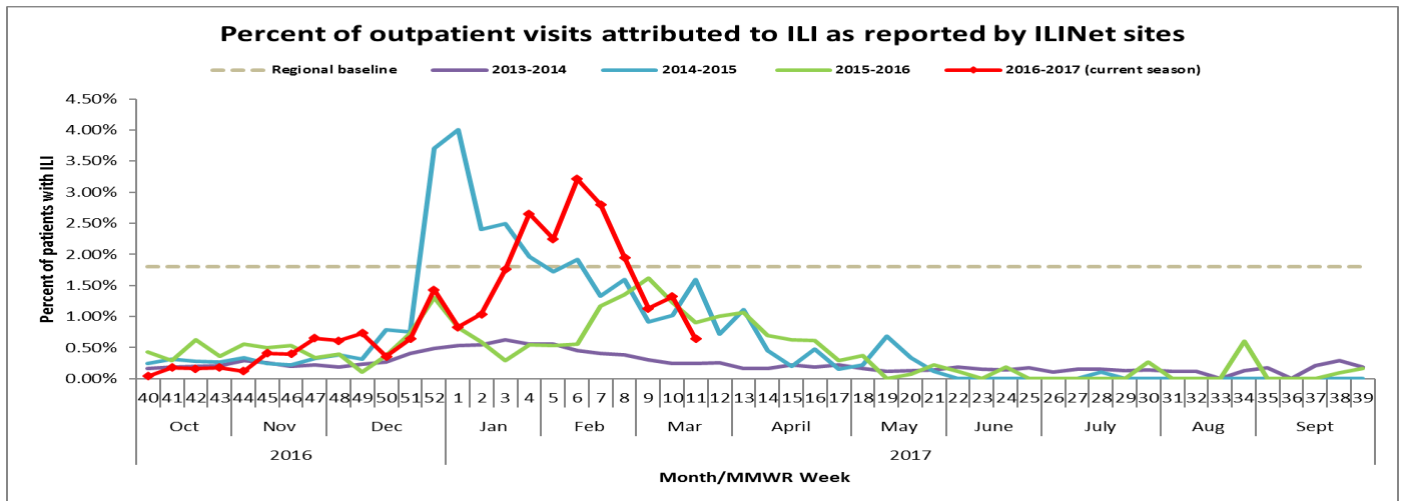
AGE	CURRENT WEEK	CUMULATIVE (10/2/16 – CURRENT WEEK)
Age 0-4	2	47
Age 5-24	5	57
Age 25-49	0	87
Age 50-64	6	179
Age >64	24	543
Total	37	913



Outpatient health care provider surveillance program (ILINet):

Outpatient health care providers who participate in the ILINet (a national influenza surveillance program) report the number of patients seen with influenza-like illness and the total number of patient visits each week. This system is a key part of Iowa's influenza surveillance. Across the state, 17 providers, ranging from family medicine to student health centers, participate weekly in the ILINet program. Iowa health care providers interested in joining this surveillance program should contact Scott Seltrecht at 515-281-4985 or Scott.Seltrecht@idph.iowa.gov for more information.

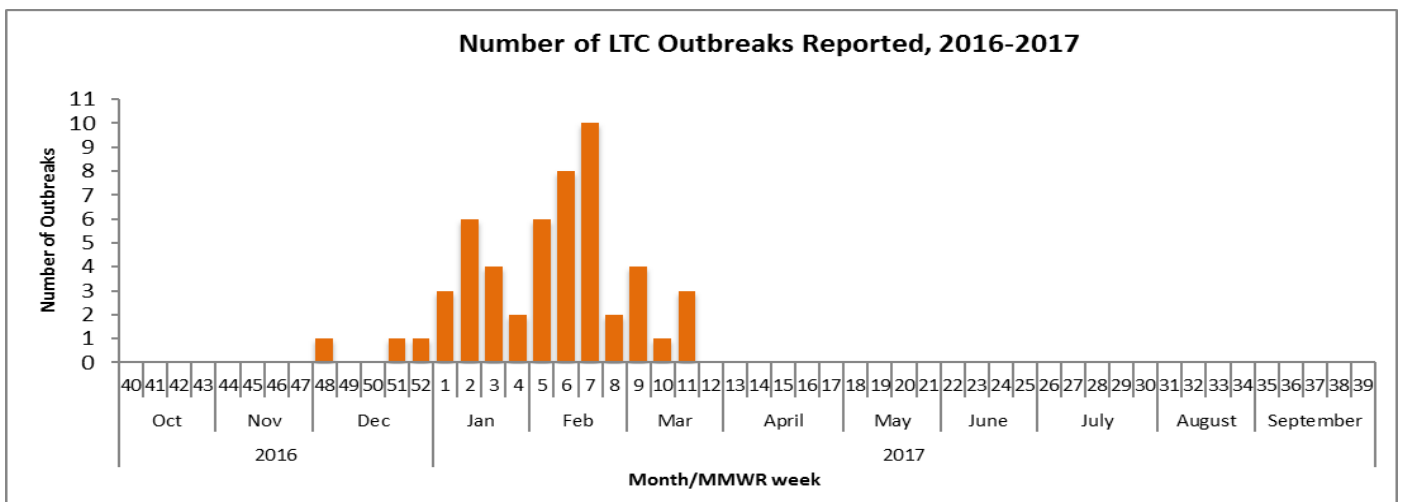
Week	%ILI	Total ILI	Age 0-4	Age 5-24	Age 25-49	Age 50-64	Age >64
Week 9, ending March 4	1.13	42	3	23	5	7	4
Week 10, ending March 11	1.32	36	7	18	4	1	6
Week 11, ending March 18	0.64	12	3	3	2	2	2



Long-term Care Outbreaks:

REGION*	CURRENT WEEK	CUMULATIVE (10/2/16 – CURRENT WEEK)
Region 1 (Central)	2	15
Region 2 (NE)	0	4
Region 3 (NW)	0	7
Region 4 (SW)	1	9
Region 5 (SE)	0	8
Region 6 (Eastern)	0	9
Total	3	52

*Region 1- Boone, Calhoun, Carroll, Dallas, Greene, Grundy, Hamilton, Hardin, Jasper, Marshall, Polk, Poweshiek, Story, Tama, Warren, Webster; Region 2- Allamakee, Bremer, Butler, Cerro Gordo, Chickasaw, Emmet, Fayette, Floyd, Franklin, Hancock, Howard, Humboldt, Kossuth, Mitchell, Winnebago, Winneshiek, Worth, Wright; Region 3- Buena Vista, Cherokee, Clay, Crawford, Dickinson, Ida, Lyon, Monona, O'Brien, Osceola, Palo Alto, Plymouth, Pocahontas, Sac, Sioux, Woodbury; Region 4- Adair, Adams, Audubon, Cass, Clarke, Decatur, Fremont, Guthrie, Harrison, Madison, Mills, Montgomery, Page, Pottawattamie, Ringgold, Shelby, Taylor, Union; Region 5- Appanoose, Davis, Des Moines, Henry, Jefferson, Keokuk, Lee, Louisa, Lucas, Mahaska, Marion, Monroe, Muscatine, Van Buren, Wapello, Washington, Wayne; Region 6- Benton, Black Hawk, Buchanan, Cedar, Clayton, Clinton, Delaware, Dubuque, Iowa, Jackson, Johnson, Jones, Linn, Scott.



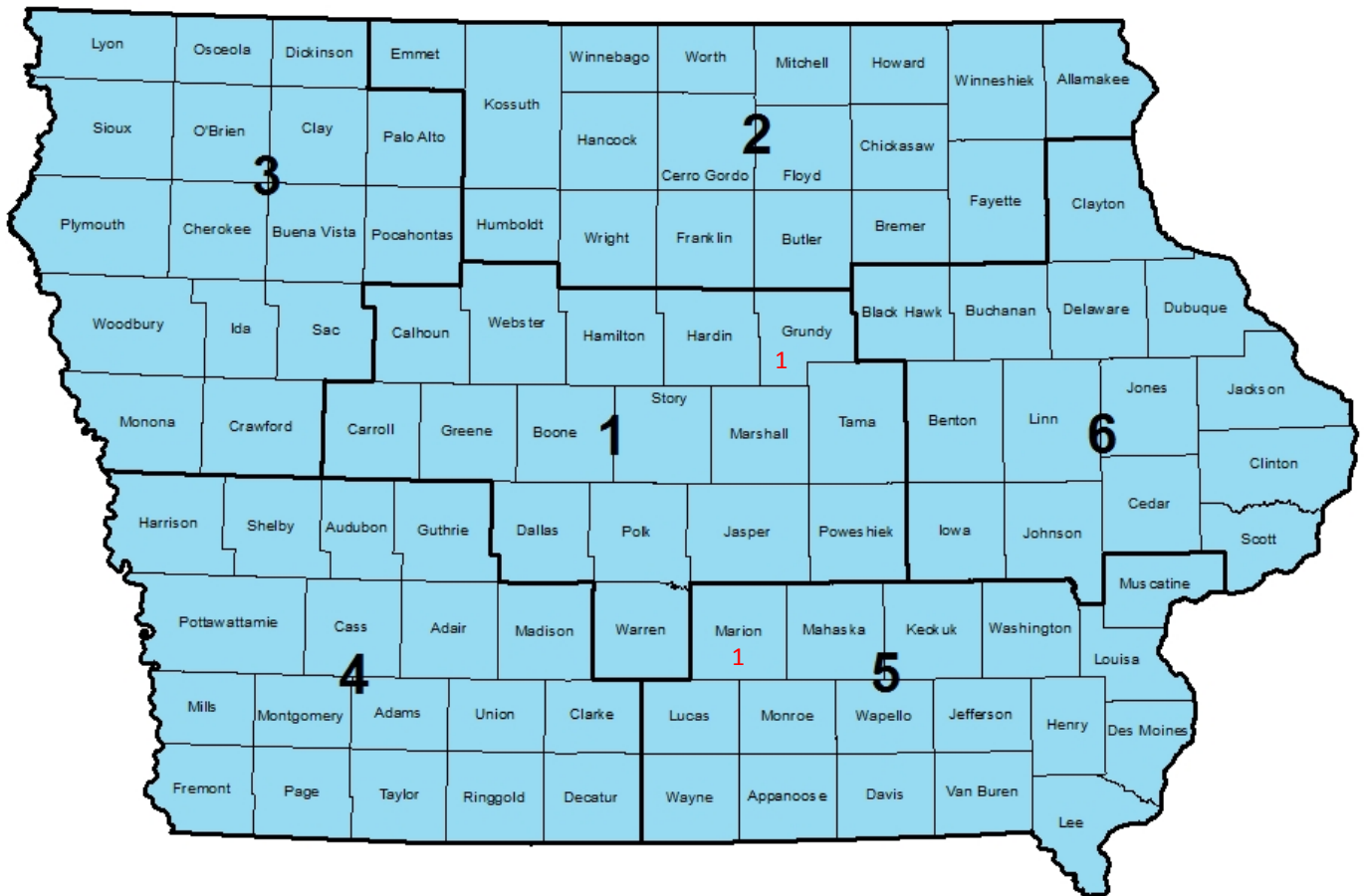
10 percent school absenteeism:

Schools (K-12) track and report outbreaks of influenza-like illness when the number of students absent with illness reaches or exceeds 10 percent of total student enrollment. Regional map with schools that have ≥10% absence due to illness for this current reporting week is displayed below (region numbers in black, number of reporting schools by county in red).

Table 8: Number of schools reporting >10% absenteeism

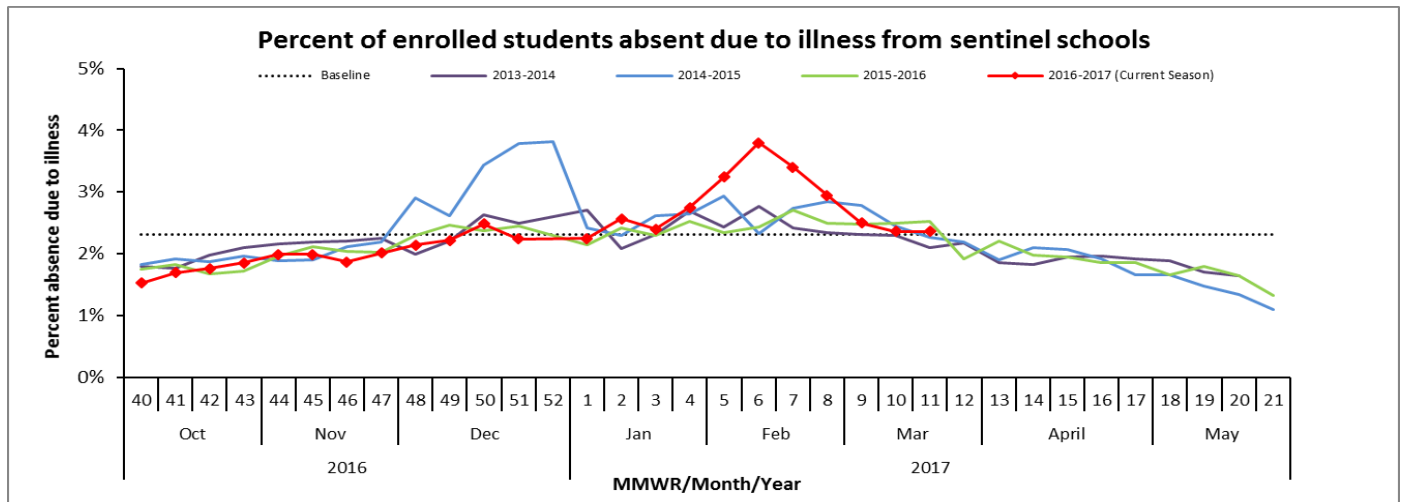
REGION*	CURRENT WEEK	CUMULATIVE (10/2/16 – CURRENT WEEK)
Region 1 (Central)	1	27
Region 2 (NE)	0	14
Region 3 (NW)	0	20
Region 4 (SW)	0	18
Region 5 (SE)	1	54
Region 6 (Eastern)	0	48
Total	2	181

*Region 1- Boone, Calhoun, Carroll, Dallas, Greene, Grundy, Hamilton, Hardin, Jasper, Marshall, Polk, Poweshiek, Story, Tama, Warren, Webster; Region 2- Allamakee, Bremer, Butler, Cerro Gordo, Chickasaw, Emmet, Fayette, Floyd, Franklin, Hancock, Howard, Humboldt, Kossuth, Mitchell, Winnebago, Winneshiek, Worth, Wright; Region 3- Buena Vista, Cherokee, Clay, Crawford, Dickinson, Ida, Lyon, Monona, O'Brien, Osceola, Palo Alto, Plymouth, Pocahontas, Sac, Sioux, Woodbury; Region 4- Adair, Adams, Audubon, Cass, Clarke, Decatur, Fremont, Guthrie, Harrison, Madison, Mills, Montgomery, Page, Pottawattamie, Ringgold, Shelby, Taylor, Union; Region 5- Appanoose, Davis, Des Moines, Henry, Jefferson, Keokuk, Lee, Louisa, Lucas, Mahaska, Marion, Monroe, Muscatine, Van Buren, Wapello, Washington, Wayne; Region 6- Benton, Black Hawk, Buchanan, Cedar, Clayton, Clinton, Delaware, Dubuque, Iowa, Jackson, Johnson, Jones, Linn, Scott.



School surveillance program:

Sentinel schools that participate in IISN voluntarily track and report absence due to all illness (including non-influenza illnesses) and the total enrollment each week.



Other resources:

Vaccine:

Influenza vaccine recommendation: idph.iowa.gov/imm/tb/immunization/vaccine

CDC vaccine information: www.cdc.gov/flu/faq/flu-vaccine-types.htm

Vaccine finder: <http://vaccinefinder.org/>

Neighboring states' influenza information:

Illinois: www.dph.illinois.gov/topics-services/diseases-and-conditions/influenza/surveillance

Minnesota: www.health.state.mn.us/divs/idepc/diseases/flu/stats/index.html

Missouri: health.mo.gov/living/healthcondiseases/communicable/influenza/reports.php

South Dakota: doh.sd.gov/diseases/infectious/flu/

Wisconsin: www.dhs.wisconsin.gov/influenza/index.htm