

SUSANA MARTINEZ, GOVERNOR

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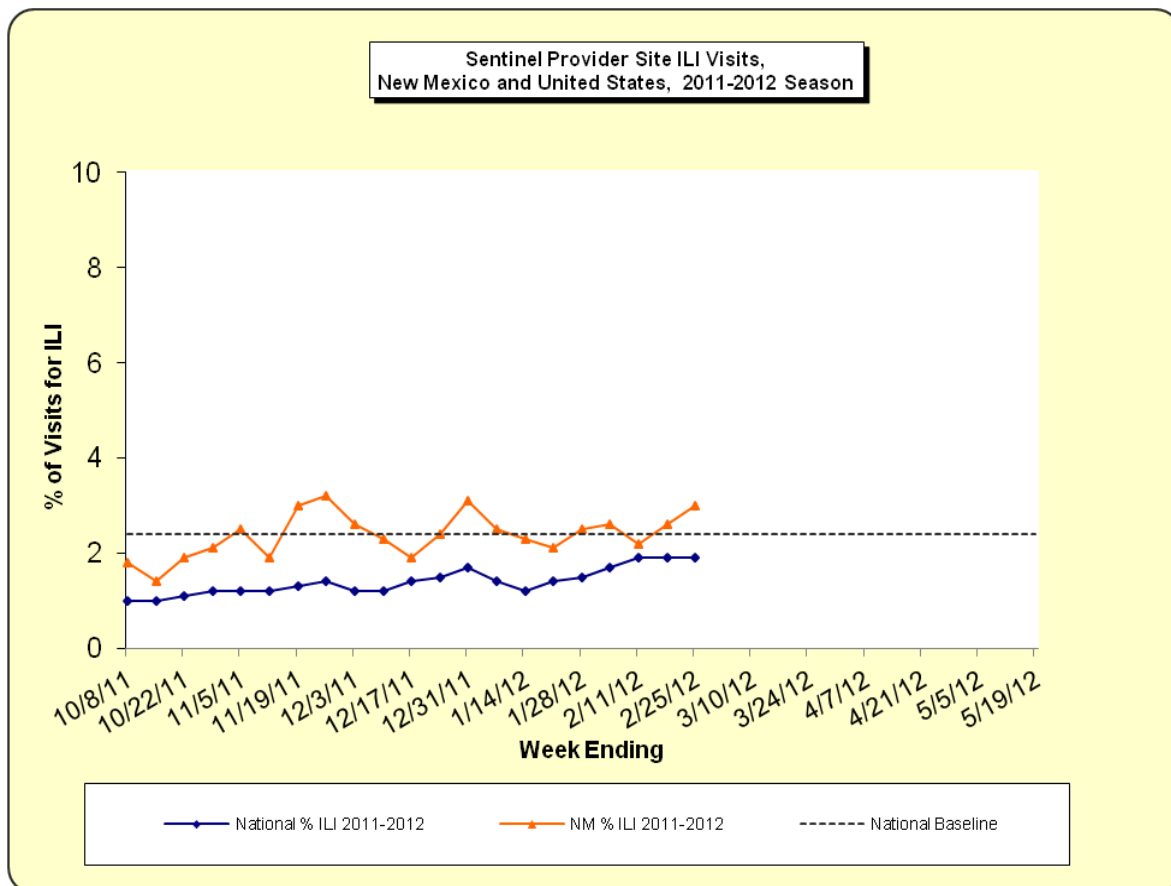
## NEW MEXICO INFLUENZA SURVEILLANCE UPDATE 2011 - 2012 Influenza Season

*Epidemiology and Response Division, New Mexico Department of Health (NMDOH)*

Influenza Activity in New Mexico for **Week Ending February 25, 2012 (MMWR Week 8)**

Influenza in the State was at **low to moderate activity** by several indicators<sup>1</sup>:

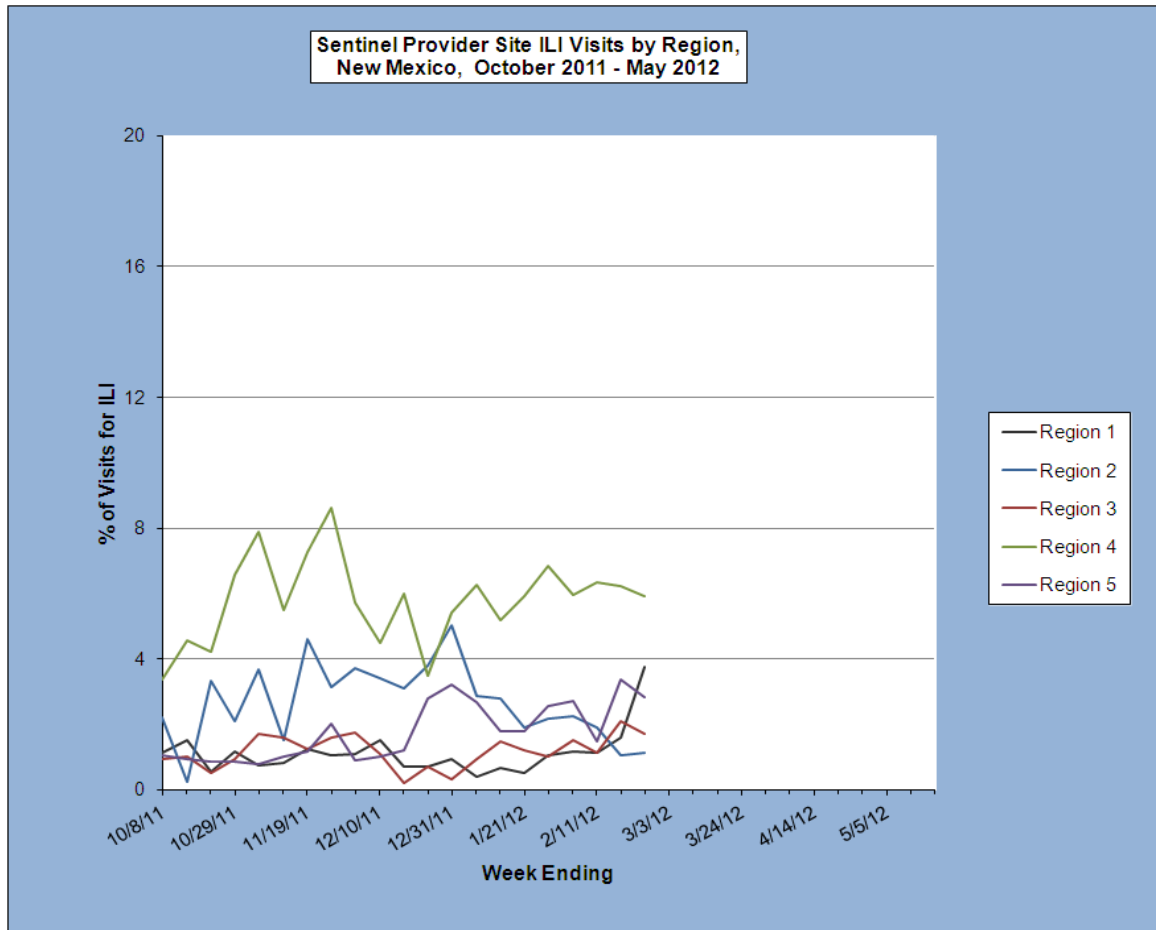
- **Outpatient Visits for Influenza-like illness (ILI):** a total of 25 out of 26 sentinel outpatient provider sites reported 8,433 patient visits, of which 249 (3.0%) were identified as visits for ILI<sup>2</sup>. The previous week ending February 18<sup>th</sup> reported 2.6% influenza-like illness. See graph below displaying the comparison of statewide ILI activity to national ILI activity by ILI percentages.



### EPIDEMIOLOGY AND RESPONSE

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- By Health Regions within the state (refer to page 4 table footnote defining the regions by county), ILI activity was at low to slightly increased levels with a range of 1.1% ILI (Region 2) to 5.9% ILI (Region 4). See graph below for the current season's ILI by region.



Sentinel outpatient reporting sites by Region:

Region 1 (NW region of state): San Juan Regional Medical Center, Farmington; Acoma-Canoncito- Laguna Indian Health Service Hospital, Acoma; and Albuquerque Health Partners Urgent Care, Rio Rancho.

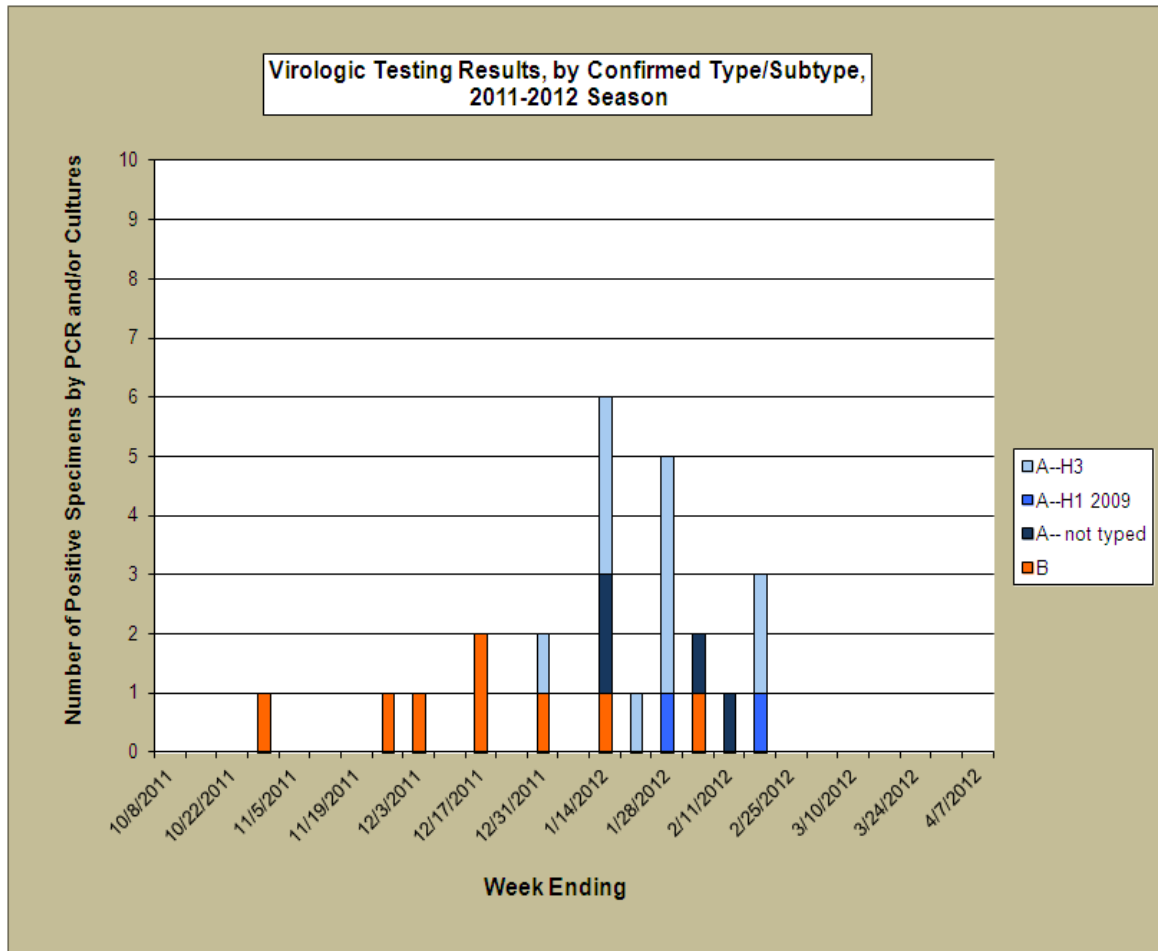
Region 2 (NE region of state): Raton Family Practice Associates, Raton; Taos-Picuris Indian Health Clinic, Taos; Pecos Valley Medical Center, Pecos; La Familia Medical Clinic, Santa Fe; Los Alamos Family Care Clinic, Los Alamos; Jicarilla Apache Indian Health Clinic, Dulce and Espanola Family Care Clinic, Espanola.

Region 3 (Bernalillo County): Lovelace Downtown Medical Center and University of New Mexico Student Health Clinic, both in Albuquerque.

Region 4 (SE region of state): Carlsbad Medical Center, Carlsbad; Lea Regional Medical Center, Hobbs; Eastern New Mexico Medical Center, Roswell and Roosevelt General Hospital in Portales.

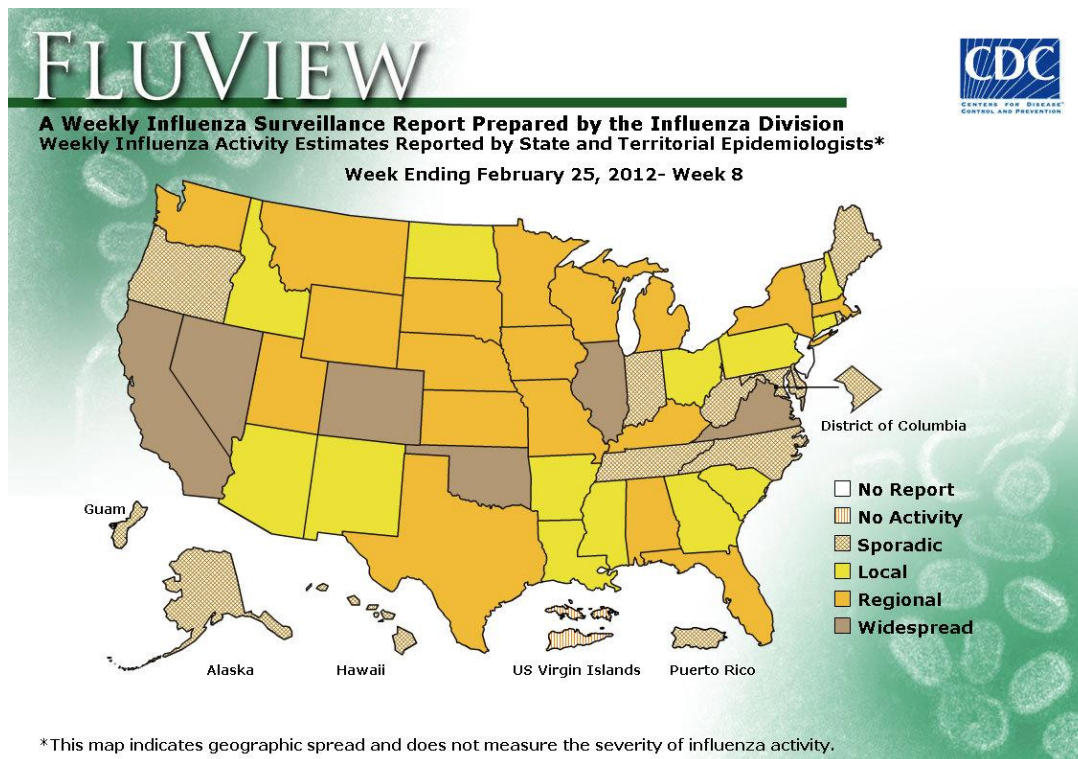
Region 5 (SW region of state): Gila Regional Medical Center, Silver City; Hidalgo Medical Services Clinic, Lordsburg; Ben Archer Health Center, Deming; Ben Archer Health Center, Dona Ana; La Clinica de Familia, Sunland Park; Ben Archer Health Center, Columbus; Mescalero Apache Indian Health Hospital, Mescalero; Sierra Vista Hospital, Truth or Consequences; Ruidoso Medical Associates, Ruidoso and the New Mexico Mining and Technology Institute, Socorro.

- Laboratory tests for influenza:** since early October, the Scientific Lab Division (SLD) has reported 25 positive samples for influenza by PCR and/or culture: eight influenza type B, 11 influenza A/H3, two influenza A/H1(2009 pandemic strain) and four influenza A (not subtyped) of 352 samples tested (7.1%). See the graph below for a representation of the circulating influenza types and subtypes by week/date of collection.



- Influenza-related deaths:** there have been reports of two deaths, both in elderly persons, caused by lab-confirmed influenza. Both occurred in the month of February, one in Bernalillo county and one in Colfax county.

- NMDOH reported the state influenza activity as “**Local**” to the Centers for Disease Control and Prevention (CDC). See the table on page 3 for full definitions of activity levels. Below is a map of the U.S displaying New Mexico activity in comparison to influenza activity in bordering states, regions and nationally.



<sup>1</sup> Weekly ILI and lab data may change as additional reports are compiled.

<sup>2</sup> Influenza-like Activity (ILI) is defined as Fever ( $\geq 100^{\circ}\text{F}$  [ $37.8^{\circ}\text{C}$ ]), oral or equivalent) AND cough and/or sore throat in absence of a KNOWN cause other than influenza.

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This information is collected by the Infectious Disease Epidemiology Bureau, Epidemiology Response Division of NMDOH.

For questions, please call 505-827-0006. For more information on influenza go to the NMDOH web page: <http://www.health.state.nm.us/flu/> or the CDC web page: <http://www.cdc.gov/ncidod/diseases/flu/fluivirus.htm>

Activity Level	ILI activity*/Outbreaks		Laboratory data
<b>No activity</b>	Low	<b>And</b>	No lab confirmed cases <sup>†</sup>
<b>Sporadic</b>	Not increased	<b>And</b>	Isolated lab-confirmed cases
	<b>OR</b>		
<b>Local</b>	Increased ILI in 1 region**; ILI activity in other regions is not increased	<b>And</b>	Recent (within the past 3 weeks) lab evidence of influenza in region with increased ILI
	<b>OR</b>		
<b>Regional</b>	2 or more institutional outbreaks (ILI or lab confirmed) in 1 region; ILI activity in other regions is not increased	<b>And</b>	Recent (within the past 3 weeks) lab evidence of influenza in region with the outbreaks; virus activity is no greater than sporadic in other regions
	<b>OR</b>		
<b>Regional</b>	Increased ILI in less than half of the regions (2 or less)	<b>And</b>	Recent (within the past 3 weeks) lab confirmed influenza in the affected regions
	<b>OR</b>		
<b>Regional</b>	Institutional outbreaks (ILI or lab confirmed) in less than half of the regions (2 or less)	<b>And</b>	Recent (within the past 3 weeks) lab confirmed influenza in the affected regions
	<b>OR</b>		
<b>Widespread</b>	Increased ILI and/or institutional outbreaks (ILI or lab confirmed) in at least 3 of the 5 regions	<b>And</b>	Recent (within the past 3 weeks) lab confirmed influenza in the state.

\*Influenza-like illness: Fever ( $\geq 100^{\circ}\text{F}$  [ $37.8^{\circ}\text{C}$ ], oral or equivalent) and cough and/or sore throat (in the absence of a known cause other than influenza)

<sup>†</sup> Lab confirmed case = case confirmed by rapid diagnostic test, antigen detection, culture, or PCR. Care should be given when relying on results of point of care rapid diagnostic test kits during times when influenza is not circulating widely. The sensitivity and specificity of these tests vary and the predicative value positive may be low outside the time of peak influenza activity. Therefore, at the start of the season, NMDOH uses lab confirmation by PCR or culture to declare the presence of lab-confirmed influenza in the state. Positivity by other lab methods is recognized and tracked as another influenza activity indicator as the season progresses.

<sup>‡</sup> Institution includes nursing home, hospital, prison, school, etc.

\*\*Region: population under surveillance in a defined geographical subdivision of a state. A region could be comprised of 1 or more counties and would be based on each state's specific circumstances. In New Mexico, the NMDOH regions are: Region 1—San Juan, McKinley, Sandoval, Cibola and Valencia counties; Region 2—Rio Arriba, Taos, Colfax, Union, Mora, Santa Fe, San Miguel and Guadalupe counties; Region 3 — Bernalillo county; Region 4 — Harding, Quay, Curry, DeBaca, Roosevelt, Chaves, Eddy and Lea counties, and Region 5 — Torrance, Lincoln, Socorro, Catron, Grant, Sierra, Otero, Dona Ana, Luna and Hidalgo counties.