

# New Mexico Department of Health Influenza & Respiratory Disease Report, 2020-2021

2020-21 Influenza Season Week 15 ending April 17, 2021



New Mexico is experiencing Minimal ILI activity\*

Please visit <https://cv.nmhealth.org> for  
COVID-19 Weekly Epidemiology Reports

Visit [CDC FluView](https://www.cdc.gov/flu/weekly/index.htm) for the national ILI report

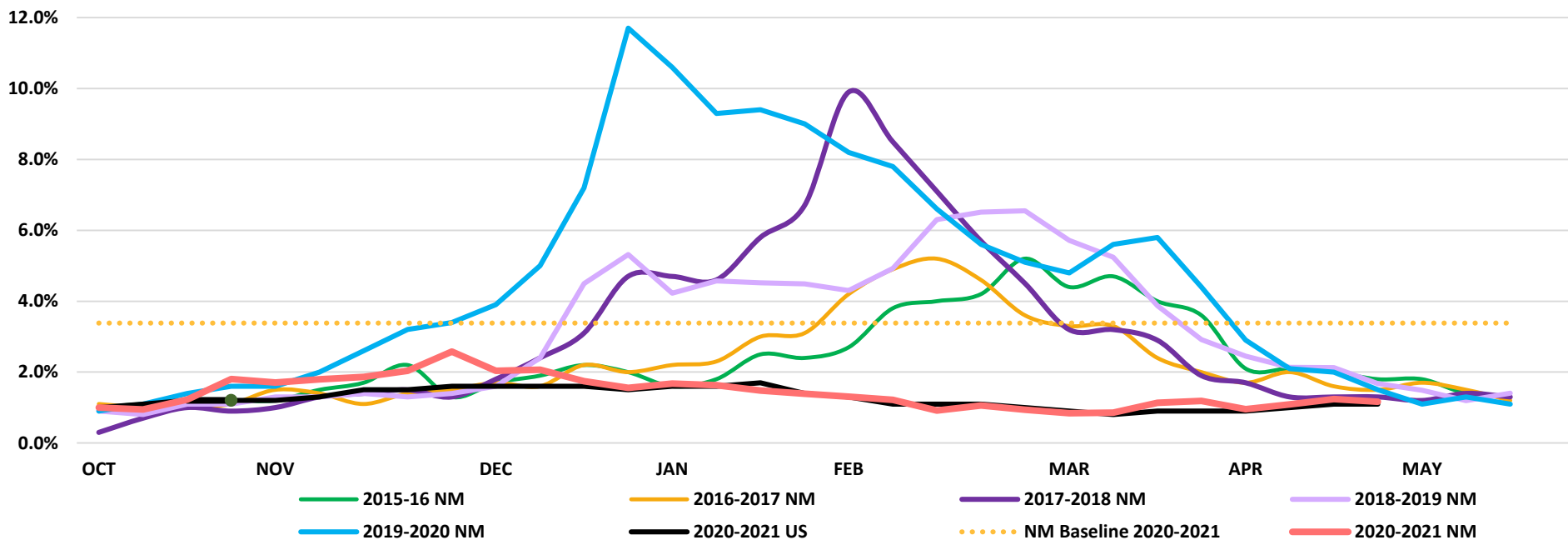
## Summary of Activity: Week 15 April 11<sup>th</sup> – April 17<sup>th</sup> 2021

- New Mexico influenza-like illness (ILI) activity is currently 1.2% of patient visits and is below the NM ILI baseline of 3.4% in all five health regions
- Based on testing results, we interpret ILI currently in NM as a reflection of symptomatic COVID-19 infection
- US ILI is 1.1%, which is below the national ILI baseline of 2.6%
- No influenza outbreaks were reported this week in any of the five health regions

# Influenza-Like Illness (ILI) Activity, 2015 to Present

New Mexico Department of Health (NMDOH) is collaborating with 21 ILI sentinel sites and 30 syndromic surveillance sites\* for the 2020-2021 season. Sites report weekly on the number of patients that present to their facility with influenza-like illness (ILI). That number is then divided by the total number of patients seen for any reason, resulting in percent of ILI activity. ILI is defined as fever of greater than or equal to 100° F and cough and/or sore throat without a known cause other than influenza.

## New Mexico and U.S. ILI Activity, 2015 to Present

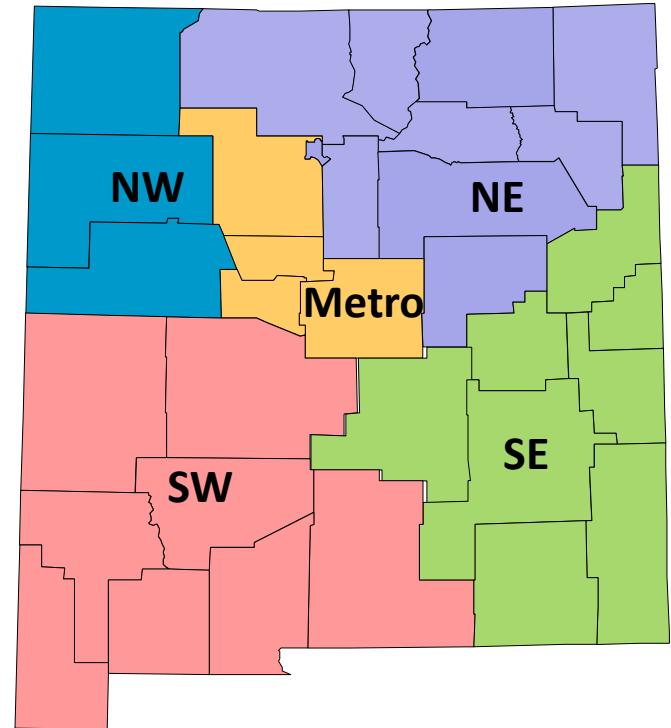
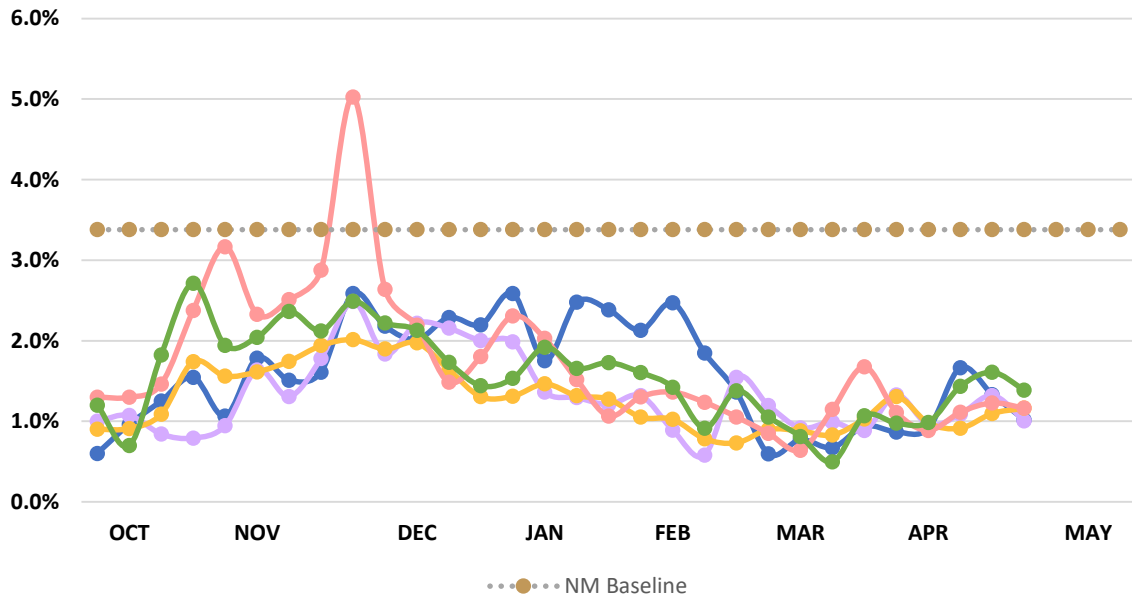


% ILI, NM, Week 15 April 11 <sup>th</sup> – April 17 <sup>th</sup> 2021 (current week)	% ILI, NM, Week 14 April 4 <sup>th</sup> – April 10 <sup>th</sup> 2021 (previous week)	% ILI, United States, Week 15 April 11 <sup>th</sup> – April 17 <sup>th</sup> 2021 (current week)
1.2%	1.2%	1.1%

\* See appendix for reporting sites

# Regional Influenza-Like Illness (ILI) Activity, 2020-2021

## NM ILI Activity by Health Region, 2020-2021



**Outbreak:** An influenza outbreak is defined as at least two cases of ILI in a congregate residential care setting with at least one laboratory confirmed case.

**PCR Testing:** Polymerase Chain Reaction (PCR) tests can identify the presence of influenza viral RNA in respiratory specimens. PCR testing is performed at various laboratories across New Mexico.

Region	This Week	Last Week	Total ILI / Total ED Visits	Outbreaks	+PCR testing	+Rapid flu tests
NW	1.0%	1.3%	11/1082	No	No	No
NE	1.0%	1.3%	24/2385	No	No	No
Metro	1.2%	1.1%	127/10928	No	No	No
SW	1.2%	1.2%	32/2752	No	No	No
SE	1.4%	1.6%	36/2595	No	No	Yes

# Percent Positivity among ILI patients at Public Health Offices, 2020-2021

In order to determine the proportion of ILI caused by SARS-CoV-2, the virus that causes COVID-19, versus influenza, we are leveraging a new source of data this season.

Individuals tested for SARS-CoV-2 at Public Health Offices (PHOs) in New Mexico register for their test via the NMDOH COVID-19 Test Registration Portal, where they indicate which symptoms they are experiencing.

Looking at just individuals who meet the ILI case definition (Fever and Cough and/or Sore Throat), we are able to match these individuals to their test results from the Scientific Laboratory Division (SLD).

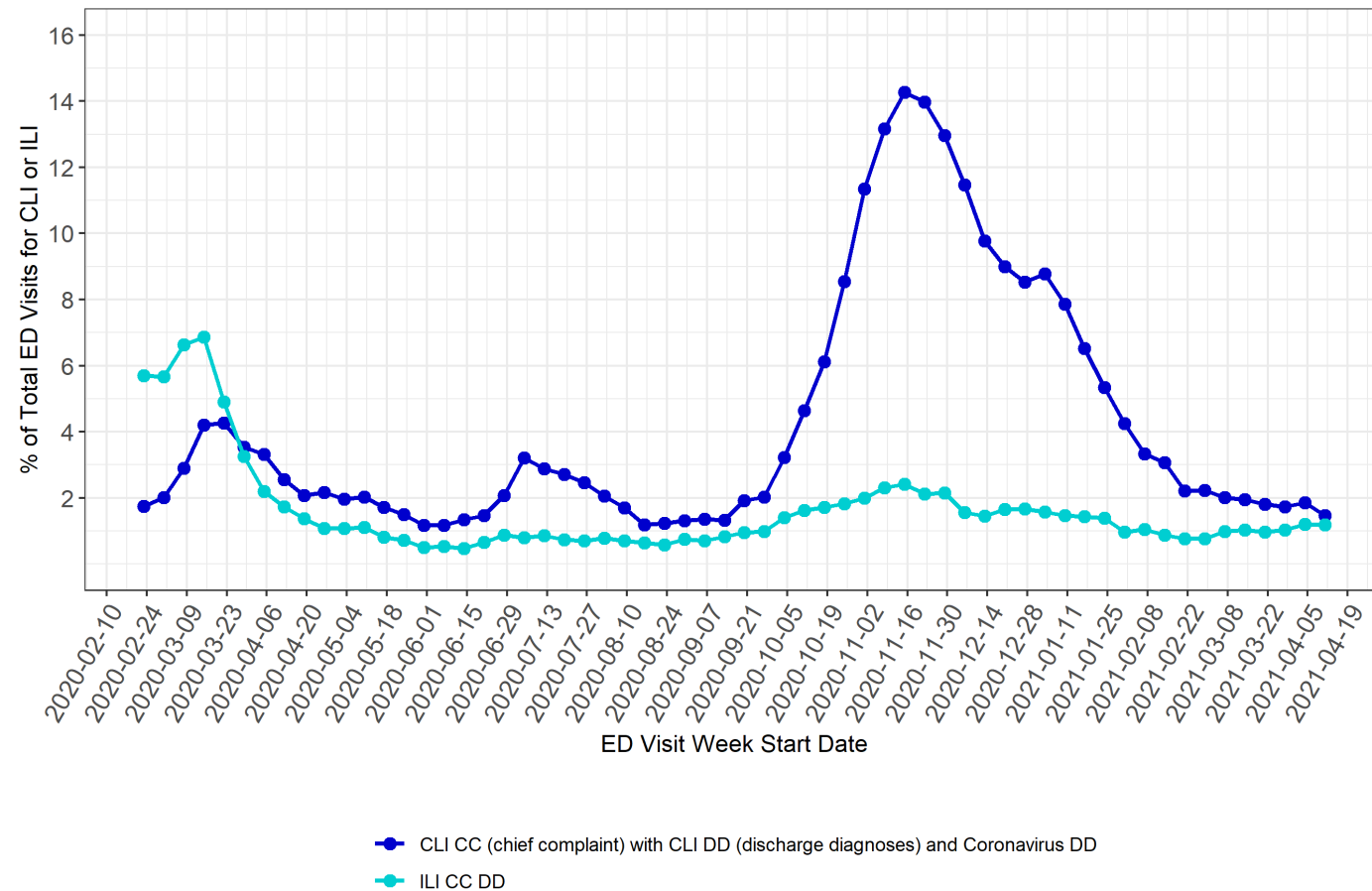
The sampling strategy selects a proportion of individuals who meet ILI case definition, to be screened for influenza in addition to SARS-CoV-2. One specimen from each of five age categories per county is selected, for a maximum of 165 specimens per week. However, there is not always a specimen that meets the sampling criteria in every age category in every county.

As of week 51, the Southeast region is no longer sending specimens to SLD.

**Please note:** due to low prevalence of ILI, some regions are seeing very low numbers of patients in recent weeks. This can result in instability in the estimate of percent positivity.

Region	Total tested	Total ILI	+Flu	+ COVID	% Positive COVID
Metro	427	12	0	2	16.7
NE	592	8	0	0	0
NW	22	0	0	0	0
SW	477	6	0	1	16.7
SE	0	0	0	0	0

# Syndromic Surveillance for Coronavirus-Like Illness (CLI) and ILI in Emergency Departments, February 2020 – April 2021



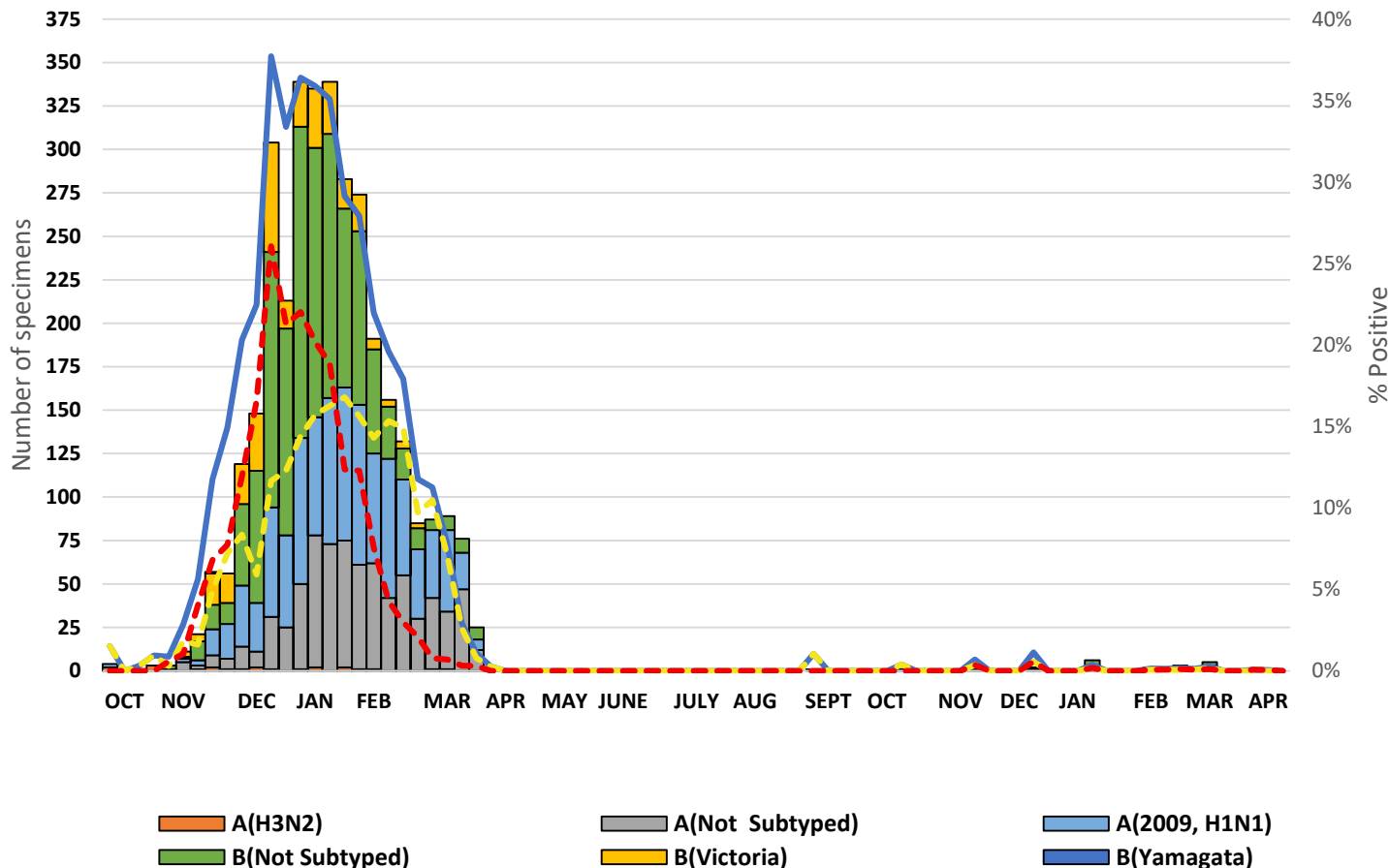
This visualization is populated from data in New Mexico’s Syndromic Surveillance Database. Initial patient encounter information is usually received within 24 hours, but clinical documentation is continuously being updated as it is identified throughout the patient encounter and hospital coding process.

**CLI CC with CLI DD and Coronavirus DD** includes ED encounters with chief complaint consisting of fever and cough, shortness of breath, or difficulty breathing, while also including COVID-19 associated discharge diagnoses codes. The CLI definition excludes known influenza related ED visits coded with related influenza discharge diagnosis.

**ILI CCDD** includes ED encounters with chief complaint consisting of fever and cough, while also including ILI and influenza related discharge diagnoses.

# Laboratory Data & Virologic Surveillance, 2020-2021

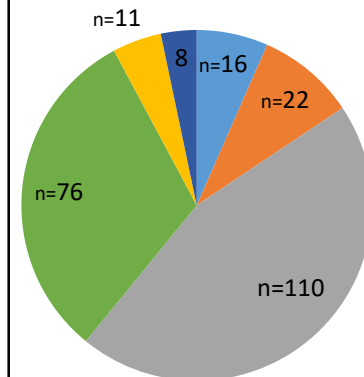
PCR Positive Results among Hospital/Clinical Sites and Scientific Laboratory Division  
October 2019 - April 2021



NM subtyping performed at SLD\*\*

There were no positive specimens at SLD during week 15. There has been one positive Flu A at SLD during the 2020-2021 season.

U.S. virus characterization performed at CDC\*\*

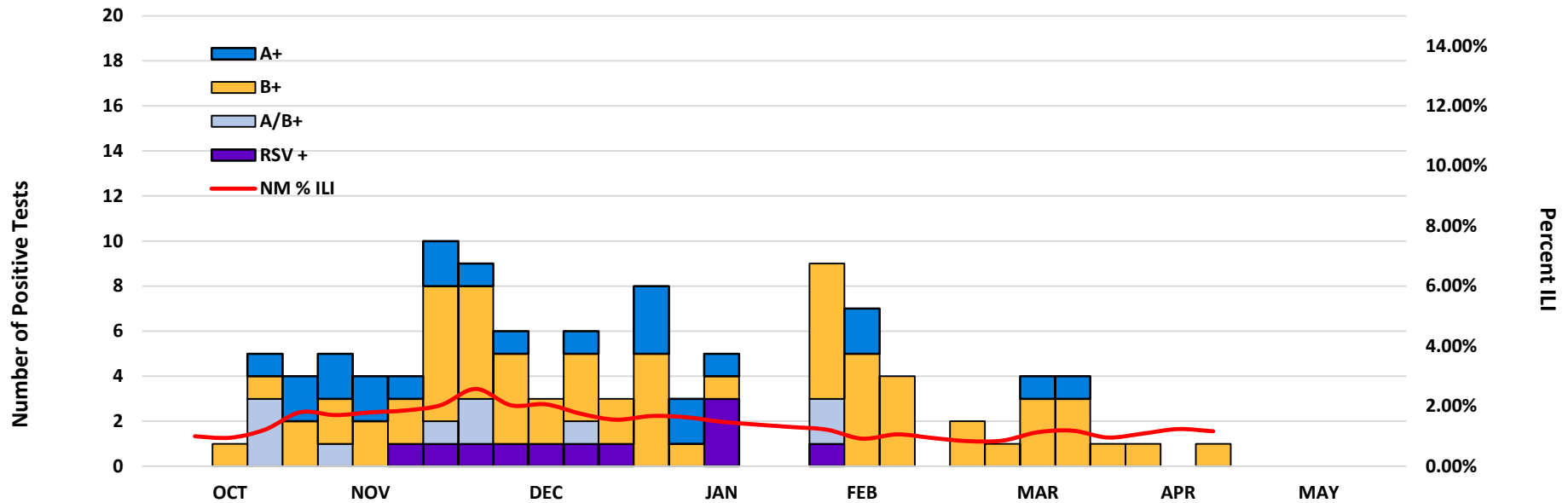


2020-2021 US

\*\* Pie chart data and bar graph data are populated from two separate sources. Therefore, not equivalent

\*\*\*There was a false positive Flu B during week 42. The positive case had received an influenza vaccination the day before testing. This result was excluded from the counts. There were two inconclusive results in week 50. Both cases had received influenza vaccinations 3 days before testing. These results are excluded from the counts.

# RSV and Rapid Influenza Laboratory Data\*, 2020-2021



- Rapid Influenza Diagnostic tests (RIDTs) are more likely to result in a false positive when community influenza activity is low. Early and late in the season, it is best to confirm a positive RIDT result by PCR.
- There were no positive Flu or RSV rapid tests reported in week 2, week 3, week 7 or week 14

Laboratory Sites Participating in Rapid Influenza Data Collection (Facility name, City)		Laboratory Sites Participating in RSV Data Collection (Facility name, City)	
<b>NW</b>	San Juan Regional Medical Center, Farmington; Northern Navajo Medical Center, Shiprock; Cibola General Hospital, Grants; Crownpoint IHS, Crownpoint; Gallup Indian Medical Center, Gallup; Rehoboth McKinley Christian Hospital, Gallup;	San Juan Regional Medical Center, Farmington; Cibola General Hospital, Grants; Crownpoint IHS, Crownpoint; Gallup Indian Medical Center, Gallup; Rehoboth McKinley Christian Hospital, Gallup;	
<b>NE</b>	Los Alamos Medical Center, Los Alamos; Christus St. Vincent's Hospital, Santa Fe	Los Alamos Medical Center, Los Alamos; Christus St. Vincent's Hospital, Santa Fe	
<b>Metro</b>	New Mexico Veterans Affairs Medical Center, Albuquerque; Sandia National Labs, Albuquerque		
<b>SW</b>	Gila Regional Medical Center, Silver City; Gerald Champion Regional Medical Center, Alamogordo; Mimbres Memorial Hospital, Deming	Gerald Champion Regional Medical Center, Alamogordo	
<b>SE</b>	Carlsbad Medical Center, Carlsbad; Lea Regional Medical Center, Hobbs; Roosevelt General Hospital Clinic, Portales; Artesia General Hospital, Artesia;	Carlsbad Medical Center, Carlsbad; Lea Regional Medical Center, Hobbs; Artesia General Hospital, Artesia;	

# Influenza Hospitalizations, NM & US, 2020-2021

Hospitalization data for this season not yet being reported by CDC

New Mexico has had 10 lab-confirmed influenza-associated hospitalizations reported since Oct 1, 2020.

## Pneumonia and Influenza (P & I) Deaths, NM, 2017-2021\*

Season	Pneumonia (P) Deaths	Adult Influenza (I) Deaths	Pediatric Influenza Deaths	Total P & I Deaths
2020-2021	127	3	0	130
2019-2020	187	62	5	254
2018-2019	178	57	2	237
2017-2018	222	67	3	292

**Pneumonia death:** Is defined as having a cause of death that is related to pneumonia & influenza (P & I) not including: aspiration pneumonia, pneumonitis, pneumococcal meningitis or pneumonia caused by COVID-19

**Influenza death:** Is defined as having a cause of death that is related to pneumonia & influenza (P & I) not including: parainfluenzae or *Haemophilus influenzae*.



# Influenza Vaccination Information

## Still Need to Get Your Flu Shot?

HealthMap Vaccine Finder:

<http://vaccine.healthmap.org/>

Or

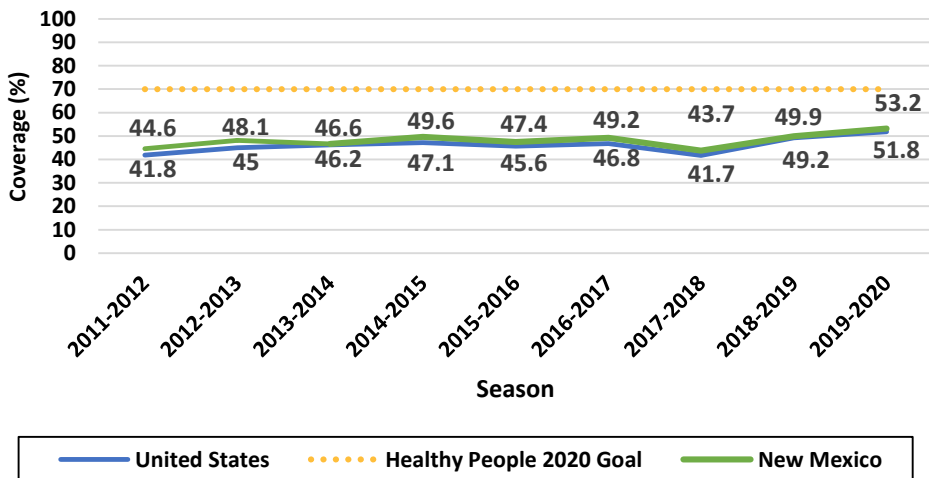
Contact your Primary Care Provider (PCP) or a local public health office (LPHO) near you:

<https://nmhealth.org/location/public/>

“Influenza is a serious disease that can lead to hospitalization and sometimes even death. Every flu season is different, and influenza infection can affect people differently, but millions of people get the flu every year, hundreds of thousands of people are hospitalized and thousands or tens of thousands of people die from flu-related causes every year. Even healthy people can get very sick from the flu and spread it to others. Flu-related hospitalizations since 2010 ranged from 140,000 to 710,000, while flu-related deaths are estimated to have ranged from 12,000 to 56,000. During flu season, flu viruses circulate at higher levels in the U.S. population in the United States can begin as early as October and last as late as May. An annual seasonal flu vaccine is the best way to reduce your risk of getting sick with seasonal flu and spreading it to others. When more people get vaccinated against the flu, less flu can spread through that community.”

-Centers for Disease Control and Prevention

## New Mexico and National Vaccination Coverage by Season, Age >6 Months, 2010-2020



## For Additional Vaccine Information/resources:

FluVaxView:

<https://www.cdc.gov/flu/fluvoxview/index.htm>

Seasonal Influenza Vaccination Resources for Health Professionals:

<https://www.cdc.gov/flu/professionals/vaccination/index.htm>

Misconceptions about Flu Vaccines:

<https://www.cdc.gov/flu/about/qa/misconceptions.htm>

# Appendix

Health Region	Participating Sentinel Sites (Facility name, City)	Syndromic Surveillance Hospitals (Facility name, City)
<b>Northwest</b>	Acoma-Canoncito-Laguna Indian Health Services, Acoma; Dzilth Indian Health Services, Bloomfield	San Juan Regional Medical Center, Farmington; Cibola General Hospital, Grants
<b>Northeast</b>	Taos-Picuris Indian Health Services, Taos; Pecos Valley Medical Center, Pecos; Jicarilla Apache Indian Health Services, Dulce; Children’s Clinic PA, Los Alamos;	Alta Vista Regional Hospital, Las Vegas; Christus St. Vincent, Santa Fe; Los Alamos Medical Center, Los Alamos; Miners’ Colfax Medical Center, Raton; Union County General Hospital, Clayton; Guadalupe County Hospital, Santa Rosa; Presbyterian Hospital, Espanola
<b>Metro</b>	University of New Mexico Student Health Clinic, Albuquerque; Presbyterian Medical Group-Atrisco, Northside, Carmel Pediatric Urgent Care, Las Estancias Pediatric Urgent Care; DaVita Urgent Care, Journal Center	Lovelace Westside Hospital, Downtown Medical Center and Women’s Hospital, Albuquerque; UNM Health System, Albuquerque & Rio Rancho; Presbyterian Hospital, Kaseman and Rust Medical Center, Albuquerque & Rio Rancho; UNM Sandoval Regional Medical Center, Rio Rancho
<b>Southwest</b>	Gila Regional Medical Center, Silver City; Ben Archer Health Centers – Dona Ana, Deming, Columbus; Hidalgo Medical Services, Lordsburg; La Clinica de Familia, Sunland Park; La Clinica de Familia, Santa Teresa School Based Clinic, Santa Teresa; Mescalero Apache Indian Health Hospital, Mescalero	Mimbres Memorial Hospital, Deming; Mountain View Regional Medical Center, Las Cruces; Socorro General Hospital, Socorro; Gerald Champion Regional Medical Center, Alamogordo
<b>Southeast</b>	Roosevelt General Hospital Clinic, Portales;	Carlsbad Medical Center, Carlsbad; Eastern New Mexico Medical Center, Roswell; Lea Regional Medical Center, Hobbs; Artesia General Hospital, Artesia; Dan C Trigg Memorial Hospital, Tucumcari; Lincoln County Medical Center, Ruidoso; Lovelace Regional Hospital, Roswell; Nor-Lea Hospital District, Lovington; Plains Regional Medical Center, Clovis;

**In accordance with New Mexico Administrative Code (NMAC) 7.4.3.13 Influenza is a reportable condition for the following:**

- Influenza, laboratory confirmed hospitalizations only
- Influenza-associated pediatric death
- Acute illness or condition of any type involving large numbers of persons in the same geographic area (outbreaks)
- Other illnesses or condition of public health significance (novel influenza A)

**For more information on reportable conditions please visit:**

<http://164.64.110.134/parts/title07/07.004.0003.html>

Found at the New Mexico State Records Center and Archives - Commission for Public Records



Report published by New Mexico Department of Health (NMDOH), Epidemiology and Response Division (ERD) Infectious Disease Epidemiology Bureau (IDEB)

For questions, please call 505-827-0006. For more information on influenza go to the NMDOH web page:

<https://nmhealth.org/about/erd/ideb/isp/> Or The CDC web page: <http://www.cdc.gov/flu/index.htm>