NEW MEXICO INFLUENZA SURVEILLANCE UPDATE
2013 - 2014 Influenza Season

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

Influenza activity in New Mexico for Week Ending January 4, 2014 (MMWR Week 1)

Influenza in the state was at high activity by several indicators:

- **Outpatient visits for influenza-like illness (ILI):** Twenty-four of the 29 sentinel outpatient provider sites reported a total of 8,817 patient visits, of which 621 (7.0%) were identified as visits for ILI. See graph below displaying the comparison of statewide ILI activity to national ILI activity.

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**ILI Activity by State Health Regions:** by NMDOH regions within the state Weekly ILI comparing this week to last week is shown in the table below.

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1 Weekly ILI and lab data may change as additional reports are compiled.

2 Influenza-like Activity (ILI) is defined as Fever (≥ 100°F [37.8°C], oral or equivalent) AND cough and/or sore throat in the absence of a KNOWN cause other than influenza.
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: Northwest Region: San Juan, McKinley, and Cibola counties; Northeast Region: Los Alamos, Rio Arriba, Taos, Colfax, Union, Mora, Harding, Santa Fe, San Miguel and Guadalupe counties; Metro Region: Bernalillo, Sandoval, Torrance and Valencia counties; Southeast Region: Quay, Curry, DeBaca, Lincoln, Roosevelt, Chaves, Eddy and Lea counties, and Southwest Region: Socorro, Catron, Grant, Sierra, Otero, Dona Ana, Luna and Hidalgo counties.

See graph below for the current season’s weekly ILI by region.
Laboratory tests for influenza: The Scientific Lab Division (SLD) reported 24 positive samples for Influenza A/H1N1 and three positive sample for Influenza A/H3 by polymerase chain reaction (PCR) since the start of the 2013/2014 influenza season.

Influenza-related deaths: There has been one laboratory confirmed influenza-related death in an adult and eighteen pneumonia deaths in New Mexico residents reported since the start of the 2013/2014 influenza season.

Influenza-related Hospitalizations: The New Mexico Emerging Infections Program (EIP) is part of FluSurv-NET (a population-based surveillance system for influenza related hospitalizations in children and adults). In New Mexico active, population-based surveillance is conducted for laboratory-confirmed influenza-related hospitalizations in seven New Mexico counties: Bernalillo, Chaves, Dona Ana, Grant, Luna, San Juan, and Santa Fe. Weekly de-identified data are sent to the Centers for Disease Control and Prevention. Data are used to estimate weekly age-specific hospitalization rates for persons hospitalized with severe influenza illness. Cumulative United States (US) rates by age group are displayed in the figure below. Incidence rates are calculated using the National Center for Health Statistics’ (NCHS) population estimates for the counties included in the surveillance catchment area.

Geographic Spread of Influenza in the State: NMDOH reported the state influenza activity level as ‘Widespread’ to the Centers for Disease Control and Prevention (CDC). See the table on page 4 for the activity level definitions. There is no map available.
displaying New Mexico activity in comparison to influenza activity in bordering states, regions, and nationally for the week ending January 4, 2014. However, 36 states, including New Mexico, are reporting widespread influenza activity.

This information is collected by the Infectious Disease Epidemiology Bureau, Epidemiology Response Division, New Mexico Department of Health. 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/](http://www.health.state.nm.us/flu/) or the CDC web page: [http://www.cdc.gov/ncidod/diseases/flu/fluivirus.htm](http://www.cdc.gov/ncidod/diseases/flu/fluivirus.htm)

### TABLE OF INFLUENZA ACTIVITY LEVELS

<table>
<thead>
<tr>
<th>Activity Level</th>
<th>ILI activity*/Outbreaks</th>
<th>Laboratory data</th>
</tr>
</thead>
<tbody>
<tr>
<td>No activity</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Low</td>
<td>Not increased</td>
<td>And</td>
</tr>
<tr>
<td>Sporadic</td>
<td></td>
<td></td>
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<tr>
<td>Increased ILI in 1 region**; ILI activity in other regions is not increased</td>
<td>And</td>
<td>Recent (within the past 3 weeks) lab evidence of influenza in region with increased ILI</td>
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<tr>
<td>Local</td>
<td>2 or more institutional outbreaks (ILI or lab confirmed) in 1 region; ILI activity in other regions is not increased</td>
<td>And</td>
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<tr>
<td>Regional</td>
<td>Increased ILI in less than half of the regions (2 or less)</td>
<td>And</td>
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<tr>
<td>Widespread</td>
<td>Increased ILI and/or institutional outbreaks (ILI or lab confirmed) in at least 3 of the 5 regions</td>
<td>And</td>
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</tbody>
</table>

*Influenza-like illness: Fever (> 100°F [37.8°C], oral or equivalent) and cough and/or sore throat (in the absence of a known cause other than influenza).

† 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 predictive 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.

‡ Institution includes nursing home, hospital, prison, school, etc.

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