

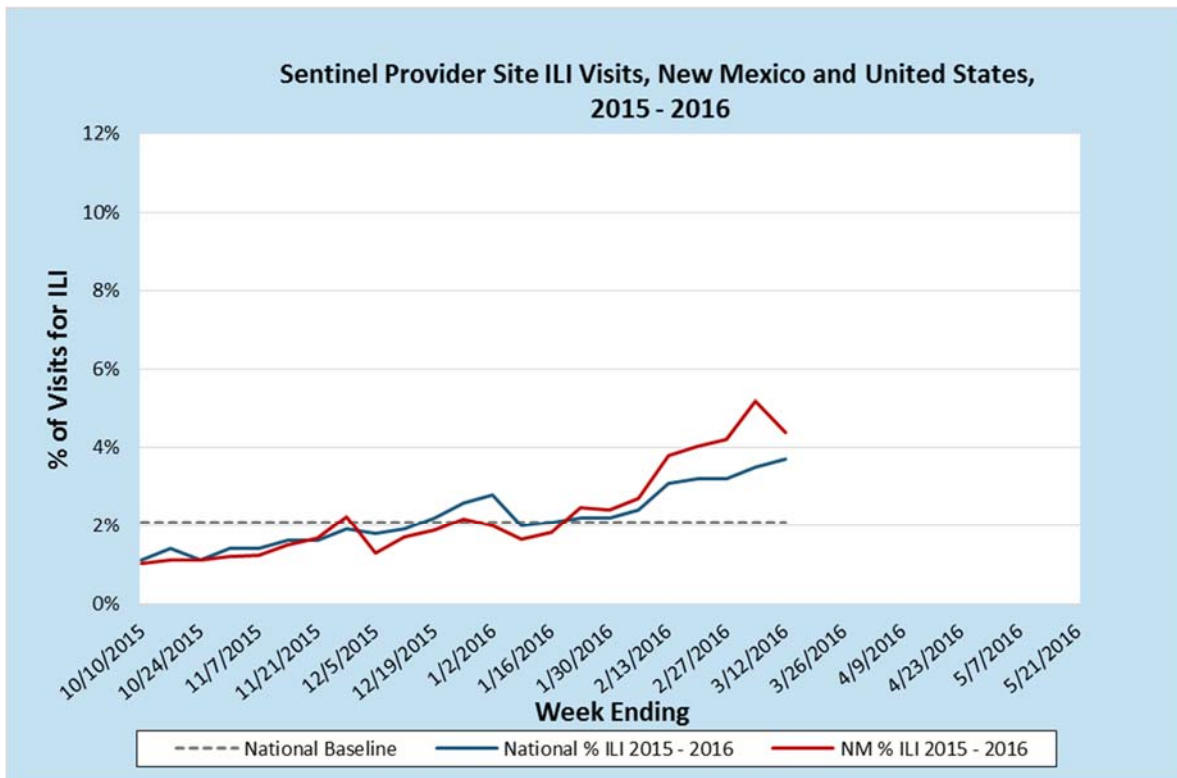
NEW MEXICO INFLUENZA SURVEILLANCE UPDATE 2015 - 2016 Influenza Season

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

Influenza Activity in New Mexico for **Week Ending March 12, 2016 (MMWR Week 10)**

Influenza in the state was at high activity by several indicators¹:

- 1. Outpatient visits for influenza-like illness (ILI):** Twenty-seven sentinel outpatient provider sites reported a total of 14,494 patient visits, of which 637 (4.4%) were identified as visits for ILI²; which is above the national baseline of 2.1%. Nationally, the percentage of ILI visits was 3.7%; which is also above baseline (see graph below).

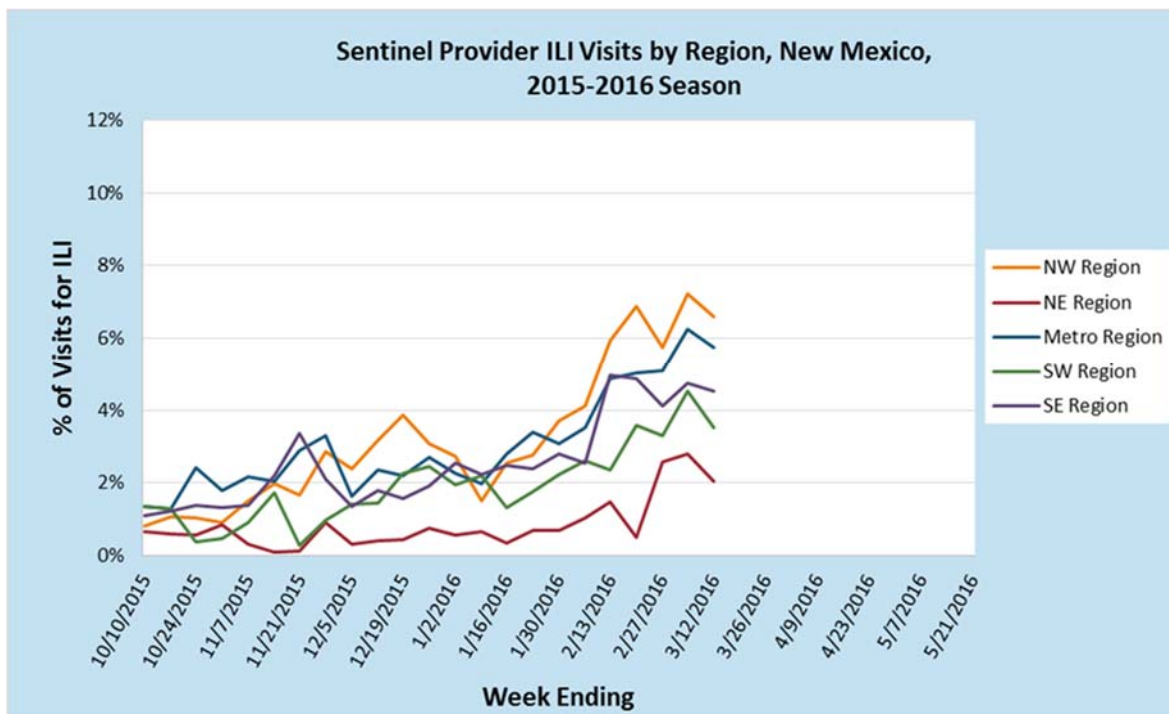


¹ Weekly ILI and lab data may change as additional reports are compiled.

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

EPIDEMIOLOGY AND RESPONSE

2. **ILI Activity by State Health Regions:** by NMDOH regions within the state (refer to the table below the graph for regional descriptions). Weekly ILI ranged from 2.0% (Northeast Region) to 6.6% (Northwest Region). See graph below for the current season's weekly ILI by region.

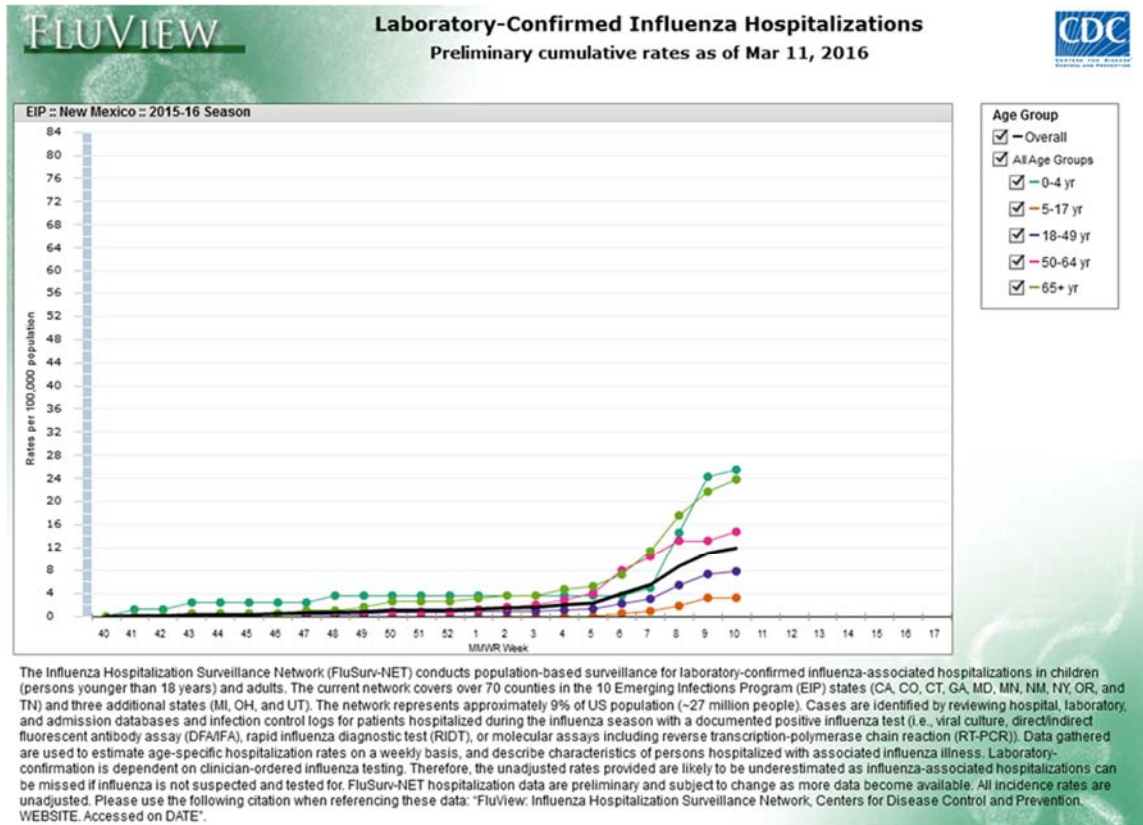


Sentinel Outpatient Reporting Sites by Region:

NW Region	San Juan Regional Medical Center, Farmington and Acoma-Canoncito-Laguna Indian Health Hospital, Acoma
NE Region	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; Children's Clinic PA, Los Alamos
Metro Region	Lovelace Downtown Medical Center, Albuquerque; University of New Mexico Student Health Clinic, Albuquerque; Presbyterian Medical Group-Atrisco, Northside, Pediatric Urgent Care; Albuquerque Health Partners Urgent Care, Rio Rancho
SE Region	Carlsbad Medical Center, Carlsbad; Lea Regional Medical Center, Hobbs; Eastern New Mexico Medical Center, Roswell; Roosevelt General Hospital Clinic, Portales
SW Region	Gila Regional Medical Center, Silver City; Hidalgo Medical Services Clinic, Lordsburg; Ben Archer Health Center, Deming, Columbus, and Dona Ana; La Clinica de Familia, Sunland Park; Mescalero Apache Indian Health Hospital, Mescalero; New Mexico Mining and Technology Institute, Socorro

3. **Laboratory tests for influenza:** Since the start of the influenza season, the New Mexico Scientific Laboratory Division reported 210 (25.2%) out of 833 respiratory specimens tested positive for influenza. 102 (12.2%) specimens were subtype Influenza A (H1N1), 68 (8.2%) were subtype Influenza A (H3N2) three specimens were not subtypes (1.4%), and 37 (4.4%) tested positive for influenza B.
4. **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. Data are used to estimate weekly age-specific hospitalization rates for persons hospitalized with severe influenza illness. Cumulative incidence rates are calculated using the National Center for Health Statistics' (NCHS) population estimates for the counties included in the surveillance catchment area. Overall, 11.9 people per 100,000 population in New Mexico were hospitalized to date for influenza for the 2015-2016 flu season. Nationally, 14.5 per 100,000 population were hospitalized for influenza.



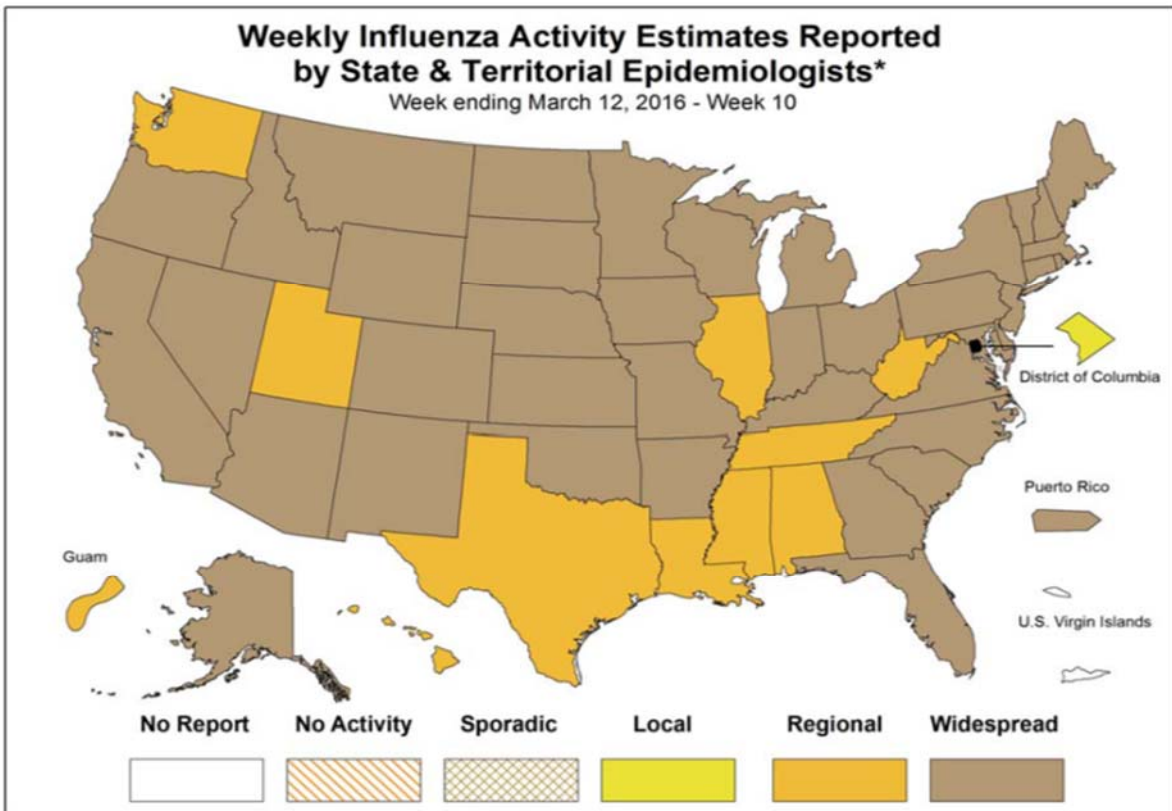
- 5. Influenza and pneumonia-related deaths:** There have been 9 influenza-related deaths in adults and 99 pneumonia-related deaths among New Mexico residents reported since the start of the 2015-2016 influenza season.

6. 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 5 for the activity level definitions. The map below displays New Mexico activity in comparison to influenza activity in bordering states, regions, and nationally for the week ending March 12, 2016.

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/> or the CDC web page: <http://www.cdc.gov/flu/about/disease/>



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

TABLE OF INFLUENZA ACTIVITY LEVELS

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

Influenza-like illness: Fever ($\geq 100^{\circ}\text{F}$ [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 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.

[‡] 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: **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.