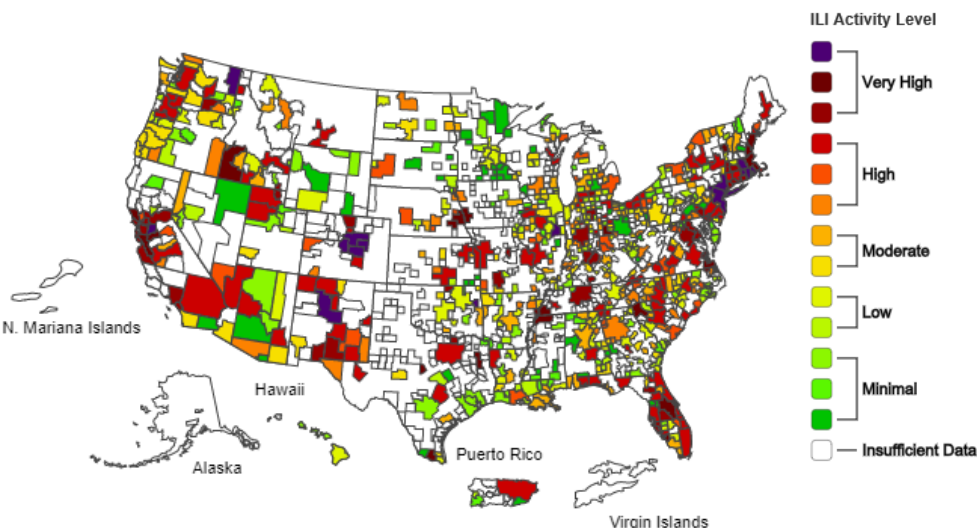# New Mexico Department of Health
Influenza & Respiratory Disease Report, 2022-2023

2022-23 Influenza Season Week 51 ending December 24, 2022

ILI Activity Level
- Very High
- High
- Moderate
- Low
- Minimal
- Insufficient Data

N. Mariana Islands
Hawaii
Alaska
Puerto Rico
Virgin Islands

New Mexico is experiencing Very High ILI activity*

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

Visit CDC FluView for the national ILI report

Summary of Activity: Week 51
## December 18 – December 24th 2022

- New Mexico influenza-like illness (ILI) activity is currently 15.6% of patient visits statewide, and is above the NM ILI baseline of 3.9% in all five health regions. It remains at the highest level in at least the past three seasons.

- Statewide flu vaccination remains below 30%. Please get your flu vaccination as soon as possible! Primary and booster shots for COVID-19 are also encouraged.

- US ILI is 6.1%, above the national ILI baseline of 2.5%

- Cases of influenza continue to rise locally and remain high nationally.

- RSV hospitalizations are leveling off but remain at a very high level for New Mexicans 0-4 years of age.

- Two influenza outbreaks were reported this week.

*Activity Map from https://www.cdc.gov/flu/weekly/index.htm
Please note:
- Influenza-like illness is a syndrome of respiratory illness, including conditions like COVID-19, Respiratory Syncytial Virus (RSV), and other seasonal respiratory viruses.

NMDOH
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New Mexico Department of Health (NMDOH) is collaborating with 21 ILI sentinel sites and 30 syndromic surveillance sites* for the 2022-2023 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.

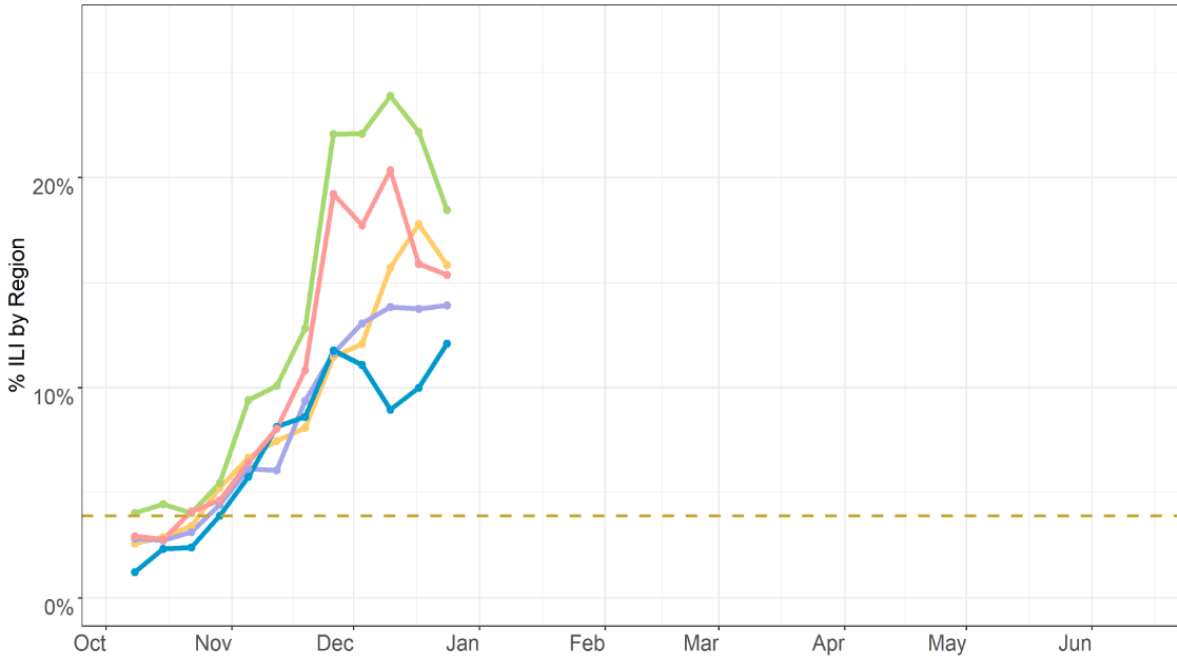New Mexico and U.S. ILI Activity, 2019 to Present
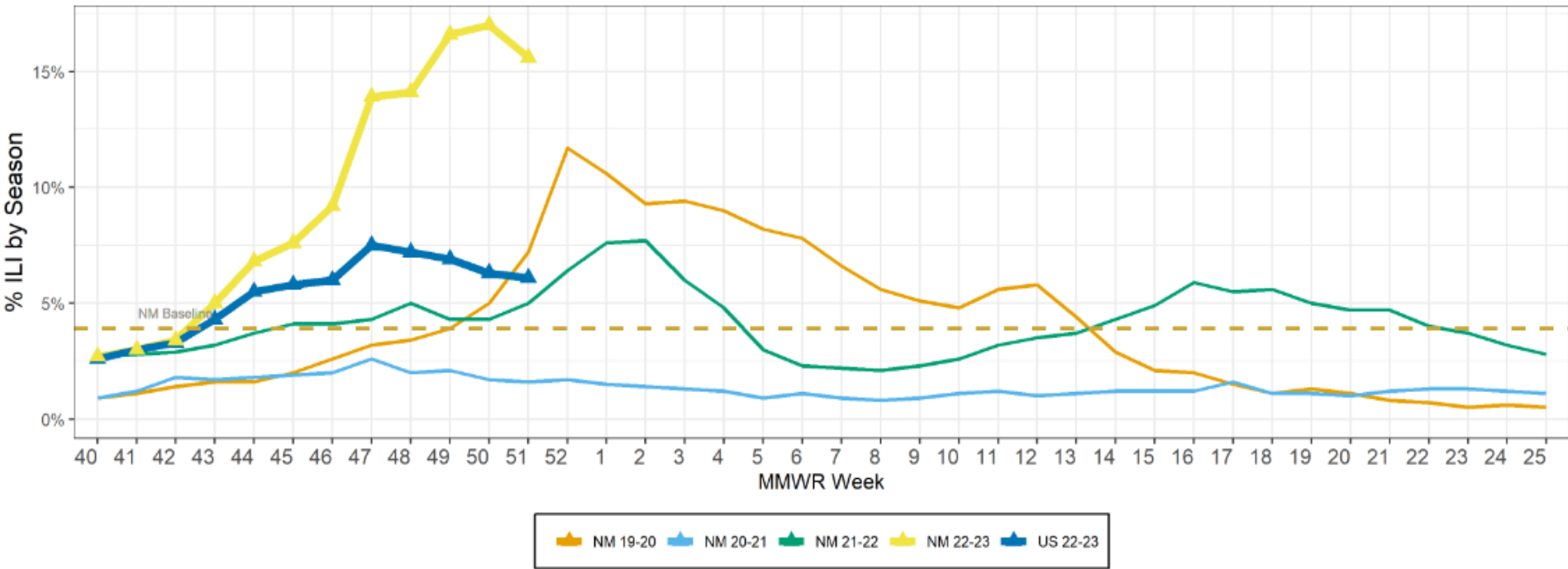
| % ILI, NM, Week 51 Dec 18-Dec 24, 2022 (Current Week)	% ILI, NM, Week 50 Dec 11-Dec 17, 2022 (Last Week)	% ILI, US, Week 51 Dec 18-Dec 24, 2022 (Current Week)
15.6%	17.0%	6.1%

* See appendix for reporting sites

Regional Influenza-Like Illness (ILI) Activity, 2022-2023
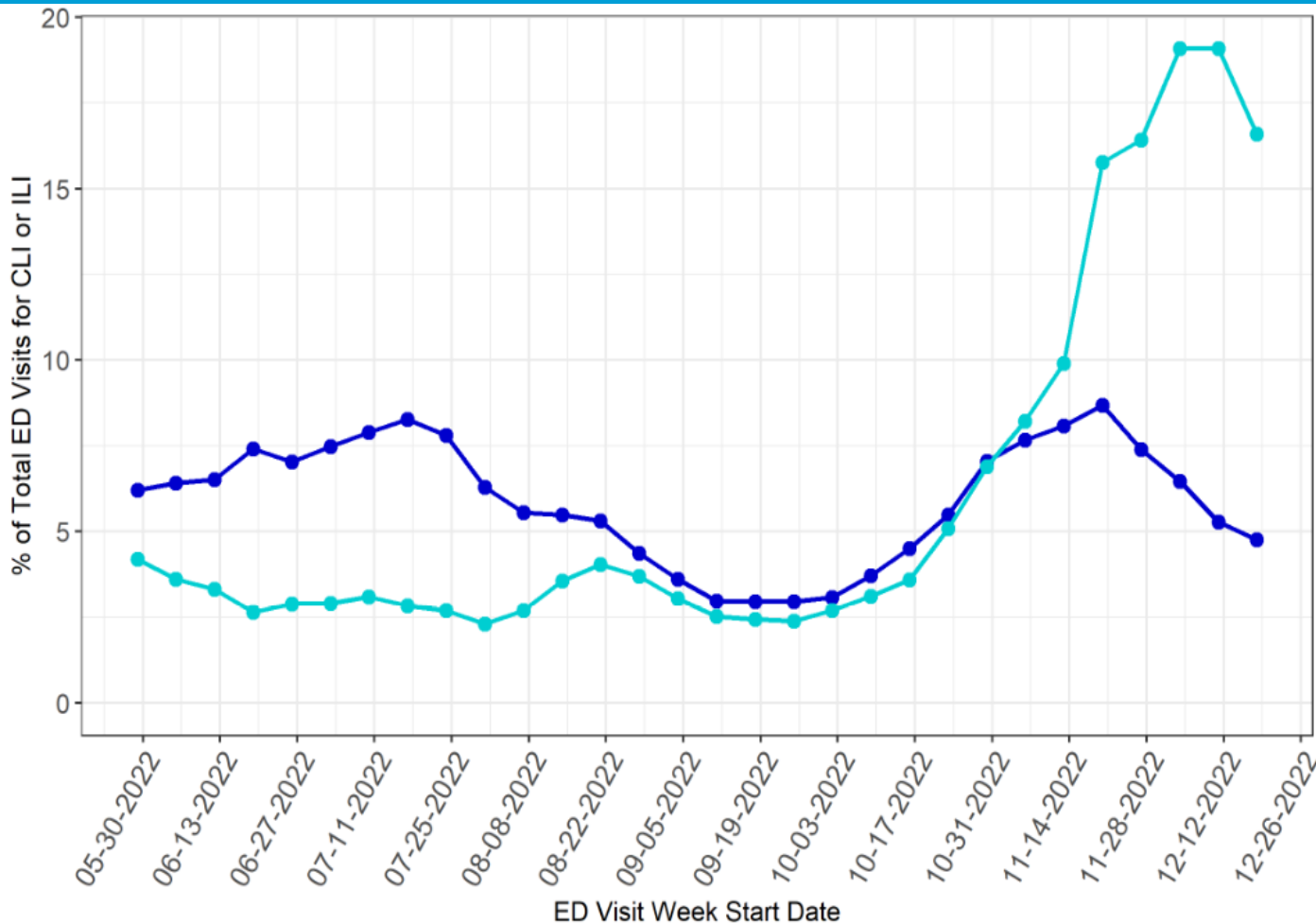
NM ILI Activity by Health Region, 2022-2023

Region	This Week	Last Week	+ Rapid Flu	+ PCR at State Lab*
Metro	15.8%	17.8%	No Data Available	30
NE	13.9%	13.8%	46	4
NW	12.1%	10.0%	122	0
SE	18.5%	22.2%	44	0
SW	15.4%	15.9%	0	20
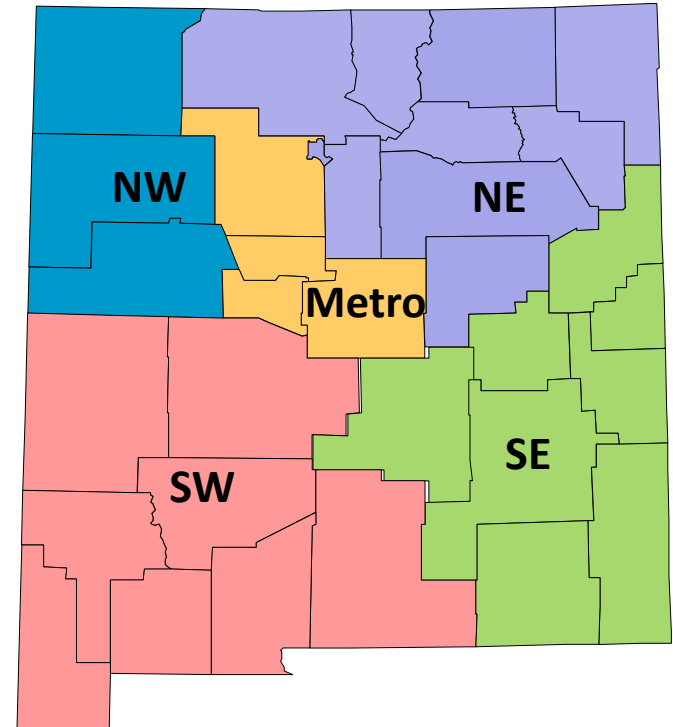
*PCR Testing: Polymerase Chain Reaction (PCR) tests can identify the presence of influenza viral RNA in respiratory specimens. PCR testing is performed at various laboratories across New Mexico.

Syndromic Surveillance for Coronavirus-Like Illness (CLI) and ILI in Emergency Departments, June 2022 – Present

Y-axis: % of Total ED Visits for CLI or ILI (0 to 20)

X-axis: ED Visit Week Start Date

05-30-2022, 06-13-2022, 06-27-2022, 07-11-2022, 07-25-2022, 08-08-2022, 08-22-2022, 09-05-2022, 09-19-2022, 10-03-2022, 10-17-2022, 10-31-2022, 11-14-2022, 11-28-2022, 12-12-2022, 12-26-2022

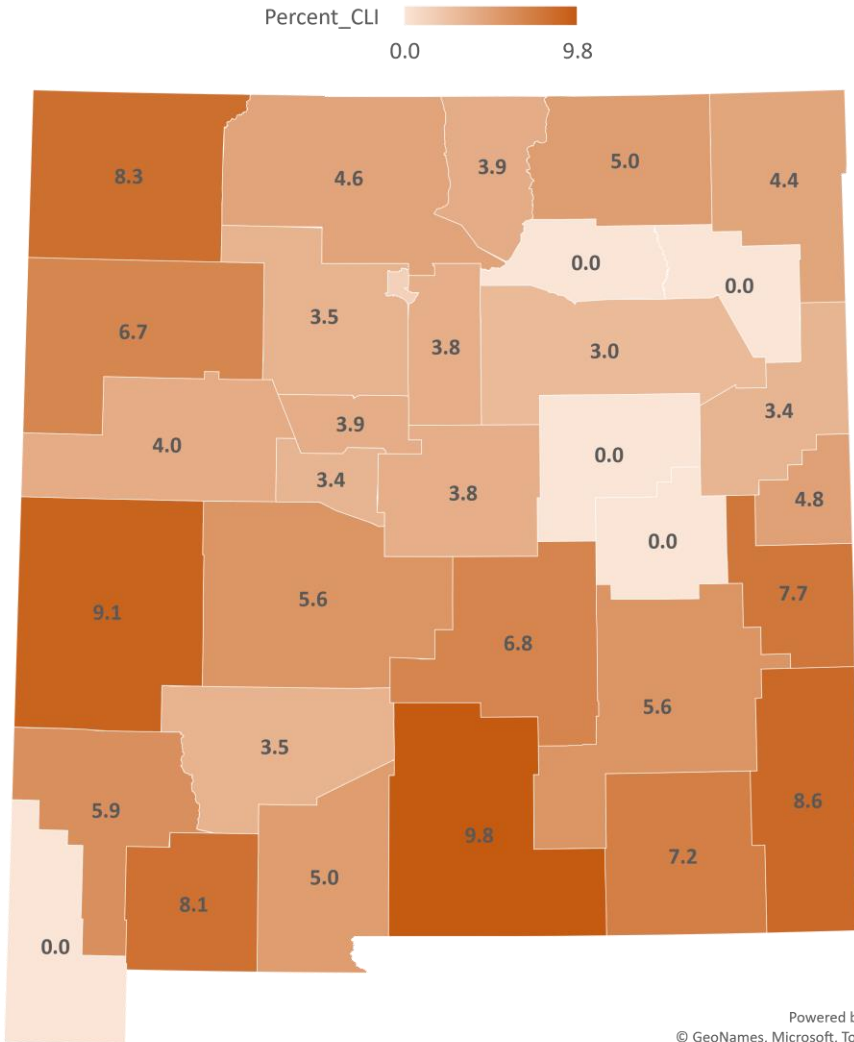● CLI CC (chief complaint) with CLI DD (discharge diagnoses) and Coronavirus DD
● ILI CC DD

This visualization is populated from data by New Mexico Emergency Departments. 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.
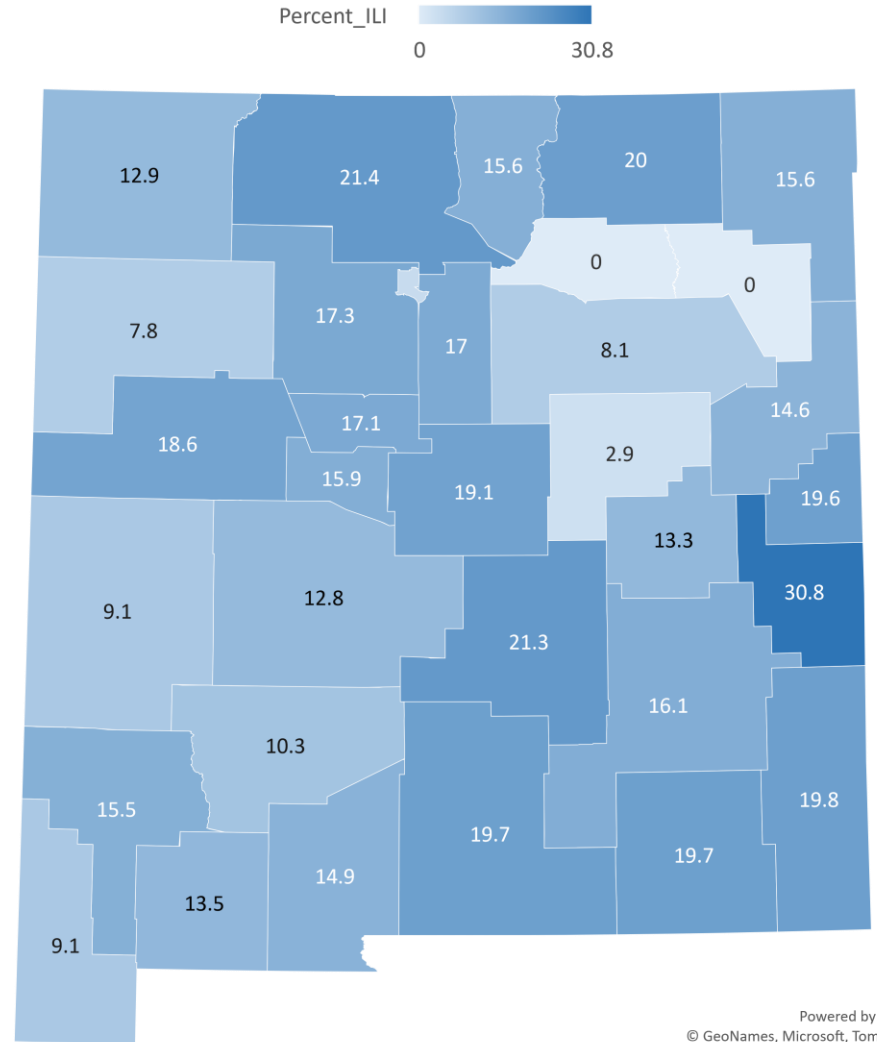
ILI CCDD includes ED encounters with chief complaint consisting of fever+cough and/or sore throat, while also including influenza-related discharge diagnoses. Note that while ICD-10 and SNOMED codes are specific to influenza/ILI, symptom keywords are broad enough to include other respiratory conditions including COVID-19/CLI.

4

Percentage of all emergency department (ED) visits that were for CLI or ILI by New Mexico County
Week 51
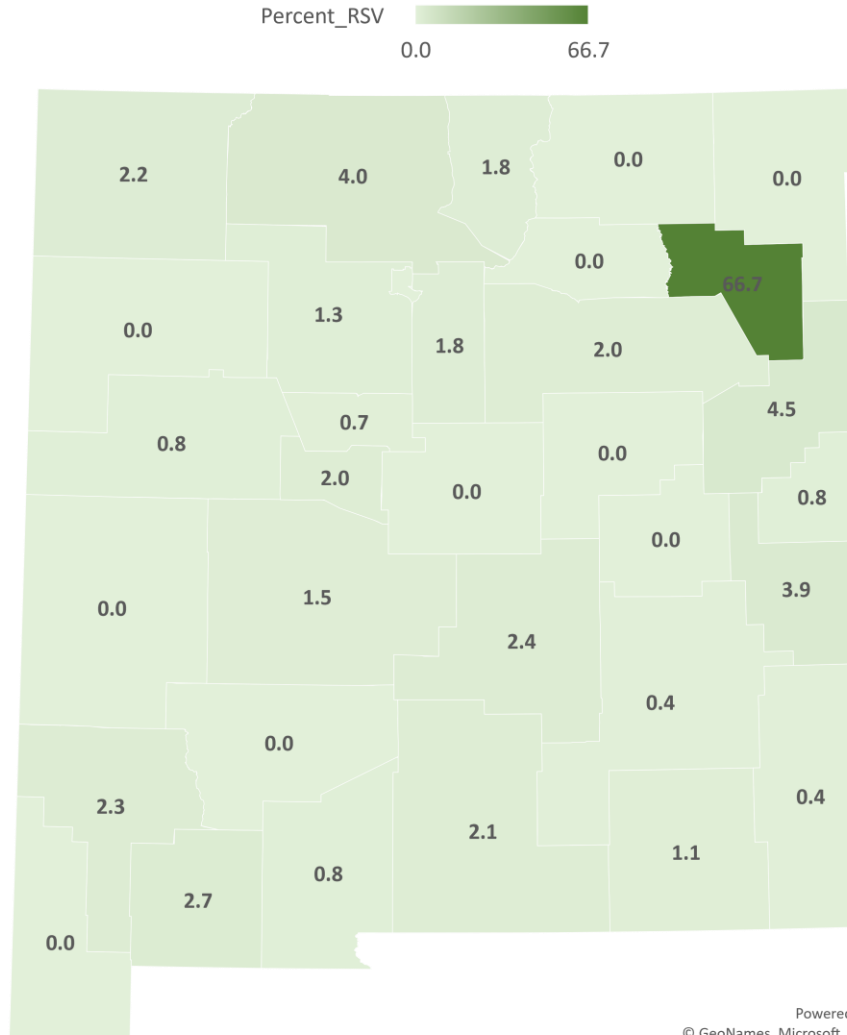
Percent CLI by County of Residence

Percent ILI by County of Residence

Percent RSV by County of Residence
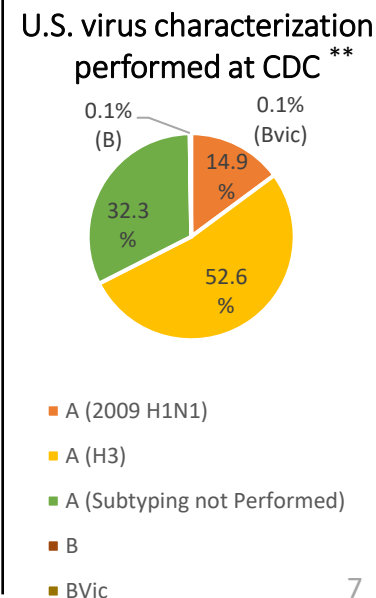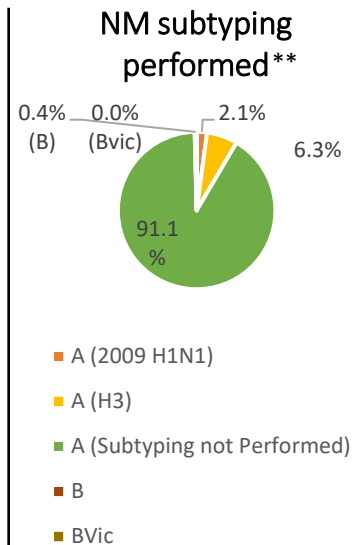

Percent_RSV

0.0   66.7

This visualization, along with those on the previous slide, are populated from data provided by New Mexico Emergency Departments. 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.

CDC Respiratory Syncytial Virus CCDD includes ED encounters with chief complaint that has keywords of "RSV," "bronchiolitis," and/or "syncytial virus" as well as RSV-related ICD-10 and SNOMED discharge diagnoses. Note that while ICD-10 and SNOMED codes are specific to RSV, they do not necessarily indicate RSV-testing was performed. Conversely, those matching CLI/ILI CCDD criteria may in fact have RSV but were not tested. Preliminary comparisons with available RSV data indicate that the query generally matches diagnosis trends in the state.

NM subtyping performed **

0.4% (B)   0.0% (Bvic)   2.1%

6.3%

91.1%

- A (2009 H1N1)
- A (H3)
- A (Subtyping not Performed)
- B
- BVic

Testing data from most labs was not available as of 12/30/22. An updated graph will be posted when it becomes available.

U.S. virus characterization performed at CDC **

0.1% (B)   0.1% (Bvic)

14.9%

32.3%

52.6%

- A (2009 H1N1)
- A (H3)
- A (Subtyping not Performed)
- B
- BVic

**Virus Characterization is based on data from the three most recent MMWR weeks. Influenza types with zero specimens collected were excluded.
SLD characterized 2 B Victoria specimens in the past three weeks; however due to rounding it is being reported as '0.0%'

RSV and Rapid Influenza Laboratory Data*, 2022-2023
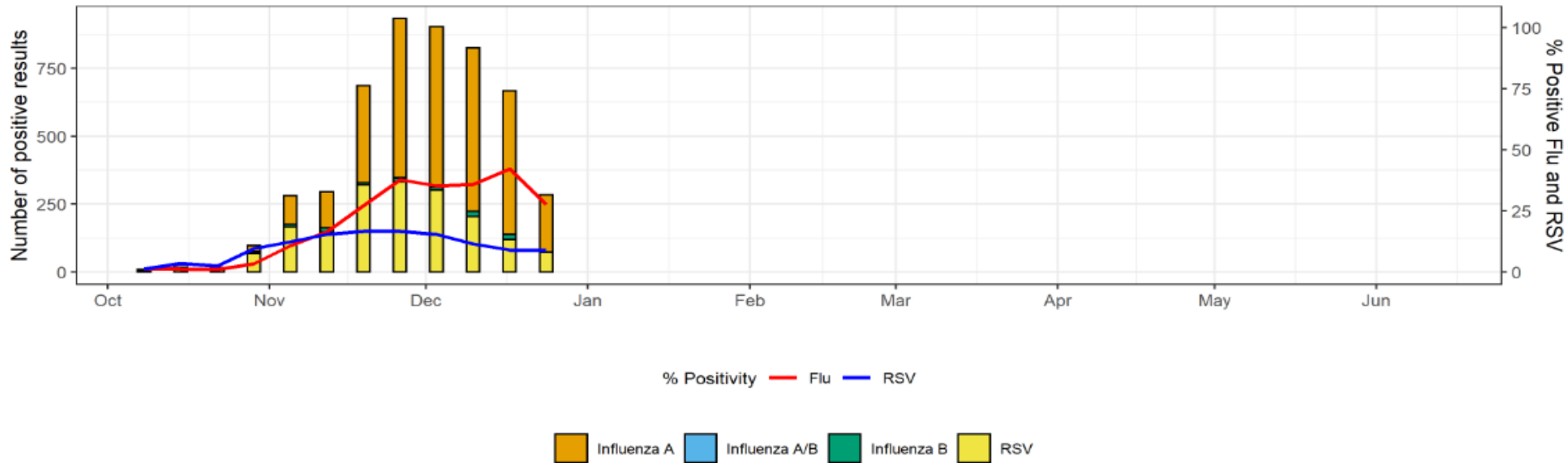
- Rapid Influenza Diagnostic tests (RIDTs) are more likely to result in a false positive when community influenza activity is low. Early and late in the season, it is best to confirm a positive RIDT result by PCR.
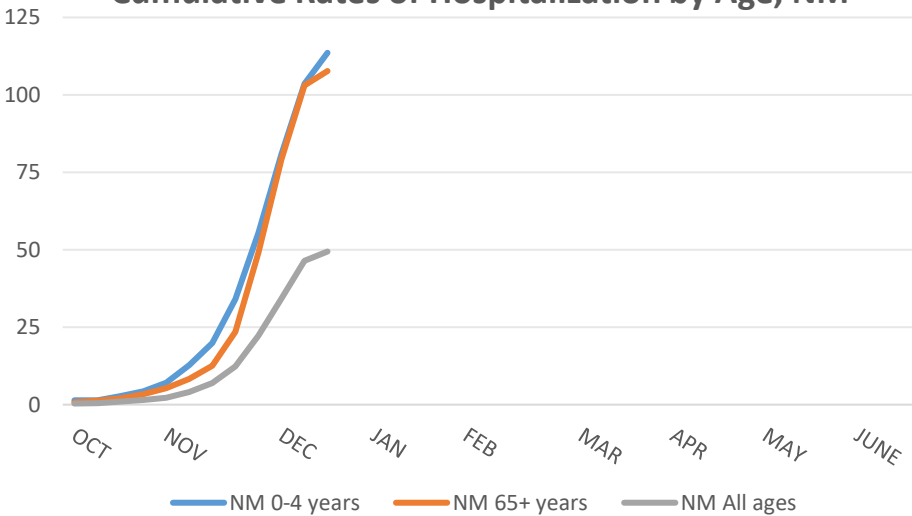
Laboratory Sites Participating in Rapid Influenza Data Collection (Facility name, City)	
NW	Dzilth-Na-O-Dith-Hle Health Center, Bloomfield; San Juan Regional Medical Center, Farmington; Northern Navajo Medical Center, Shiprock; Rehoboth McKinley Christian Hospital, Gallup;
NE	Los Alamos Medical Center, Los Alamos; Children's Clinic Los Alamos, Los Alamos; Christus St. Vincent's Hospital, Santa Fe; Jicarilla Apache Health Care Clinic, Dulce
Metro	
SW	Gerald Champion Regional Medical Center, Alamogordo; Mimbres Memorial Hospital, Deming; Ben Archer Health Center, Columbus; Ben Archer Health Center, Las Cruces; Mountain View Regional Medical Center, Las Cruces, La Clinica de Familia, Sunland Park
SE	Lea Regional Medical Center, Hobbs; Carlsbad Medical Center, Carlsbad; Artesia General Hospital, Artesia

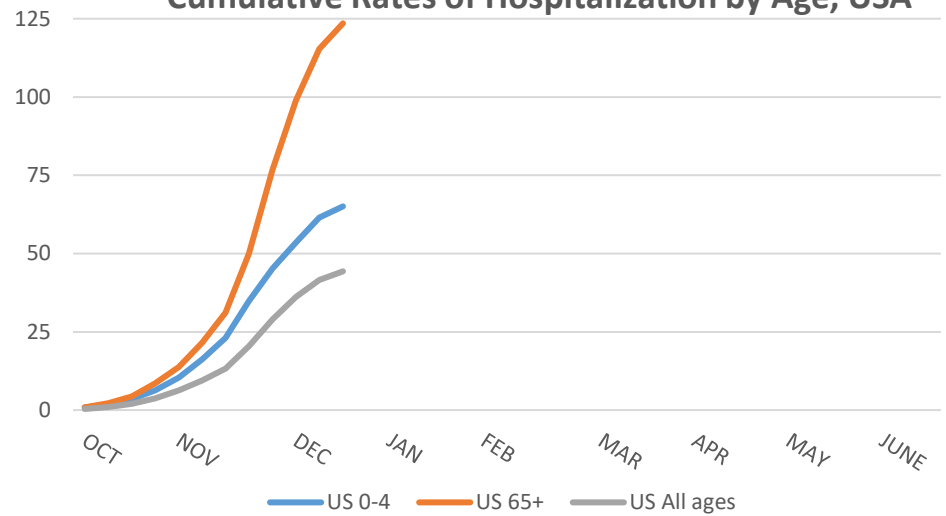* Data reported to NMDOH via a weekly online survey

Influenza Hospitalizations, NM & US, 2022-2023

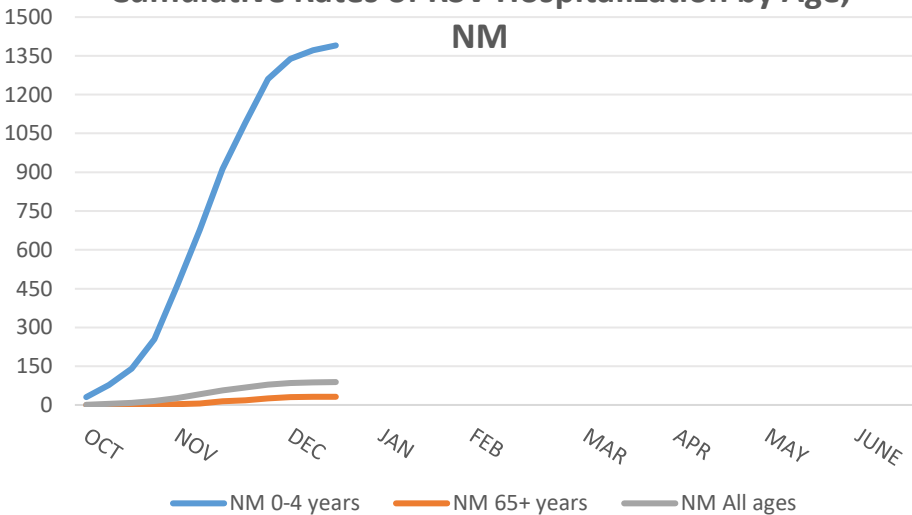### Cumulative Rates of Hospitalization by Age, NM

Legend: NM 0-4 years, NM 65+ years, NM All ages

Cumulative Rates of Hospitalization by Age, USA

Legend: US 0-4, US 65+, US All ages

RSV Hospitalizations, NM&US, 2022-2023*

Cumulative Rates of RSV Hospitalization by Age, NM

Legend: NM 0-4 years, NM 65+ years, NM All ages

Cumulative Rates of RSV Hospitalization by Age, USA

Legend: US 0-4, US 65+, US All ages
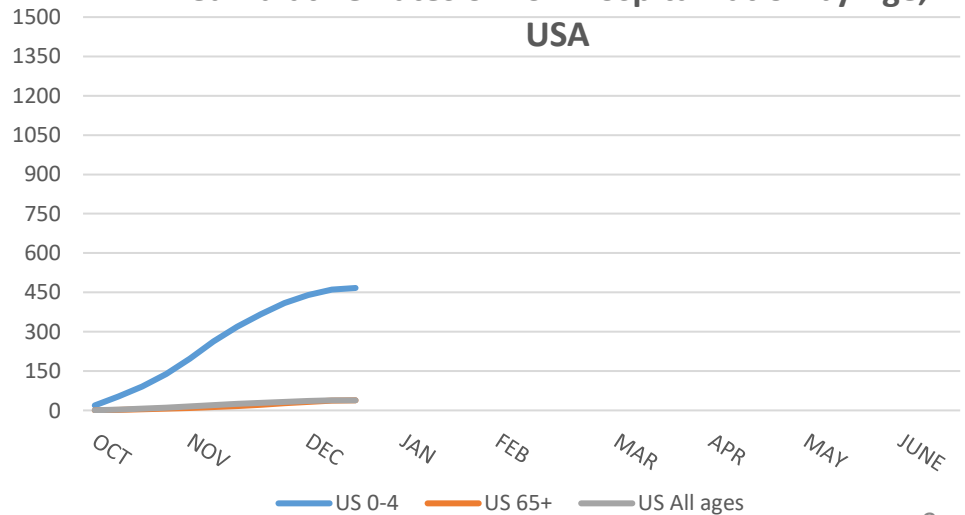
RSV data is derived from RSV-NET, which currently only covers several major hospitals in Bernalillo County. It is thus likely an underestimate.

Pneumonia and Influenza (P & I) Deaths, NM, 2018-2023*

| Season	Pneumonia (P) Deaths	Adult Influenza (I) Deaths	Pediatric Influenza Deaths	Total P & I Deaths
2022-2023	33	14	0	47
2021-2022	180	16	1	197
2020-2021	157	3	0	160
2019-2020	187	62	5	254
2018-2019	178	57	2	237

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*.

* Death data is delayed up to 8 weeks, reporting period for each season is October 1 – May 15.

New Mexico 2022-23 Season Influenza Vaccination Trend*
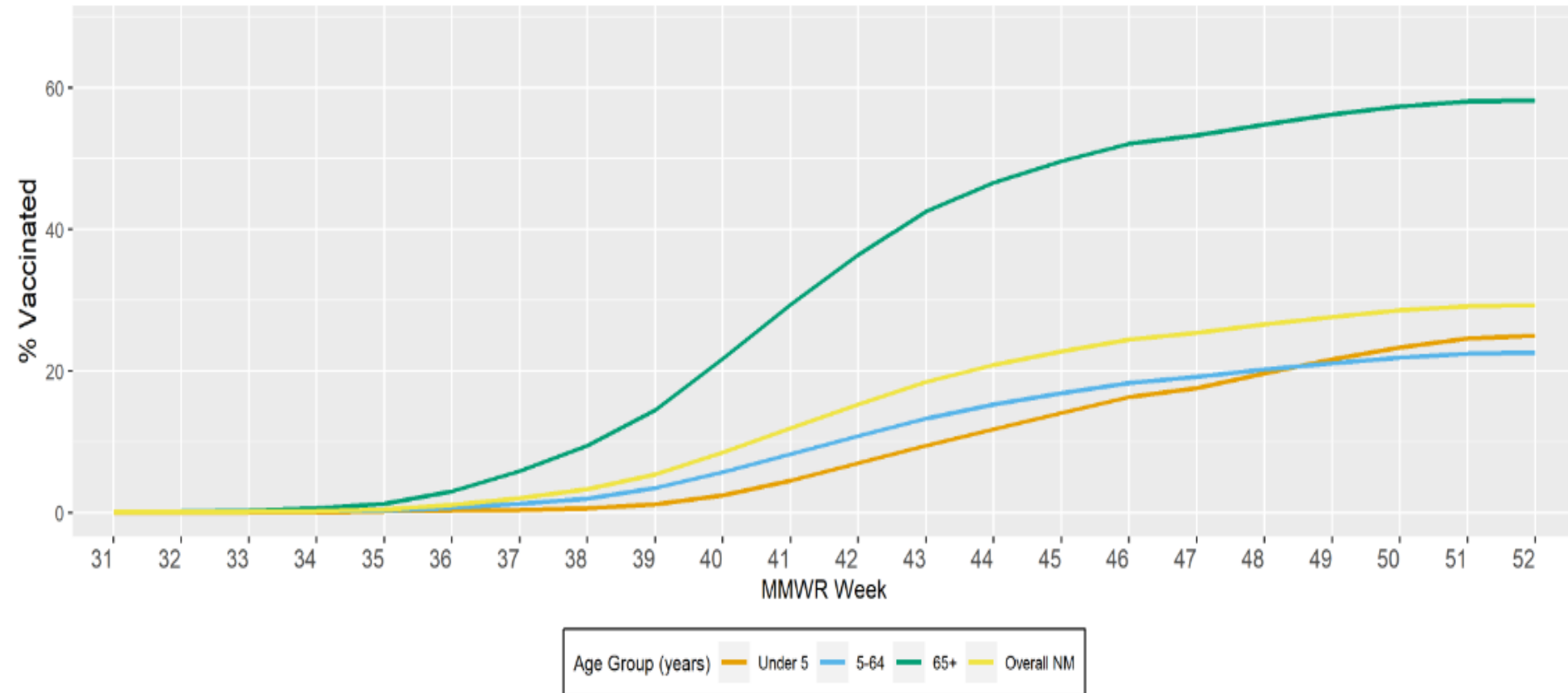
*Vaccination data is derived from New Mexico State Immunization Information System (NMSIIS). While this serves as a centralized database for reporting vaccinations, not all vaccination activities are reported. As a result, vaccination data presented here is likely an underestimate. The New Mexico Immunization program estimates approximately 80% of vaccinations are reported to NMSIIS. Data is pulled on a weekly basis but should be considered preliminary.

Additional Influenza Vaccination Information

## Still Need to Get Your Flu Shot?

Flu Vaccine Finder:

https://www.vaccines.gov/find-vaccines/

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, 2012-2022
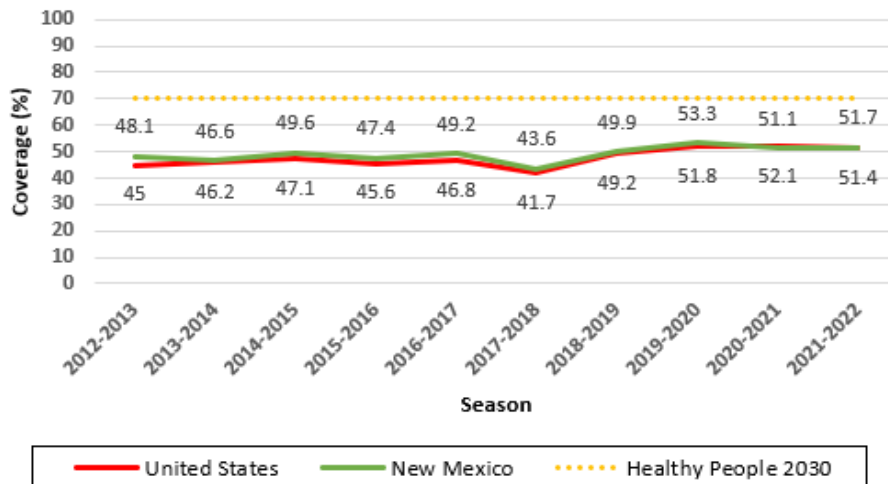
For Additional Vaccine Information/resources:

FluVaxView:

https://www.cdc.gov/flu/fluvaxview/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)
Northwest	Acoma-Canoncito-Laguna Indian Health Services, Acoma; Dzilth Indian Health Services, Bloomfield	San Juan Regional Medical Center, Farmington; Cibola General Hospital, Grants
Northeast	Taos-Picuris Indian Health Services, Taos; 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
Metro	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
Southwest	Gila Regional Medical Center, Silver City; Ben Archer Health Center –Columbus; Ben Archer Health Center –Las Cruces; 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
Southeast	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 Medial Center, Clovis;

In accordance with New Mexico Administrative Code (NMAC) 7.4.3.13 <u>Influenza is a reportable condition for the following</u>:
- 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

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