

Respiratory Virus Surveillance Report¹



New Jersey Department of Health Communicable Disease Service

Week ending March 19, 2016 (MMWR week 11)

SYNOPSIS

	Influenza Activity Lev	vel ²
State Activ	ity Week ending 3/19:	Sussex /Pas
	HIGH	Salo Sargetti
Current week Last year: HIGH		Hugher Com (Misch
Re	egional ³ Data	don see Add Mercer Mon mouth
Northwest	HIGH	Bullington Dean
Northeast	HIGH	California
Central West	HIGH	Salem Atlantic
Central East HIGH		Cumberland Cape
South	HIGH	

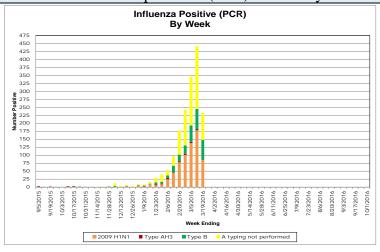
	ILI Activity ⁴						
	P	ercent ILI/Absente	eism	Baselines			
	Current week (range by county)	Non-season ⁵ Season ⁶ (3 low, 3 high)					
Long Term Care Facilities	0.65 (0.00, 1.59)	0.35	0.50	0.58 (0.60, 0.77)			
Schools (absenteeism)	5.28 (3.15, 9.79)	4.88	4.35	3.56 (4.49, 4.85)			
Emergency Departments	5.59 (0.95, 9.30)	5.16	3.41	2.39 (3.21, 4.20)			

Viral Activity ⁷							
Current Past 3 Cumulative Week Weeks Total							
Influenza H1N1 (2009)	85	401	685				
Influenza H3N2	1	9	36				
Influenza B	62	176	280				
Respiratory Syncytial Virus (RSV)	43	269	3024				
Rapid Influenza Tests	744	2165	3486				

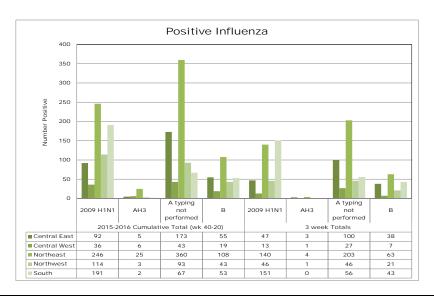
ILINet Providers						
Current Week Previous Week						
#of reporters	%ILI	#of reporters	%ILI			
16	5.55	24	6.94			

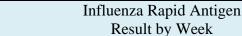
Virologic Surveillance⁷

Influenza Positive Specimens (PCR) - Result by Week



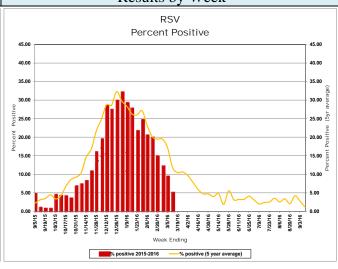
Influenza Positive Specimens (PCR)- Result by Region³



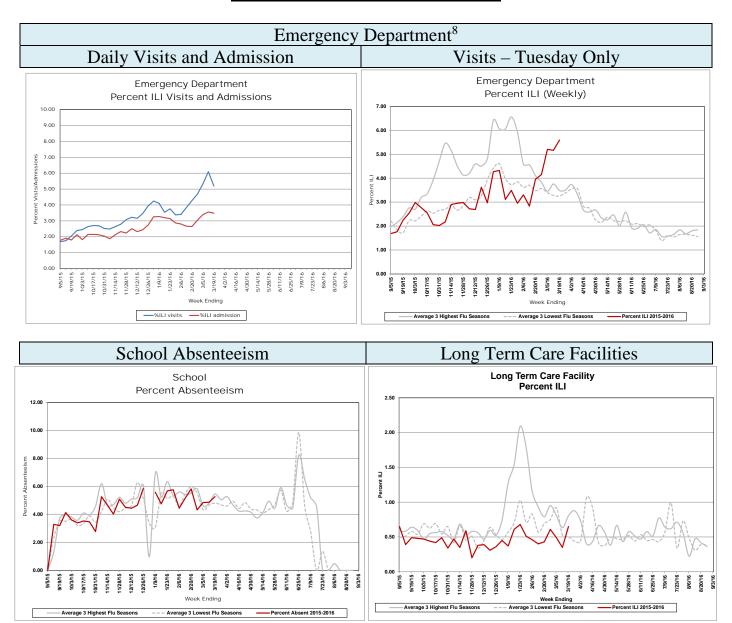


Rapid Influenza Tests Total Tested and Percent Positive 45.00 4400 ₽ 4000 3600 30.00 ë 3200 25.00 s 2800 15.00 1200 10.00 3/5/16 4/2/16 4/30/16 5/14/16 5/28/16 6/11/16 6/25/16 7/9/16 7/23/16 8/6/16 1/9/16 Total Tests Performed —Percent Positive

Respiratory Syncytial Virus (RSV) Results by Week



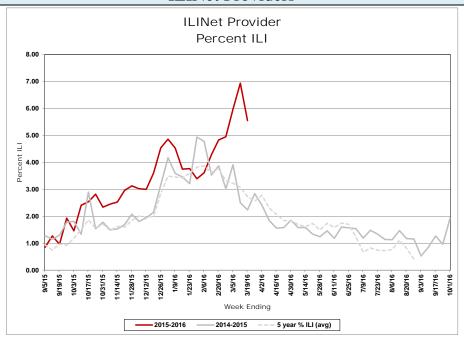
Influenza-like Illness Surveillance



Respiratory Outbreaks in Long Term Care Facilities⁹

Cumulative outbreaks 2015-2016 season	15
No. outbreaks last 3 weeks	5
Regions with recent	NE/CW
outbreaks	NE/CW





Pediatric Influenza Mortality¹⁰

	Number of Pediatric Influenza Deaths Reported to CDC			
Influenza season	NJ	US (includes NJ)		
2010-2011	4	123		
2011-2012	1	35		
2012-2013	7	171		
2013-2014	6	108		
2014-2015	1	146		
2015-2016	0	28		

For additional information regarding influenza surveillance please visit the following websites. http://nj.gov/health/flu/surveillance.shtml http://www.cdc.gov/flu/

Footnotes:

- 1. This report represents activity occurring in New Jersey related to influenza and RSV. In addition, reports of other circulating respiratory viruses or regarding illness severity (i.e., hospitalization) will be included when available.
- 2. Activity levels for the state and region are defined in Table 1 and 2 at the end of this document.
- 3. The following is a breakdown of counties contained within each public health region: Northwest: Morris, Passaic, Sussex, Warren; Northeast: Bergen, Essex, Hudson; Central west: Hunterdon, Mercer, Somerset; Central East: Middlesex, Monmouth, Ocean, Union; South: Atlantic, Burlington, Camden, Cape May, Salem, Cumberland, Gloucester
- 4. Influenza-like illness (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). For long term care facilities, fever is defined as 2° above baseline temperature.
- 5. Non-season baseline is calculated by taking the average of statewide percentages of ILI for a 10 year (2006, 2007, 2008, 2009, 2010, 2011, 2012, 2013, 2014 and 2015) period during months when influenza is less likely to be circulating (May-August).
- 6. Three year seasonal averages are determined by calculating the average percent ILI/absenteeism for each influenza season (October to May). These averages are ranked and the three highest and lowest overall season averages were selected. The three highest and lowest numbers were then averaged to obtain a single high and single low value. The season which contribute to the high and low value vary by entity type and are as follows: LTCF (High: 09-10, 12-13, 14-15; Low: 10-11,11-12,13-14), ED (High: 09-10, 12-13, 14-15; Low: 10-11, 11-12,13-14) and schools (High: 09-10, 10-11, 12-13; Low: 11-12,13-14, 14-15). A week by week average was also calculated using the average of the seasons listed above for each entity type.
- 7. Viral activity: Real-time polymerase chain reaction (PCR) results are obtained from electronic laboratory transmission submitted by acute care, commercial and public health laboratories to CDRSS. Rapid influenza test data and respiratory syncytial virus data are acquired from facilities reporting rapid influenza tests via the National Respiratory and Enteric Virus Surveillance System (NREVSS) or CDRSS ILI module. Counts for cumulative totals begin with week ending October 10, 2015. Three week count data includes current week and two prior weeks. Data presented for RSV and rapid influenza testing represent information for the week prior to the current report week.
- 8. Daily visits and admissions associated with ILI from emergency department data is collected via EpiCenter and Hippocrates. Prior to these systems, data on ILI visits were only recorded one day per week usually on Tuesday. This system is maintained as a large amount of historical data allows for better seasonal comparisons.
- Only LTCF outbreaks reported to NJDOH that receive an outbreak number are recorded in this report.
- 10. Data presented for New Jersey are for cases confirmed as of the current reporting week. Data presented for the United States represent data reported for the prior MMWR week. This data can be viewed at: http://www.cdc.gov/flu/weekly/.

	<u>Table 1</u> Influenza Activity Level – Definitions for State Activity						
NJ Level	CSTE Level	i i	inition	•			
		ILI Activity/Outbreaks		Lab Activity			
	No Activity	ILI activity at or below baseline AND no detected outbreaks	AND	No lab confirmed cases			
Low	Sporadic	Low ILI activity detected OR one lab confirmed outbreaks anywhere in the state	AND	Sporadic isolation of laboratory confirmed influenza			
	Local	Increase in ILI activity OR two or more lab confirmed outbreaks in one public health region (Other regions not experiencing increased ILI activity)	AND	Recent (within 3 weeks) laboratory activity in the region with increased ILI			
Moderate	Regional	Increase in ILI activity OR two or more lab confirmed outbreaks in at least 2 public health regions (Other regions not experiencing increased ILI activity)	AND	Recent (within 3 weeks) laboratory activity in the region with increased ILI			
High	Widespread	Increase in ILI activity OR two or more lab confirmed outbreaks in > 2 public health regions	AND	Recent (within 3 weeks) laboratory activity in the region with increased ILI			

	<u>Table 2</u> Influenza Activity Level – Definitions for Public Health Regions						
NJ Level	NJ Level ILI Activity/Outbreaks Definition Lab Activity						
Low	Low ILI activity detected OR one lab confirmed outbreaks anywhere in the region	AND	Sporadic isolation of laboratory confirmed influenza anywhere in the region				
Moderate	Increased ILI activity in less than half of the counties in the region OR two lab confirmed outbreaks in the public health region	AND	Recent (within 3 weeks) laboratory activity in same counties of the region with increased ILI				
High	Increased ILI activity in more than half of the counties in the region OR three or more lab confirmed outbreaks in the region	AND	Recent (within 3 weeks) laboratory activity in more than half of the counties in the region with increased ILI				

Notes:

ILI activity: Systems used to detect increases in ILI activity include: ILINet (i.e., sentinel providers), school absenteeism data, ED ILI visits and admissions collected via Hippocrates and EpiCenter systems, LTCF ILI data, LTCF outbreak data, and information on influenza mortality (122 city, influenza associated death report).

Lab Activity: Virologic surveillance data from PHEL and commercial laboratories will be used as the primary data source for the above levels. However, rapid influenza test data will also be considered when determining the appropriate activity levels.

INFLUENZA LABORATORY REPORTS BY COUNTY

Counts represent total positive specimens from week ending October 10, 2015 to current MMWR week

Source: CDRSS

Frequency

	RESULT						
COUNTY(COUNTY)	Influenza A - Typing not performed	Influenza A 2009 H1N1	Influenza AH3	Influenza B	Total		
ATLANTIC	131	11	1	28	171		
BERGEN	401	171	18	112	702		
BURLINGTON	92	88	1	46	227		
CAMDEN	139	69	0	65	273		
CAPE MAY	6	1	0	2	9		
CUMBERLAND	4	1	0	0	5		
ESSEX	156	30	5	24	215		
GLOUCESTER	9	20	0	11	40		
HUDSON	102	49	2	49	202		
HUNTERDON	12	15	2	3	32		
MERCER	113	10	4	44	171		
MIDDLESEX	108	35	4	45	192		
MONMOUTH	310	7	0	114	431		
MORRIS	65	13	0	28	106		
OCEAN	178	8	1	80	267		
PASSAIC	151	81	2	50	284		
SALEM	2	2	0	0	4		
SOMERSET	31	12	1	7	51		
SUSSEX	14	2	0	6	22		
UNION	169	42	0	18	229		
WARREN	5	18	1	5	29		
Total	2198	685	42	737	3662		

INFLUENZA LABORATORY REPORTS BY REGION

Counts represent total positive specimens from week ending October 10, 2015 to current MMWR week

Source: CDRSS

Frequency

Table of REGION by RESULT									
		RESULT							
REGION	Influenza A - Typing not performed	A - Typing Influenza not A 2009 Influenza Influenza							
Central East	765	92	5	257	1119				
Central West	156	37	7	54	254				
Northeast	659	250	25	185	1119				
Northwest	235	114	3	89	441				
South	383	192	2	152	729				
Total	2198	685	42	737	3662				

Communicable Disease Reporting and Surveillance System

NJ ACTIVE INFLUENZA-LIKE ILLNESS SURVEILLANCE STATISTICS SURVEILLANCE DATE: 03/15/2016



03/21/2016 8:42 AM

	Long Term Care				Schools		Hospi	tal Emergency	Dept
COUNTY	# Enrolled	# Reports Rec'd	₩ 	# Enrolled	# Reports Rec'd	% Absent	# Enrolled	# Reports Rec'd	∏ %
March 15, 2016 MMWR WEEK 11								<u> </u>	
ATLANTIC	6	2	0.39	42	37	7.28	4	4	1.12
BERGEN	4	2	0.14	34	25	3.66	5	5	3.76
BURLINGTON	6	4	0.19	79	43	5.29	4	4	6.19
CAMDEN	0	0	0.00	1	0	0.00	7	7	6.06
CAPE MAY	3	1	0.00	14	10	5.69	1	1	1.85
CUMBERLAND	5	5	1.59	11	9	7.10	3	3	4.94
ESSEX	2	0	0.00	4	3	2.97	8	7	5.59
GLOUCESTER	3	1	0.00	4	4	9.79	2	2	3.99
HUDSON	4	3	1.51	13	8	4.33	6	6	6.64
HUNTERDON	4	4	1.12	8	8	4.14	1	1	0.95
MERCER	3	1	0.00	22	19	4.99	5	4	6.80
MIDDLESEX	4	2	0.00	21	19	4.78	6	6	6.52
MONMOUTH	5	2	1.44	16	15	6.43	5	5	7.16
MORRIS	0	0	0.00	9	8	3.15	4	4	3.87
OCEAN	1	0	0.00	5	3	5.75	4	4	6.88
PASSAIC	7	3	0.00	26	16	4.81	3	3	7.29
SALEM	0	0	0.00	3	3	7.53	1	1	4.92
SOMERSET	3	1	0.00	22	18	4.22	1	1	7.59
SUSSEX	2	2	0.00	5	5	4.66	2	2	2.59
UNION	1	0	0.00	49	29	4.45	5	5	5.04
WARREN	4	1	0.00	20	14	4.64	2	2	9.30
NW Region	13	6	0.00	60	43	4.50	11	11	5.85
NE Region	10	5	0.75	51	36	3.82	19	18	5.36
CW Region	10	6	0.72	52	45	4.49	7	6	6.20
CE Region	11	4	0.59	91	66	5.07	20	20	6.45
South Region	23	13	0.92	154	106	6.36	22	22	4.69
State Total	67	34	0.65	408	296	5.28	79	77	5.59

User Name: HALDEMAN, ANNMARIE

Communicable Disease Reporting and Surveillance System

NJ ACTIVE INFLUENZA-LIKE ILLNESS SURVEILLANCE STATISTICS SURVEILLANCE DATE: 03/15/2016



N	J Health
New .	Jersey Department of Health

	RSV Tests		Rapid Flu Tests	
County	# Positive	Total Tests Performed	# Positive	Total Tests Performed
March 15, 2016 MMWR WEEK 1	1		,,	
ATLANTIC	1	25	36	180
BERGEN	2	28	166	496
BURLINGTON	1	1	0	0
CAMDEN	1	18	40	279
CAPE MAY	1	4	3	64
CUMBERLAND	1	5	0	0
ESSEX	3	24	43	417
GLOUCESTER	1	25	54	265
HUDSON	1	13	25	70
HUNTERDON	2	12	20	144
MERCER	0	8	30	134
MIDDLESEX	1	51	23	113
MONMOUTH	8	154	196	869
MORRIS	8	252	0	0
OCEAN	1	15	58	171
PASSAIC	0	3	27	63
SALEM	0	0	0	0
SOMERSET	0	0	0	0
SUSSEX	0	0	0	0
UNION	5	175	1	14
WARREN	6	73	22	141
NW Region	14	328	49	204
NE Region	6	65	234	983
CW Region	2	20	50	278
CE Region	15	395	278	1167
South Region	6	78	133	788
State Total	43	886	744	3420