



Texas Department of State Health Services



SECRETARÍA DE SALUD



# THE US-MEXICO BORDER INFLUENZA SURVEILLANCE NETWORK WEEKLY UPDATE: PASO DEL NORTE REGION

Weekly Report ending February 22, 2020 (MMWR<sup>s</sup> Week 8)

## Highlights

- A total of 4 lab-confirmed† cases of influenza were reported in week 8 for Texas, New Mexico, and Mexico border region
- Influenza-Like-Illness activity\* at sentinel sites in the border region was **below** the U.S. national baseline (2.4%) for week 8
- 93% of sentinel sites reported ILI activity for Texas, New Mexico, and Mexico border region in Week 8

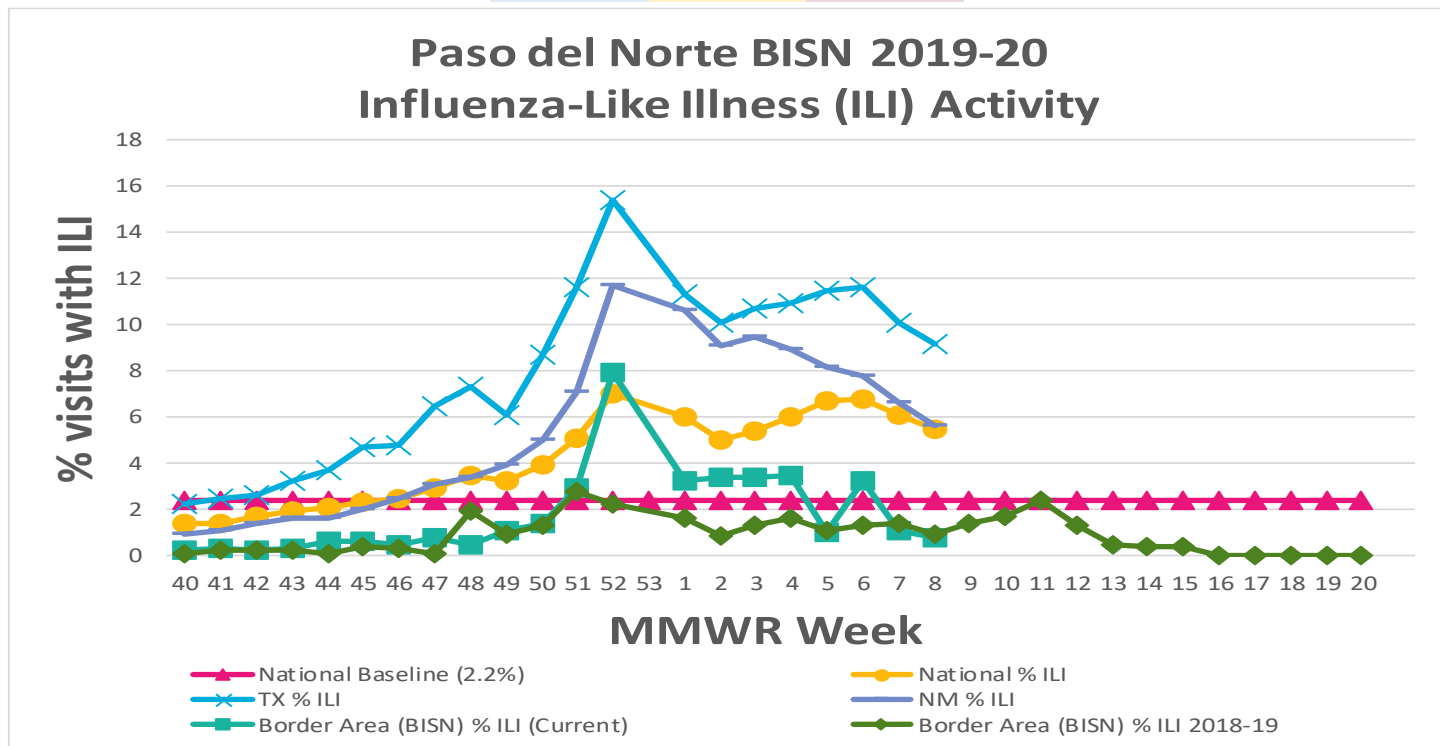


Region	Influenza Activity Level (see end of report for description)
Border Region Paso del Norte (New Mexico/Chihuahua/Texas)	Widespread
New Mexico	Widespread
Texas	Widespread

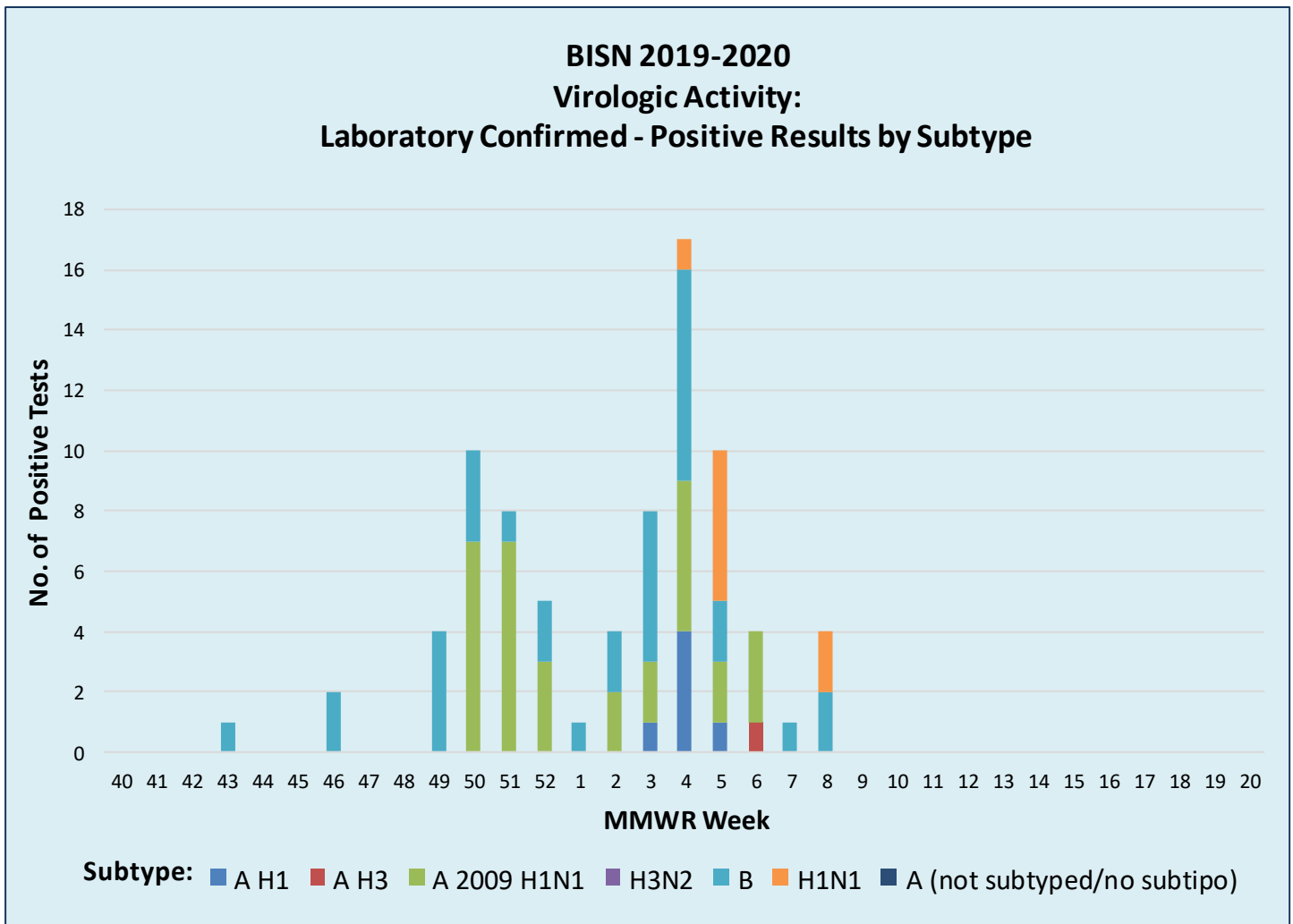
**Border Region Sentinel ILI Activity in New Mexico, Chihuahua, and West Texas for Week Ending 2/22/2020:**

Clinic	Patients seen week ending: 2/22/2020	Patients with ILI this week (n; % of this week's total):	Patients with ILI last week (n; % of last week's total):
CAAPS Águilas	638	0 (0.0%)	0 (0.0%)
Centro Salud "B" Bellavista	867	0 (0.0%)	0 (0.0%)
Centro Salud "C" Galeana	76	0 (0.0%)	1 (1.4%)
CSHS, Ojinaga	122	1 (0.8%)	3 (1.9%)
BAHC, Deming	232	5 (2.2%)	5 (1.8%)
BAHC, Dona Ana	325	7 (2.2%)	3 (0.7%)
BAHC, Columbus	42	0 (0.0%)	0 (0.0%)
HMS, Lordsburg	No report	-	-
LCDF, Sunland Park	167	9 (5.4%)	18 (9.6%)
SHC, Sunland Park	29	1 (3.4%)	3 (20.0%)
FHSA, Alpine	138	0 (0.0%)	0 (0.0%)
BBFP, Alpine	116	0 (0.0%)	-
Marfa	57	1 (1.8%)	1 (1.5%)
Presidio	163	1 (0.6%)	1 (0.5%)
<b>Totals:</b>	<b>2972</b>	<b>25 (0.8%)</b>	<b>35 (1.1%)</b>

Chihuahua    New Mexico    Texas



**Border Region Sentinel Laboratory Activity in New Mexico, Chihuahua, and West Texas for Week  
Ending 2/22/2020:**



Cumulative Lab-confirmed Overall Positivity 2019-2020								
State	AH1	AH3	2009 H1N1	H3N2	H1N1	B	Negative	Positivity
Texas	0	1	31	0	0	21	70	43.1%
New Mexico	0	0	0	0	8	8	48	25.0%
Chihuahua	6	0	0	0	0	4	2	83.3%

Age Range (in years) of Patients with ILI					
0-4	5-24	25-49	50-64	65+	Total Patients with ILI; Week 8
1	9	3	7	5	25

## National Flu Surveillance and Laboratory Activity, Week Ending 2/22/2020

More information on national surveillance can be found at <http://www.cdc.gov/flu/weekly>

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	Not increased	And	Lab confirmed outbreak in one institution‡
	OR		
Regional (doesn't apply to states with ≤4 regions)	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 (doesn't apply to states with ≤4 regions)	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 (doesn't apply to states with ≤4 regions)	Increased ILI in ≥2 but less than half of the regions	And	Recent (within 3 weeks) lab confirmed influenza in the affected regions
	OR		
Regional (doesn't apply to states with ≤4 regions)	Institutional outbreaks (ILI or lab confirmed) in ≥2 and less than half of the regions	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 half of the regions	And	Recent (within the past 3 weeks) lab confirmed influenza in the state

\*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 influenza rapid test (EIA), fluorescent antibody (DFA or IFA), RT-PCR or viral culture. 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, a state may wish to obtain laboratory confirmation of influenza by testing methods other than point of care rapid tests for reporting the first laboratory confirmed case of influenza of the season.

§MMWR week: The week of the epidemiologic year for reporting local or state health department for the purposes of MMWR disease incidence reporting and publishing. Values for MMWR week range from 1 to 53, although most years consist of 52 weeks.

‡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. Depending on the size of the state, the number of regions could range from 2 to approximately 12. The definition of regions would be left to the state but existing state health districts could be used in many states. Allowing states to define regions would avoid somewhat arbitrary county lines and allow states to make division that make sense based on geographic population clusters. Focusing on regions larger than counties would also improve the likelihood that data needed for estimating activity would be available.

This information is collected by the Border Infectious Disease Surveillance (BIDS) program at the Office of Border Public Health, Texas Department of State Health Services Health Service Region 9/10. For questions, please email [David.Torres@dshs.texas.gov](mailto:David.Torres@dshs.texas.gov) or call (915) 834.7778. For more information on Influenza in Texas, visit <http://www.dshs.texas.gov/idcu/disease/influenza/surveillance/> or visit the CDC's Influenza page: <https://www.cdc.gov/flu/index.htm>.