

Eastern Michigan University – Emergency Management  
2009 Influenza A (H1N1) Outbreak Situation Report

**Situation Update #13**

**Date: 18 September 2009**

**Time: 1:00pm EDT**

Evidence from multiple outbreak sites demonstrates that the H1N1 pandemic virus has rapidly established itself and is now the dominant influenza strain in most parts of the world. The pandemic will persist in the coming months as the virus continues to move through susceptible populations. Preliminary epidemiologic data on the H1N1 flu suggests significant risk among those in the college setting.

As of Monday, September 14<sup>th</sup>, the American College health association is reporting a total of 6,432 new Influenza Like Illness (ILI) cases with 16 hospitalizations. Eighty-three percent of the 253 colleges and universities reported new ILI cases, compared to 72% the prior week. The nationwide attack rate was 21.5 cases/10,000 students, at least 20 percent higher than the prior week's rate. The highest rates of activity remain in the Northwest. The Southeast region still shows considerable disease activity but there has been some decrease in rate of attack from the previous week. There have been significant increases in disease activity in both the Midwest and Mid-Atlantic regions of the country. Again, no deaths were observed among the reporting institutions.

**Eastern Michigan University**

<http://www.emich.edu/uhs/swineflu/>

Eastern Michigan University has initiated comprehensive H1N1 prevention and preparedness activities to minimize impacts caused by both the seasonal flu and the H1N1 virus. EMU's initiatives include providing up-to-date information to faculty, staff, students and parents; contingency planning for continuity of operations in the event of an outbreak; lessons in proper hand washing; offering informational meetings for students and employees; and distributing more than 2,500 bottles of hand sanitizer to students during move-in weekend.

**Key Activities**

- EMU distributed 2,500 bottles of hand sanitizer and informational letter during student move-in day (September 5<sup>th</sup>).
- Parents of first-year students, ages 24 or younger, received a letter outlining medical services, including information about available vaccines, offered by University Health Services.
- Informational letters were distributed to the following target populations:
  - All EMU students
  - Residence hall students and university apartment tenants
  - New Student Orientation Student Assistants
  - International students
  - Greek community members
  - Faculty and Academic Affairs Administrators
  - Parents of students
- Communications are scheduled to go out to:
  - EMU employees
  - Student athletes
  - Children's Institute families

**Surveillance**

- As of 9/18/09, EMU has documented two diagnosed and ten probable cases of Influenza -Like Illness (ILI). Influenza-Like Illness case definition = fever (> or = 100 degrees F) AND cough and/or sore throat (in the absence of a known cause other than influenza).
- The Michigan Department of Community Health has documented 115 confirmed and probable cases of Influenza Like Illness (ILI) in Washtenaw County as of September 12<sup>th</sup>.
- As of September 12, 3976 cases of flu-like illness and confirmed and probable cases of seasonal and novel influenza, including 12 deaths, were reported in Michigan. 1 hospitalization due to influenza was reported during the week of September 6-12, 2009.
- EMU is participating with the American College Health Association in a national surveillance network to report data on a weekly basis that is specific to campus communities. ACHA Pandemic Influenza Surveillance - Influenza Like Illness (ILI) in Colleges and Universities [http://www.acha.org/ILI\\_Surveillance.cfm](http://www.acha.org/ILI_Surveillance.cfm)

EMU's influenza surveillance is a collaborative effort between federal, state and local health departments and other agencies. The campus surveillance effort includes:

- Finding out when and where influenza activity is occurring
- Tracking influenza-related illness
- Tracking what influenza viruses are circulating
- Measuring the impact influenza is having on the EMU campus community

**Vaccination**

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The EMU Snow Health Center is currently providing seasonal flu vaccination services to the campus community. For further information, call University Health Services @734.487.1122. Seasonal flu shots also will be offered at satellite clinics as follows: Tuesday, Sept. 22, 4-6 p.m., Walton/Putnam Lounge; and Wednesday, Sept. 23, 11 a.m. to 2 p.m., room 104, Student Center.

- Currently, there is no vaccine available to protect against the 2009 H1N1 flu virus. However, a vaccine is currently in production, and initial doses of this vaccine are expected to become available for the public later in the fall.
- CDC's Advisory Committee on Immunization Practices (ACIP) has recommended that certain groups of the population receive the 2009 H1N1 flu vaccine when it first becomes available:
  - Pregnant women because they are at higher risk of complications and can potentially provide protection to infants who cannot be vaccinated;
  - Household contacts and caregivers for children younger than 6 months of age because younger infants are at higher risk of influenza-related complications and cannot be vaccinated;
  - Healthcare and emergency medical services personnel because infections among healthcare workers have been reported and this can be a potential source of infection for vulnerable patients;
  - All people from 6 months through 24 years of age;
  - Children from 6 months through 18 years of age because we have seen many cases of novel H1N1 influenza in children and they are in close contact with each other in school and day care settings, which increases the likelihood of disease spread;
  - Young adults 19 through 24 years of age because we have seen many cases of novel H1N1 influenza in these healthy young adults and they often live, work, and study in close proximity, and they are a frequently mobile population; and,
  - Persons aged 25 through 64 years who have health conditions associated with higher risk of medical complications from influenza.

### **Campus Community Mitigation**

Community mitigation includes such measures as social distancing (e.g., cancelling events with large crowds, school and daycare closures, etc.) and targeted use of antiviral medications. Isolation and treatment are all effective measures in preventing the spread of influenza. Isolation refers to the separation of persons who have a specific infectious illness from those who are healthy by restricting movement and interaction to stop or minimize the spread of that particular illness.

- EMU has installed hand sanitizer along with informational signage at high traffic/contact locations including the student center, computing centers, Halle Library and other locations.
- A Web site listing action steps for preventing the spread of the flu and an FAQs page providing current information and updates. The site can be accessed at <http://www.emich.edu/uhs/swineflu/>
- **CDC recommends that individuals with influenza-like illness remain at home and away from other people until at least 24 hours after they are free of fever (100° F [37.8° C] or greater), or signs of a fever, without the use of fever-reducing medications.**

### **Communications**

Guidance to the campus community about how to protect themselves is an essential component of influenza prevention. When health risks are uncertain, people need information about what is known and unknown, as well as interim guidance to formulate decisions to help protect their health and the health of others.

- EMU is preparing the campus community for the H1N1 influenza pandemic by developing messages and materials to promote preparedness and prevention. The university is employing public outreach efforts to the campus community through its website, EMU Hotline, informational letters and posters, public outreach to various groups on campus, and by sharing information with the media.
- September 3<sup>rd</sup> press release on EMU H1N1 preparations and interviews with local radio and television outlets.
- September 4<sup>th</sup> letter from Provost to faculty on H1N1 prevention & preparedness.

### **World Health Organization (WHO)**

**World Health Organization** <http://www.who.int/en/>

*On June 11, the World Health Organization raised the pandemic alert level from Phase 5 to Phase 6 indicating that an influenza pandemic is underway. The novel influenza A (H1N1) virus now will be referred to as "2009 influenza A (H1N1) virus."*

As of September 18<sup>th</sup>, influenza activity remains widely variable. In North America, the United States is reporting increases in influenza-like-illness activity above the seasonal baseline, most notably in the southern, southeastern, and parts of the northeastern United States. Pandemic (H1N1) influenza virus continues to be the predominant circulating influenza virus, both in the northern and southern hemisphere.

**Pandemia (H1N1) 2009: Interactive Map:** <http://new.paho.org/hq/images/atlas/en/atlas.html>

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**CDC**

**CDC U.S. Human Swine Influenza Infection website:** <http://www.cdc.gov/swineflu/investigation.htm>

**CDC Guidance:** <http://www.cdc.gov/swineflu/guidance/>

Note: The United States changed its surveillance system this week to include Pandemic (H1N1) 2009-related cases and deaths within the routine influenza surveillance. The US will no longer be publishing cases or deaths associated with the Pandemic (H1N1) 2009.

As of September 18<sup>th</sup>, the following influenza activity was reported:

- Widespread influenza activity was reported by Guam and 11 states (Alaska, Arizona, Florida, Georgia, Louisiana, Maryland, Mississippi, North Carolina, Oklahoma, South Carolina, and Tennessee).
- Regional influenza activity was reported by Puerto Rico and 13 states (Alabama, Arkansas, California, Illinois, Kentucky, Minnesota, Nebraska, Nevada, New Mexico, Ohio, Texas, Virginia, and Washington).
- Local influenza activity was reported by the District of Columbia and 10 states (Colorado, Hawaii, Iowa, Kansas, Maine, Massachusetts, Montana, New Jersey, Oregon, and Pennsylvania).
- Sporadic activity was reported by 14 states (Connecticut, Delaware, Idaho, Indiana, Michigan, Missouri, New York, North Dakota, South Dakota, Utah, Vermont, West Virginia, Wisconsin, and Wyoming).
- No influenza activity was reported by two states (New Hampshire and Rhode Island).
- The U.S. Virgin Islands did not report.

**Internet Resources**

**Washtenaw County H1N1 and Seasonal Influenza Information**

[http://www.ewashtenaw.org/government/departments/public\\_health/school\\_portal/H1N1%20Influenza](http://www.ewashtenaw.org/government/departments/public_health/school_portal/H1N1%20Influenza)

**Michigan Department of Community Health**

[www.michigan.gov/swineflu](http://www.michigan.gov/swineflu)

**Google Map H1N1 Flu Tracking (Colleges and Universities)**

<http://tinyurl.com/HigherEdH1N1Map-Sep09>

<http://tinyurl.com/HigherEdH1N1Map>

**U.S. Government Influenza information**

<http://flu.gov/psa/index.html>