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Weekly Report on Novel H1N1 Influenza (swine flu) as of June 25, 2009.

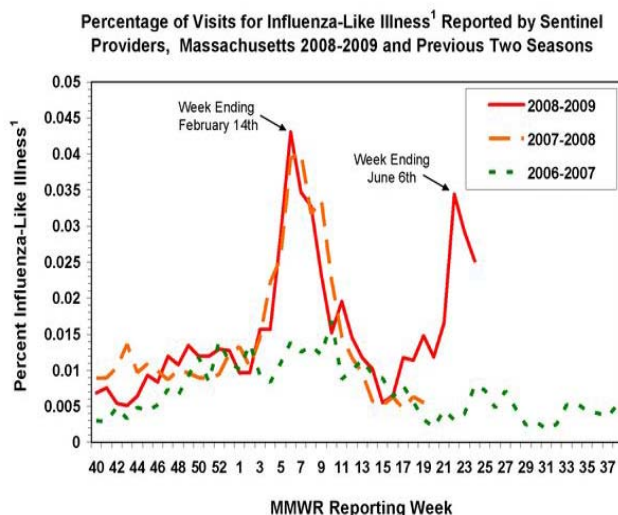
This Week's Developments:

Perhaps the biggest development of the week is that many schools in Massachusetts have completed the year and have let out for summer break. Given that school-aged children are disproportionately impacted by H1N1 flu, schools felt the brunt of this outbreak and did a very admirable job of managing its impact, while at the same time staying focused on the educational needs of their students.

Now that school has let out, the focus on prevention and limiting the spread of illness will shift to community settings, and places where school-age children will spend their time this summer. We continue to update guidance documents, [such as recommendations to camp professionals](#), to ensure that camps have all the information that they need to reduce the risk of illness in campers and staff. We do expect that there will be cases identified at camps and plan to work closely with them to minimize the spread of illness.

Update on Massachusetts:

For the first time since this outbreak began, we are seeing indications in our surveillance data that the number of people seeking care for influenza-like-illness is dropping in Massachusetts. The [CDC has reported that the New England Region](#) has returned to "normal" flu activity levels. However, in our state we continue to see person-to-person spread of the H1N1 flu virus, and the level of influenza activity is still higher than normal for this time of year.



¹Influenza-like illness (ILI, defined as fever >100°F and cough and/or sore throat), as reported by Massachusetts sentinel surveillance sites by CDC week date.

The chart above shows the percentage of visits for influenza-like-illness reported by health care providers in our flu surveillance network over the past 3 flu seasons. The dotted lines show activity during the previous 2 flu seasons, and the red line shows flu activity for this year. As you can see, the activity has dropped over the past two weeks, but is still much higher than normal.

Cases:

- There are now 1,287 confirmed cases of H1N1 flu in Massachusetts (14 more than our last update).
- There have been 134 people hospitalized since the outbreak began (35 more than our last update. Reports on hospitalizations appear to be lagging behind case reports for H1N1.)
- There has been 1 reported death since the outbreak began.

Age breakdown on confirmed cases:

0-4	195
5-24	741
25-64	337
65+	13
Unknown	1

The median age of confirmed cases is 14 years-old, and 64% of confirmed cases are 18 years-old or younger.

Flu outbreaks evolve in unpredictable ways; Some severe cases, including additional deaths, may occur during this outbreak. Risk of complications are especially high in people with underlying risk factors (see list below).

Guidance for the Public:

Preventing the Flu: Because there is no vaccine for [H1N1 influenza](#), public health officials remind all Massachusetts residents to continue taking simple steps to keep themselves and others healthy.

- Wash your hands frequently with soap and warm water or use an alcohol-based hand sanitizer.
- Cover your cough with a tissue or cough into your inner elbow and not into your hands.
- If you are sick stay home from work and if your child is sick keep them home from school for 7 days, or 24 hours after your symptoms go away—whichever is longer.
- Stay informed about the latest developments on the H1N1 flu.

Treating the Flu: Most people that get the H1N1 flu do not need to be tested or seen by a doctor. They can simply stay home, get plenty of rest, and take over-the-counter medication for their fever, aches and pains. Although the H1N1 flu doesn't seem to be more severe than the seasonal flu, certain groups of people may be at greater risk for complications from any flu – whether seasonal or H1N1.

Anyone in the groups listed below who has a fever, along with a cough, sore throat or runny nose, should contact their doctor to talk with them about treatment with antivirals. Antivirals work best if they are taken within 2 days of when symptoms start, so even people with mild illness should call their doctor right away if they have any of these conditions.

- Children less than 2 years old

- People age 65 years or older
- Pregnant women
- People who have chronic health problems like heart disease, asthma or diabetes
- Children and teens who are on long-term aspirin therapy who might be at risk for experiencing Reye's syndrome after influenza virus infection
- Adults and children who have compromised immune systems caused by medications or by HIV infection