



Content on this page was developed during the 2009-2010 H1N1 pandemic and *has not been updated*.

- The H1N1 virus that caused that pandemic is now a regular human flu virus and continues to circulate seasonally worldwide.
- The English language content on this website is being archived for *historic and reference purposes only*.
- For current, updated information on seasonal flu, including information about H1N1, see the [CDC Seasonal Flu website](#).

Weekly Influenza Activity Estimates, Including Novel H1N1

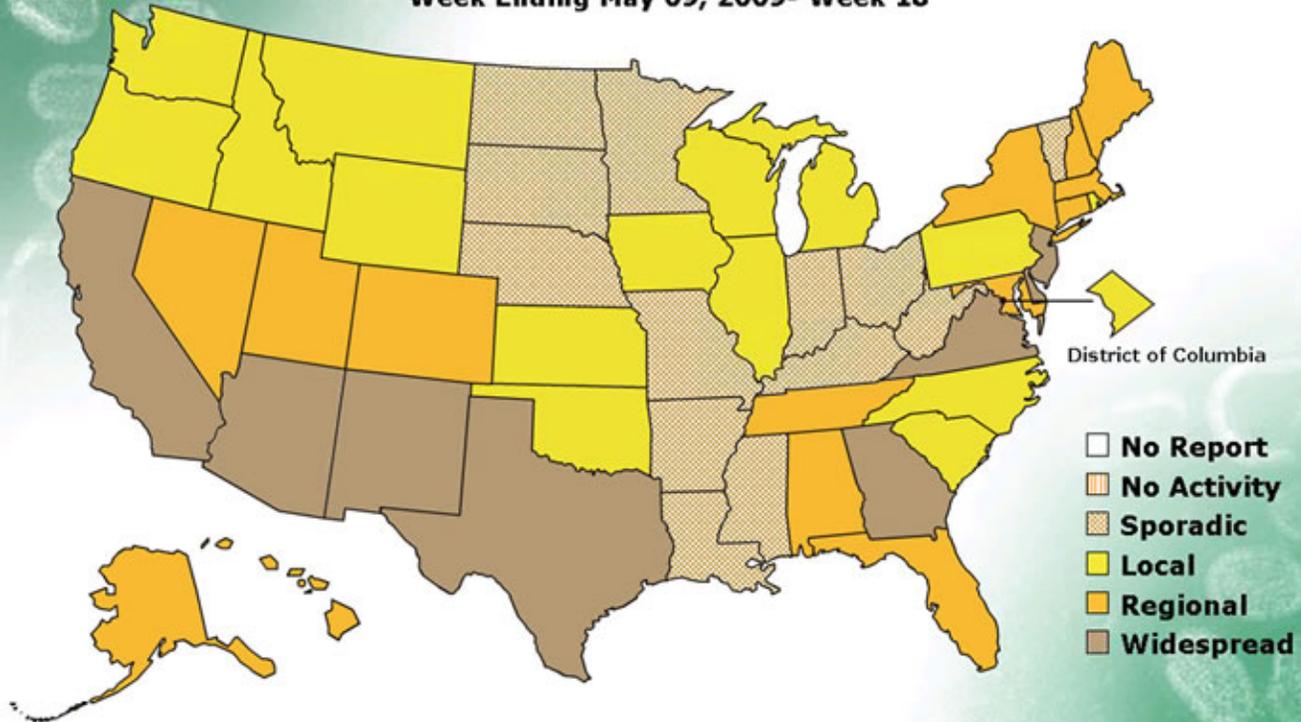
May 15, 2009, 11:00 AM ET

FLUVIEW



A Weekly Influenza Surveillance Report Prepared by the Influenza Division
Weekly Influenza Activity Estimates Reported by State and Territorial Epidemiologists*

Week Ending May 09, 2009- Week 18



*This map indicates geographic spread and does not measure the severity of influenza activity.

For more details about the data in the map above, see the [FluView Surveillance Report](#) for the week ending May 9, 2009.

A New Influenza Virus

Novel influenza A (H1N1) is a new flu virus of swine origin that was first detected in April, 2009. The virus is infecting people and is spreading from person-to-person, sparking a growing outbreak of illness in the United States. An increasing number of cases are being reported internationally as well.

It's thought that novel influenza A (H1N1) flu spreads in the same way that regular seasonal influenza viruses spread; mainly through the coughs and sneezes of people who are sick with the virus.

It's uncertain at this time how severe this novel H1N1 outbreak will be in terms of illness and

U.S. Human Cases of H1N1 Flu Infection

(As of May 15, 2009, 11:00 AM ET)

States*	Confirmed and Probable Cases	Deaths
Alabama	55	
Arizona	435	1
Arkansas	2	
California	504	

death compared with other influenza viruses. Because this is a new virus, most people will not have immunity to it, and illness may be more severe and widespread as a result. In addition, currently there is no vaccine to protect against this novel H1N1 virus. CDC anticipates that there will be more cases, more hospitalizations and more deaths associated with this new virus in the coming days and weeks.

Novel influenza A (H1N1) activity is now being detected through CDC's [routine influenza surveillance systems](#) and reported weekly in FluView. CDC tracks U.S. influenza activity through multiple systems across five categories. The fact that novel H1N1 activity can now be monitored through seasonal surveillance systems is an indication that there are higher levels of influenza-like illness in the United States than is normal for this time of year. About half of all influenza viruses being detected are novel H1N1 viruses.

CDC Response

CDC continues to take aggressive action to respond to the outbreak. CDC's response goals are to reduce the spread and severity of illness, and to provide information to help health care providers, public health officials and the public address the challenges posed by this new public health threat.

CDC is issuing updated [interim guidance](#) daily in response to the rapidly evolving situation.

Clinician Guidance

CDC has issued interim guidance for clinicians on [identifying and caring for patients](#) with novel H1N1, in addition to providing interim [guidance on the use of antiviral drugs](#). Influenza antiviral drugs are prescription medicines (pills, liquid or an inhaler) with activity against influenza viruses, including novel influenza H1N1 viruses. The priority use for influenza antiviral drugs during this outbreak is to treat severe influenza illness, including people who are hospitalized or sick people who are considered at high risk of serious influenza-related complications.

Public Guidance

In addition, CDC has provided guidance for the public on [what to do if they become sick with flu-like symptoms](#), including infection with novel H1N1. CDC also has issued instructions on [taking care of a sick person at home](#). Novel H1N1 infection has been reported to cause a wide range of symptoms, including fever, cough, sore throat, body aches, headache, chills and fatigue. In addition, a significant number of people also have reported nausea, vomiting or diarrhea. Everyone should take everyday preventive actions to stop the spread of germs, including frequent hand washing and people who are sick should stay home and avoid contact with others in order to limit further spread of the disease.

Testing

CDC has developed a PCR diagnostic test kit to detect this novel H1N1 virus and has now distributed test kits to all states in the U.S. and the District of Columbia and Puerto Rico. The test kits are being shipped internationally as well. This will allow states and other countries to test for this new virus. This increase in testing will likely result in an increase in the number of confirmed cases of illness reported. This, combined with ongoing monitoring through Flu View should provide a fuller picture of the burden of disease in the United States over time.

See also the [FluView Surveillance Report](#) for the week ending May 9, 2009.

More on the Situation

- [Guidance](#)
- [Reports & Publications](#)
- [Press Briefings](#)
- [Past Updates on the Situation](#)

Colorado	55	
Connecticut	47	
Delaware	60	
Florida	68	
Georgia	18	
Hawaii	10	
Idaho	5	
Illinois	638	
Indiana	71	
Iowa	66	
Kansas	30	
Kentucky**	13	
Louisiana	57	
Maine	14	
Maryland	28	
Massachusetts	135	
Michigan	142	
Minnesota	36	
Missouri	19	
Montana	4	
Nebraska	27	
Nevada	26	
New Hampshire	18	
New Jersey	14	
New Mexico	68	
New York	242	
North Carolina	12	
North Dakota	2	
Ohio	14	
Oklahoma	26	
Oregon	94	
Pennsylvania	47	
Rhode Island	8	
South Carolina	36	
South Dakota	4	
Tennessee	74	
Texas	506	2
Utah	91	
Vermont	1	
Virginia	21	
Washington	246	1
Washington, D.C.	12	
Wisconsin	613	
TOTAL*(47)	4,714 cases	4 deaths

*includes the District of Columbia

**one case is resident of KY but currently hospitalized in GA.

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This table will be updated daily Monday-Friday at around 11 AM ET.

International Human Cases of Swine Flu Infection

See: [World Health Organization](#)

NOTE: Because of daily reporting deadlines, the state totals reported by CDC may not always be consistent with those reported by state health departments. If there is a discrepancy between these two counts, data from the state health departments should be used as the most accurate number.

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Page last reviewed: May 15, 2009, 11:00 AM ET

Page last updated: May 15, 2009, 11:00 AM ET

Content source: [Centers for Disease Control and Prevention](#)

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