

RESPIRATORY WATCH

Weeks 42 (October 15 to October 21, 2017)*

IN SUMMARY...

Ac	tivity levels**						
•	No activity in all Zones this week.						
La	boratory-confirmed cases***						
•	There were no influenza cases reported during week 42. There have been 2 laboratory confirmed cases of Influenza A reported during the 2017-2018 influenza season.						
•	Positive test results were received for mycoplasma pneumoniae and rhinovirus.						
Se	verity						
•	There have been no ICU admissions and no influenza deaths*** of laboratory confirmed influenza during the 2017-2018 influenza season.						
Sy	ndromic surveillance						
•	The average ILI rate for Nova Scotia during this reporting period was 0.6. 95% of emergency rooms reported ILI data during this reporting period. St Anne Hospital and Victoria County Memorial Hospital did not report this week.						

Notes: *Reporting weeks run from Sunday to Saturday. The 2017-2018 influenza season is defined using PHAC's influenza surveillance weeks. This year runs from August 27, 2017 (Week 35) to August 25, 2018 (Week 34);

**Activity level data is obtained from CNPHI, see appendix for definitions;

***Deaths include individuals with a positive influenza test result, influenza may not have been the major contributing cause of death or hospitalization.

LABORATORY-CONFIRMED INFLUENZA CASES

Figure 1: Number of laboratory confirmed influenza cases by report week, 2017-2018 season, with trend-line comparison to 2016-2017 season, Nova Scotia.

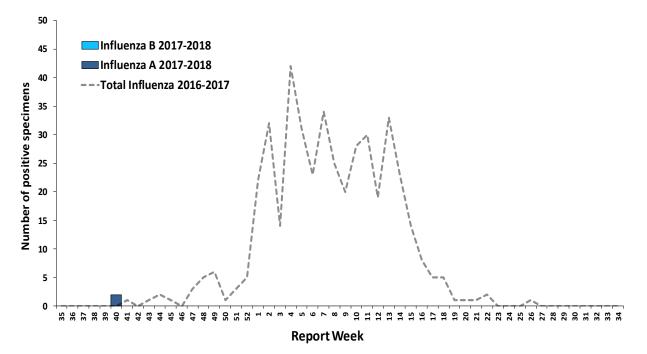


Table 1: Number of laboratory-confirmed influenza cases by zone, current week and cumulative 2017-2018 season in Nova Scotia.

ZONE	CURRENT WEEK			CUMULATIVE 2017-2018		
ZONE	TOTAL	INFLUENZA A	INFLUENZA B	TOTAL	INFLUENZA A	INFLUENZA B
Western	0	0	0	0	0	0
Northern	0	0	0	0	0	0
Eastern	0	0	0	0	0	0
Central	0	0	0	2	2	0
Nova Scotia Total	0	0	0	2	2	0

 Table 2: Number of laboratory-confirmed influenza cases by age group, current week and cumulative 2017-2018 season in Nova Scotia.

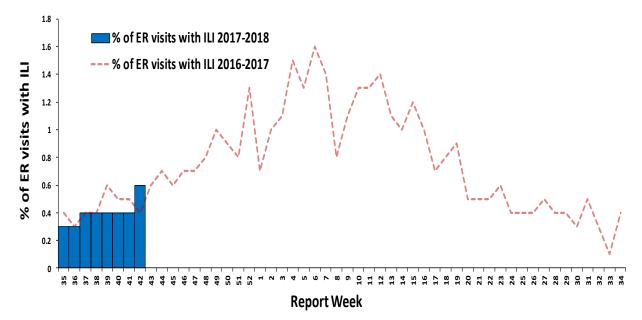
AGE	CURRENT WEEK			CUMULATIVE 2017-2018		
	TOTAL	INFLUENZA A	INFLUENZA B	TOTAL	INFLUENZA A	INFLUENZA B
0-4	0	0	0	0	0	0
5-19	0	0	0	0	0	0
20-44	0	0	0	0	0	0
45-64	0	0	0	1	1	0
65+	0	0	0	1	1	0
Nova Scotia Total	0	0	0	2	2	0

Table 3: Hospitalizations, ICU admissions and deaths for influenza positive patients, current week and cumulative, 2017-2018 season, Nova Scotia.

	CURRENT WEEK			CUMULATIVE 2017-2018		
	TOTAL	INFLUENZA A	INFLUENZA B	TOTAL	INFLUENZA A	INFLUENZA B
Hospitalized	0	0	0	2	2	0
Hospitalized - ICU	0	0	0	0	0	0
Deceased*	0	0	0	0	0	0
Nova Scotia Total	0	0	0	2	2	0

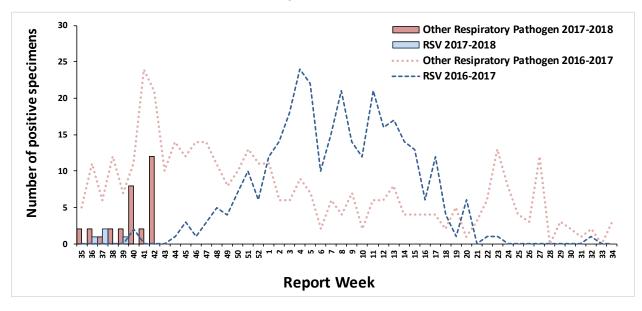
SYNDROMIC SURVEILLANCE

Figure 2: Percentage of emergency room visits due to ILI by report week, 2017-2018 season, with trend-line comparison to 2016-2017 season, Nova Scotia.



OTHER RESPIRATORY PATHOGENS

Figure 3: Number of positive specimens tested for other respiratory pathogens* and RSV by report week, 2017-2018 season, with trend-line comparison to 2016-2017 season, Nova Scotia.



* Other respiratory pathogen includes Adenovirus, Bocavirus, Chlamydophila pneumonia, Coronovirus, Enterovirus, Metapneumovirus, Mycoplasma pneumoniae, Parainfluenza, Pertussis, Rhinovirus. Note that data for this figure is obtained from provincial laboratories.

AGE GROUP	2017-2018
0-5 months	1
6-11 months	0
12-23 months	2
2-5 years	0
6-15 years	1
16-65 years	0
65+ years	0
Nova Scotia Total	4

Table 4: Number of positive RSV specimens by age group, 2017-2018 season, Nova Scotia.

Table 5: Number of positive specimens tested for other respiratory pathogens, current report week and cumulative season, Nova Scotia, 2017–2018.

PATHOGEN	CURRENT WEEK (n positive)	CUMULATIVE 2017-2018
Adenovirus	0	1
Bocavirus	0	1
Chlamydophila pneumoniae	0	1
Coronavirus	0	0
Enterovirus	0	0
Metapneumovirus	0	0
Mycoplasma pneumoniae	4	5
Parainfluenza	0	0
Pertussis	0	1
Respiratory Syncytial Virus	0	4
Rhinovirus	8	22

APPENDIX: DEFINITIONS USED IN INFLUENZA SURVEILLANCE, AND USEFUL LINKS, 2017-2018

ACRONYM LIST

CNPHI Canadian Network for Public Health Intelligence

- ICU Intensive care unit
- ILI Influenza-like illness
- **RSV** Respiratory syncytial virus

ILI CASE DEFINITION

Acute onset of respiratory illness with fever and cough and with one or more of the following – sore throat, arthralgia, myalgia or prostration which is likely due to influenza. In children under 5, gastrointestinal symptoms may also be present. In patients under 5 or 65 and older, fever may not be prominent.

NATIONAL FLUWATCH DEFINITIONS FOR INFLUENZA ACTIVITY LEVELS

No activity	No laboratory-confirmed influenza detections in the reporting week, however,					
	sporadically occurring ILI* may be reported					
Sporadic	Sporadically occurring ILI* and lab confirmed influenza detection(s) with no					
	outbreaks detected within the influenza surveillance region					
Localized	(1) Evidence of increased ILI* and					
	(2) lab confirmed influenza detection(s) together with					
	(3) outbreaks occurring in schools, hospitals, residential institutions and/or					
	other types of facilities occurring in less than 50% of the influenza					
	surveillance region					
Widespread	(1) Evidence of increased ILI* and					
	(2) lab confirmed influenza detection(s) together with					
	(3) outbreaks occurring in schools, hospitals, residential institutions and/or					
	other types of facilities occurring in greater than or equal to 50% of the					
	influenza surveillance region					

LINKS TO OTHER WEEKLY INFLUENZA REPORTING BODIES

Canada: <u>http://www.phac-aspc.gc.ca/fluwatch/</u> World:<u>https://www.who.int/influenza/surveillance_monitoring/updates/latest_update_GIP_surveillance_e/en/index.html</u> US: www.cdc.gov/flu/weekly