

# **RESPIRATORY WATCH**

Weeks 50 (December 10 to December 16, 2017)\*

# IN SUMMARY...

# Activity levels\*\*

- Zones 1 & 4 are reporting localized activity. Zone 3 is reporting sporadic activity. Zone 2 is reporting no activity this week.
- There have been 2 influenza outbreaks reported this week.

# Laboratory-confirmed cases\*\*\*

- There were 8 influenza A cases reported this week. There have been 18 laboratory confirmed cases
  of Influenza A and 1 laboratory confirmed case of influenza B reported during the 2017-2018
  influenza season.
- Positive test results were received for parainfluenza, rhinovirus and RSV.

# Severity

• There have been no ICU admissions and no influenza deaths\*\*\* of laboratory confirmed influenza during the 2017-2018 influenza season.

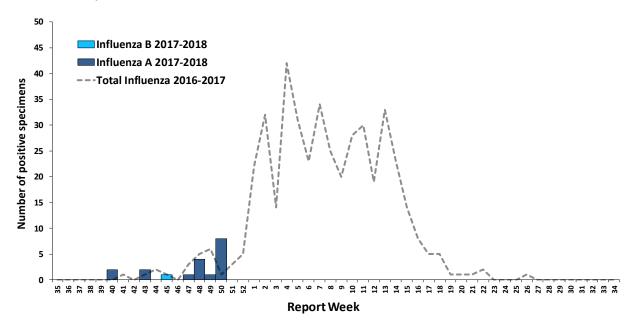
### Syndromic surveillance

- The average ILI rate for Nova Scotia during this reporting period was 0.6.
- **100**% of emergency rooms reported ILI data during this reporting period.

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);

#### **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



<sup>\*\*</sup>Activity level data is obtained from CNPHI, see appendix for definitions;

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

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	3	3	0	4	4	0
Northern	0	0	0	1	1	0
Eastern	1	1	0	7	6	1
Central	4	4	0	7	7	0
Nova Scotia Total	8	8	0	19	18	1

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

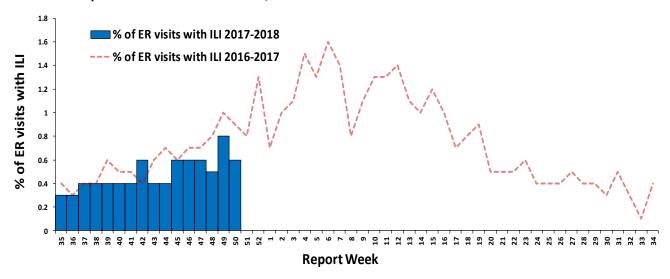
AGE T	CURRENT WEEK			CUMULATIVE 2017-2018		
	TOTAL	INFLUENZA A	INFLUENZA B	TOTAL	INFLUENZA A	INFLUENZA B
0-4	0	0	0	0	0	0
5-19	0	0	0	0	0	0
20-44	1	1	0	1	1	0
45-64	0	0	0	4	4	0
65+	7	7	0	14	13	1
Nova Scotia Total	8	8	0	19	18	1

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	1	1	0	10	9	1
Hospitalized - ICU	0	0	0	0	0	0
Deceased*	0	0	0	0	0	0
Nova Scotia Total	1	1	0	10	9	1

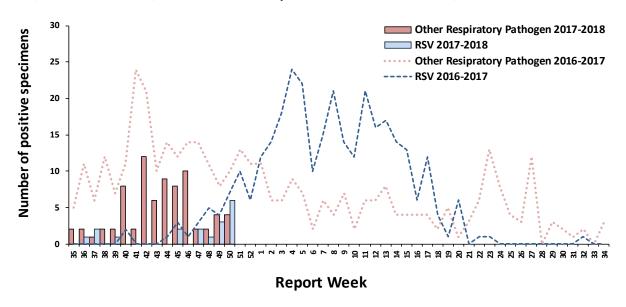
# **SYNDROMIC SURVEILLANCE**

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



<sup>\*</sup> 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.

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

AGE GROUP	2017-2018
0-5 months	4
6-11 months	2
12-23 months	5
2-5 years	5
6-15 years	2
16-65 years	0
65+ years	0
Nova Scotia Total	18

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	3
Bocavirus	0	1
Chlamydophila pneumoniae	0	1
Coronavirus	0	0
Enterovirus	0	1
Metapneumovirus	0	2
Mycoplasma pneumoniae	0	13
Parainfluenza	1	3
Pertussis	0	1
Respiratory Syncytial Virus	6	12
Rhinovirus	3	47

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

#### **ACRONYM LIST**

**CNPHI** Canadian Network for Public Health Intelligence

ICU Intensive care unitILI Influenza-like illnessRSV Respiratory syncytial virus

# **MANAGEMENT ZONES**

Zone 1 – Western

Zone 2 - Northern

Zone 3 - Eastern

Zone 4 - Central

#### **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 <b>no</b>		
	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: http://www.phac-aspc.gc.ca/fluwatch/

World: <a href="https://www.who.int/influenza/surveillance\_monitoring/updates/latest\_update\_GIP\_surveillance\_monitoring/updates/latest\_update\_GIP\_surveillance\_monitoring/updates/latest\_update\_GIP\_surveillance\_monitoring/updates/latest\_update\_GIP\_surveillance\_monitoring/updates/latest\_update\_GIP\_surveillance\_monitoring/updates/latest\_update\_GIP\_surveillance\_monitoring/updates/latest\_update\_GIP\_surveillance\_monitoring/updates/latest\_update\_GIP\_surveillance\_monitoring/updates/latest\_update\_GIP\_surveillance\_monitoring/updates/latest\_update\_GIP\_surveillance\_monitoring/updates/latest\_update\_GIP\_surveillance\_monitoring/updates/latest\_update\_GIP\_surveillance\_monitoring/updates/latest\_update\_GIP\_surveillance\_monitoring/updates/latest\_update\_GIP\_surveillance\_monitoring/updates/latest\_updates/lates\_updates/latest\_updates/latest\_updates/latest\_updates/latest\_updates/latest\_updates/latest\_updates/latest\_updates/latest\_updates/latest\_updates/latest\_updates/latest\_updates/latest\_updates/latest\_updates/latest\_updates/latest\_updates/lates\_updates/latest\_updates/latest\_updates/latest\_updates/latest\_updates/lates\_upda

e/en/index.html

US: www.cdc.gov/flu/weekly