

RESPIRATORY WATCH

Week 11 (March 11 to March 17, 2018)*

IN SUMMARY...

Activity levels**

- Eastern Zone is reporting localized activity. All other zones are reporting sporadic activity.
- There were 2 new influenza outbreaks reported for this week.

Laboratory-confirmed cases***

- There were 17 influenza A cases and 24 influenza B cases reported this week. There have been 402 laboratory confirmed cases of Influenza A and 206 laboratory confirmed cases of influenza B reported during the 2017-2018 influenza season.
- Positive test results were received for adenovirus, coronavirus, metapneumovirus and RSV.

Severity

• There have been 32 ICU admissions and 31 influenza deaths*** of laboratory confirmed influenza during the 2017-2018 influenza season.

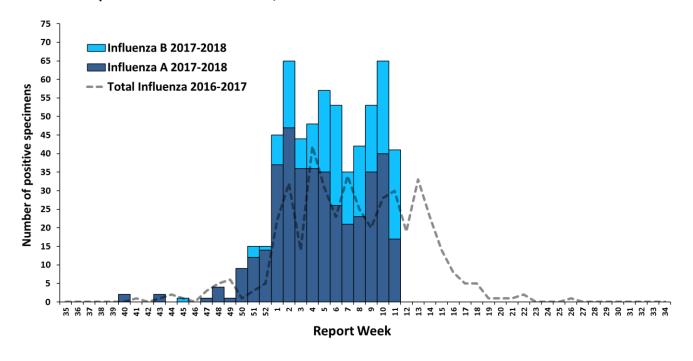
Syndromic surveillance

- The average ILI rate for Nova Scotia during this reporting period was 1.4.
- 97% 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



^{**}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.

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	119	89	30
Northern	10	0	10	55	18	37
Eastern	11	6	5	209	143	66
Central	17	8	9	225	152	73
Nova Scotia Total	41	17	24	608	402	206

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

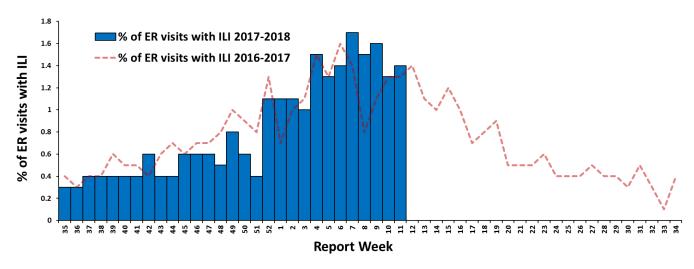
AGE	CURRENT WEEK			CUMULATIVE 2017-2018		
AGE	TOTAL	INFLUENZA A	INFLUENZA B	TOTAL	INFLUENZA A	INFLUENZA B
0-4	6	1	5	34	15	19
5-19	4	2	2	45	14	31
20-44	1	1	0	34	19	15
45-64	3	1	2	87	60	27
65+	27	12	15	408	294	114
Nova Scotia Total	41	17	24	608	402	206

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	16	9	7	343	247	96
Hospitalized - ICU	0	0	0	32	23	9
Deceased*	0	0	0	31	24	7
Nova Scotia Total	16	9	7	406	294	112

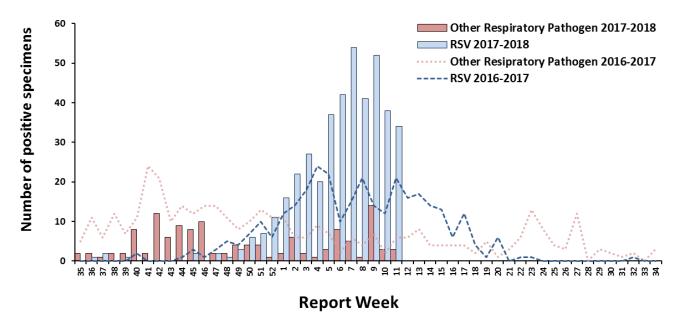
SYNDROMIC SURVEILLANCE

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.

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

AGE GROUP	2017-2018
0-5 months	106
6-11 months	24
12-23 months	45
2-5 years	31
6-15 years	5
16-65 years	57
65+ years	151
Nova Scotia Total	419

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

PATHOGEN	CURRENT WEEK	CUMULATIVE 2017-2018	
	(n positive)		
Adenovirus	1	6	
Bocavirus	0	4	
Chlamydophila pneumoniae	0	3	
Coronavirus	1	14	
Enterovirus	0	1	
Metapneumovirus	1	13	
Mycoplasma pneumoniae	0	19	
Parainfluenza	0	9	
Pertussis	0	1	
Respiratory Syncytial Virus	34	419	
Rhinovirus	0	59	

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 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: http://www.phac-aspc.gc.ca/fluwatch/

World: 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_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/latest_updates/lates_updates/latest_updates/lates_updates/latest_updates/latest_updates/lates_updates/lates_updates/lates_updates/lates_updates/late

e/en/index.html

US: www.cdc.gov/flu/weekly