

RESPIRATORY WATCH

Week 16 (April 15 to April 21, 2018)*

IN SUMMARY...

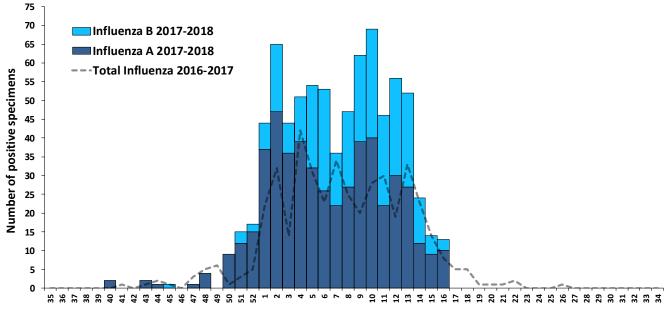
Activity levels**
 Central Zone is reporting localized activity. Eastern, Northern, and Western Zones have sporadic activity. There was 1 new influenza outbreak reported for this week.
Laboratory-confirmed cases***
 There were 10influenza A cases and 3 influenza B cases reported this week. There have been 501 laboratory confirmed cases of Influenza A and 281 laboratory confirmed cases of influenza B reported during the 2017-2018 influenza season. Positive test results were received for metapneumovirus, rhinovirus and RSV.
Severity
 There have been 50 ICU admissions and 56 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 0.9. 100% of emergency rooms reported ILI data during this reporting period.
tes: *Reporting weeks run from Sunday to Saturday. The 2017-2018 influenza season is defined using PHAC's influenza surveillance weeks. This year runs from gust 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



Report Week

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

ZONE		CURRENT WE	EK	CUMULATIVE 2017-2018		
ZONE	TOTAL	INFLUENZA A	INFLUENZA B	TOTAL	INFLUENZA A	INFLUENZA B
Western	2	2	0	154	103	51
Northern	1	0	1	70	23	47
Eastern	1	1	0	242	161	81
Central	9	7	2	316	214	102
Nova Scotia Total	13	10	3	782	501	281

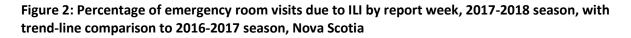
 Table 2: Number of laboratory-confirmed influenza cases by age group, current week and cumulative 2017-2018 season in Nova Scotia

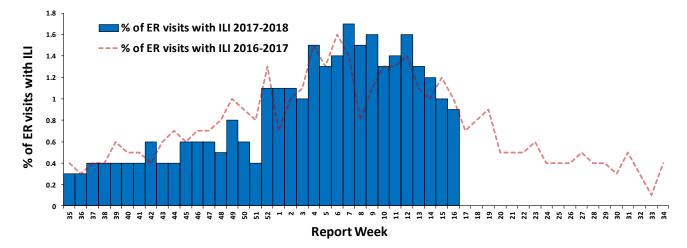
AGE		CURRENT WEEK		CUMULATIVE 2017-2018		
AGL	TOTAL	INFLUENZA A	INFLUENZA B	TOTAL	INFLUENZA A	INFLUENZA B
0-4	3	0	1	37	25	25
5-19	4	1	0	49	22	35
20-44	3	1	0	38	26	20
45-64	5	2	0	92	70	38
65+	26	6	2	442	358	163
Nova Scotia Total	13	10	3	782	501	281

 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	9	6	3	457	307	150
Hospitalized - ICU	0	0	0	50	32	18
Deceased*	0	0	0	56	40	16
Nova Scotia Total	9	6	3	563	379	184

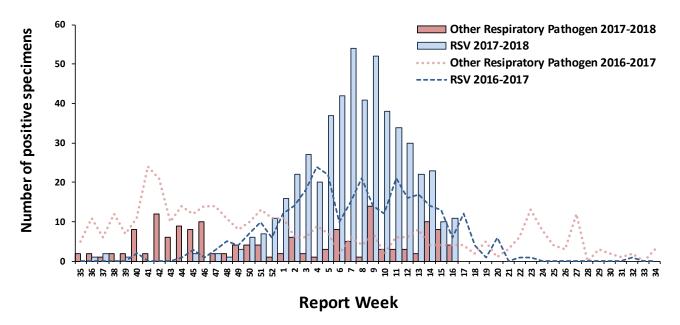
SYNDROMIC SURVEILLANCE





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	127
6-11 months	31
12-23 months	51
2-5 years	38
6-15 years	8
16-65 years	66
65+ years	195
Nova Scotia Total	516

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 reportweek and cumulative season, Nova Scotia, 2017–2018

Adenovirus	CURRENT WEEK (n positive)	CUMULATIVE 2017-2018
Adenovirus	0	7
Bocavirus	0	5
Chlamydophila pneumoniae	0	4
Coronavirus	0	16
Enterovirus	0	1
Metapneumovirus	2	23
Mycoplasma pneumoniae	0	20
Parainfluenza	0	9
Pertussis	0	1
Respiratory Syncytial Virus	11	516
Rhinovirus	2	70

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

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:<u>https://www.who.int/influenza/surveillance_monitoring/updates/latest_update_GIP_surveillance_e/en/index.html</u>

US: <u>www.cdc.gov/flu/weekly</u>