

RESPIRATORY WATCH

Weeks 43 (October 21 to October 27, 2018)*

IN SUMMARY...

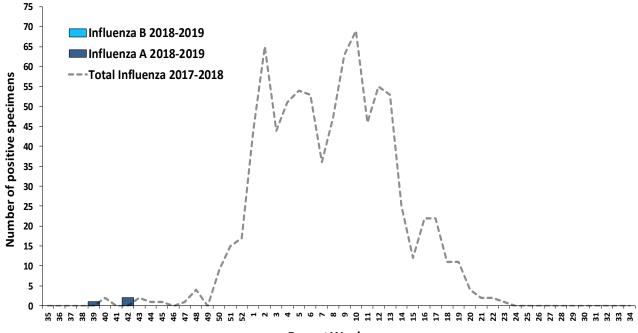
Activity levels**				
٠	No activity in all zones.			
Laboratory-confirmed cases***				
•	There were 0 influenza cases reported this week. There have been 3 laboratory confirmed cases of Influenza A and 0 laboratory confirmed cases of Influenza B reported during the 2018-2019 influenza season. Positive test results were received for mycoplasma pneumoniae and rhinovirus.			
Severity				
•	There has been 1 ICU admission and no influenza deaths*** of laboratory confirmed influenza during the 2018-2019 influenza season.			
Syndromic surveillance				
•	The average ILI rate for Nova Scotia during this reporting period was 0.5. 97.5% of emergency rooms reported ILI data during this reporting period. St. Anne Community and Nursing Care Centre did not report this week.			

August 26, 2018 (Week 35) to August 28, 2019 (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, 2018-2019 season, with trend-line comparison to 2017-2018 season, Nova Scotia



Report Week

 Table 1: Number of laboratory-confirmed influenza cases by zone, current week and cumulative 2018-2019

 season in Nova Scotia

ZONE		CURRENT WEEK			CUMULATIVE 2018-2019		
ZONE	TOTAL	INFLUENZA A	INFLUENZA B	TOTAL	INFLUENZA A	INFLUENZA B	
Western	0	0	0	0	0	0	
Northern	0	0	0	1	1	0	
Eastern	0	0	0	0	0	0	
Central	0	0	0	2	2	0	
Nova Scotia Total	0	0	0	3	3	0	

 Table 2: Number of laboratory-confirmed influenza cases by age group, current week and cumulative 2018-2019 season in Nova Scotia

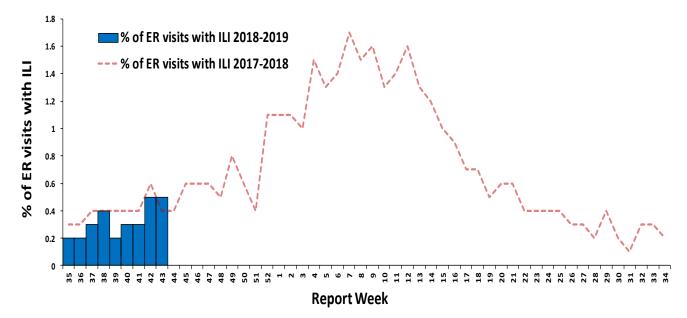
AGE	CURRENT WEEK			CUI	CUMULATIVE 2018-2019 TOTAL INFLUENZA A INFLUENZA B		
AGL	TOTAL	INFLUENZA A	INFLUENZA B	TOTAL	INFLUENZA A	INFLUENZA B	
0-4	0	0	0	0	0	0	
5-19	0	0	0	0	0	0	
20-44	0	0	0	2	2	0	
45-64	0	0	0	0	0	0	
65+	0	0	0	1	1	0	
Nova Scotia Total	0	0	0	3	3	0	

Table 3: Hospitalizations, ICU admissions and deaths for influenza positive patients, current week and cumulative, 2018-2019 season, Nova Scotia

	CURRENT WEEK			CUMULATIVE 2018-2019		
TOTAL		INFLUENZA A	INFLUENZA B	TOTAL	INFLUENZA A	INFLUENZA B
Hospitalized	0	0	0	2	2	0
Hospitalized - ICU	0	0	0	1	1	0
Deceased*	0	0	0	0	0	0
Nova Scotia Total	0	0	0	3	3	0

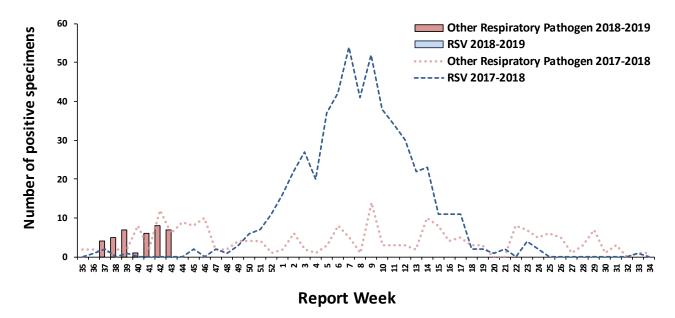
SYNDROMIC SURVEILLANCE

Figure 2: Percentage of emergency room visits due to ILI by report week, 2018-2019 season, with trend-line comparison to 2017-2018 season, Nova Scotia



OTHER RESPIRATORY PATHOGENS

Figure 3: Number of positive specimens tested for other respiratory pathogens* and RSV by report week, 2018-2019 season, with trend-line comparison to 2017-2018 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	2018-2019
0-5 months	0
6-11 months	0
12-23 months	0
2-5 years	0
6-15 years	0
16-65 years	0
65+ years	0
Nova Scotia Total	0

Table 4: Number of positive RSV specimens by age group, 2018-2019 season, Nova Scotia

Table 5: Number of positive specimens tested for other respiratory pathogens, current reportweek and cumulative season, Nova Scotia, 2018–2019

Adenovirus	CURRENT WEEK (n positive)	CUMULATIVE 2018-2019
Adenovirus	0	0
Bocavirus	0	0
Chlamydophila pneumoniae	0	0
Coronavirus	0	0
Enterovirus	0	0
Metapneumovirus	0	1
Mycoplasma pneumoniae	1	4
Parainfluenza	0	1
Pertussis	0	3
Respiratory Syncytial Virus	0	0
Rhinovirus	6	29

APPENDIX: DEFINITIONS USED IN INFLUENZA SURVEILLANCE, AND USEFUL LINKS, 2018-2019

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_surveillanc</u> <u>e/en/index.html</u> US: <u>www.cdc.gov/flu/weekly</u>