

# RESPIRATORY WATCH

Week 11 (March 10, 2019 to March 16, 2019)\*

# IN SUMMARY...

# Activity levels\*\*

- All Zones have localized activity.
- There are 5 influenza outbreaks being reported this week and one school reported an increased absenteeism rate.

## Laboratory-confirmed cases\*\*\*

- There were 42 influenza A and 0 influenza B cases reported this week. There have been 520 laboratory confirmed cases of Influenza A and 7 laboratory confirmed cases of Influenza B reported during the 2018-2019 influenza season.
- Positive test results were received for Chlamydophila pneumoniae, Coronavirus, Metapneumovirus, and RSV.

#### Severity

• There have been 51 ICU admissions in adults and 5 ICU admission in children (age group 0-19 years). There have been 27 deaths\*\*\* of laboratory confirmed influenza during the 2018-2019 influenza season. All deaths have been in adults.

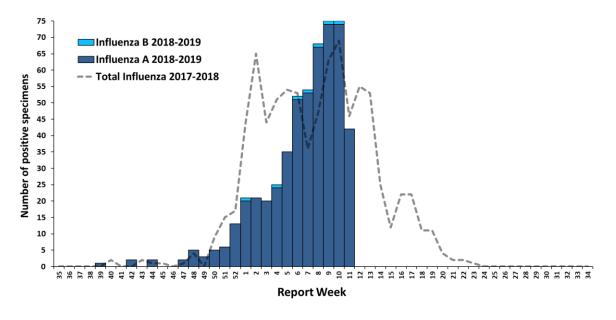
## Syndromic surveillance

- The average ILI rate for Nova Scotia during this reporting period was 1.4.
- 97.5% of emergency rooms reported ILI data during this reporting period. Victoria County Memorial Hospital did not report this week.

Notes: \*Reporting weeks run from Sunday to Saturday. The 2018-2019 influenza season is defined using PHAC's influenza surveillance weeks. This year runs from August 26, 2018 (Week 35) to August 28, 2019 (Week 34);

#### **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



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

<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 2018-2019 season in Nova Scotia

ZONE	CURRENT WEEK			CUMULATIVE 2018-2019		
ZONE	TOTAL	INFLUENZA A	INFLUENZA B	TOTAL	INFLUENZA A	INFLUENZA B
Western	9	9	0	97	97	0
Northern	8	8	0	89	89	0
Eastern	5	5	0	94	93	1
Central	20	20	0	247	241	6
Nova Scotia Total	42	42	0	527	520	7

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

AGE TOTA	CURRENT WEEK			CUMULATIVE 2018-2019		
	TOTAL	INFLUENZA A	INFLUENZA B	TOTAL	INFLUENZA A	INFLUENZA B
0-4	8	8	0	53	53	0
5-19	7	7	0	53	53	0
20-44	3	3	0	78	76	2
45-64	11	11	0	143	142	1
65+	13	13	0	200	196	4
Nova Scotia Total	42	42	0	527	520	7

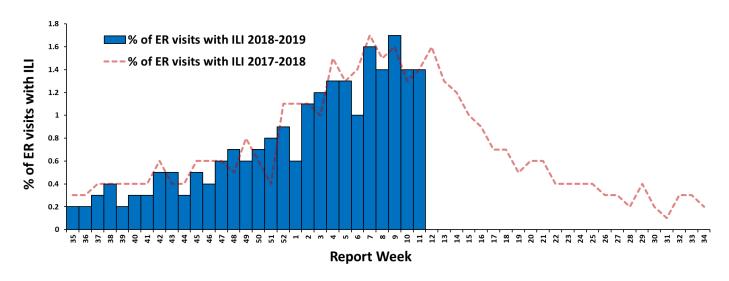
Table 3: Hospitalizations, ICU admissions and deaths for influenza positive patients, current week and cumulative, 2018-2019 season, Nova Scotia

	CURRENT WEEK			CUMULATIVE 2018-2019		
	TOTAL	INFLUENZA A	INFLUENZA B	TOTAL	INFLUENZA A	INFLUENZA B
Hospitalized	18	18	0	252	249	3
Hospitalized - ICU	5	5	0	56	56	0
Deceased*	2	2	0	28	27	1
Nova Scotia Total	25	25	0	336	332	4

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

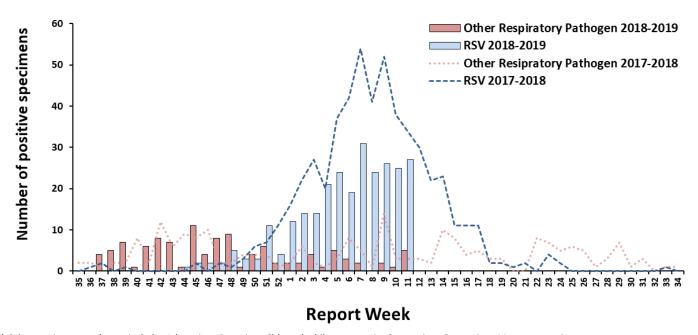
## **SYNDROMIC SURVEILLANCE**

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



<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, 2018-2019 season, Nova Scotia

AGE GROUP	2018-2019
0-5 months	72
6-11 months	23
12-23 months	38
2-5 years	42
6-15 years	9
16-65 years	28
65+ years	58
Nova Scotia Total	270

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

Pathogen	CURRENT WEEK (n positive)	<b>CUMULATIVE 2018-2019</b>
Adenovirus	0	0
Bocavirus	0	0
Chlamydophila pneumoniae	1	4
Coronavirus	3	9
Enterovirus	0	0
Metapneumovirus	1	5
Mycoplasma pneumoniae	0	16
Parainfluenza	0	16
Pertussis	0	3
Respiratory Syncytial Virus	27	270
Rhinovirus	0	58

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

#### **ACRONYM LIST**

**CNPHI** Canadian Network for Public Health Intelligence

ICU Intensive care unitILI Influenza-like illnessRSV 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 <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: <a href="http://www.phac-aspc.gc.ca/fluw">http://www.phac-aspc.gc.ca/fluw</a>atch/

World: https://www.who.int/influenza/surveillance\_monitoring/updates/latest\_update\_GIP\_surveillance\_monitoring/updates/latest\_updates/lates/latest\_updates/latest\_updates/latest\_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/latest\_updates/latest\_updates/latest\_updates/latest\_updates/lates\_updates/latest\_updates/latest\_updates/lates\_updates/lates\_up

e/en/index.html

US: www.cdc.gov/flu/weekly