

RESPIRATORY WATCH

Week 4 (January 20, 2019 to January 26, 2019)*

IN SUMMARY...

Activity levels**
• All 4 Zones have localized activity. There are no influenza outbreaks being reported this week, and several schools have reported increased absenteeism rates.
Laboratory-confirmed cases***
 There were 21 influenza A and 1 influenza B cases reported this week. There have been 117 laboratory confirmed cases of Influenza A and 2 laboratory confirmed cases of Influenza B reported during the 2018-2019 influenza season. Positive test results were received for rhinovirus and RSV.
 There have been 14 ICU admissions in adults and 1 ICU admission in children (age group 0-19 years). There have been 4 influenza death*** of laboratory confirmed influenza during the 2018-2019 influenza season.
Syndromic surveillance
 The average ILI rate for Nova Scotia during this reporting period was 1.3. 100% of emergency rooms reported ILI data during this reporting period.

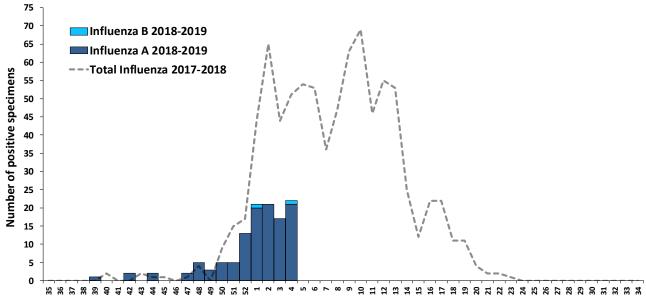
Notes: *Reporting weeks run from Sunday to Saturday. The 2018-2019 influenza season is defined using PHAC's influenza surveillance weeks. This year runs from August 26, 2018 (Week 35) to August 28, 2019 (Week 34);

**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	9	9	0	19	19	0
Northern	1	1	0	11	11	0
Eastern	3	3	0	36	36	0
Central	0	8	1	53	51	2
Nova Scotia Total	22	21	1	119	117	2

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

AGE		CURRENT WE	EK	CUMULATIVE 2018-2019		
AGL	TOTAL	INFLUENZA A	INFLUENZA B	TOTAL	INFLUENZA A	INFLUENZA B
0-4	6	6	0	15	15	0
5-19	0	0	0	5	5	0
20-44	6	6	0	25	25	0
45-64	6	5	1	35	34	1
65+	4	4	0	39	38	1
Nova Scotia Total	22	21	1	119	117	2

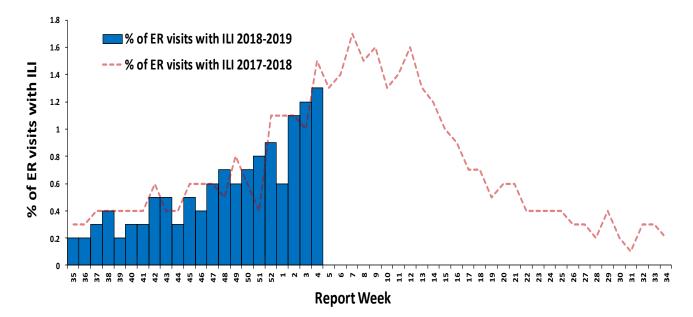
Table 3: Hospitalizations, ICU admissions and deaths for influenza positive patients, current week and cumulative, 2018-2019 season, Nova Scotia

	CURRENT WEEK			CUMULATIVE 2018-2019		
	TOTAL	INFLUENZA A	INFLUENZA B	TOTAL	INFLUENZA A	INFLUENZA B
Hospitalized	12	11	1	57	56	1
Hospitalized - ICU	1	1	0	15	15	0
Deceased*	0	0	0	4	3	1
Nova Scotia Total	13	12	1	76	74	2

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

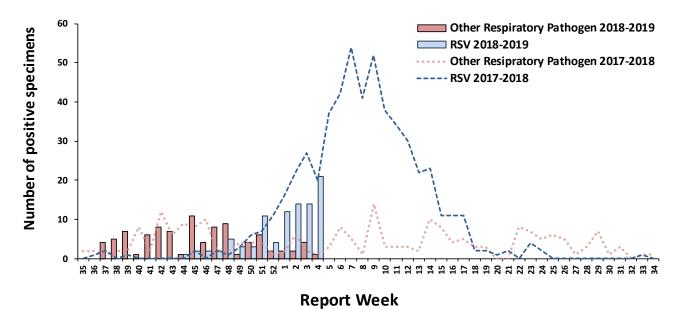
SYNDROMIC SURVEILLANCE

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



* 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	23
6-11 months	3
12-23 months	11
2-5 years	14
6-15 years	1
16-65 years	10
65+ years	32
Nova Scotia Total	94

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

Pathogen	CURRENT WEEK (n positive)	CUMULATIVE 2018-2019
Adenovirus	0	0
Bocavirus	0	0
Chlamydophila pneumoniae	0	2
Coronavirus	0	3
Enterovirus	0	0
Metapneumovirus	0	3
Mycoplasma pneumoniae	0	15
Parainfluenza	0	13
Pertussis	0	3
Respiratory Syncytial Virus	21	94
Rhinovirus	1	54

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