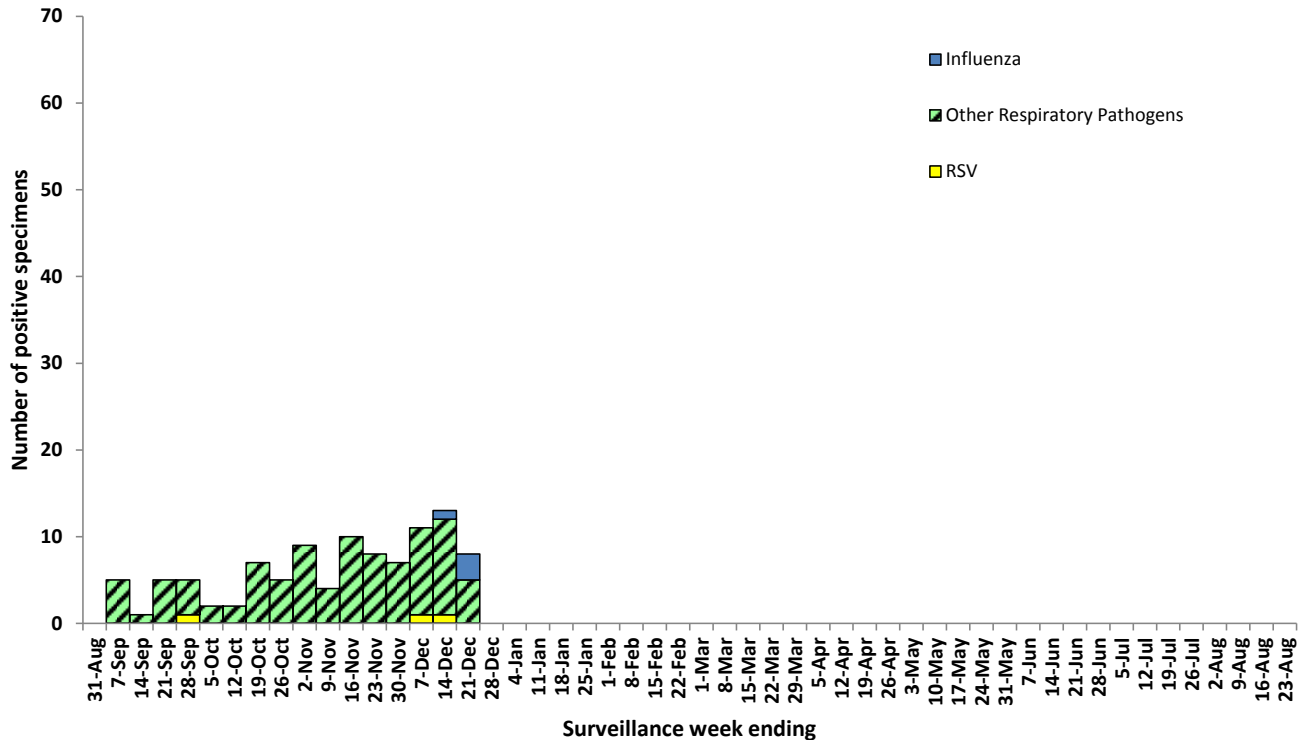


### Summary of Nova Scotia surveillance findings, for the period ending December 21, 2013:

- There were 4 cases of influenza reported during the week of December 15 to December 21, 2013.
- Positive results were received for mycoplasma pneumonia, parainfluenza, and rhinovirus.
- The ILI rate (% of ER visits) for Nova Scotia for this reporting period was 0.6
- Sixty-six percent of emergency departments reported ILI rates for this reporting week.

Figure 1: Summary of laboratory detected circulating respiratory pathogens, Nova Scotia, 2013–2014

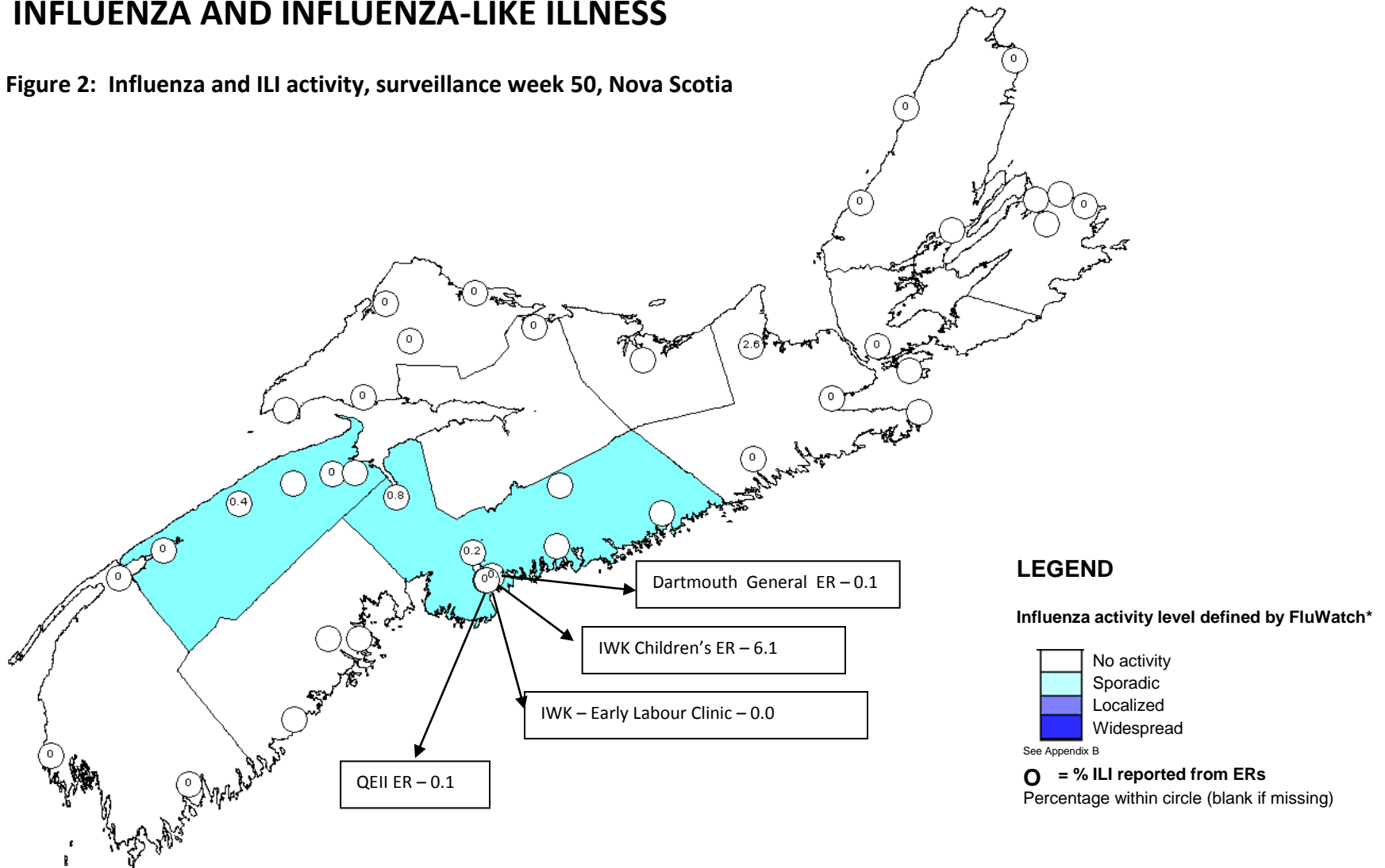


# RESPIRATORY WATCH

Week 51 (December 15 to December 21, 2013)

## INFLUENZA AND INFLUENZA-LIKE ILLNESS

Figure 2: Influenza and ILI activity, surveillance week 50, Nova Scotia



# RESPIRATORY WATCH

Week 51 (December 15 to December 21, 2013)

Figure 3: Number of reported lab-confirmed influenza cases by type and report week, Nova Scotia, 2013–2014

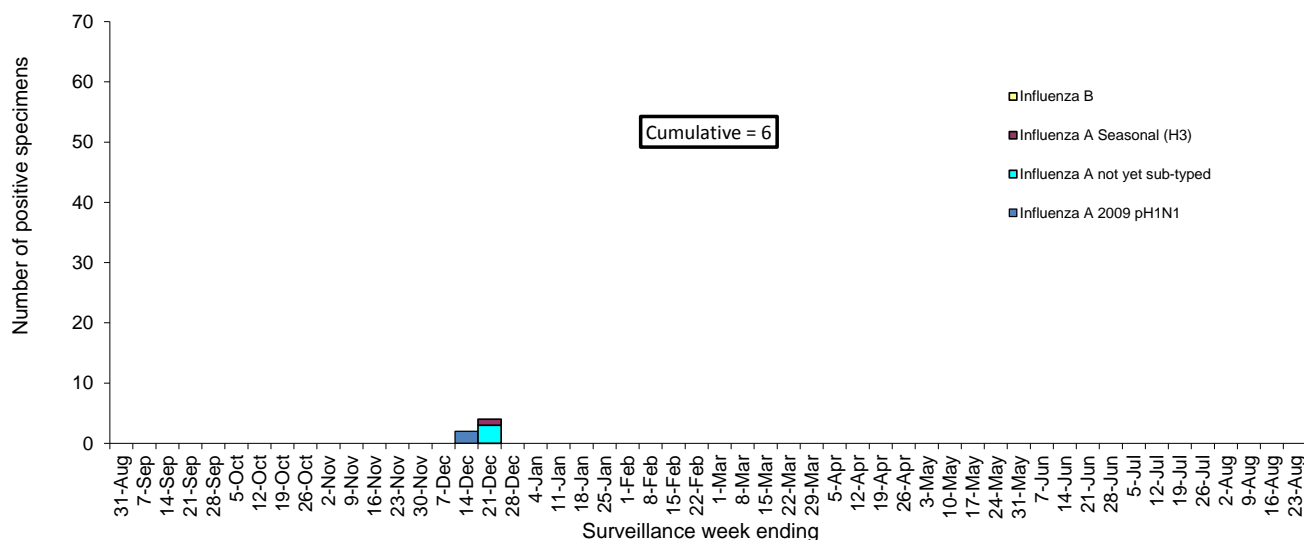
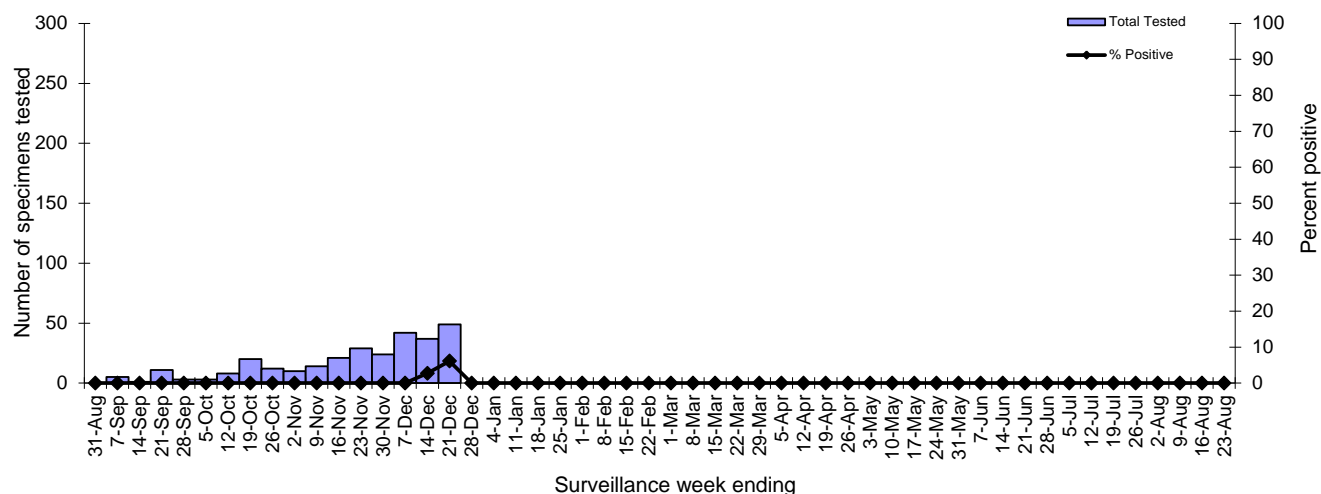


Figure 4: Number of specimens tested for influenza and percent positive, Nova Scotia Provincial Public Health Laboratory Network, 2013–2014\*



\*Data presented in this figure refers to week specimen was tested.

Table 1: Influenza case counts by DHA, current surveillance week and cumulative, Nova Scotia, 2013–2014

	DHA 1	DHA 2	DHA 3	DHA 4	DHA 5	DHA 6	DHA 7	DHA 8	DHA 9	Nova Scotia
<b>Influenza A 2009 pH1N1</b>										
Current Week	0	0	0	0	0	0	0	0	0	0
Cumulative 2013 - 2014	0	0	1	0	0	0	0	0	1	2
<b>Influenza A (not yet sub-typed)</b>										
Current Week	0	0	0	0	0	0	0	0	3	3
Cumulative 2013 - 2014	0	0	0	0	0	0	0	0	3	3
<b>Influenza A Seasonal (H3)</b>										
Current Week	0	0	1	0	0	0	0	0	0	1
Cumulative 2013 - 2014	0	0	0	0	0	0	0	0	0	1
<b>Influenza B</b>										
Current Week	0	0	0	0	0	0	0	0	0	0
Cumulative 2013 - 2014	0	0	0	0	0	0	0	0	0	0

# RESPIRATORY WATCH

Week 51 (December 15 to December 21, 2013)

Figure 5: Influenza rate per 100,000 population by type and age group, cumulative, Nova Scotia, 2013–2014

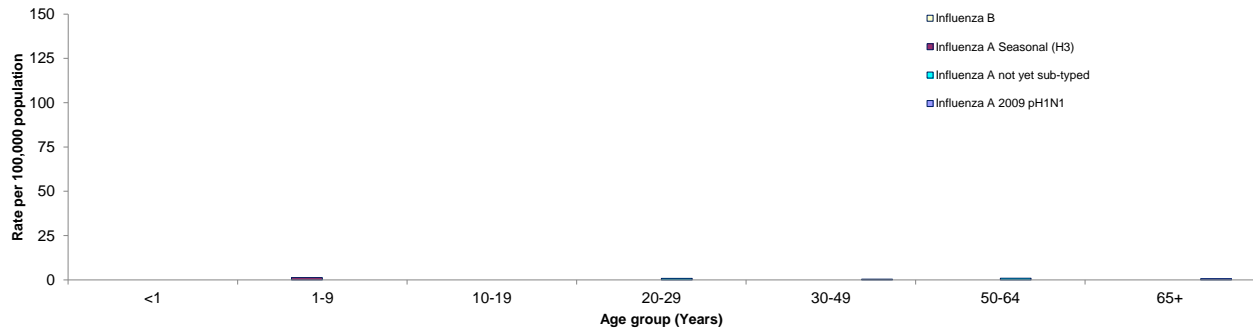


Figure 6: Influenza rate per 100,000 population by type and DHA, cumulative, Nova Scotia, 2013–2014

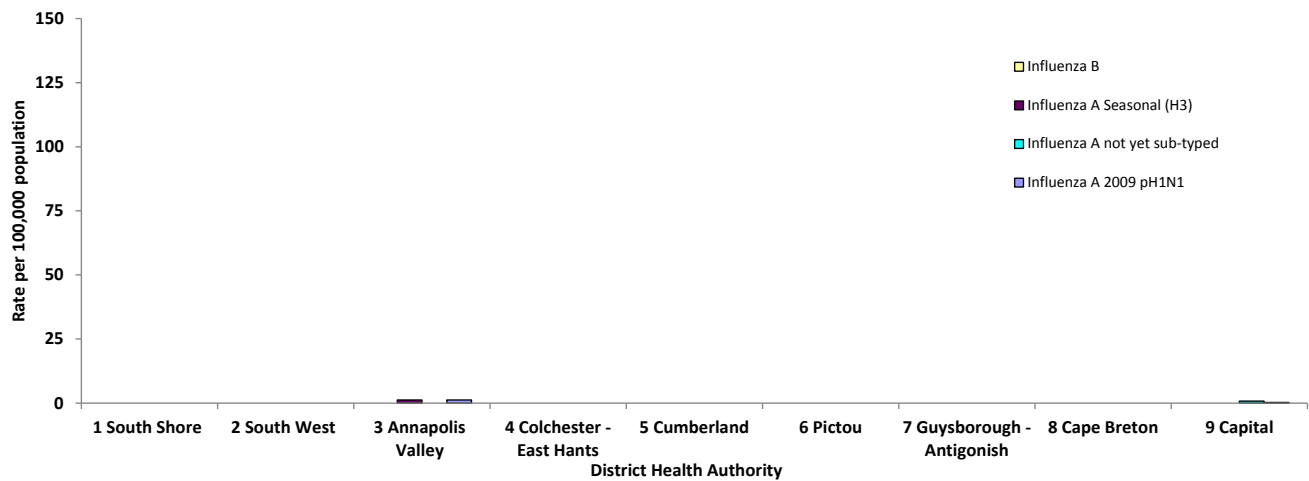


Table 2: ILI reporting from emergency departments and FluWatch sentinel physicians, Nova Scotia, 2013-2014

	ER SURVEILLANCE		SENTINEL SURVEILLANCE*	
	%ILI	Reporting ERs	%ILI	Reporting Sentinels
DHA 1	-	0 of 3	-	0 of 6
DHA 2	0.0	3 of 3	-	0 of 0
DHA 3	0.1	3 of 5	0.0	1 of 1
DHA 4	1.0	2 of 2	-	0 of 0
DHA 5	0.0	5 of 5	-	0 of 2
DHA 6	-	0 of 1	-	0 of 2
DHA 7	1.3	5 of 6	-	0 of 1
DHA 8	0.0	4 of 8	0.0	1 of 4
DHA 9	0.2	4 of 7	0.0	1 of 14
IWK	4.4	1 of 1		
<b>Nova Scotia (excl. IWK)†</b>	<b>0.3</b>	<b>26 of 40</b>	<b>65.0%</b>	
<b>Nova Scotia (incl. IWK)</b>	<b>0.6</b>	<b>27 of 41</b>	<b>65.9%</b>	<b>3 of 30</b> <b>10.0%</b>

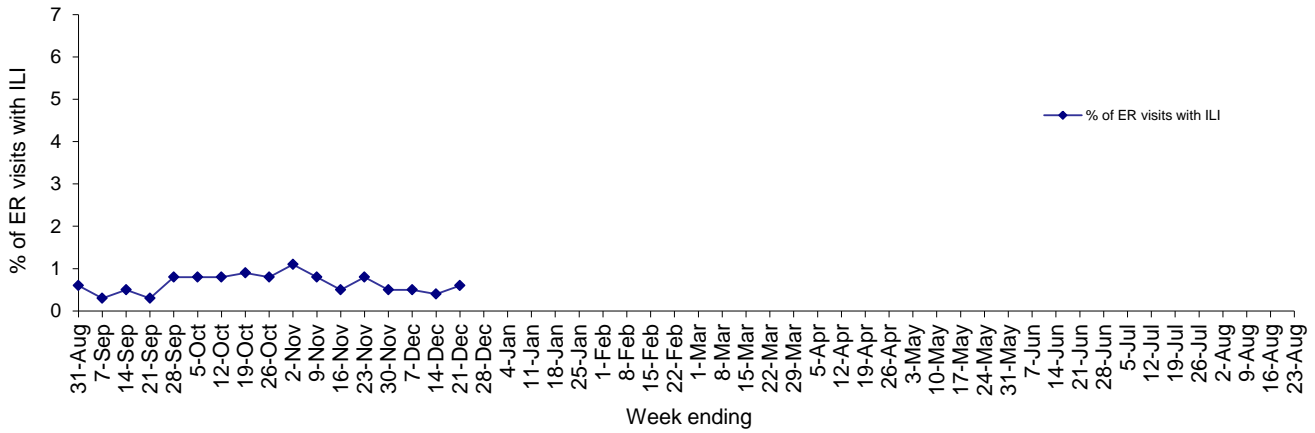
\*Flu watch sentinels

†Excludes the children's ER from IWK

# RESPIRATORY WATCH

Week 51 (December 15 to December 21, 2013)

Figure 7: Percentage of ER visits with ILI, Nova Scotia, 2013–2014



## RESPIRATORY SYNCYTIAL VIRUS (RSV)

Figure 8: Number of positive RSV specimens by report week, Nova Scotia, 2013–2014

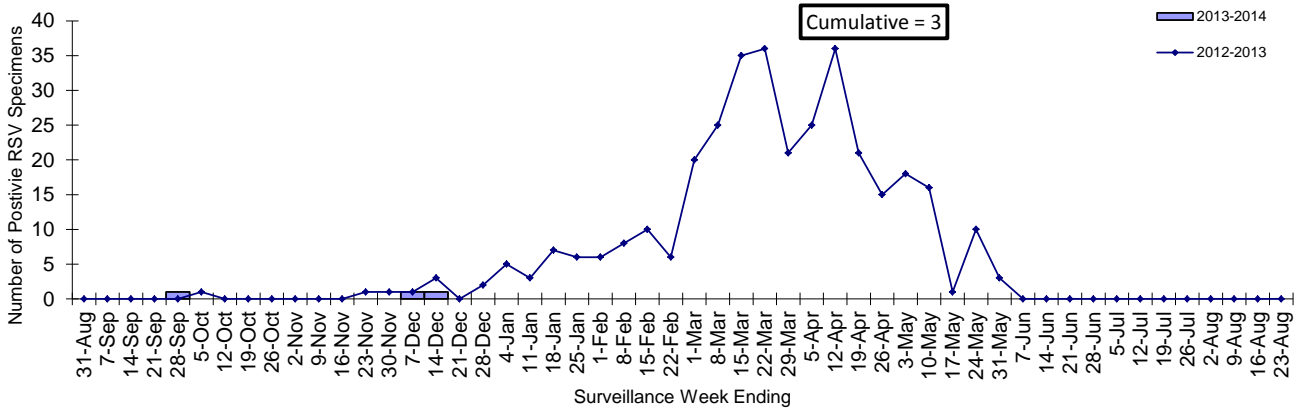


Figure 9: Cumulative number of positive RSV specimens by age group and sex, Nova Scotia, 2013-2014



# RESPIRATORY WATCH

Week 51 (December 15 to December 21, 2013)

## OTHER RESPIRATORY PATHOGENS

Table 3: Total number of specimens tested and number (%) positive for other respiratory pathogens, by report week and cumulative season, Nova Scotia, 2013–2014

Number and percent positive for:	Surveillance Week			Cumulative		
	n tested	n positive	% positive	Season-to-Date	Totals	
	n tested	n positive	% positive	n tested	n positive	% positive
Adenovirus	39	0	0.0	262	1	0.4
Bocavirus	39	0	0.0	262	0	0.0
Chlamydomphila pneumoniae	11	0	0.0	174	2	1.1
Coronavirus	39	0	0.0	262	0	0.0
Enterovirus	39	0	0.0	262	0	0.0
Metapneumovirus	39	0	0.0	262	1	0.4
Mycoplasma pneumoniae	11	2	18.2	174	27	15.5
Parainfluenza	39	1	2.6	262	24	9.2
Pertussis	3	0	0.0	51	2	3.9
Respiratory syncytial virus A	39	0	0.0	262	0	0.0
Respiratory syncytial virus B	39	0	0.0	262	0	0.0
Respiratory syncytial virus not typed	8	0	0.0	83	3	3.6
Rhinovirus	39	2	5.1	262	38	14.5

# RESPIRATORY WATCH

Week 51 (December 15 to December 21, 2013)

## APPENDIX: Definitions used in Influenza Surveillance, 2013-2014

### 1) ILI in the general population:

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.

### 2) Outbreaks of influenza / ILI by setting:

#### Schools and Daycares:

Greater than 10% absenteeism (or absenteeism that is higher (e.g. >5-10%) than expected level as determined by school or public health authority) which is likely due to ILI.

#### Hospitals and residential institutions:

Two or more cases of ILI within a seven-day period, including at least one laboratory confirmed case. Institutional outbreaks should be reported within 24 hours of identification. Residential institutions include but not limited to long-term care facilities (LTCF) and prisons.

#### Other Settings:

Two or more cases of ILI within a seven-day period, including at least one laboratory confirmed case; i.e. closed communities.

### 3) National FluWatch Definitions for Influenza Activity Levels:

#### Influenza activity levels are defined as:

- |                         |  |
|-------------------------|--|
| <b>1 = No activity:</b> | i.e. no laboratory-confirmed influenza detections in the reporting week, however, sporadically occurring ILI* may be reported  |
| <b>2 = Sporadic:</b>    | sporadically occurring ILI* and lab confirmed influenza detection(s) with <b>no outbreaks</b> detected within the influenza surveillance region†   |
| <b>3 = Localized:</b>   | (1) evidence of increased ILI* and<br>(2) lab confirmed influenza detection(s) together with<br>(3) outbreaks in schools, hospitals, residential institutions and/or other types of facilities occurring in <b>less than 50% of the influenza surveillance region</b> †                |
| <b>4 = Widespread:</b>  | (1) evidence of increased ILI* and<br>(2) lab confirmed influenza detection(s) together with<br>(3) outbreaks in schools, hospitals, residential institutions and/or other types of facilities occurring in <b>greater than or equal to 50% of the influenza surveillance region</b> † |

\* ILI data may be reported through sentinel physicians, emergency room visits or health line telephone calls.

† Sub-regions within the province or territory as defined by the provincial/territorial epidemiologist.

# RESPIRATORY WATCH

Week 51 (December 15 to December 21, 2013)

- 4) District Health Authorities (DHAs), Nova Scotia:
  - DHA 1 – South Shore Health
  - DHA 2 – South West Health
  - DHA 3 – Annapolis Valley Health
  - DHA 4 – Colchester East Hants Health Authority
  - DHA 5 – Cumberland Health Authority
  - DHA 6 – Pictou County Health Authority
  - DHA 7 – Guysborough Antigonish Strait Health Authority
  - DHA 8 – Cape Breton District Health Authority
  - DHA 9 – Capital Health