

Week 2 (January 5 to January 11, 2014)

Summary of Nova Scotia surveillance findings, for the period ending January 11, 2014:

- Influenza activity continues to increase. Eleven positive results were received this week. There have been 33 lab confirmed cases of influenza this season (25 pH1N1, 4 influenza A non pH1N1, and 4 influenza A not subtyped). Positive results were received metapneumovirus, parainfluenza, rhinovirus and RSV.
- Effective January 9, 2014, ICU admissions are reported to the Department of Health and Wellness to monitor severity of influenza. There have been 9 ICU admissions of laboratory confirmed influenza for the 2013-2014 influenza season (8 pH1N1 and 1 Influenza A not subtyped). Age range 33 – 76 years of age, median age 55 years. 5 males and 4 females.
- There have been 2 influenza deaths for the 2013-2014 influenza season.
- The ILI rate for Nova Scotia for this reporting period was 1.0% (0.9% in week 1)
- Eighty-three percent of emergency departments reported ILI rates for this reporting week.

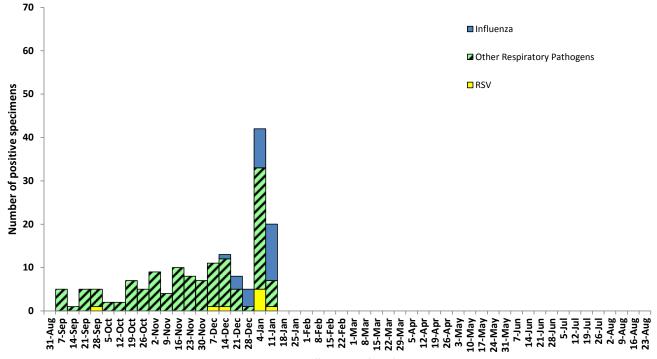
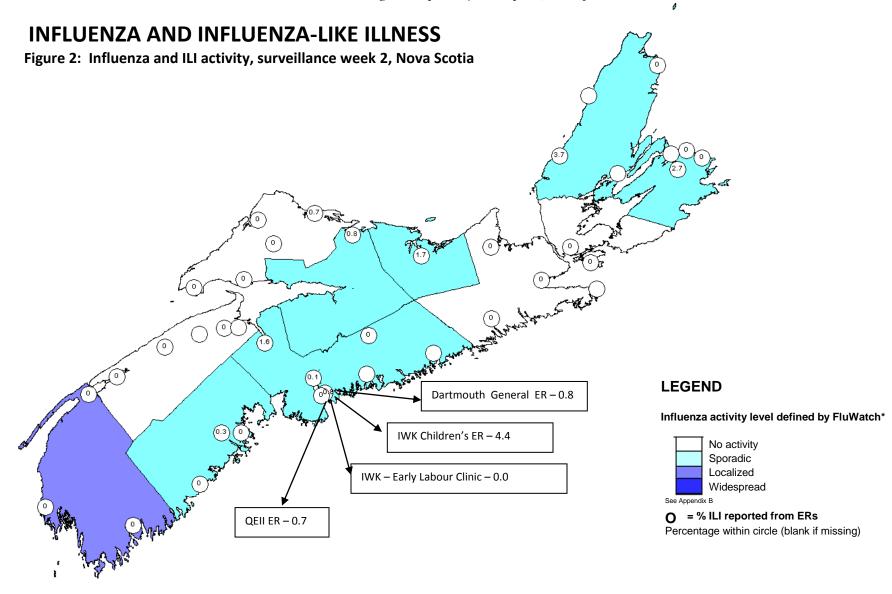


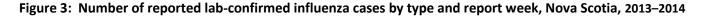
Figure 1: Summary of laboratory detected circulating respiratory pathogens, Nova Scotia, 2013–2014

Surveillance week ending

Week 2 (January 5 to January 11, 2014)



Week 2 (January 5 to January 11, 2014)



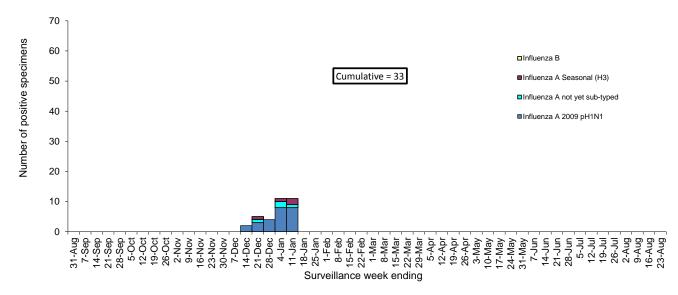
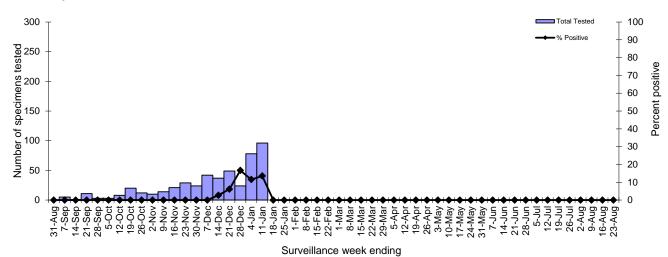


Figure 4: Number of specimens tested for influenza and percent positive, Nova Scotia Provincial Public Health Laboratory Network, 2013–2014*



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

ble 1: Influenza case cou	nts by [OHA, cur	rent surv	eillance	week an	d cumula	tive, No	va Scotia	<u>, 2013–</u>	2014
	DHA 1	DHA 2	DHA 3	DHA 4	DHA 5	DHA 6	DHA 7	DHA 8	DHA 9	Nova Scotia
Influenza A 2009 pH1N1										
Current Week	1	0	0	2	0	0	0	1	4	8
Cumulative 2013 - 2014	1	0	1	2	0	2	2	1	16	25
influenza A (not yet sub-typed)										
Current Week	0	0	0	0	0	0	0	2	2	4
Cumulative 2013 - 2014	0	0	0	0	0	0	0	2	2	4
Influenza A Seasonal (H3)										
Current Week	0	1	0	0	0	0	0	0	0	1
Cumulative 2013 - 2014	0	3	1	0	0	0	0	0	0	4
Influenza 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

Week 2 (January 5 to January 11, 2014)



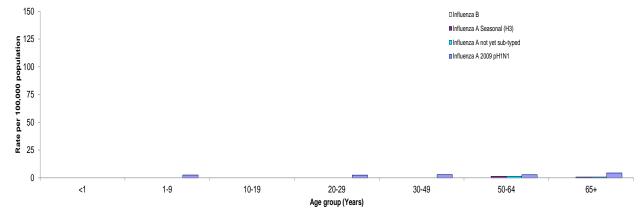


Figure 6: Influenza rate per 100,000 population by type and DHA, cumulative, Nova Scotia, 2013–2014

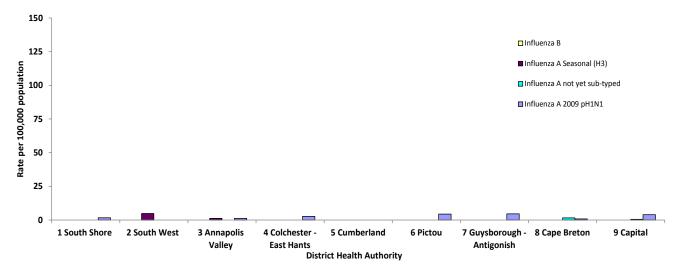


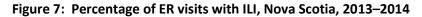
Table 2: ILI reporting from emergency departments and FluWatch sentinel physicians, Nova Scotia, 2013-2014

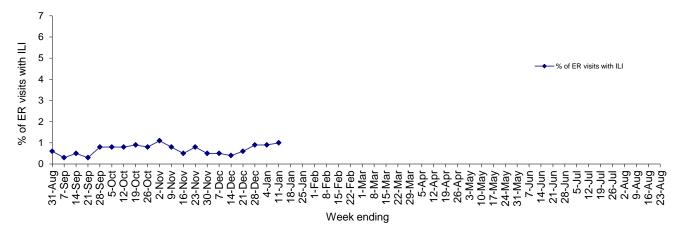
	ER	SURVEILLANCE	S	SENTINEL SURVEILLANCE*		
	%ILI	Reporting ERs	%ILI	Reporting Sentinels		
DHA 1	0.2	3 of 3	0.00	1 of 6		
DHA 2	0.0	3 of 3	-	0 of 0		
DHA 3	0.0	3 of 5	0.0	1 of 1		
DHA 4	3.3	2 of 2	-	0 of 0		
DHA 5	0.2	5 of 5	0.0	1 of 2		
DHA 6	1.7	1 of 1	-	0 of 2		
DHA 7	0.0	6 of 6	0.0	1 of 1		
DHA 8	1.7	5 of 8	2.8	2 of 4		
DHA 9	0.7	5 of 7	0.0	2 of 14		
IWK	3.3	1 of 1				
Nova Scotia (excl. IWK) [.]	0.8	33 of 4	0 82.5%			
Nova Scotia (incl. IWK)	1.0	34 of 4	1 82.9%	8 of 30 26.7%		

*Fluw atch sentinels

†Excludes the children's ER from IWK

Week 2 (January 5 to January 11, 2014)





RESPIRATORY SYNCYTIAL VIRUS (RSV)

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

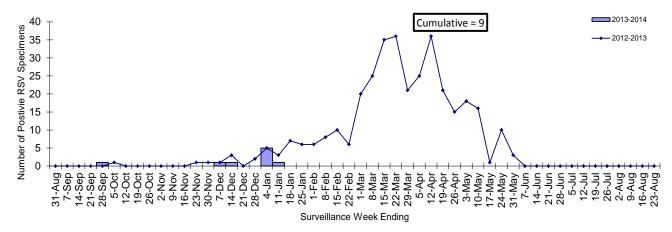
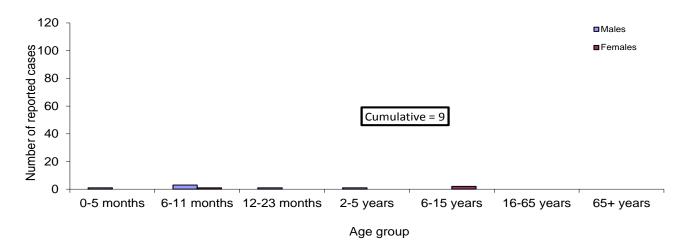


Figure 9: Cumulative number of positive RSV specimens by age group and sex, Nova Scotia, 2013-2014



Week 2 (January 5 to January 11, 2014)

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

		Surveillance N	Week	Cumulative		
					Season-to-Date	Totals
Number and percent positive for:	n tested	n positive	% positive	n tested	n positive	% positive
	in teoted	ii pooliivo	70 розние	ii tootou	ii positive	
Adenovirus	90	0	0.0	422	1	0.2
Bocavirus	90	0	0.0	422	0	0.0
Chlamydophila pneumoniae				203	2	1.0
Coronavirus	90	0	0.0	422	1	0.2
Enterovirus	90	0	0.0	422	0	0.0
Metapneumovirus	90	2	2.2	422	6	1.4
Mycoplasma pneumoniae				203	36	17.7
Parainfluenza	90	2	2.2	422	35	8.3
Pertussis				54	2	3.7
Respiratory syncytial virus A	90	0	0.0	422	0	0.0
Respiratory syncytial virus B	90	0	0.0	422	2	0.5
Respiratory syncytial virus not typed	1	1	100.0	114	7	6.1
Rhinovirus	90	2	2.2	422	47	11.1

This week's laboratory reporting does not include data from IWK

Week 2 (January 5 to January 11, 2014)

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

* 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.

Week 2 (January 5 to January 11, 2014)

- 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