

RESPIRATORY WATCH

Week 47 (November 22 to November 28, 2015)*

IN SUMMARY...

Activity levels

• All zones are reporting no activity.

Laboratory-confirmed cases***

- There have been 0 influenza cases this week, There have been 5 lab confirmed cases of influenza this season (1 influenza A H3 and 4 influenza A not subtyped).
- Positive test results were received for adenovirus, bocavirus, mycoplasma pneumonia, and parainfluenza.

Severity

 There has been 1 ICU admission of laboratory confirmed influenza and 1 influenza deaths*** for the 2015-2016 influenza season.

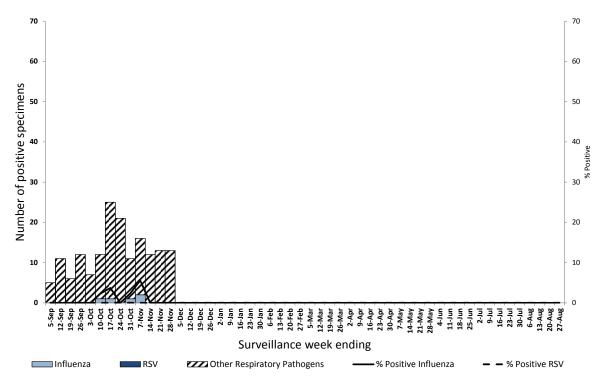
Syndromic surveillance

- The ILI rate for Nova Scotia this reporting period was 0.8.
- 100% of emergency departments reported ILI data for this period.

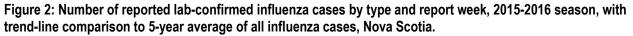
*Reporting weeks run from Sunday to Saturday. The 2015-2016 influenza season is defined using PHAC's influenza surveillance weeks. This year runs from August 30, 2015 (Week 35) to August 27, 2016 (Week 34); **Outbreak data is obtained from CNPHI, see appendix for definitions.; *** Deaths include individuals with a positive influenza test result, influenza may not have been the major contributing cause of death or hospitalization.

LABORATORY-CONFIRMED CASES

Figure 1: Number of respiratory specimens tested positive, and select percent positives, by report week, 2015-2016 season, Nova Scotia.



*Data for this figure is obtained from provincial laboratories. All other data, unless otherwise stated, has been obtained from ANDS. Reporting lags may cause the data in this figure to not reconcile with others.



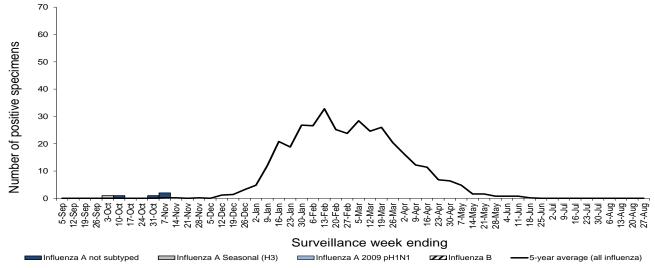


Table 1: Number of total laboratory-confirmed influenza cases, current week and cumulative 2015-2016 season, by zones in Nova Scotia.

	Current Week					Cummulative 2015-2016				
Zone*		Influe	nza A		Influenza B	Influenza A				
	Total	A(H1) pdm09	A (H3)	A not subtyped		Total	A(H1) pdm09	A (H3)	A not subtyped	Influenza B
1 - Western	0	0	0	0	0	1	0	1	0	0
2 - Northern	0	0	0	0	0	0	0	0	0	0
3 - Eastern	0	0	0	0	0	1	0	0	1	0
4 - Central	0	0	0	0	0	3	0	0	3	0
Nova Scotia Total	0	0	0	0	0	5	0	1	1	0

*Zones are defined in the appendix.

 Table 2: Number of total laboratory-confirmed influenza cases, current week and cumulative 2015-2016

 season, by age group in Nova Scotia.

		Current Week				Cummulative 2015-2016				
Zone*		Influen	iza A		Influenza B	Influenza A				
	Total	A(H1) pdm09	A (H3)	A not subtyped		Total	A(H1) pdm09	A (H3)	A not subtyped	Influenza B
0-4	0	0	0	0	0	0	0	0	0	0
5-19	0	0	0	0	0	0	0	0	0	0
20-44	0	0	0	0	0	0	0	0	0	0
45-64	0	0	0	0	0	2	0	0	2	0
65+	0	0	0	0	0	3	0	1	2	0
Nova Scotia Total	0	0	0	0	0	5	0	1	4	0





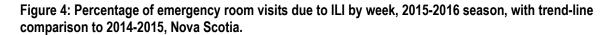
Severity

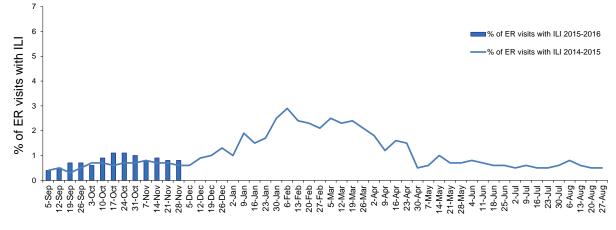
Table 3: Hospitalizations, ICU admissions and deaths for influenza positive patients, current week and cumulative, 2015-2016 season, Nova Scotia.

Pathogen	Curre	ent surveillance	week	Cumulative 2015-2016		
Patiloyett	Hospitalized*	ICU	Death**	Hospitalized	ICU	Death
Influenza A (H1) pdm09	0	0	0	0	0	0
Influenza A unsubtyped	0	0	0	1	1	1
Influenza A (H3)	0	0	0	1	0	0
Influenza B	0	0	0	0	0	0
Nova Scotia Total	0	0	0	2	1	1

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

SYNDROMIC SURVEILLANCE





Surveillance week ending

Table 4: Current week ILI reporting from emergency departments by zones, 2015-2016 season, Nova Scotia.

Zone	ILI (%)	Number of reporting ERs	Number of ERs	ERs reporting (%)
1 - Western	0.4	9	9	100.0
2 - Northern	0.1	8	8	100.0
3 - Eastern	0.5	14	14	100.0
4 - Central	1.5	7	7	100.0
IWK	7.2	2	2	100.0
Nova Scotia Total (excl IWK)	0.3	38	38	100.0
Nova Scotia Total (incl IWK)	0.8	40	40	100.0

OTHER RESPIRATORY PATHOGENS

able 5: Total number of specimens tested and number (%) positive for other respiratory pathogens, by report week and cumulative season, Nova Scotia, 2015–2016

Pathogen		Surveillance V	Week	Cumulative Season-to-Date Totals			
	n tested	n positive	% positive	n tested	n positive	% positive	
Adenovirus	7	1	14.3	212	9	4.2	
Bocavirus	7	1	14.3	212	2	0.9	
Chlamydophila pneumoniae	30	0	0.0	244	2	0.8	
Coronavirus	7	0	0.0	212	0	0.0	
Enterovirus	7	0	0.0	212	1	0.5	
Metapneumovirus	7	0	0.0	212	0	0.0	
Mycoplasma pneumoniae	30	10	33.3	244	66	27.0	
Parainfluenza	7	2	28.6	212	9	4.2	
Pertussis	32	0	0.0	327	34	10.4	
Respiratory Syncytial Virus	35	0	0.0	400	0	0.0	
Rhinovirus	7	0	0.0	212	38	17.9	

APPENDIX: DEFINITIONS USED IN INFLUENZA SURVEILLANCE, AND USEFUL LINKS, 2015-2016

ACRONYM LIST

CNPHI Canadian Network for Public Health Intelligence

- **DHA** District Health Authority
- **ICU** Intensive care unit
- ILI Influenza-like illness
- LTCF Long-term care facility
- **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.

OUTBREAK DEFINITIONS

Schools and daycares	Greater than 10% absenteeism (or absenteeism that is higher (e.g. >5-10%) than expected level as determined by the 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 are 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).

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	 Evidence of increased ILI* and lab confirmed influenza detection(s) together with outbreaks occurring in schools, hospitals, residential institutions and/or other types of facilities occurring in less than 50% of the influenza surveillance region 						
Widespread	 Evidence of increased ILI* and lab confirmed influenza detection(s) together with 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/en/index.html</u> US: <u>www.cdc.gov/flu/weekly</u>