

RESPIRATORY WATCH

Weeks 49 (December 4 to December 10, 2016)*

IN SUMMARY...

Ac	tivity levels**
•	Zone 3 is reporting localized activity and Zone 4 is reporting sporadic activity. Zones 1, 2 are reporting no activity.
La	boratory-confirmed cases***
•	There were 6 influenza cases reported during this week. There have been 19 lab confirmed cases of Influenza reported during the 2016-2017 influenza season. Positive test results were received for mycoplasma pneumoniae, parainfluenza, rhinovirus and RSV.
Se	verity
•	There have been 2 ICU admissions and 2 deaths*** of laboratory confirmed influenza during the 2016-2017 influenza season.
Sy	ndromic surveillance
•	The average ILI rate for Nova Scotia during this reporting period was 1.0. 97.5% of emergency rooms reported ILI data during this reporting period. Cape Breton Regional

Hospital did not report ILI for this reporting week.

Notes: *Reporting weeks run from Sunday to Saturday. The 2016-2017 influenza season is defined using PHAC's influenza surveillance weeks. This year runs from August 28, 2016 (Week 35) to August 26, 2017 (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, 2016-2017 season, with trend-line comparison to 2015-2016 season, Nova Scotia.

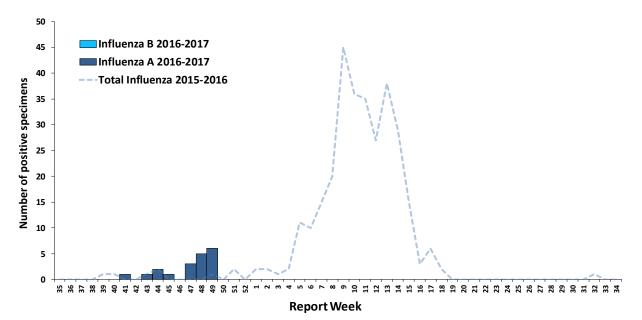


 Table 1: Number of laboratory-confirmed influenza cases by zone, current week and cumulative 2016-2017 season in Nova Scotia.

ZONE	CURRENT WEEK			CUI	JMULATIVE 2016-2017		
ZOINE	TOTAL	INFLUENZA A	INFLUENZA B	TOTAL	INFLUENZA A	INFLUENZA B	
Western	0	0	0	1	1	0	
Northern	0	0	0	0	0	0	
Eastern	4	4	0	13	13	0	
Central	2	2	0	5	5	0	
Nova Scotia Total	6	6	0	19	19	0	

 Table 2: Number of laboratory-confirmed influenza cases by age group, current week and cumulative 2016-2017 season in Nova Scotia.

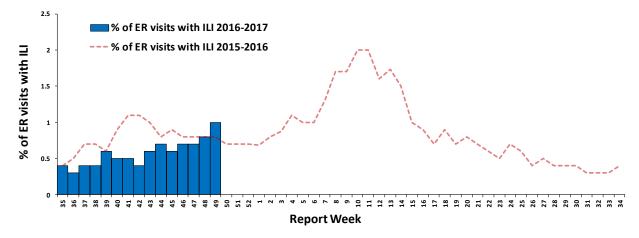
AGE	CURRENT WEEK			CUI	CUMULATIVE 2016-2017		
AGE	TOTAL	INFLUENZA A	INFLUENZA B	TOTAL	INFLUENZA A	INFLUENZA B	
0-4	1	1	0	1	1	0	
5-19	0	0	0	1	1	0	
20-44	0	0	0	1	1	0	
45-64	1	1	0	2	2	0	
65+	4	4	0	14	14	0	
Nova Scotia Total	6	6	0	19	19	0	

Table 3: Hospitalizations, ICU admissions and deaths for influenza positive patients, current week and cumulative, 2016-2017 season, Nova Scotia.

OUTCOME		CURRENT WE	EK	CUI	MULATIVE 2016-2017		
OUTCOME	TOTAL	INFLUENZA A	INFLUENZA B	TOTAL	INFLUENZA A	INFLUENZA B	
Hospitalized	2	2	0	10	10	0	
Hospitalized - ICU	0	0	0	2	2	0	
Deceased*	1	1	0	2	2	0	
Nova Scotia Total	3	3	0	14	14	0	

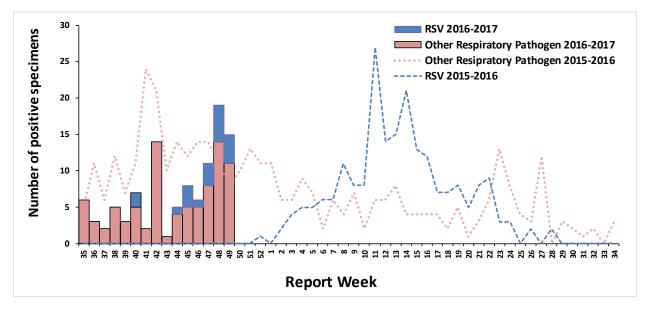
SYNDROMIC SURVEILLANCE

Figure 2: Percentage of emergency room visits due to ILI by report week, 2016-2017 season, with trend-line comparison to 2015-2016 season, Nova Scotia.



OTHER RESPIRATORY PATHOGENS

Figure 3: Number of positive specimens tested for other respiratory pathogens* and RSV by report week, 2016-2017 season, with trend-line comparison to 2015-2016 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	2016-2017
0-5 months	6
6-11 months	0
12-23 months	7
2-5 years	3
6-15 years	0
16-65 years	1
65+ years	2
Nova Scotia Total	19

Table 4: Number of positive RSV specimens by age group, 2016-2017 season, Nova Scotia.

Table 5: Number of positive specimens tested for other respiratory pathogens, current report week and cumulative season, Nova Scotia, 2016–2017.

PATHOGEN	CURRENT WEEK (n positive)	CUMULATIVE 2016-2017
Adenovirus	0	2
Bocavirus	0	0
Chlamydophila pneumoniae	0	5
Coronavirus	0	0
Enterovirus	0	5
Metapneumovirus	0	0
Mycoplasma pneumoniae	2	14
Parainfluenza	2	6
Pertussis	0	12
Respiratory Syncytial Virus	4	19
Rhinovirus	3	25

APPENDIX: DEFINITIONS USED IN INFLUENZA SURVEILLANCE, AND USEFUL LINKS, 2016-2017

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.

MANAGEMENT ZONES

Zone 1 – Western Zone 2 – Northern Zone – Eastern Zone 4 - Central

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	 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: http://www.phac-aspc.gc.ca/fluwatch/

World:<u>https://www.who.int/influenza/surveillance_monitoring/updates/latest_update_GIP_surveillanc</u> <u>e/en/index.html</u>

US: <u>www.cdc.gov/flu/weekly</u>