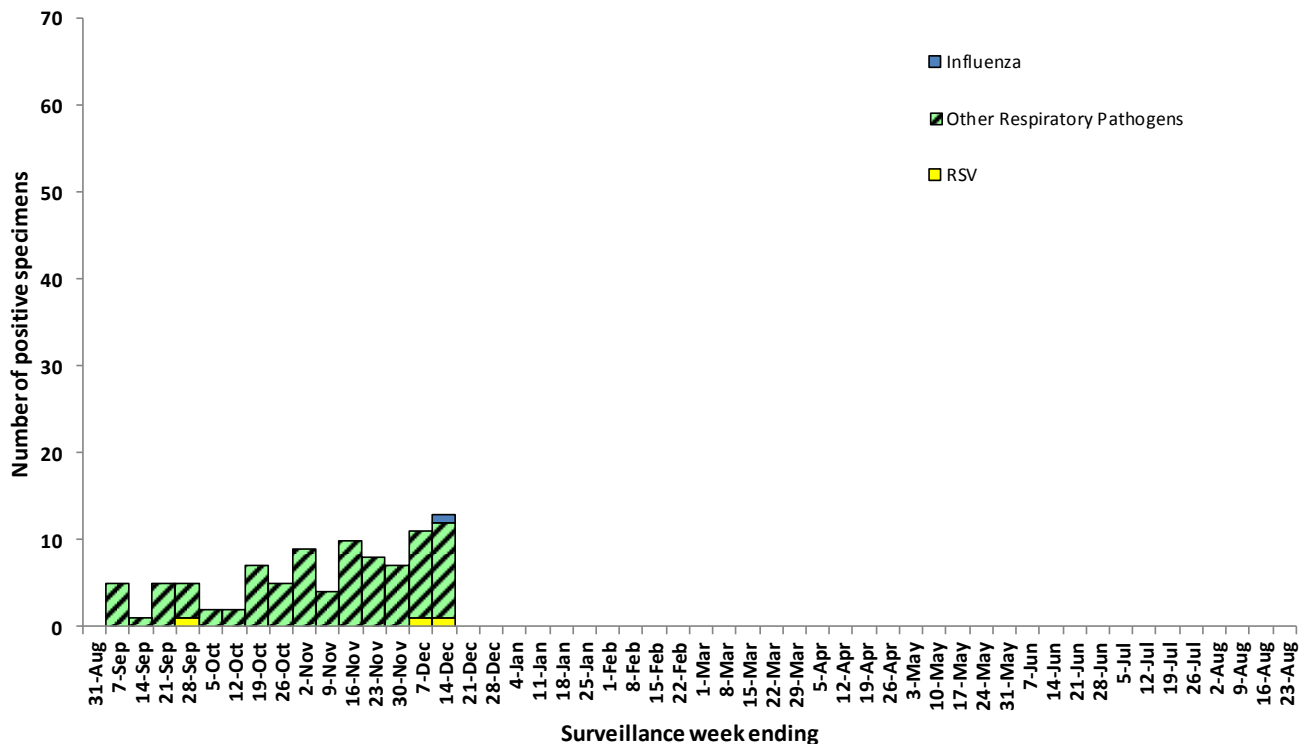


## Summary of Nova Scotia surveillance findings, for the period ending December 14, 2013:

- Capital District Health Authority reported the province’s first influenza case for the 2013-2013 influenza season. The case is positive for influenza A- pH1N1.
- Positive results were received for mycoplasma pneumonia, parainfluenza, rhinovirus and RSV.
- The ILI rate for Nova Scotia for this reporting period was 0.4
- Eighty-three percent of emergency departments reported ILI rates for this reporting week.
- The next Respiratory Watch will be publish on **Friday, December 27, 2013.**

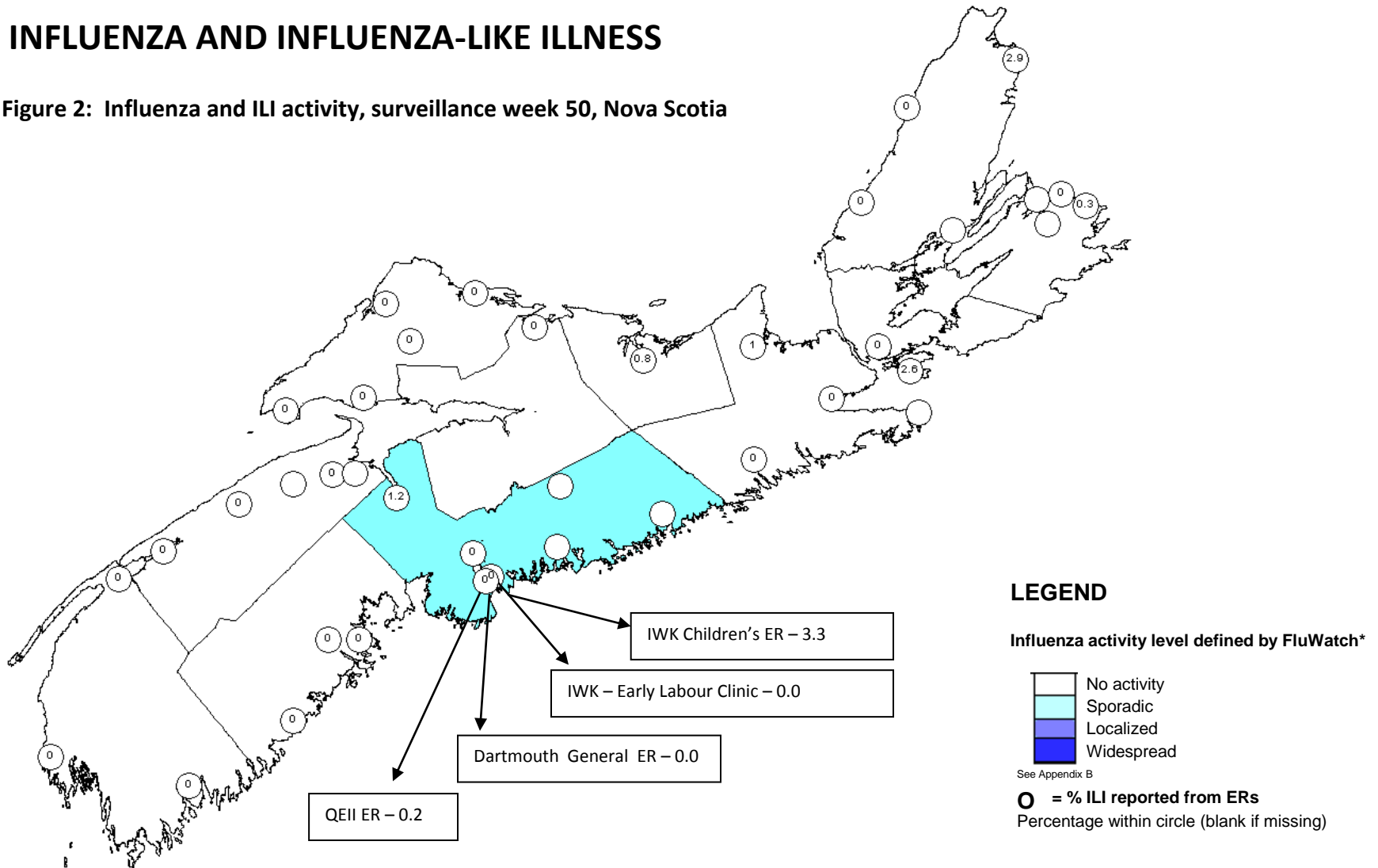
Figure 1: Summary of laboratory detected circulating respiratory pathogens, Nova Scotia, 2013–2014



# RESPIRATORY WATCH

## INFLUENZA AND INFLUENZA-LIKE ILLNESS

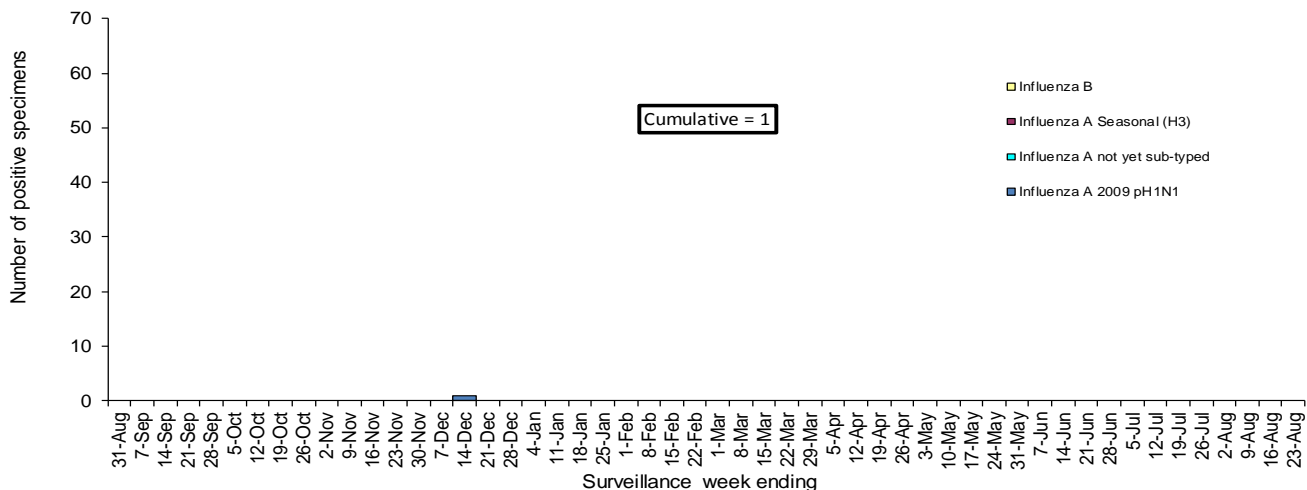
Figure 2: Influenza and ILI activity, surveillance week 50, Nova Scotia



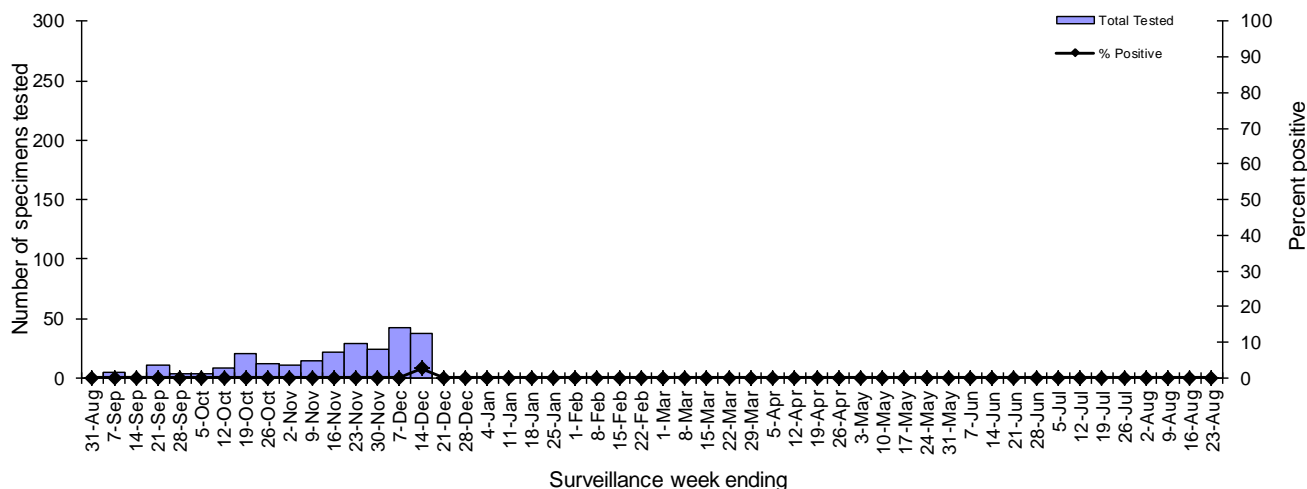
# RESPIRATORY WATCH

Week 50 (December 8 to December 14, 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	1	1
Cumulative 2013 - 2014	0	0	0	0	0	0	0	0	1	1
<b>Influenza A (not yet sub-typed)</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
<b>Influenza A Seasonal (H3)</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
<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 50 (December 8 to December 14, 2013)

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

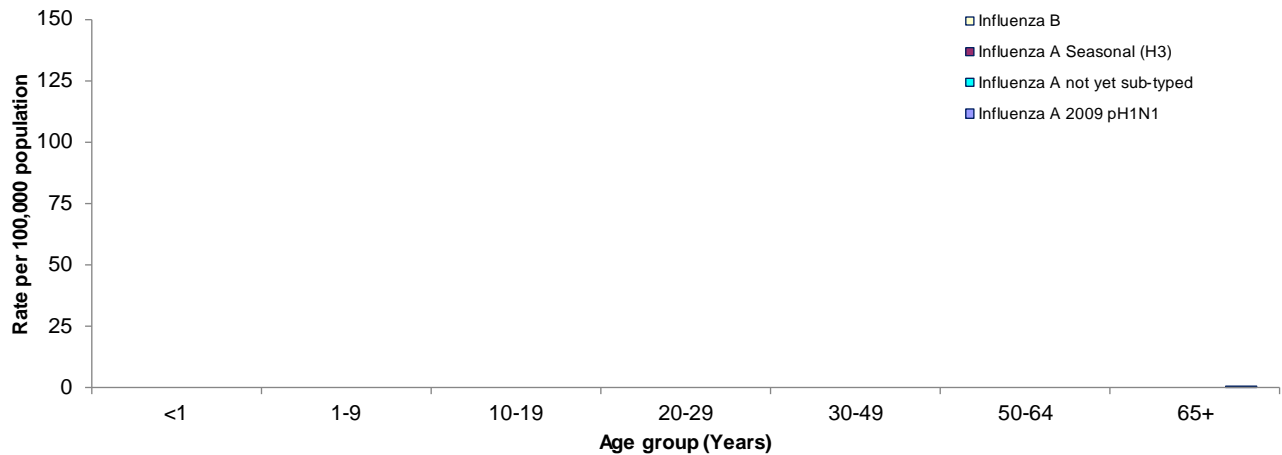


Figure 6: Influenza rate per 100,000 population by type and DHA, cumulative, Nova Scotia, 2013–2014

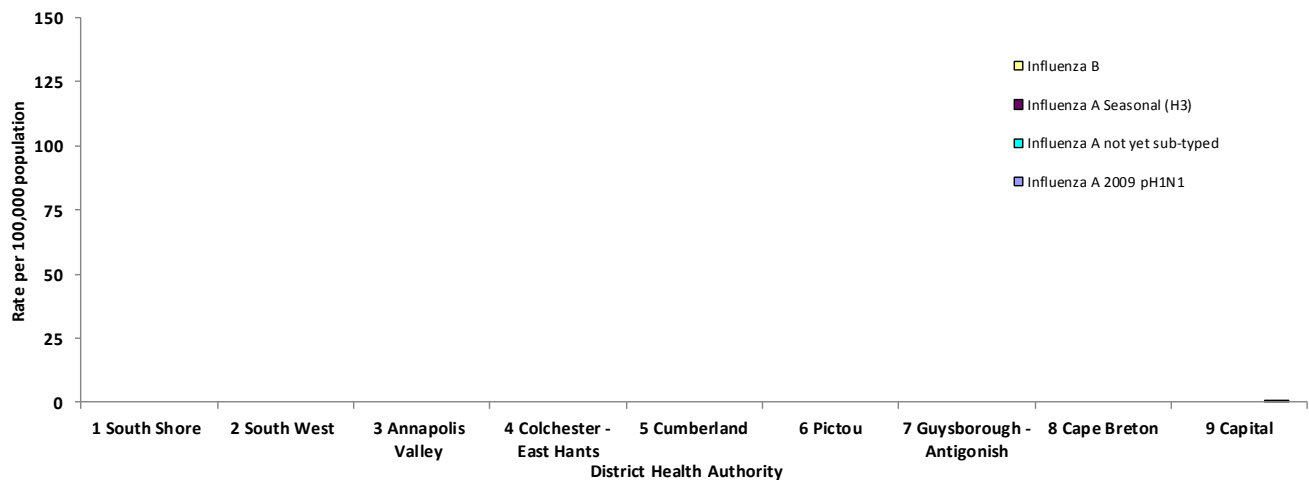


Table 2: ILI reporting from emergency departments and FluWatch sentinel physicians, Nova Scotia, 2013-2014

	ER SURVEILLANCE		SENTINEL SURVEILLANCE*	
	%ILI	Reporting ERs	%ILI	Reporting Sentinels
DHA 1	0.0	3 of 3	0.0	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	1.1	2 of 2	–	0 of 0
DHA 5	0.0	5 of 5	16.7	1 of 2
DHA 6	0.8	1 of 1	–	0 of 2
DHA 7	0.7	6 of 6	0.0	1 of 1
DHA 8	0.3	5 of 8	0.0	1 of 4
DHA 9	0.2	5 of 7	0.0	3 of 14
IWK	2.4	1 of 1		
<b>Nova Scotia (excl. IWK)†</b>	<b>0.3</b>	<b>33 of 40</b>	<b>82.5%</b>	
<b>Nova Scotia (incl. IWK)</b>	<b>0.4</b>	<b>34 of 41</b>	<b>82.9%</b>	<b>8 of 30</b> <b>26.7%</b>

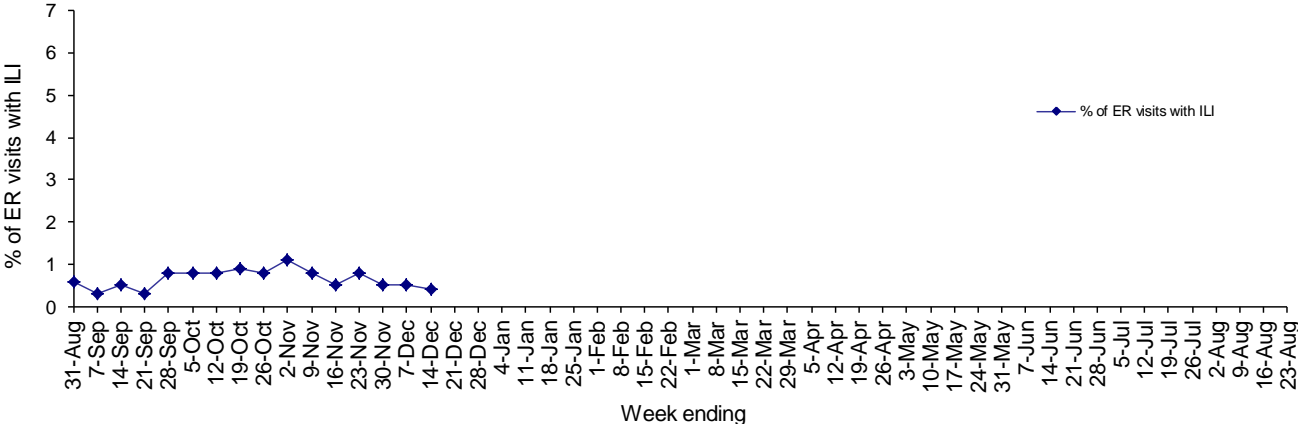
\*Flu watch sentinels

†Excludes the children's ER from IWK

# RESPIRATORY WATCH

Week 50 (December 8 to December 14, 2013)

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



# RESPIRATORY WATCH

Week 50 (December 8 to December 14, 2013)

## RESPIRATORY SYNCYTIAL VIRUS (RSV)

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

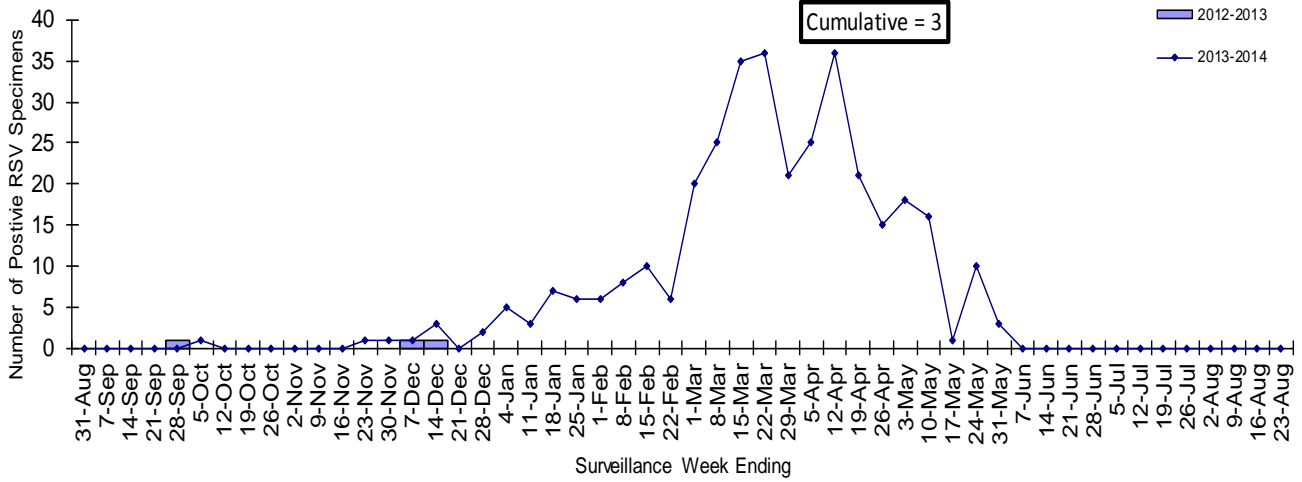


Figure 9: Cumulative number of positive RSV specimens by age group and sex, Nova Scotia, 2013-2014



# RESPIRATORY WATCH

Week 50 (December 8 to December 14, 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 Season-to-Date Totals		
	n tested	n positive	% positive	n tested	n positive	% positive
Adenovirus	35	0	0.0	223	1	0.4
Bocavirus	35	0	0.0	223	0	0.0
Chlamydomphila pneumoniae	18	0	0.0	163	2	1.2
Coronavirus	35	0	0.0	223	0	0.0
Enterovirus	35	0	0.0	223	0	0.0
Metapneumovirus	35	0	0.0	223	1	0.4
Mycoplasma pneumoniae	18	4	22.2	163	25	15.3
Parainfluenza	35	6	17.1	223	23	10.3
Pertussis	5	0	0.0	48	2	4.2
Respiratory syncytial virus A	35	0	0.0	223	0	0.0
Respiratory syncytial virus B	35	0	0.0	223	0	0.0
Respiratory syncytial virus not typed	8	1	0.0	75	3	4.0
Rhinovirus	35	1	2.9	223	36	16.1

# RESPIRATORY WATCH

Week 50 (December 8 to December 14, 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 50 (December 8 to December 14, 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