

## IN SUMMARY...

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|---|
| <b>Activity levels**</b>  |
| <ul style="list-style-type: none"> <li>Zone 4 reported sporadic activity during this 4 week reporting period. Zones 1, 2 and 3 had no activity.</li> </ul>  |
| <b>Laboratory-confirmed cases***</b>  |
| <ul style="list-style-type: none"> <li>One influenza B case was reported during this period. There have been 409 lab confirmed cases of Influenza A and 33 influenza B reported during the 2016-2017 influenza season.</li> <li>Positive test results were received for metapneumovirus, mycoplasma pneumonia, parainfluenza, pertussis, rhinovirus and RSV.</li> </ul> |
| <b>Severity</b>   |
| <ul style="list-style-type: none"> <li>There have been 24 ICU admissions and 27 deaths*** of laboratory confirmed influenza during the 2016-2017 influenza season.</li> </ul>   |
| <b>Syndromic surveillance</b>   |
| <ul style="list-style-type: none"> <li>The average ILI rate for Nova Scotia was 0.4.</li> <li>Only <b>83.75%</b> of emergency rooms reported ILI data during this reporting period.</li> </ul>  |

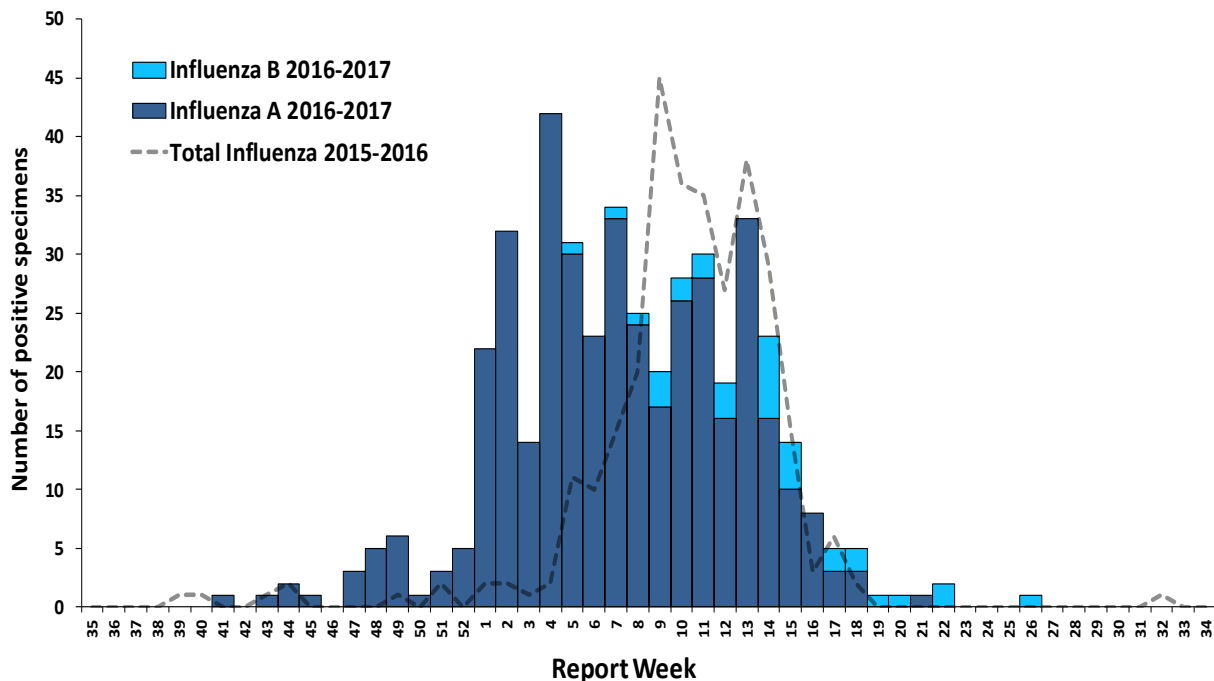
*Notes: \*Reporting weeks run from Sunday to Saturday. The 2016-2017 influenza season is defined using PHAC's influenza surveillance weeks. This year runs from August 28, 2016 (Week 35) to August 26, 2017 (Week 34);*

*\*\*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.*

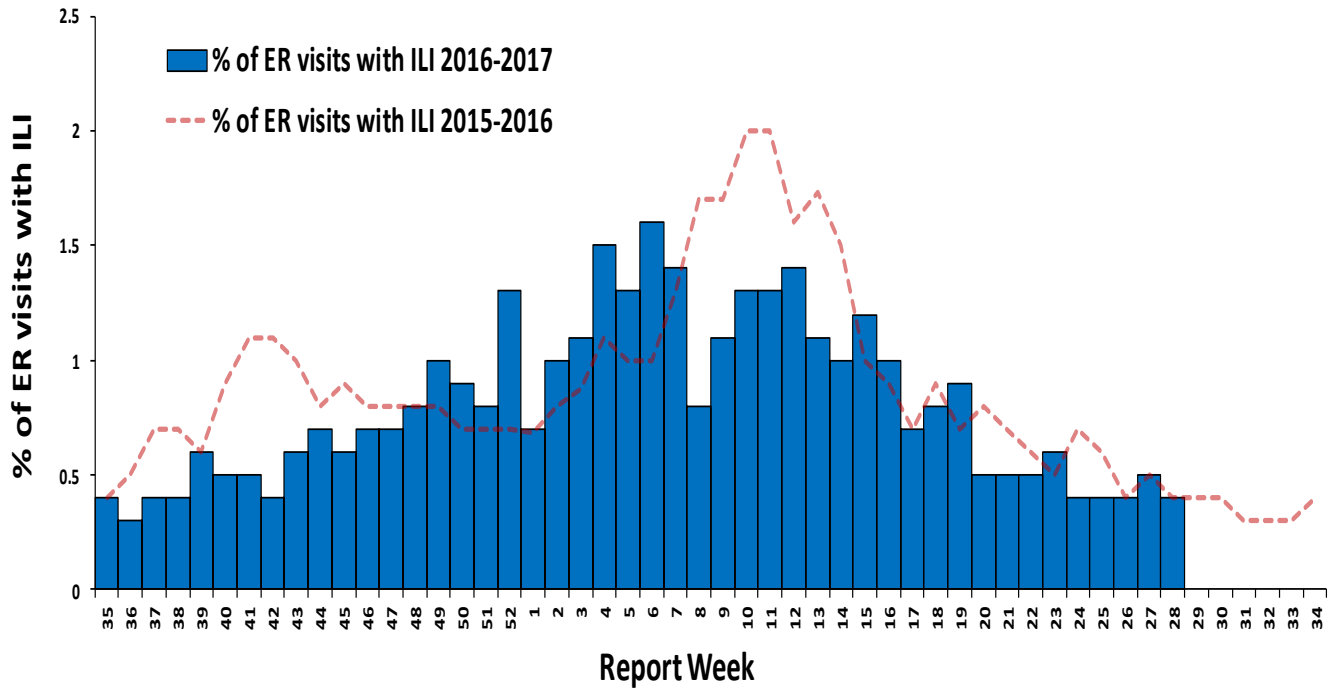
## LABORATORY-CONFIRMED INFLUENZA CASES

**Figure 1: Number of laboratory confirmed influenza cases by report week, 2016-2017 season, with trend-line comparison to 2015-2016 season, Nova Scotia.**



### 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.



## 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 3**– Eastern

**Zone 4** - Central

### NATIONAL FLUWATCH DEFINITIONS FOR INFLUENZA ACTIVITY LEVELS

|                    |   |
|--------------------|---|
| <b>No activity</b> | No laboratory-confirmed influenza detections in the reporting week, however, sporadically occurring ILI* may be reported  |
| <b>Sporadic</b>    | Sporadically occurring ILI* and lab confirmed influenza detection(s) with <b>no outbreaks</b> detected within the influenza surveillance region   |
| <b>Localized</b>   | (1) Evidence of increased ILI* and<br>(2) lab confirmed influenza detection(s) together with<br>(3) outbreaks occurring in schools, hospitals, residential institutions and/or other types of facilities occurring in less than 50% of the influenza surveillance region                |
| <b>Widespread</b>  | (1) Evidence of increased ILI* and<br>(2) lab confirmed influenza detection(s) together with<br>(3) 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: [https://www.who.int/influenza/surveillance\\_monitoring/updates/latest\\_update\\_GIP\\_surveillance/en/index.html](https://www.who.int/influenza/surveillance_monitoring/updates/latest_update_GIP_surveillance/en/index.html)

US: [www.cdc.gov/flu/weekly](http://www.cdc.gov/flu/weekly)