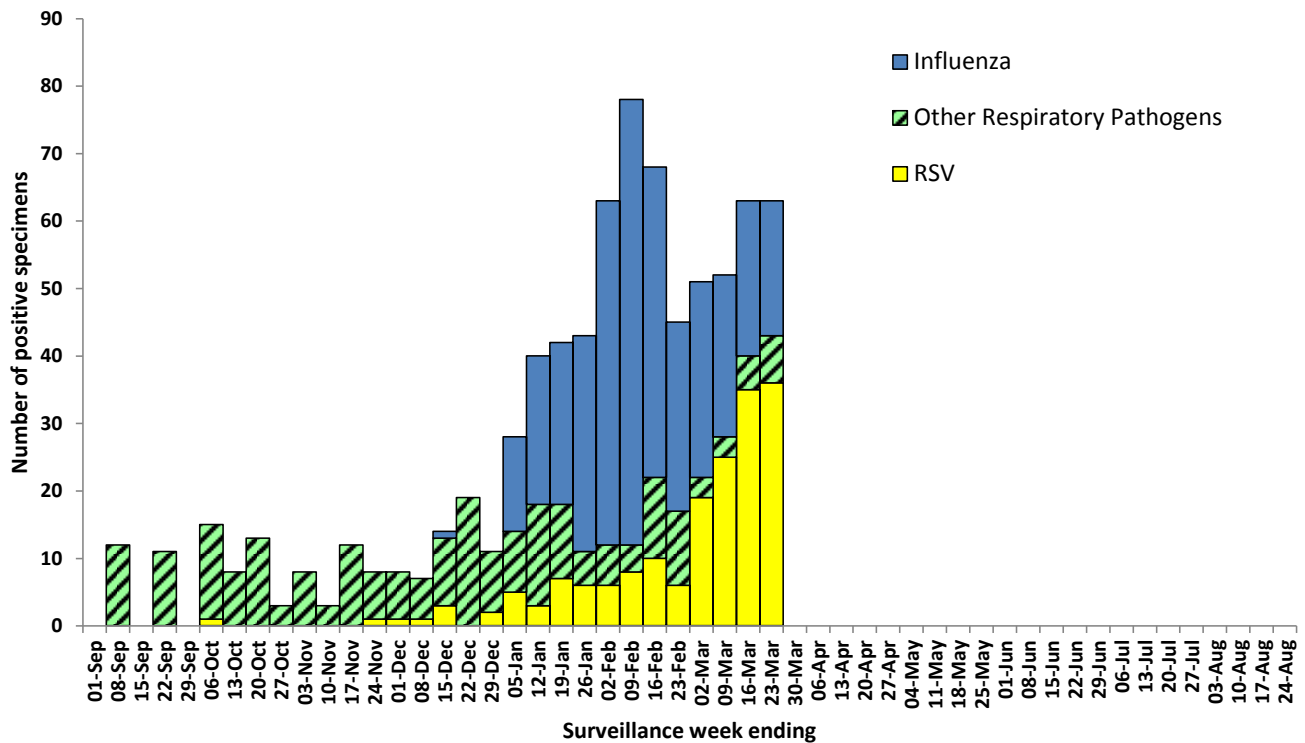


## Summary of Nova Scotia surveillance findings, for the period ending March 23, 2013:

- Twenty influenza positive lab results were reported this week.
- Other respiratory pathogen activity continues. Positive results were received for coronavirus, human metapneumovirus, and RSV.
- The ILI rate for Nova Scotia for this reporting period was 1.6. Eighty three percent of ER sites reported ILI data this week.
- Six specimens were submitted through the sentinel swabbing program from DHAs 3 and 7.
- Sentinel physician data was received from 6 (of 30) physicians.

Figure 1: Summary of laboratory detected circulating respiratory pathogens, Nova Scotia, 2012–2013

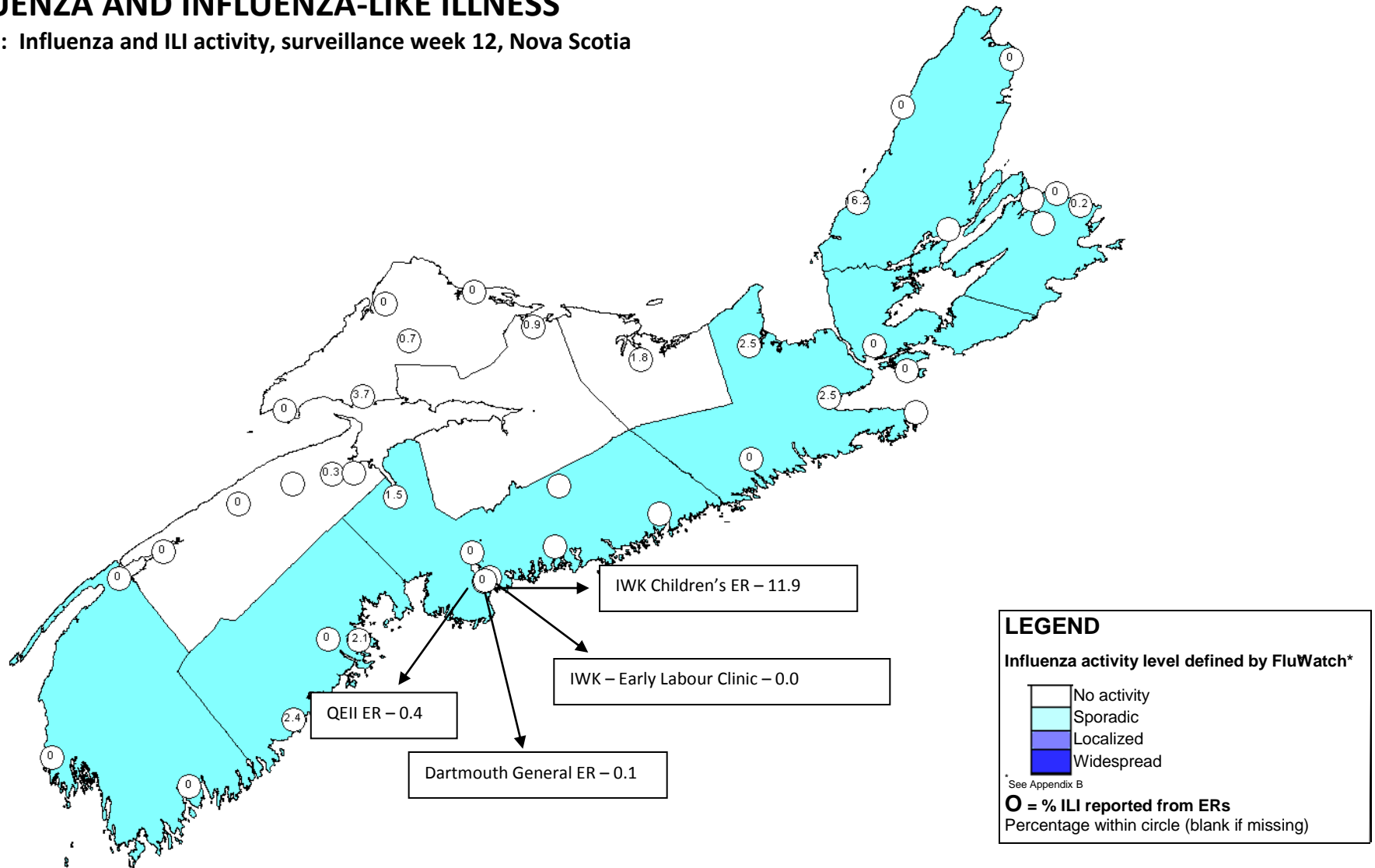


# RESPIRATORY WATCH

Week 12 (March 17 to March 23, 2013)

## INFLUENZA AND INFLUENZA-LIKE ILLNESS

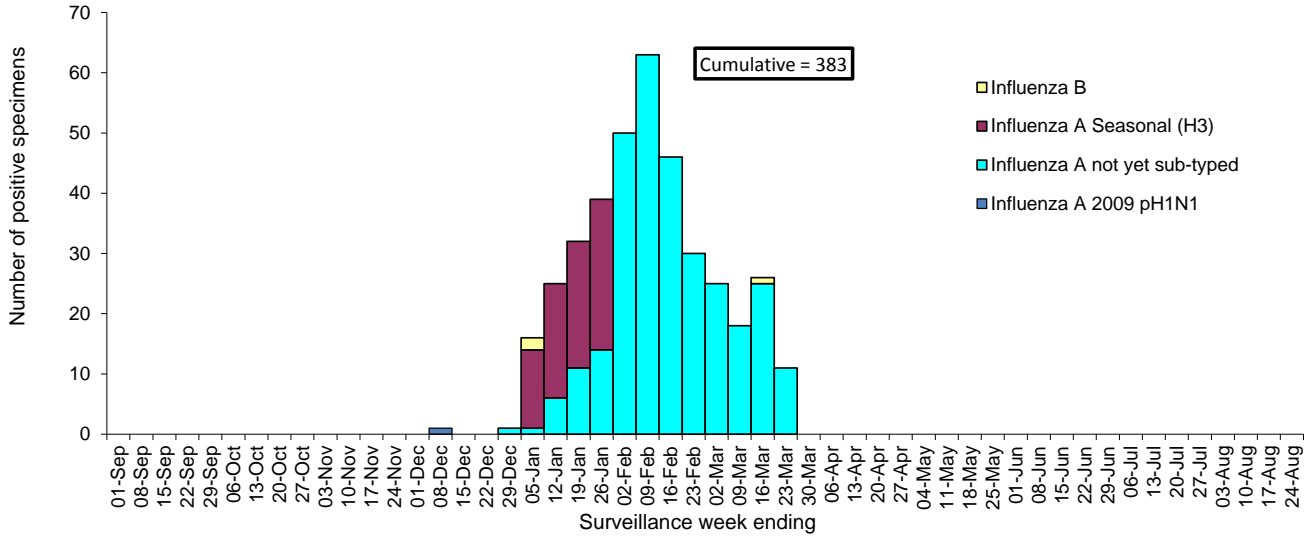
Figure 2: Influenza and ILI activity, surveillance week 12, Nova Scotia



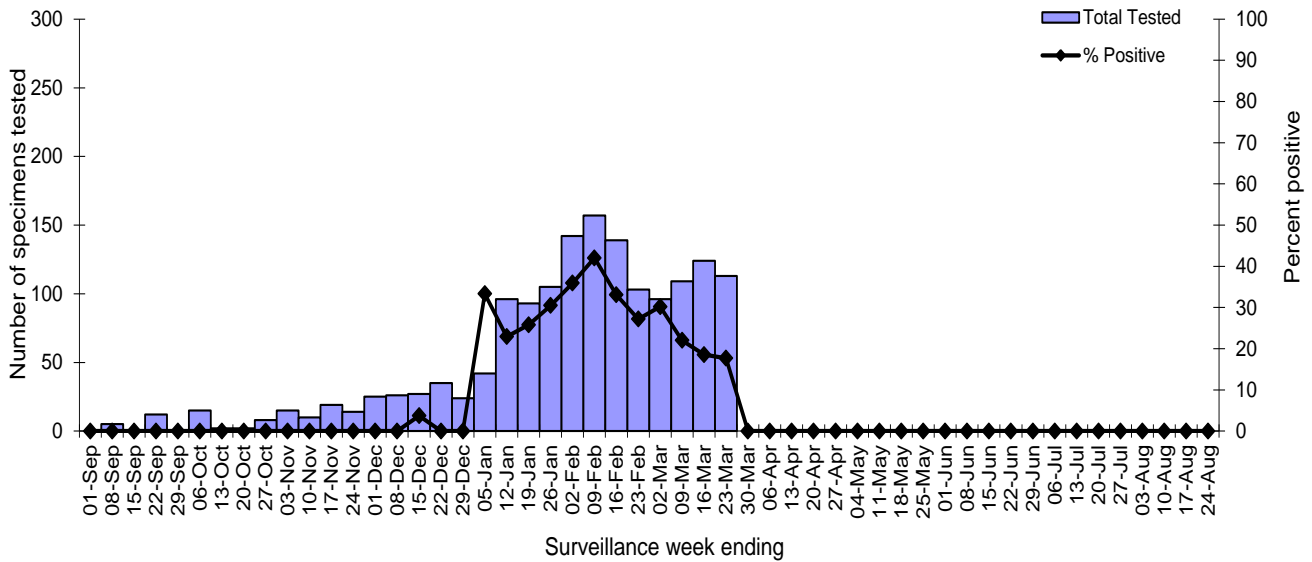
# RESPIRATORY WATCH

Week 12 (March 17 to March 23, 2013)

**Figure 3: Number of reported lab-confirmed influenza cases by type and report week, Nova Scotia, 2012–2013**



**Figure 4: Number of specimens tested for influenza and percent positive, Nova Scotia Provincial Public Health Laboratory Network, 2012–2013\***



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

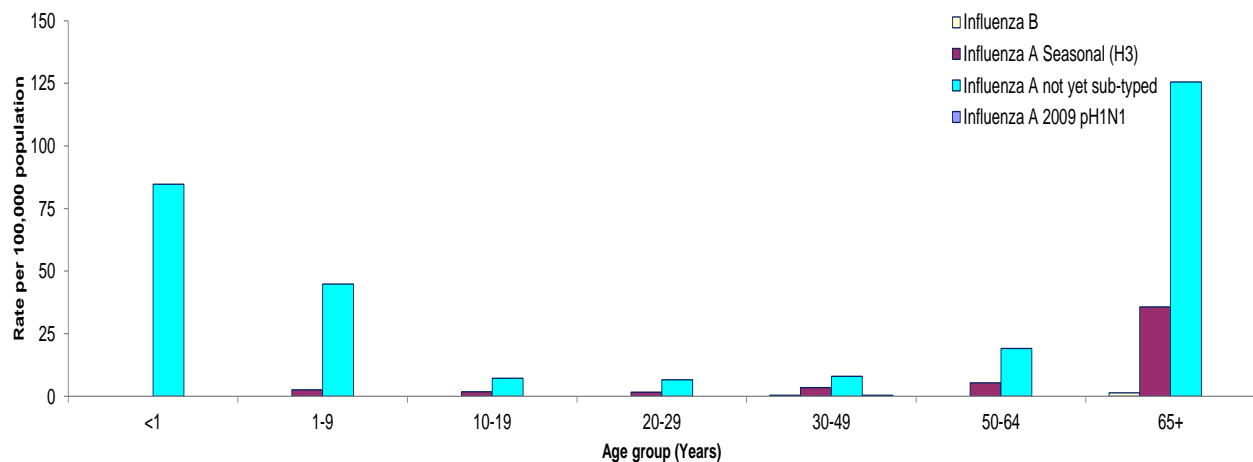
# RESPIRATORY WATCH

Week 12 (March 17 to March 23, 2013)

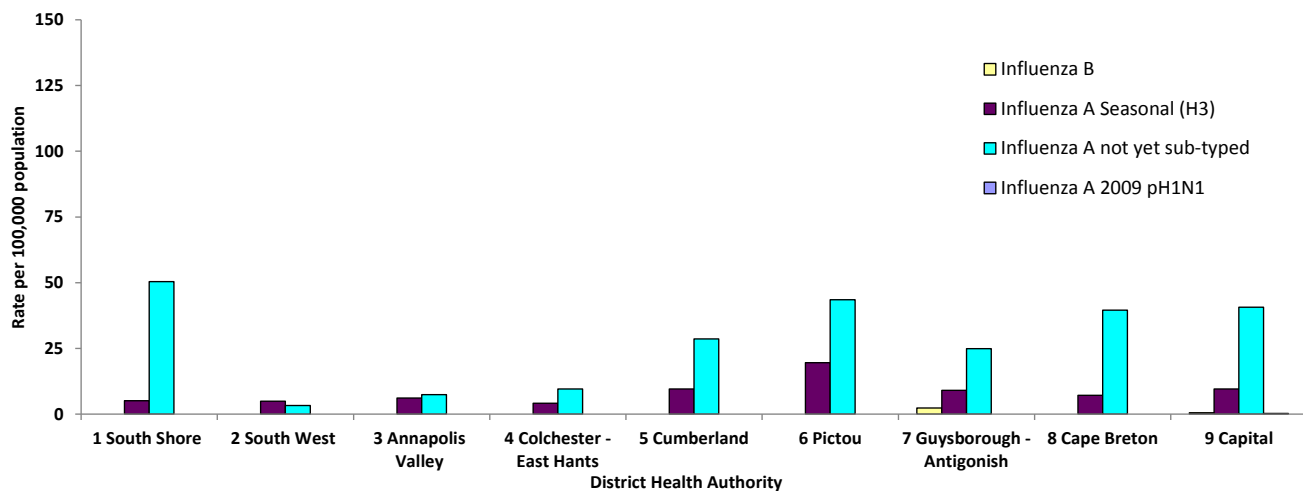
**Table 1: Influenza case counts by DHA, current surveillance week and cumulative, Nova Scotia, 2012–2013**

	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	0	0
Cumulative 2012 - 2013	0	0	0	0	0	0	0	0	1	1
<b>Influenza A (not yet sub-typed)</b>										
Current Week	1	2	0	0	0	0	1	1	7	12
Cumulative 2012 - 2013	30	2	6	7	9	20	11	50	166	301
<b>Influenza A Seasonal (H3)</b>										
Current Week	0	0	0	0	0	0	0	0	0	0
Cumulative 2012 - 2013	3	3	5	3	3	9	4	9	39	78
<b>Influenza B</b>										
Current Week	0	0	0	0	0	0	0	0	0	0
Cumulative 2012 - 2013	0	0	0	0	0	0	1	0	2	3

**Figure 5: Influenza rate per 100,000 population by type and age group, cumulative, Nova Scotia, 2012–2013**



**Figure 6: Influenza rate per 100,000 population by type and DHA, cumulative, Nova Scotia, 2012–2013**



# RESPIRATORY WATCH

Week 12 (March 17 to March 23, 2013)

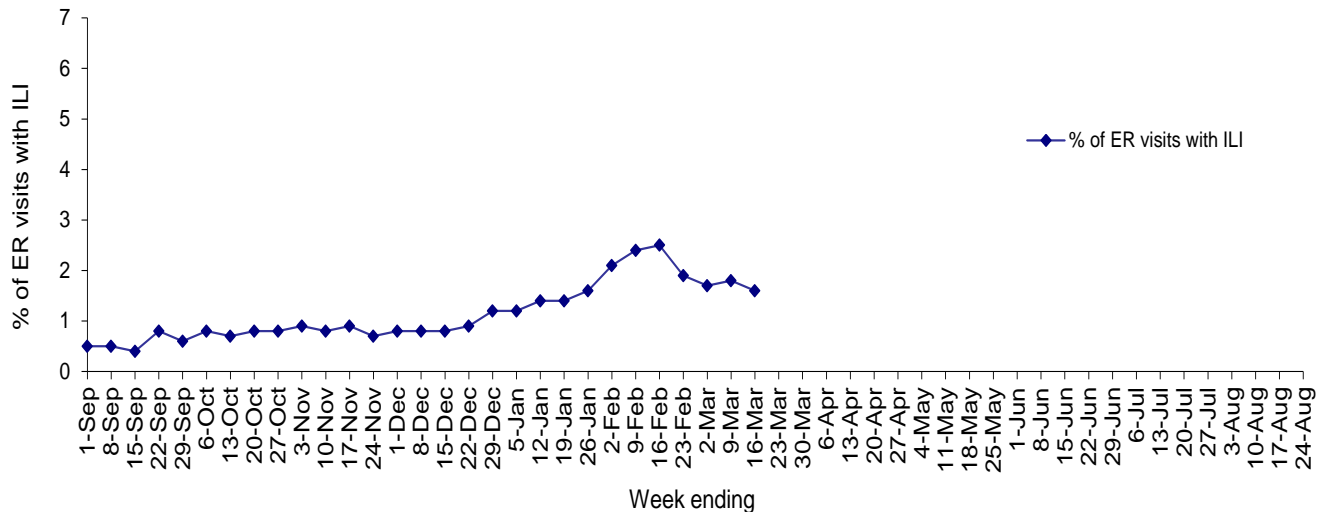
**Table 2: ILI reporting from emergency departments and FluWatch sentinel physicians, and Sentinel Swabbing Specimen Submissions, Nova Scotia, 2012-2013**

	ER SURVEILLANCE			SENTINEL SURVEILLANCE*			SENTINEL SWABBING	
	%ILI	Reporting ERs		%ILI	Reporting Sentinels		# Swabs	Sites Submitting Specimens
DHA 1	4.1	3	of 3	16.0	1	of 6	0	0 of 1
DHA 2	0.0	3	of 3	-	0	of 0	0	0 of 1
DHA 3	0.2	3	of 5	-	0	of 1	1	1 of 2
DHA 4	1.2	2	of 2	-	0	of 0	0	0 of 2
DHA 5	0.3	5	of 5	0.0	1	of 2	0	0 of 1
DHA 6	1.8	1	of 1	-	0	of 2	0	0 of 1
DHA 7	1.5	6	of 6	-	0	of 1	5	1 of 2
DHA 8	2.8	5	of 8	0.0	2	of 4	0	0 of 3
DHA 9	0.4	5	of 7	0.0	2	of 14		
IWK	8.7	1	of 1					
<b>Nova Scotia (excl. IWK)†</b>	<b>1.0</b>	<b>33</b>	<b>of 40</b>	<b>82.5%</b>			<b>6</b>	<b>2 of 12</b>
<b>Nova Scotia (incl. IWK)</b>	<b>1.6</b>	<b>34</b>	<b>of 41</b>	<b>82.9%</b>	<b>3.0%</b>	<b>6 of 30</b>		

\*Flu watch sentinels

†Excludes the children's ER from IWK

**Figure 7: Percentage of ER visits with ILI, Nova Scotia, 2012–2013**



# RESPIRATORY WATCH

Week 12 (March 17 to March 23, 2013)

## RESPIRATORY SYNCYTIAL VIRUS (RSV)

Figure 8: Number of positive RSV specimens by report week, Nova Scotia, 2012–2013

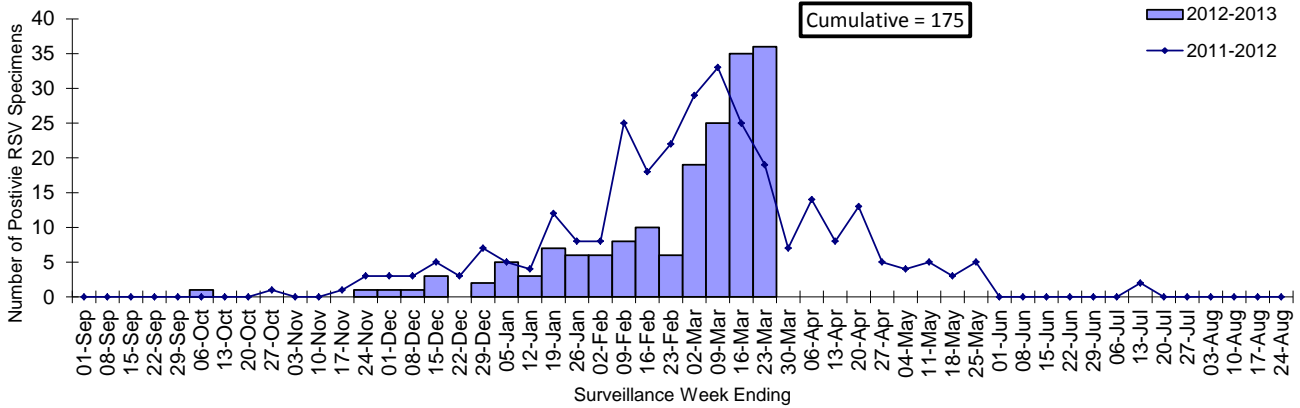
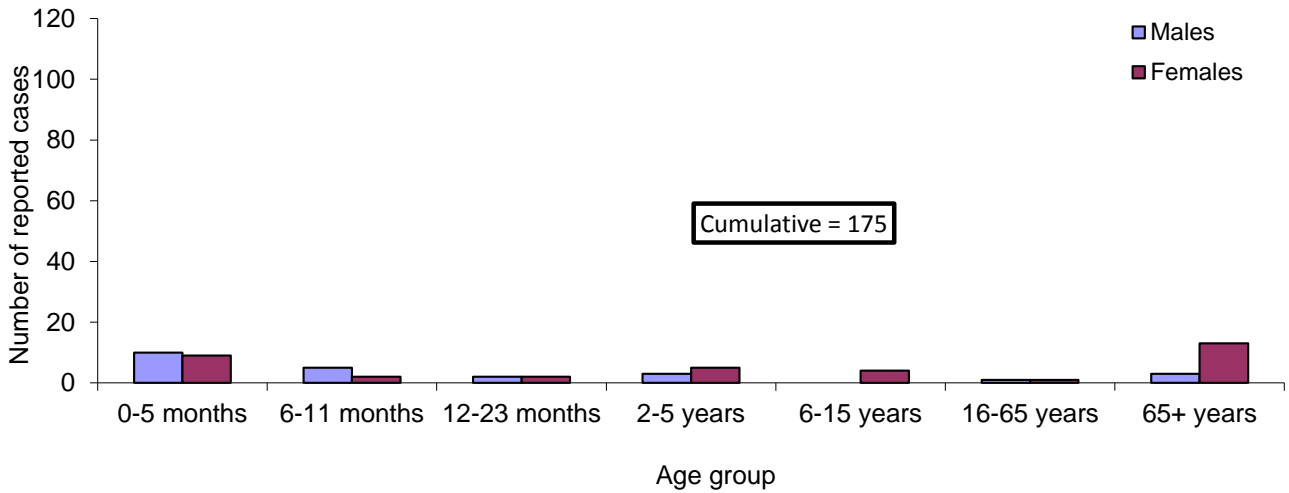


Figure 9: Cumulative number of positive RSV specimens by age group and sex, Nova Scotia, 2012-2013



# RESPIRATORY WATCH

Week 12 (March 17 to March 23, 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, 2012–2013

Number and percent positive for:	Surveillance Week			Cumulative		
	n tested	n positive	% positive	Season-to-Date	Totals	
	n tested	n positive	% positive	n tested	n positive	% positive
Adenovirus	15	0	0.0	507	0	0.0
Bocavirus	15	0	0.0	507	2	0.4
Chlamydophila pneumoniae	21	0	0.0	438	24	5.5
Coronavirus	15	2	13.3	507	29	5.7
Enterovirus	15	0	0.0	498	4	0.8
Metapneumovirus	15	1	6.7	507	10	2.0
Mycoplasma pneumoniae	21	0	0.0	438	64	14.6
Parainfluenza	15	3	20.0	507	29	5.7
Pertussis	9	0	0.0	222	14	6.3
Respiratory syncytial virus A	15	0	0.0	453	10	2.2
Respiratory syncytial virus B	15	1	0.0	453	3	0.7
Respiratory syncytial virus not typed	106	32	30.2	1223	162	13.2
Rhinovirus	15	4	26.7	507	57	11.2

# RESPIRATORY WATCH

Week 12 (March 17 to March 23, 2013)

## APPENDIX: Definitions used in Influenza Surveillance, 2012-2013

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 12 (March 17 to March 23, 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