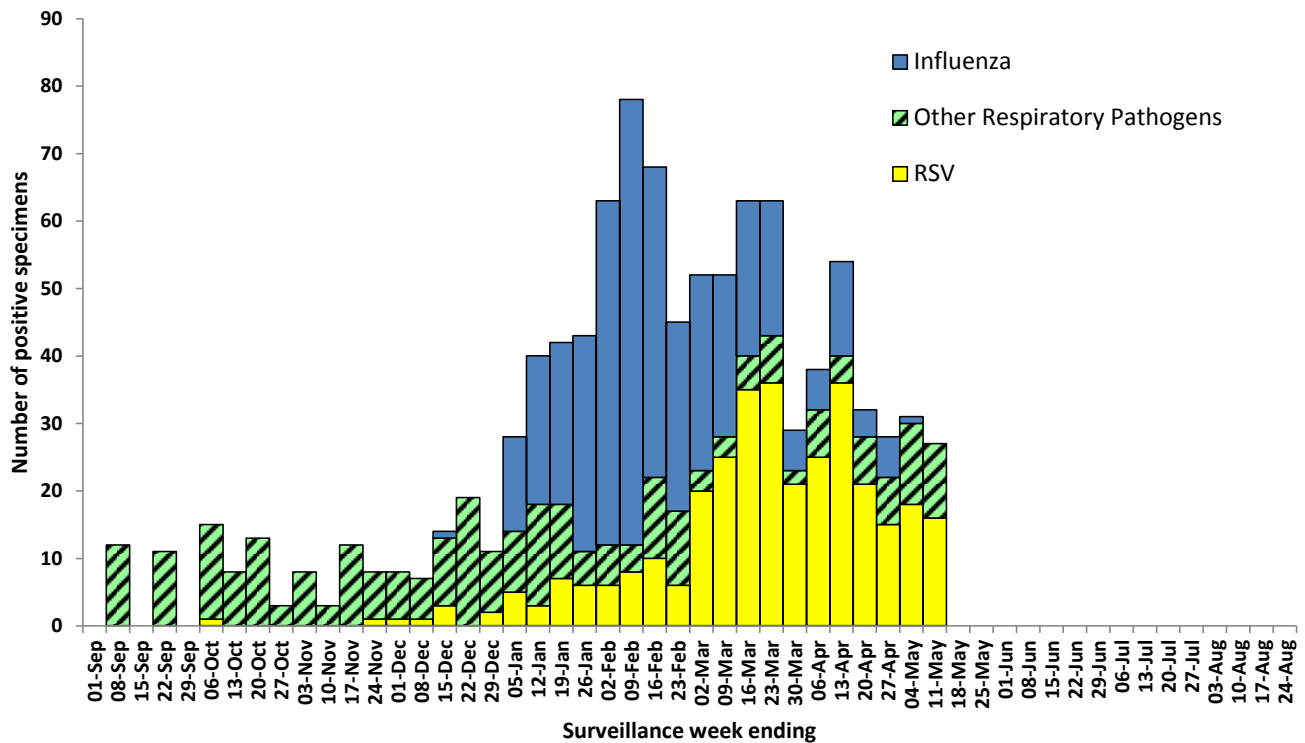


## Summary of Nova Scotia surveillance findings, for the period ending May 11, 2013:

- There were no influenza positive lab results reported this week.
- Other respiratory pathogen activity continues. Positive results were received for metapneumovirus, mycoplasma pneumoniae, parainfluenza, rhinovirus and RSV.
- The ILI rate for Nova Scotia for this reporting period was 0.9. Eighty three percent of ER sites reported ILI data this week.
- One specimen was submitted through the sentinel swabbing program.
- Sentinel physician data was received from 3 (of 30) physicians.

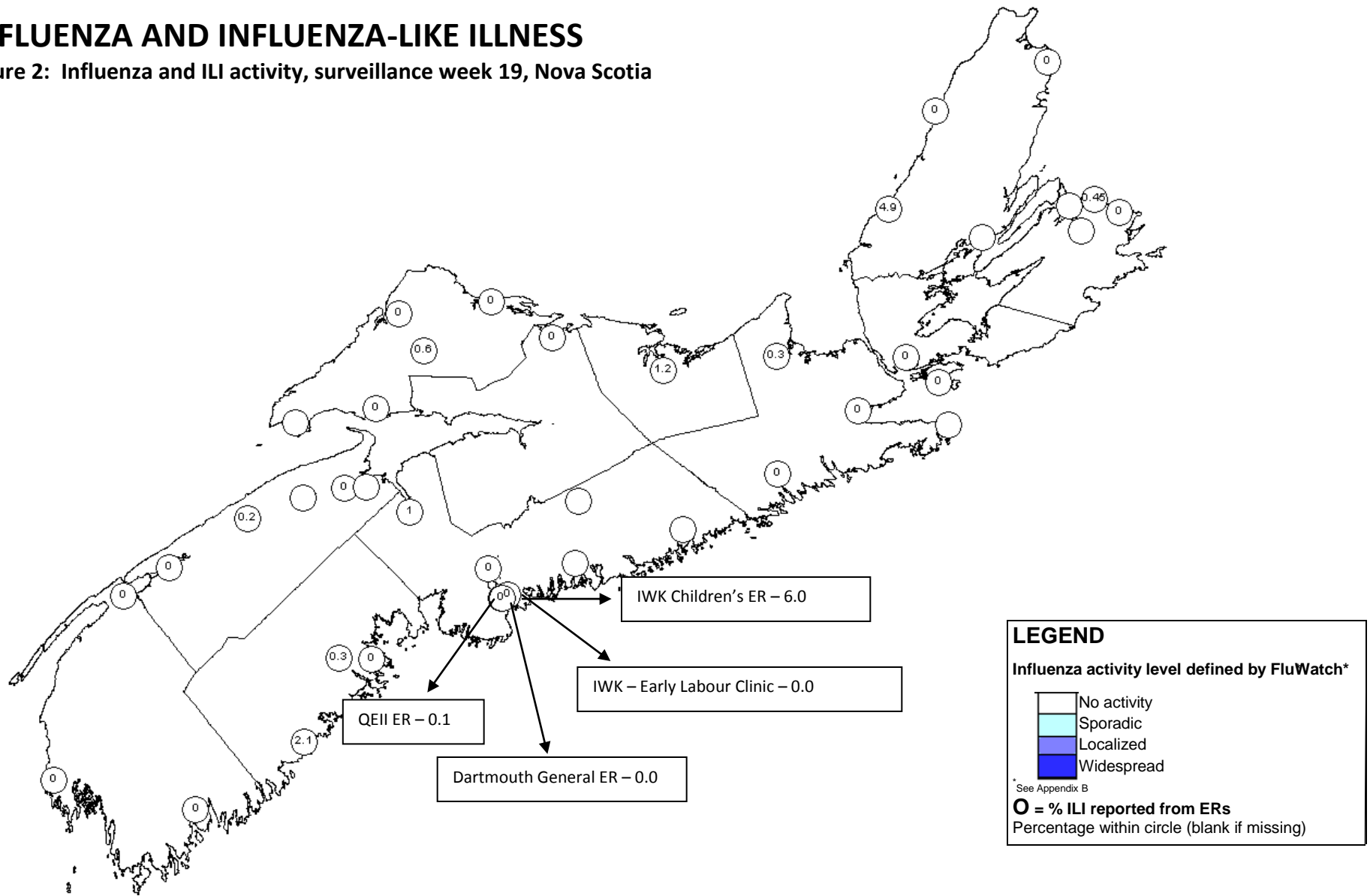
Figure 1: Summary of laboratory detected circulating respiratory pathogens, Nova Scotia, 2012–2013



# RESPIRATORY WATCH

## INFLUENZA AND INFLUENZA-LIKE ILLNESS

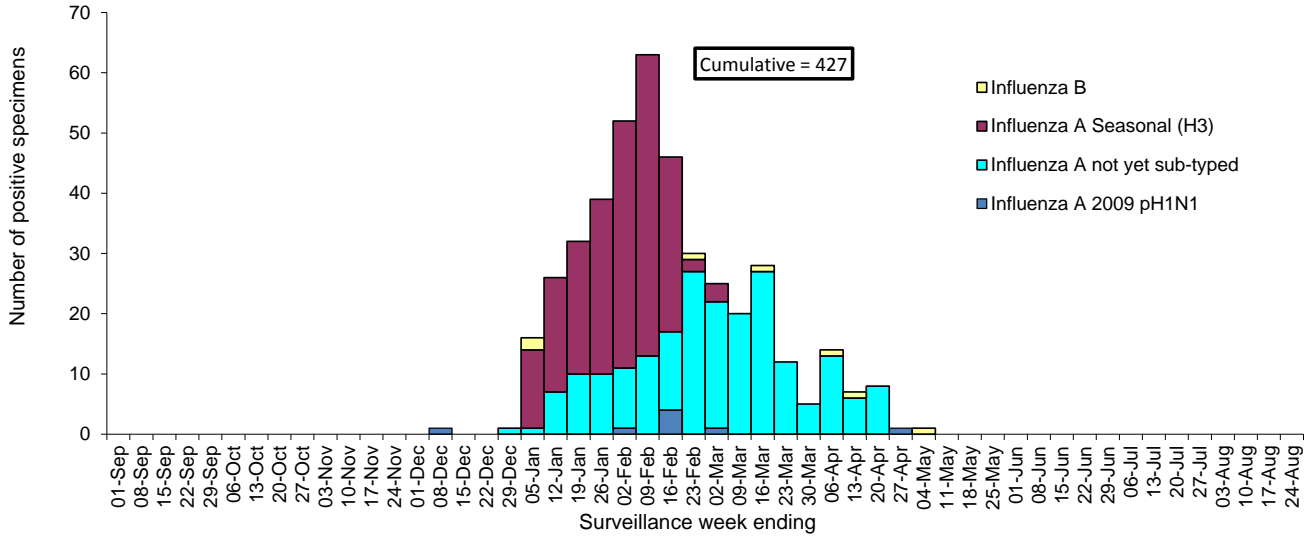
Figure 2: Influenza and ILI activity, surveillance week 19, Nova Scotia



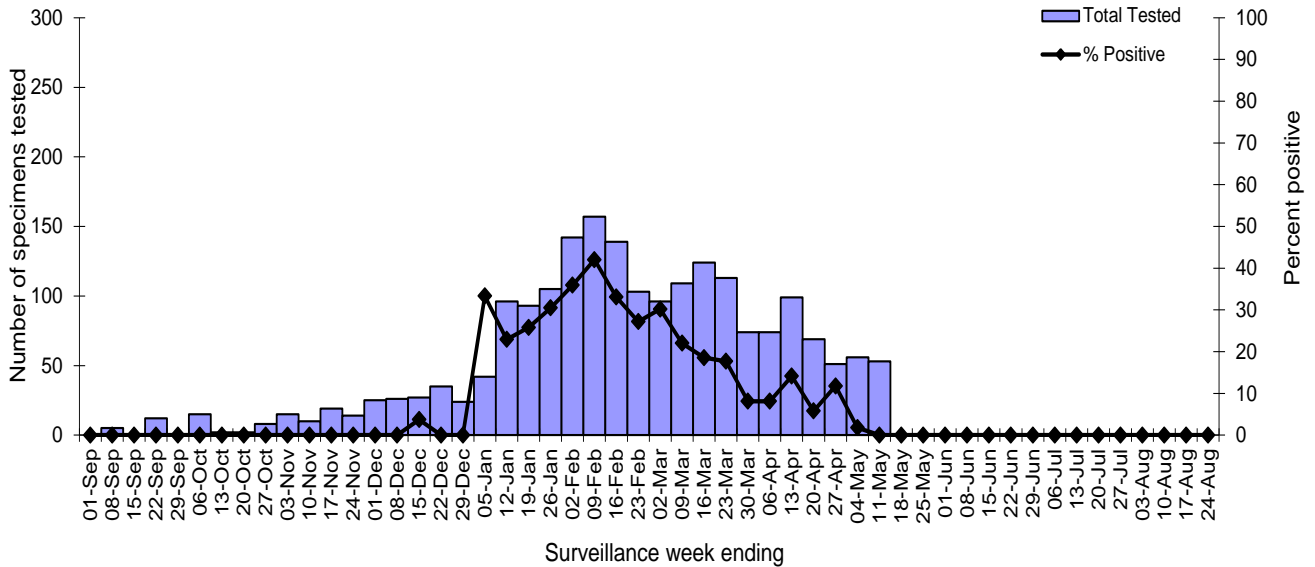
# RESPIRATORY WATCH

Week 19 (May 5 to May 11, 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.

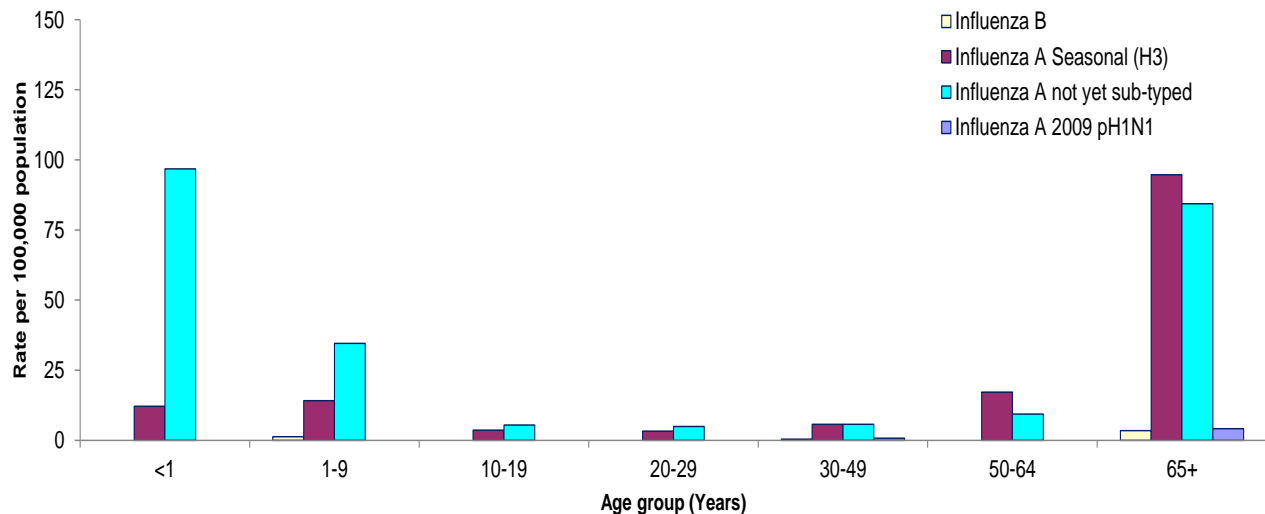
# RESPIRATORY WATCH

Week 19 (May 5 to May 11, 2013)

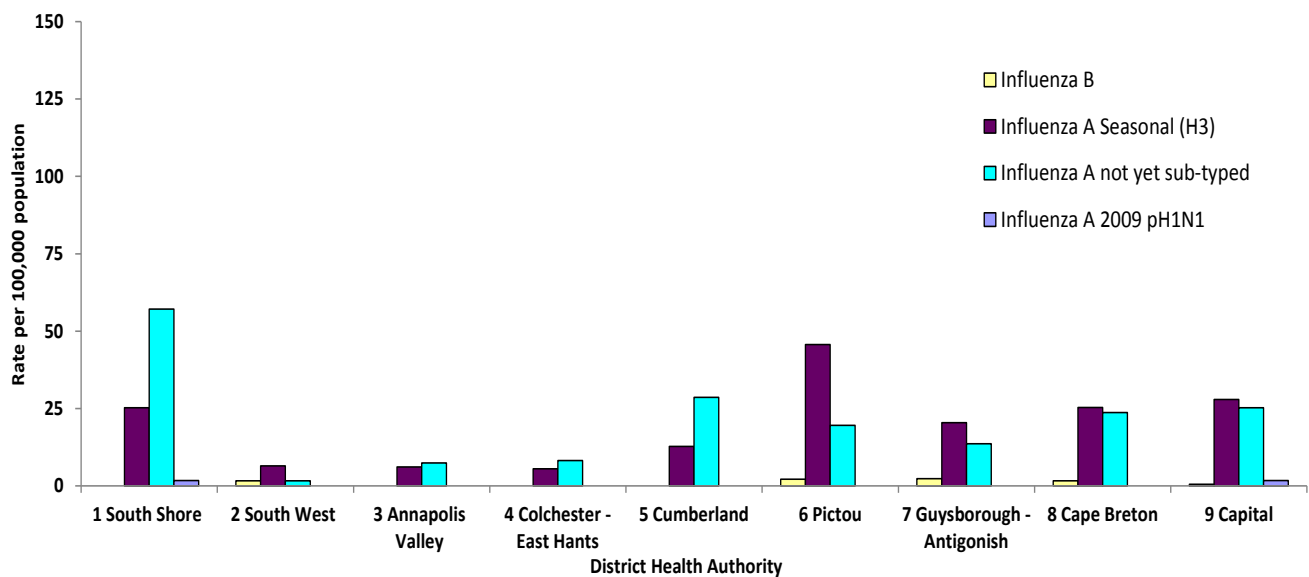
**Table 1: Influenza case counts by DHA, current surveillance week and cumulative, Nova Scotia, 2012–2013**

	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	1	0	0	0	0	0	0	0	7	8
<b>Influenza A (not yet sub-typed)</b>										
Current Week	5	0	0	0	0	0	0	0	0	0
Cumulative 2012 - 2013	34	1	6	6	9	9	6	30	103	204
<b>Influenza A Seasonal (H3)</b>										
Current Week	0	0	0	0	0	0	0	0	0	0
Cumulative 2012 - 2013	15	4	5	4	4	21	9	32	114	208
<b>Influenza B</b>										
Current Week	0	0	0	0	0	0	0	0	0	0
Cumulative 2012 - 2013	0	1	0	0	0	1	1	2	2	7

**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 19 (May 5 to May 11, 2013)

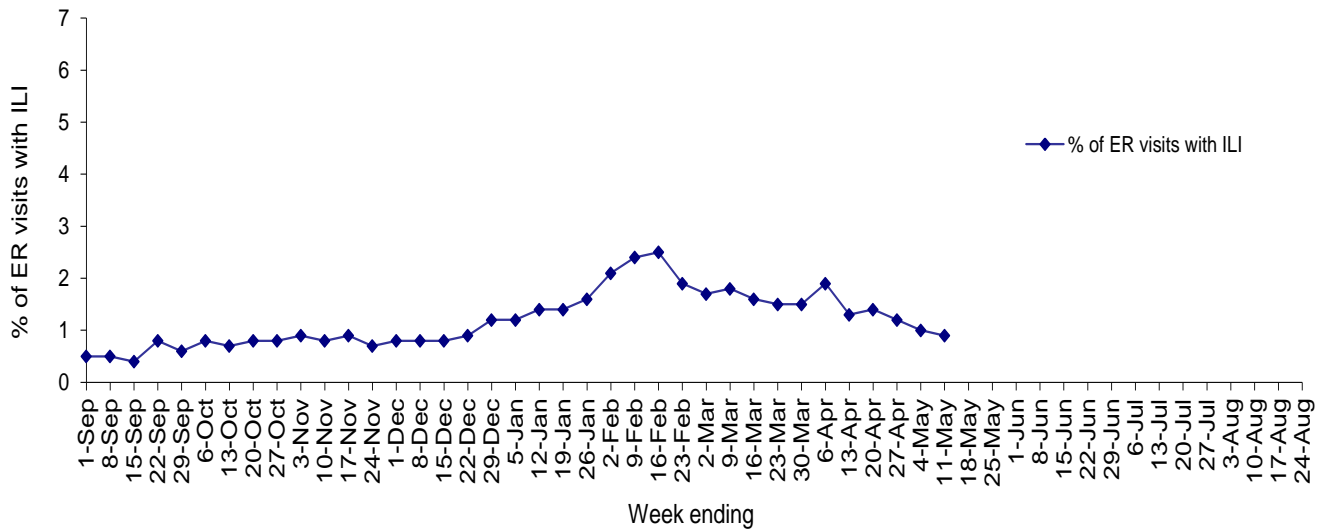
**Table 2: ILI reporting from emergency departments and FluWatch sentinel physicians, and Sentinel Swabbing Specimen Submissions, Nova Scotia, 2012-2013**

	ER SURVEILLANCE		SENTINEL SURVEILLANCE*		SENTINEL SWABBING	
	%ILI	Reporting ERs	%ILI	Reporting Sentinels	# Swabs	Sites Submitting Specimens
DHA 1	0.6	3 of 3	0.0	1 of 6	0	0 of 1
DHA 2	0.0	3 of 3	-	0 of 0	0	0 of 1
DHA 3	0.1	3 of 5	-	0 of 1	0	0 of 2
DHA 4	4.6	2 of 2	-	0 of 0	0	0 of 2
DHA 5	0.1	5 of 5	-	0 of 2	0	0 of 1
DHA 6	1.2	1 of 1	-	0 of 2	0	0 of 1
DHA 7	0.3	6 of 6	-	0 of 1	1	1 of 2
DHA 8	1.1	5 of 8	0.0	1 of 4	0	0 of 3
DHA 9	0.1	5 of 7	0.0	1 of 14		
IWK	4.4	1 of 1				
<b>Nova Scotia (excl. IWK)†</b>	<b>0.6</b>	<b>33 of 40</b>	<b>82.5%</b>		<b>1</b>	<b>1 of 12</b>
<b>Nova Scotia (incl. IWK)</b>	<b>0.9</b>	<b>34 of 41</b>	<b>82.9%</b>	<b>3.1%</b>	<b>3 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 19 (May 5 to May 11, 2013)

## RESPIRATORY SYNCYTIAL VIRUS (RSV)

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

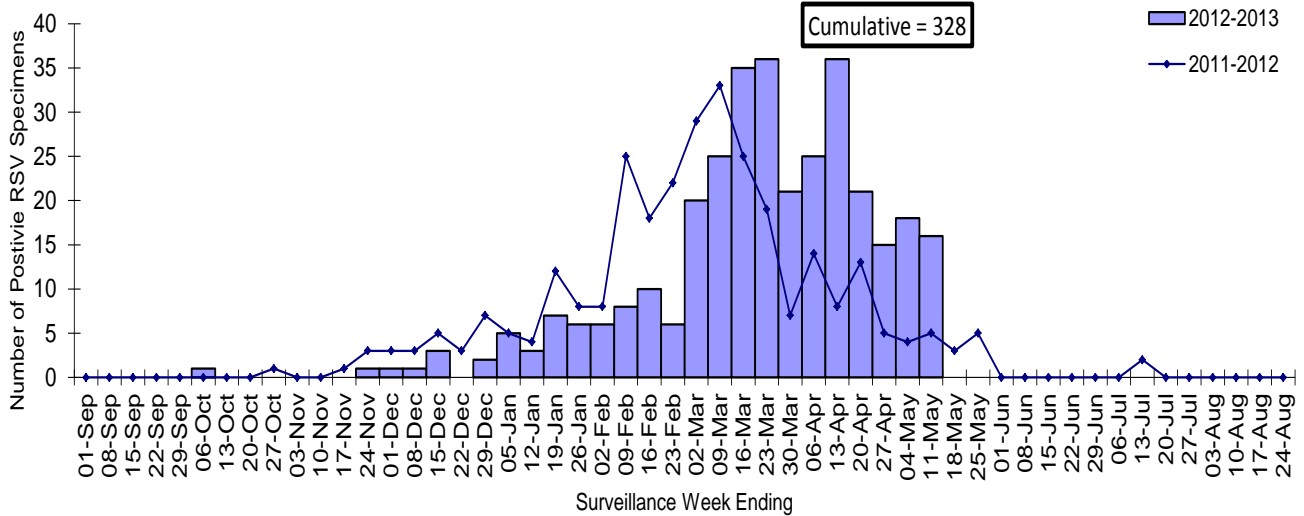
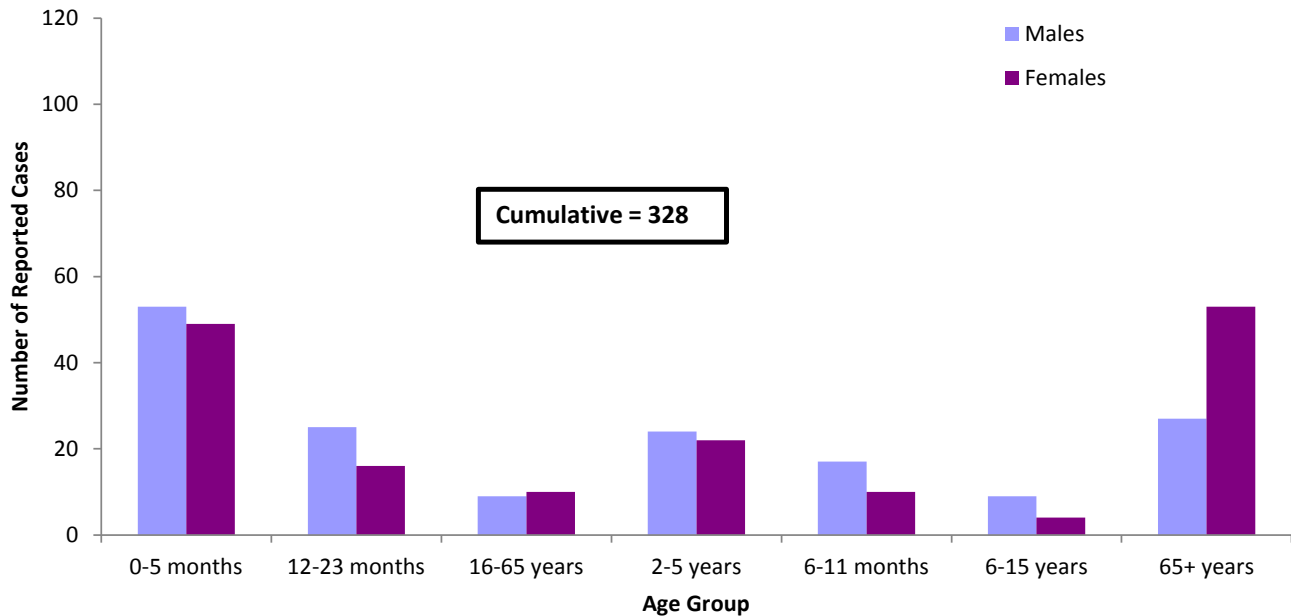


Figure 9: Cumulative number of positive RSV specimens by age group and sex, Nova Scotia, 2012-2013



# RESPIRATORY WATCH

Week 19 (May 5 to May 11, 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 Season-to-Date Totals		
	n tested	n positive	% positive	n tested	n positive	% positive
Adenovirus	16	0	0.0	598	0	0.0
Bocavirus	16	0	0.0	598	2	0.3
Chlamydomphila pneumoniae	14	0	0.0	527	28	5.3
Coronavirus	16	0	0.0	598	37	6.2
Enterovirus	16	0	0.0	589	4	0.7
Metapneumovirus	16	6	37.5	598	29	4.8
Mycoplasma pneumoniae	14	1	7.1	527	66	12.5
Parainfluenza	16	2	12.5	598	37	6.2
Pertussis	2	0	0.0	254	14	5.5
Respiratory syncytial virus A	16	2	0.0	544	15	2.8
Respiratory syncytial virus B	16	0	0.0	544	4	0.7
Respiratory syncytial virus not typed	39	14	35.9	1657	309	18.6
Rhinovirus	16	2	12.5	598	66	11.0

# RESPIRATORY WATCH

Week 19 (May 5 to May 11, 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 19 (May 5 to May 11, 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