

IN SUMMARY...

Activity levels**
<ul style="list-style-type: none"> No activity in all Zones this week.
Laboratory-confirmed cases***
<ul style="list-style-type: none"> There were no influenza cases reported during week 41. There have been 2 laboratory confirmed cases of Influenza A reported during the 2017-2018 influenza season. Positive test results were received for chlamydomphila pneumoniae and rhinovirus.
Severity
<ul style="list-style-type: none"> There have been no ICU admissions and no influenza deaths*** of laboratory confirmed influenza during the 2017-2018 influenza season.
Syndromic surveillance
<ul style="list-style-type: none"> The average ILI rate for Nova Scotia during this reporting period was 0.4. 82.5% of emergency rooms reported ILI data during this reporting period. Aberdeen Hospital, All Saints Springhill Hospital, Colchester East Hants Health Centre, Cumberland Regional Health Care Centre, Lillian Fraser Memorial Hospital, North Cumberland Memorial Hospital and South Cumberland Community Care Centre did not report this week.

Notes: *Reporting weeks run from Sunday to Saturday. The 2017-2018 influenza season is defined using PHAC's influenza surveillance weeks. This year runs from August 27, 2017 (Week 35) to August 25, 2018 (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, 2017-2018 season, with trend-line comparison to 2016-2017 season, Nova Scotia.

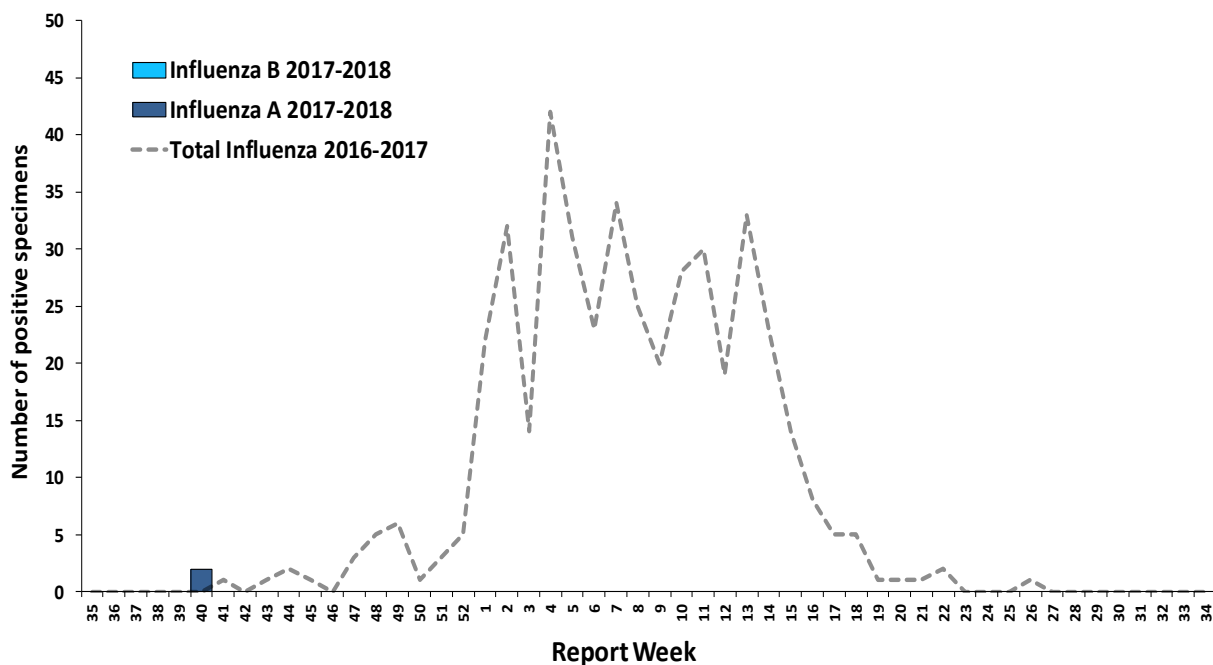


Table 1: Number of laboratory-confirmed influenza cases by zone, current week and cumulative 2017-2018 season in Nova Scotia.

ZONE	CURRENT WEEK			CUMULATIVE 2017-2018		
	TOTAL	INFLUENZA A	INFLUENZA B	TOTAL	INFLUENZA A	INFLUENZA B
Western	0	0	0	0	0	0
Northern	0	0	0	0	0	0
Eastern	0	0	0	0	0	0
Central	0	0	0	2	2	0
Nova Scotia Total	0	0	0	2	2	0

Table 2: Number of laboratory-confirmed influenza cases by age group, current week and cumulative 2017-2018 season in Nova Scotia.

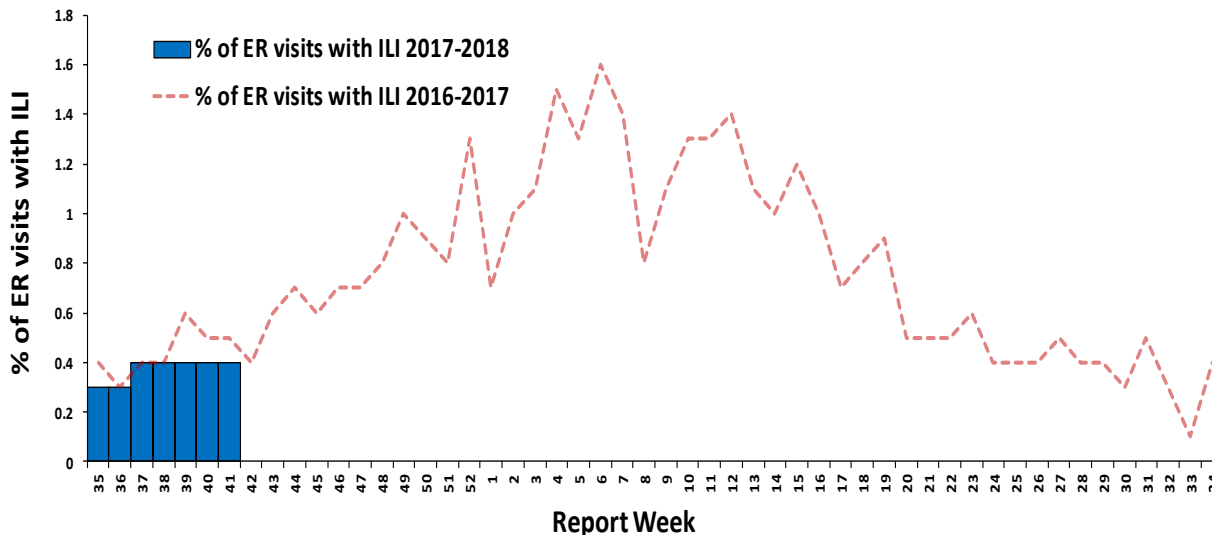
AGE	CURRENT WEEK			CUMULATIVE 2017-2018		
	TOTAL	INFLUENZA A	INFLUENZA B	TOTAL	INFLUENZA A	INFLUENZA B
0-4	0	0	0	0	0	0
5-19	0	0	0	0	0	0
20-44	0	0	0	0	0	0
45-64	0	0	0	1	1	0
65+	0	0	0	1	1	0
Nova Scotia Total	0	0	0	2	2	0

Table 3: Hospitalizations, ICU admissions and deaths for influenza positive patients, current week and cumulative, 2017-2018 season, Nova Scotia.

	CURRENT WEEK			CUMULATIVE 2017-2018		
	TOTAL	INFLUENZA A	INFLUENZA B	TOTAL	INFLUENZA A	INFLUENZA B
Hospitalized	0	0	0	2	2	0
Hospitalized - ICU	0	0	0	0	0	0
Deceased*	0	0	0	0	0	0
Nova Scotia Total	0	0	0	2	2	0

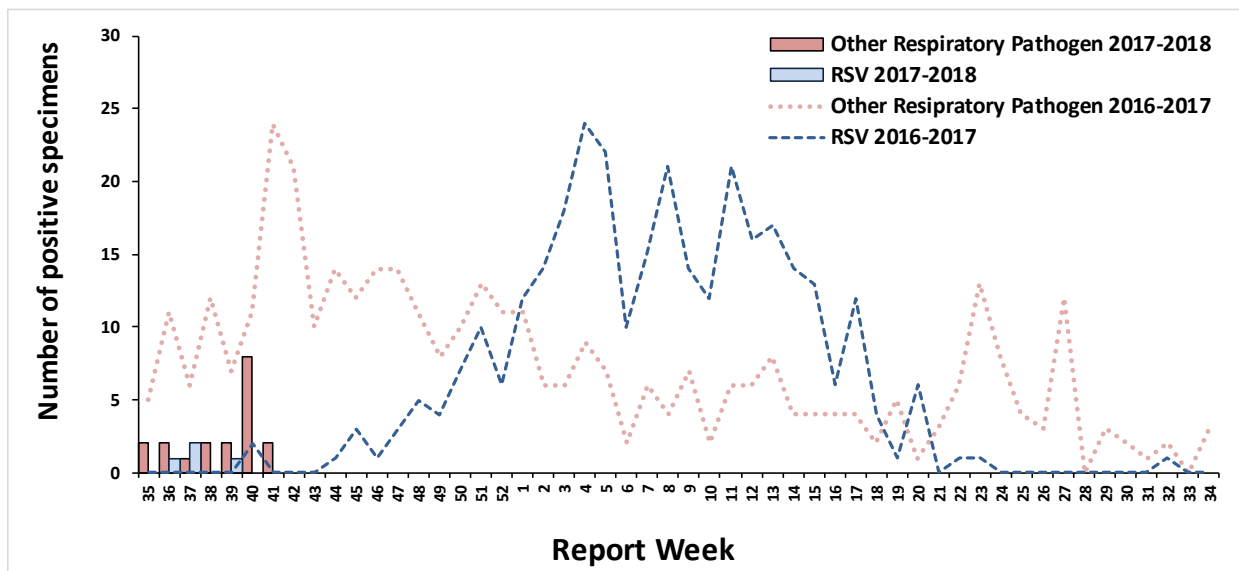
SYNDROMIC SURVEILLANCE

Figure 2: Percentage of emergency room visits due to ILI by report week, 2017-2018 season, with trend-line comparison to 2016-2017 season, Nova Scotia.



OTHER RESPIRATORY PATHOGENS

Figure 3: Number of positive specimens tested for other respiratory pathogens* and RSV by report week, 2017-2018 season, with trend-line comparison to 2016-2017 season, Nova Scotia.



* Other respiratory pathogen includes Adenovirus, Bocavirus, Chlamydomphila pneumonia, Coronavirus, Enterovirus, Metapneumovirus, Mycoplasma pneumoniae, Parainfluenza, Pertussis, Rhinovirus.
Note that data for this figure is obtained from provincial laboratories.

Table 4: Number of positive RSV specimens by age group, 2017-2018 season, Nova Scotia.

AGE GROUP	2017-2018
0-5 months	1
6-11 months	0
12-23 months	2
2-5 years	0
6-15 years	1
16-65 years	0
65+ years	0
Nova Scotia Total	4

Table 5: Number of positive specimens tested for other respiratory pathogens, current report week and cumulative season, Nova Scotia, 2017–2018.

PATHOGEN	CURRENT WEEK (n positive)	CUMULATIVE 2017-2018
Adenovirus	0	1
Bocavirus	0	1
Chlamydophila pneumoniae	1	1
Coronavirus	0	0
Enterovirus	0	0
Metapneumovirus	0	0
Mycoplasma pneumoniae	0	1
Parainfluenza	0	0
Pertussis	0	1
Respiratory Syncytial Virus	0	4
Rhinovirus	1	14

APPENDIX: DEFINITIONS USED IN INFLUENZA SURVEILLANCE, AND USEFUL LINKS, 2017-2018

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.

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	(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 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
US: www.cdc.gov/flu/weekly