

IN SUMMARY...

Activity levels**
<ul style="list-style-type: none"> All Zones are reporting no activity this week.
Laboratory-confirmed cases***
<ul style="list-style-type: none"> There were no influenza cases reported this week. There have been 4 laboratory confirmed cases of Influenza A and 1 laboratory confirmed case of influenza B reported during the 2017-2018 influenza season. Positive test results were received for adenovirus, mycoplasma pneumonia 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 0.6. 97.5% of emergency rooms reported ILI data during this reporting period. Twin Oaks Memorial Hospital did not report.

*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.

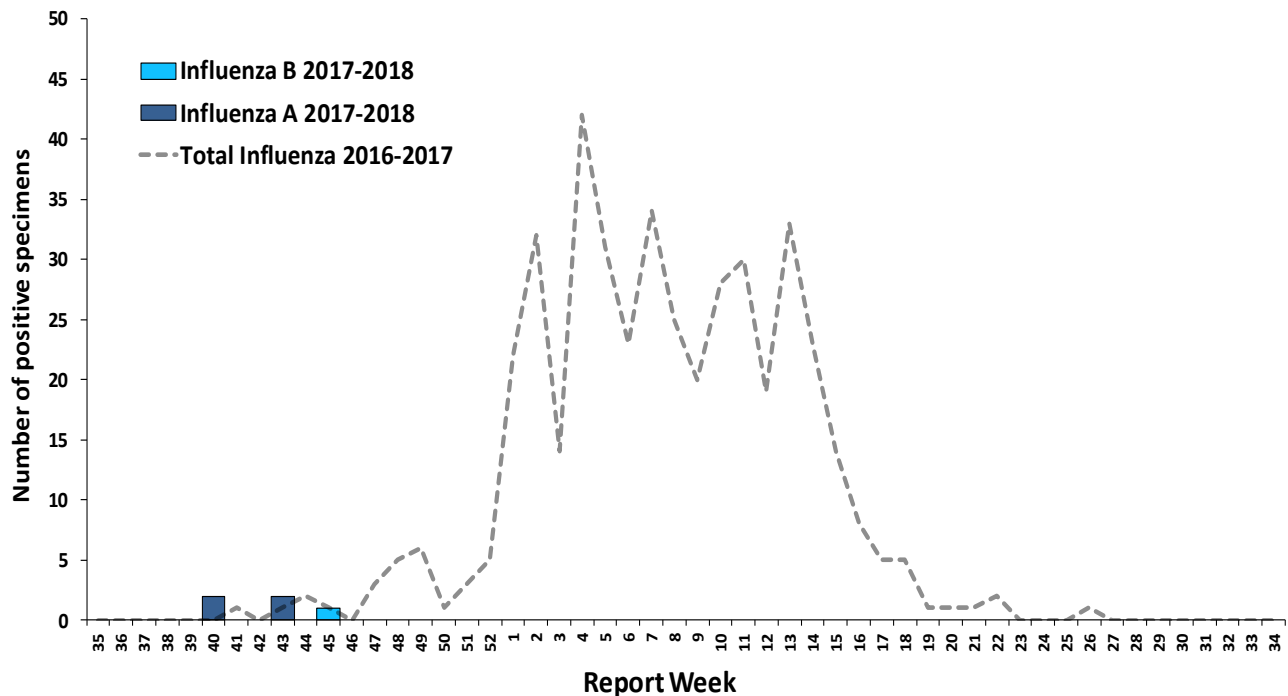


Table 1: Number of laboratory-confirmed influenza cases by zone, current week and cumulative 2017-2018 season in Nova Scotia.

ZONE	CURRENT WEEK			CUMULATIVE 2017-2018		
	TOTAL	INFLUENZA A	INFLUENZA B	TOTAL	INFLUENZA A	INFLUENZA B
Western	0	0	0	1	1	0
Northern	0	0	0	0	0	0
Eastern	0	0	0	2	1	1
Central	0	0	0	2	2	0
Nova Scotia Total	0	0	0	5	4	1

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

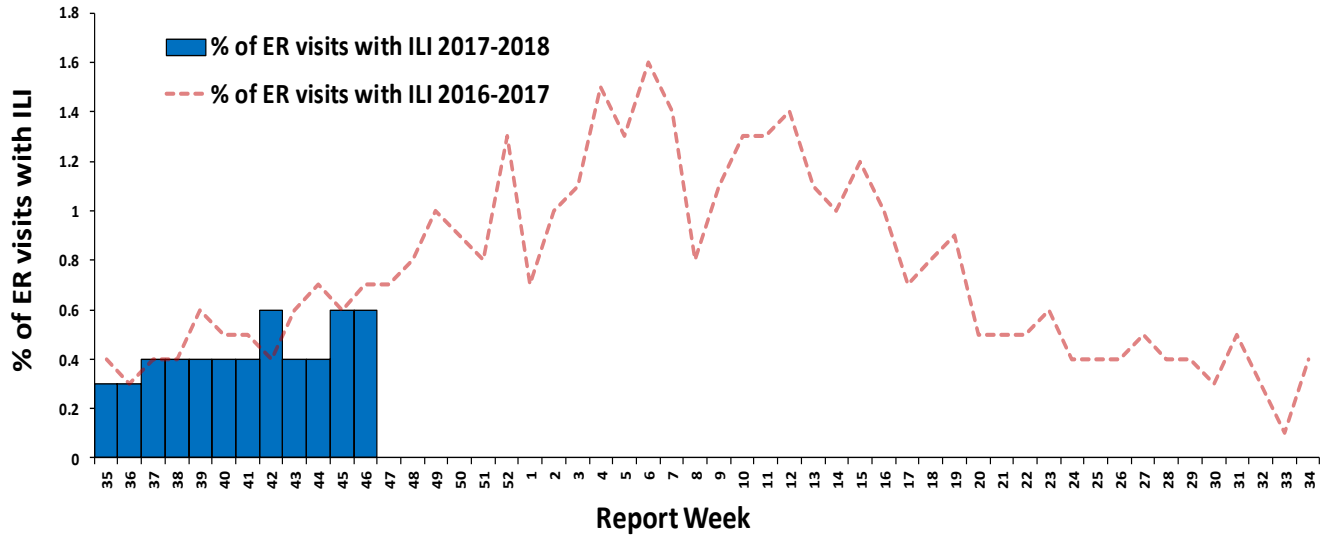
AGE	CURRENT WEEK			CUMULATIVE 2017-2018		
	TOTAL	INFLUENZA A	INFLUENZA B	TOTAL	INFLUENZA A	INFLUENZA B
0-4	0	0	0	0	0	0
5-19	0	0	0	0	0	0
20-44	0	0	0	0	0	0
45-64	0	0	0	2	2	0
65+	0	0	0	3	2	1
Nova Scotia Total	0	0	0	5	4	1

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	4	3	1
Hospitalized - ICU	0	0	0	0	0	0
Deceased*	0	0	0	0	0	0
Nova Scotia Total	0	0	0	4	3	1

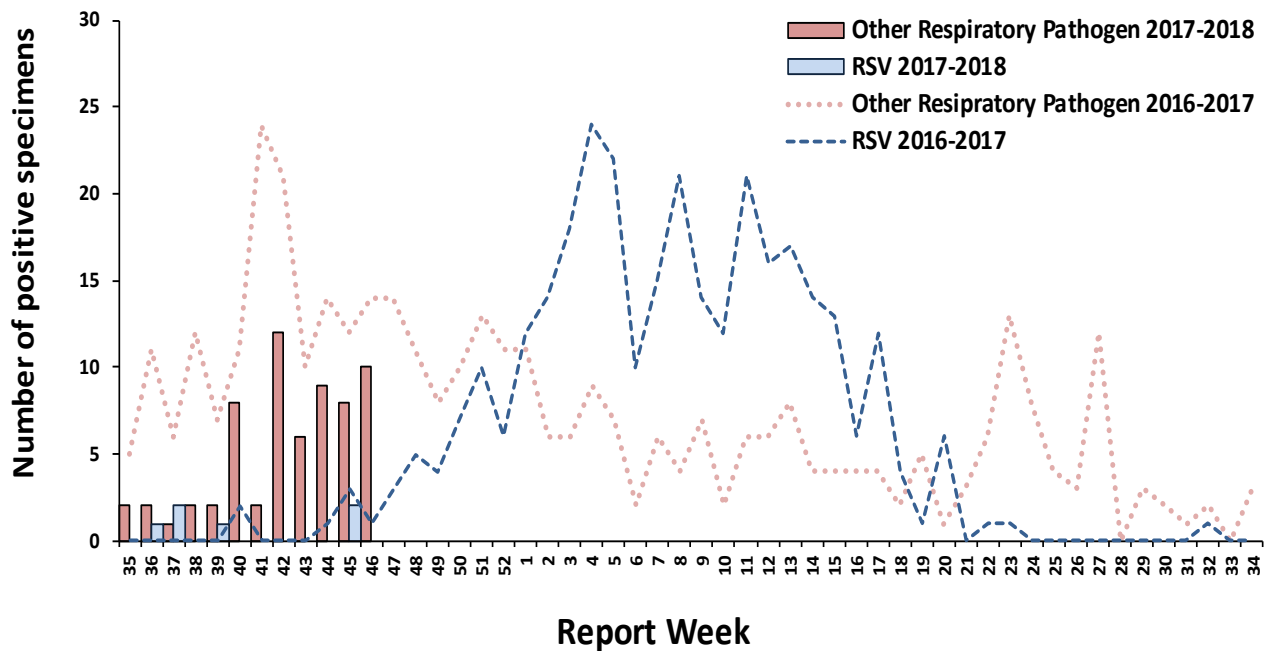
SYNDROMIC SURVEILLANCE

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	2
6-11 months	0
12-23 months	2
2-5 years	1
6-15 years	1
16-65 years	0
65+ years	0
Nova Scotia Total	6

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	2	3
Bocavirus	0	1
Chlamydophila pneumoniae	0	1
Coronavirus	0	0
Enterovirus	0	1
Metapneumovirus	0	2
Mycoplasma pneumoniae	2	9
Parainfluenza	0	2
Pertussis	0	1
Respiratory Syncytial Virus	0	6
Rhinovirus	6	44

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