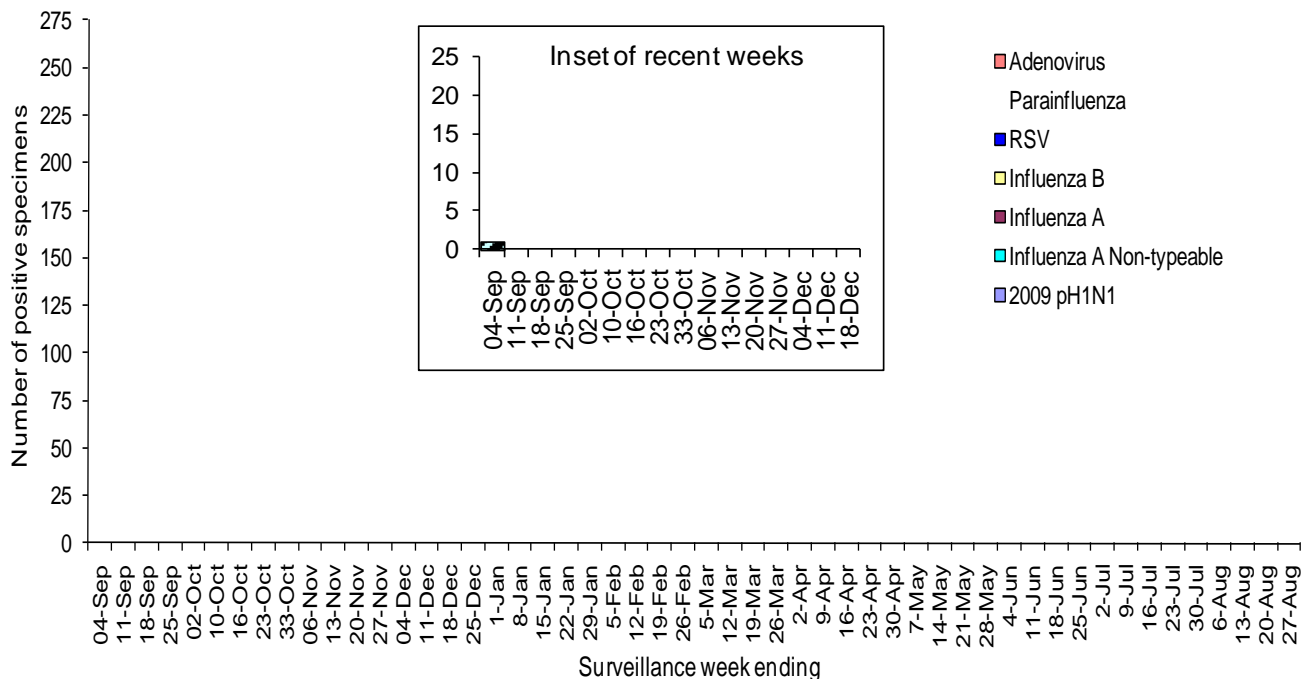


Summary of Nova Scotia surveillance findings, 2 week period ending October 9, 2010:

- No reports of laboratory-detected influenza
- All DHAs reported no influenza activity during surveillance weeks 39 & 40.
- The percentage of ER visits with ILI was 1.3% (1.2 % in weeks 37 & 38).
- The percentage of visits with ILI from sentinel physicians was 2.56% (0.7% in weeks 37 & 38).

Figure 1 summarizes all laboratory detected respiratory pathogens for the 2010-2011 season.

Figure 1: Summary of laboratory detected circulating respiratory pathogens, Nova Scotia, 2010-2011*

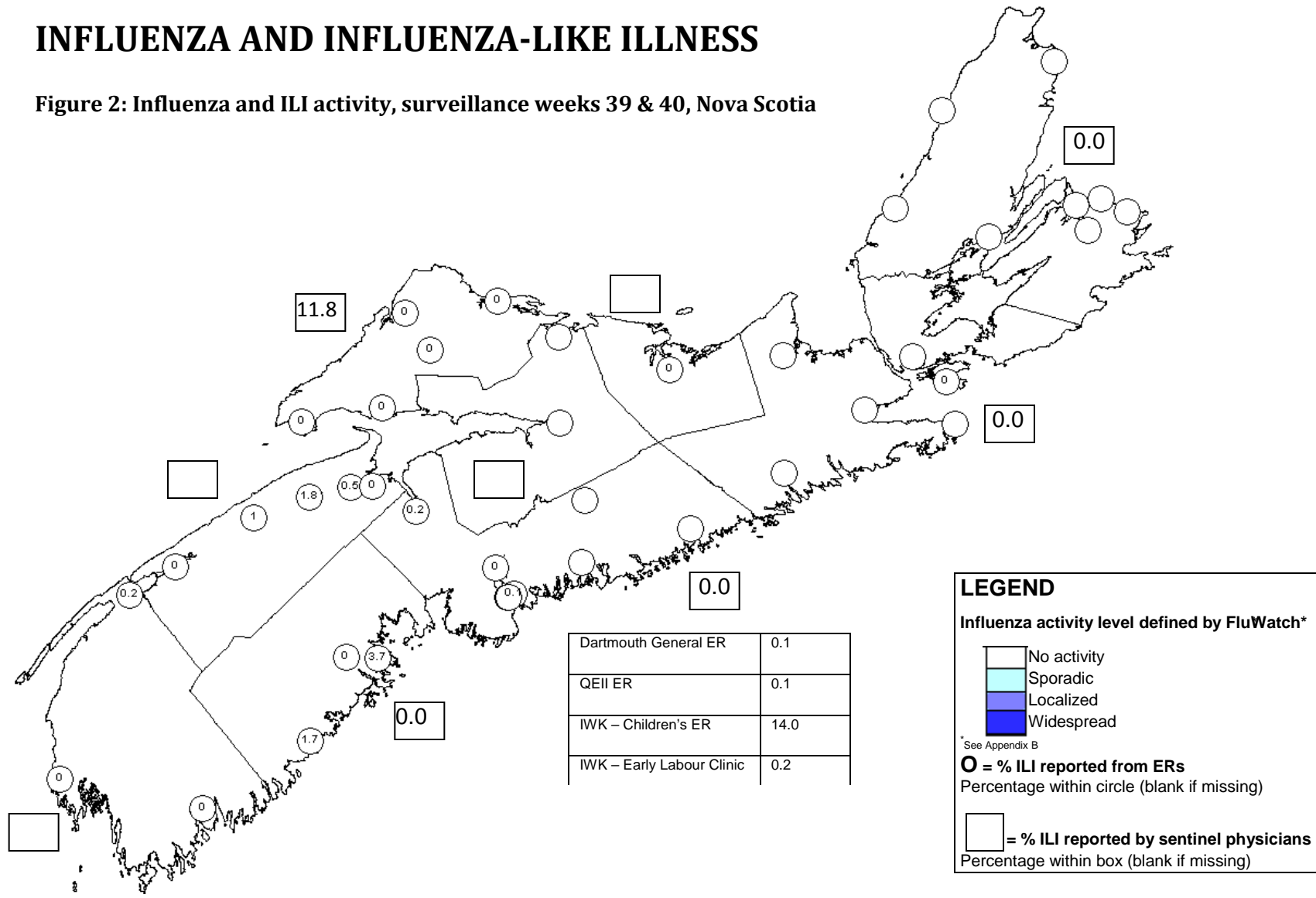


RESPIRATORY WATCH

Weeks 39 & 40 (September 26 to October 9, 2010)

INFLUENZA AND INFLUENZA-LIKE ILLNESS

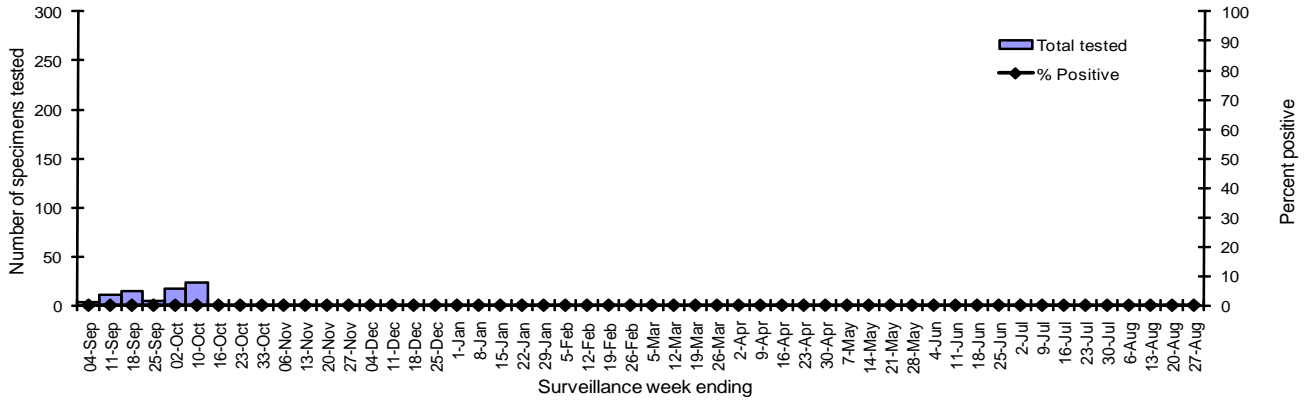
Figure 2: Influenza and ILI activity, surveillance weeks 39 & 40, Nova Scotia



RESPIRATORY WATCH

Weeks 39 & 40 (September 26 to October 9, 2010)

Figure 3: Number of specimens tested for influenza and percent positive, Nova Scotia Provincial Public Health Laboratory Network, 2010-2011*



*Data presented in this figure refers to week specimen was tested. All other data in report refers to onset date of symptoms.

Figure 4: Number of reported lab-confirmed influenza cases by type and report week, Nova Scotia, 2010-2011 (n=0)

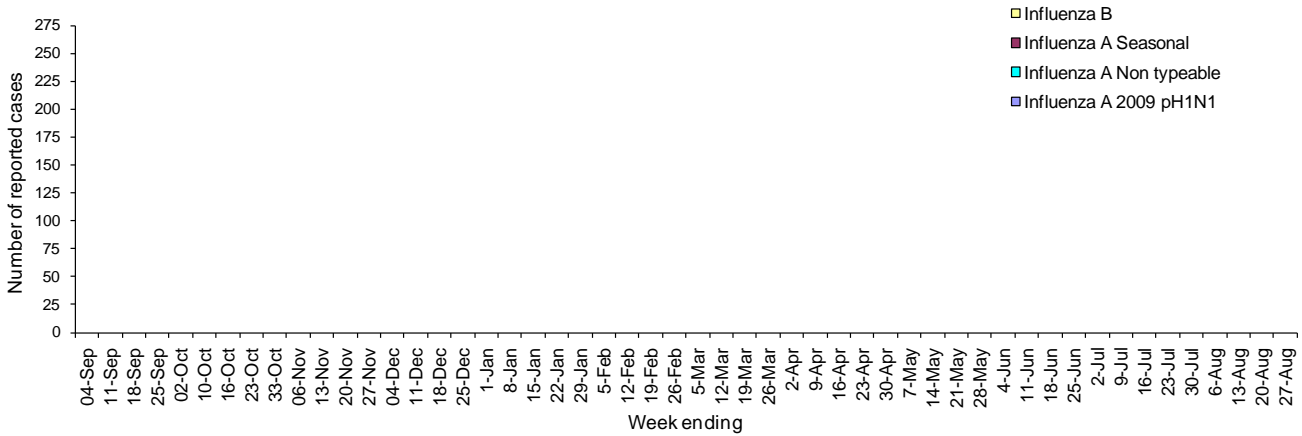
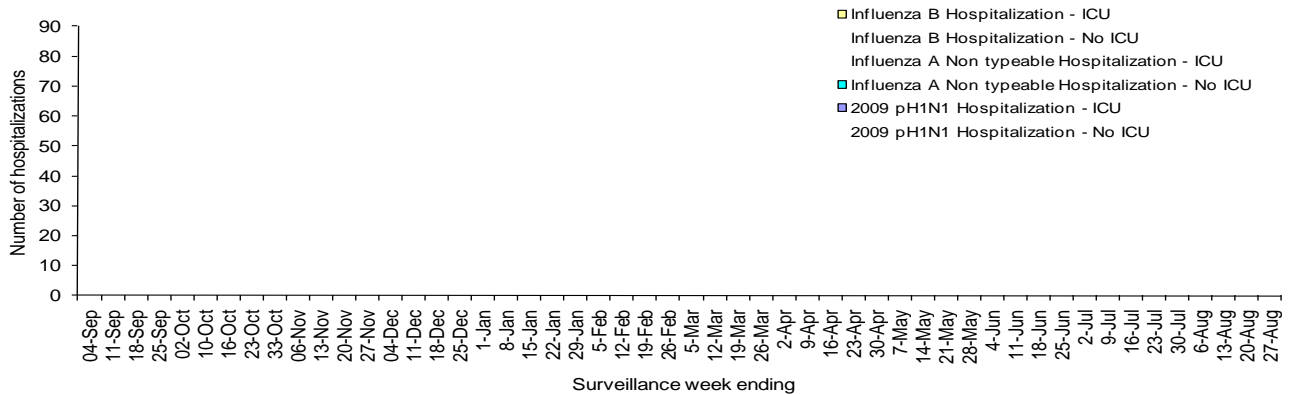


Figure 5: Number of influenza hospitalizations by type and report week, Nova Scotia, 2010-2011 (n=0)



RESPIRATORY WATCH

Weeks 39 & 40 (September 26 to October 9, 2010)

Figure 6: Influenza rate per 100,000 population by type and age group, cumulative, Nova Scotia, 2010-2011

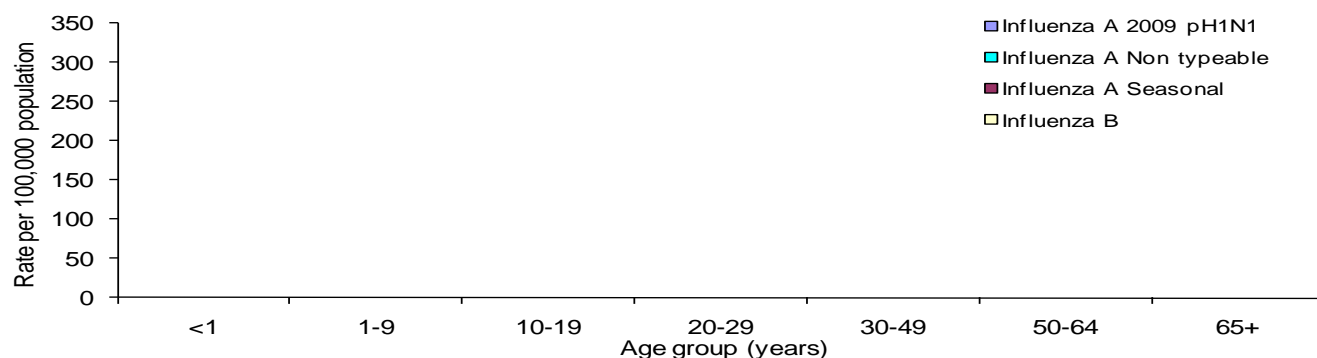


Figure 7: Influenza rate per 100,000 population by type and DHA, cumulative, Nova Scotia, 2010-2011

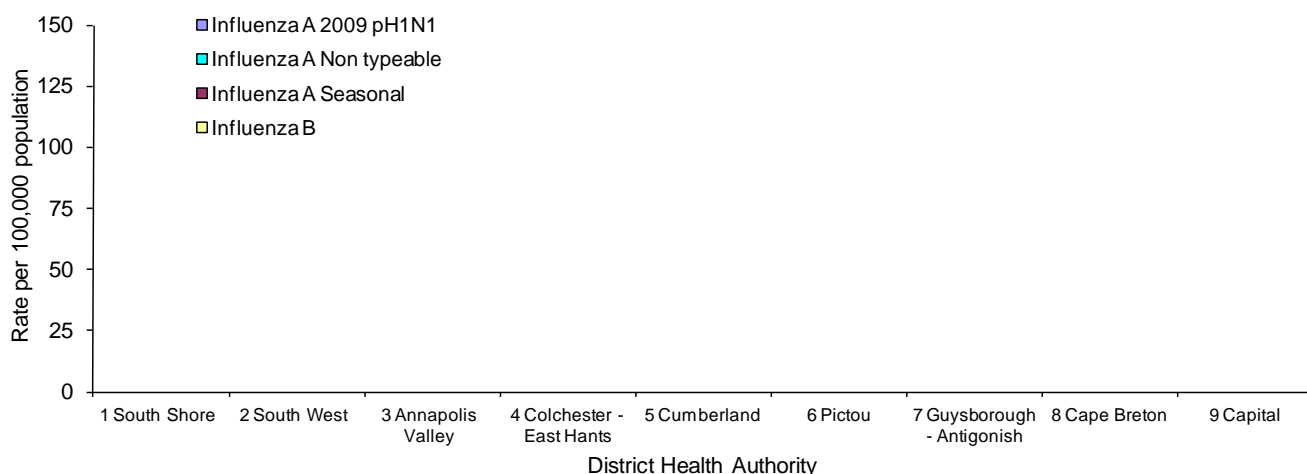


Table 1: Influenza case counts by DHA, surveillance weeks 39 & 40 and cumulative, Nova Scotia, 2010-2011

	DHA 1	DHA 2	DHA 3	DHA 4	DHA 5	DHA 6	DHA 7	DHA 8	DHA 9	Nova Scotia
2009 pH1N1										
Week 39 & 40	0	0	0	0	0	0	0	0	0	0
Cumulative	0	0	0	0	0	0	0	0	0	0
2009-2010 season	20	55	29	71	20	41	66	42	408	752
Influenza A (non-typeable)										
Week 39 & 40	0	0	0	0	0	0	0	0	0	0
Cumulative	0	0	0	0	0	0	0	0	0	0
Influenza A (seasonal)										
Week 39 & 40	0	0	0	0	0	0	0	0	0	0
Cumulative	0	0	0	0	0	0	0	0	0	0
2009-2010 season	0	0	0	0	0	0	0	0	0	0
Influenza B										
Week 39 & 40	0	0	0	0	0	0	0	0	0	0
Cumulative	0	0	0	0	0	0	0	0	0	0
2009-2010 season	1	0	0	0	0	0	0	0	0	1



RESPIRATORY WATCH

Weeks 39 & 40 (September 26 to October 9, 2010)

Table 2: Influenza case demographics, surveillance weeks 39 & 40 and cumulative, Nova Scotia, 2010–2011

		n	Rate (CI)*	% Male	Mean age	Median age	Age range
Week 39 & 40							
2009 pH1N1							
Cases		0	–	–	–	–	–
Total hospitalizations		0	–	–	–	–	–
	Non-ICU	0	–	–	–	–	–
	ICU	0	–	–	–	–	–
Deaths**		0	–	–	–	–	–
Influenza A (seasonal)							
Cases		0	–	–	–	–	–
Total hospitalizations		0	–	–	–	–	–
	Non-ICU	0	–	–	–	–	–
	ICU	0	–	–	–	–	–
Deaths		0	–	–	–	–	–
Influenza A (non-typeable)							
Cases		0	–	–	–	–	–
Total hospitalizations		0	–	–	–	–	–
	Non-ICU	0	–	–	–	–	–
	ICU	0	–	–	–	–	–
Deaths		0	–	–	–	–	–
Influenza B							
Cases		0	–	–	–	–	–
Total hospitalizations		0	–	–	–	–	–
	Non-ICU	0	–	–	–	–	–
	ICU	0	–	–	–	–	–
Deaths		0	–	–	–	–	–
Cumulative 2010–2011 season							
2009 pH1N1							
Cases		0	–	–	–	–	–
Total hospitalizations		0	–	–	–	–	–
	Non-ICU	0	–	–	–	–	–
	ICU	0	–	–	–	–	–
Deaths**		0	–	–	–	–	–
Influenza A (seasonal)							
Cases		0	–	–	–	–	–
Total hospitalizations		0	–	–	–	–	–
	Non-ICU	0	–	–	–	–	–
	ICU	0	–	–	–	–	–
Deaths		0	–	–	–	–	–
Influenza A (non-typeable)							
Cases		0	–	–	–	–	–
Total hospitalizations		0	–	–	–	–	–
	Non-ICU	0	–	–	–	–	–
	ICU	0	–	–	–	–	–
Deaths		0	–	–	–	–	–
Influenza B							
Cases		0	–	–	–	–	–
Total hospitalizations		0	–	–	–	–	–
	Non-ICU	0	–	–	–	–	–
	ICU	0	–	–	–	–	–
Deaths**		0	–	–	–	–	–

*Rate per 100,000 population; CI=confidence interval for rate. Dashes used for small numbers.

**Age group rather than age presented for deaths due to small numbers.



RESPIRATORY WATCH

Weeks 39 & 40 (September 26 to October 9, 2010)

Table 3: Surveillance weeks 39 & 40 ILI reporting from emergency departments, FluWatch sentinel physicians and provincial sentinel physicians, Nova Scotia

	ER SURVEILLANCE		SENTINEL SURVEILLANCE*	
	%ILI	Reporting ERs	%ILI	Reporting Practices
DHA 1	1.5	3 of 3	0.0	1 of 1
DHA 2	0.0	3 of 3	—	0 of 1
DHA 3	0.7	5 of 5	—	—
DHA 4	—	0 of 2	—	—
DHA 5	0.1	5 of 5	11.8	1 of 1
DHA 6	0.0	1 of 1	—	0 of 2
DHA 7	0.0	1 of 6	0.0	1 of 2
DHA 8	—	0 of 8	0.0	1 of 3
DHA 9	0.1	4 of 7	0.0	1 of 3
Nova Scotia (excl. IWK)[†]	0.4	22 of 40 (55%)		
Nova Scotia (incl. IWK)	1.3	23 of 41 (56%)		5 of 13 (38.5%)
IWK	14.0	1 of 1		

*Flu watch sentinels

[†]Excludes the children's ER from IWK

Figure 8: Percentage of ER visits with ILI, Nova Scotia, 2010–2011

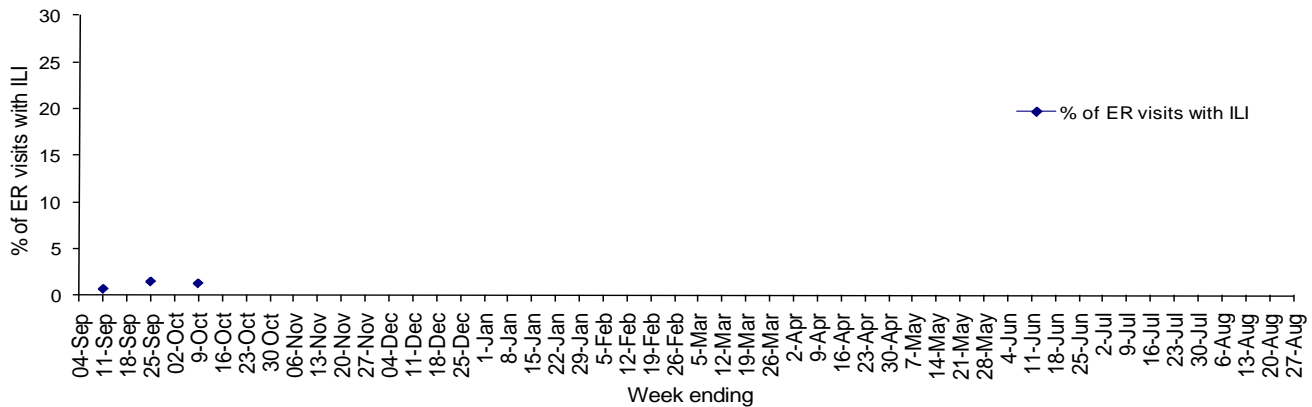
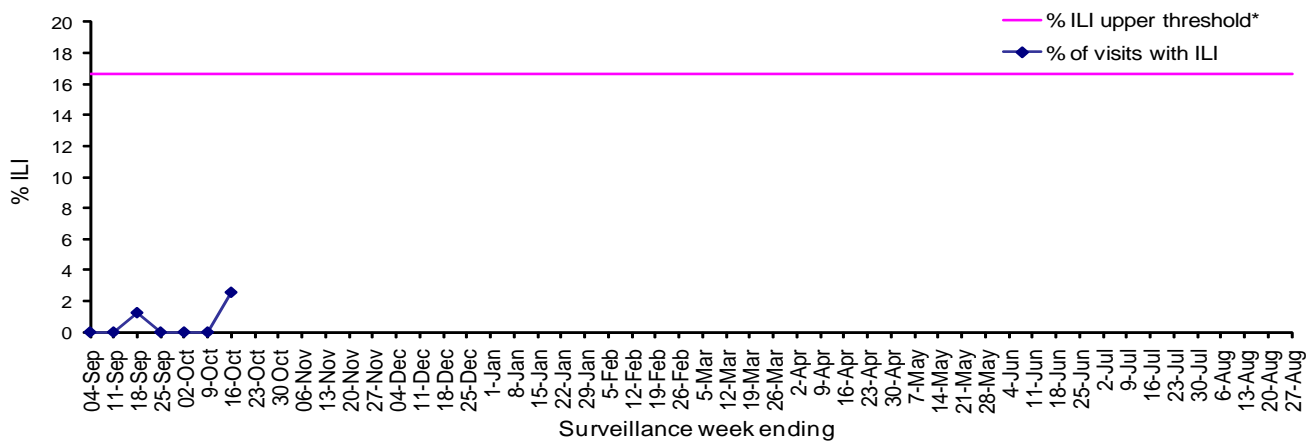


Figure 9: Percent of patient visits to FluWatch sentinel physicians with ILI, Nova Scotia, 2010–2011



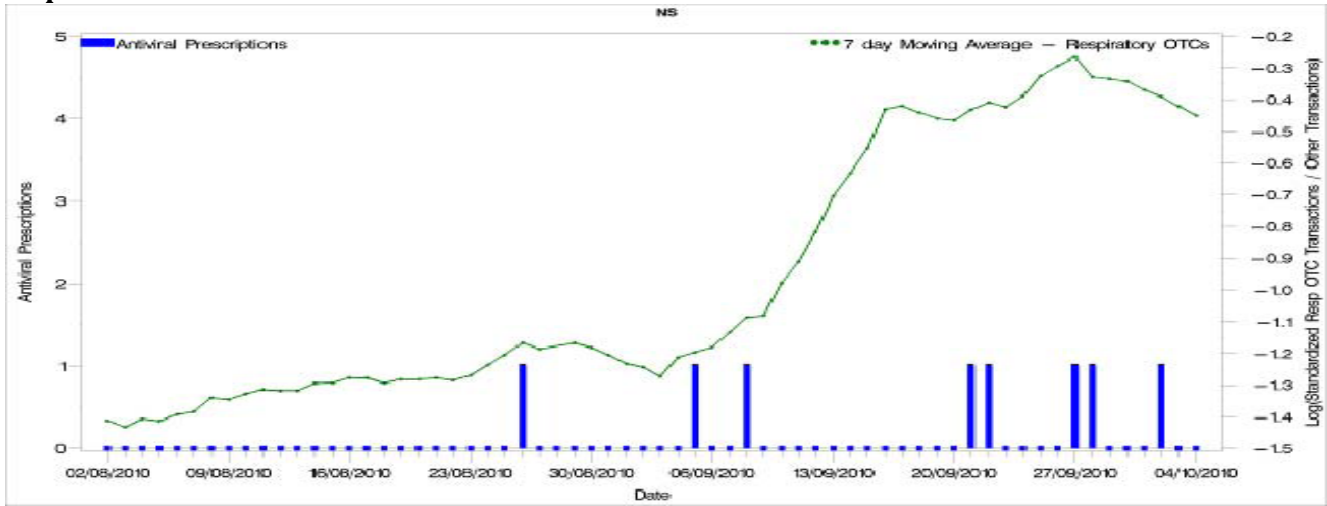
*Note: Threshold ILI rate of 16.7% represents the highest proportion of patient visits reported with ILI over the past five influenza seasons.



RESPIRATORY WATCH

Weeks 39 & 40 (September 26 to October 9, 2010)

Figure 10: Seven day moving average of antivirals and respiratory over-the-counter medications dispensed in Nova Scotia



RESPIRATORY SYNCYTIAL VIRUS (RSV)

Figure 11: Number of positive RSV specimens by report week, Nova Scotia, 2010-2011 (n=0)

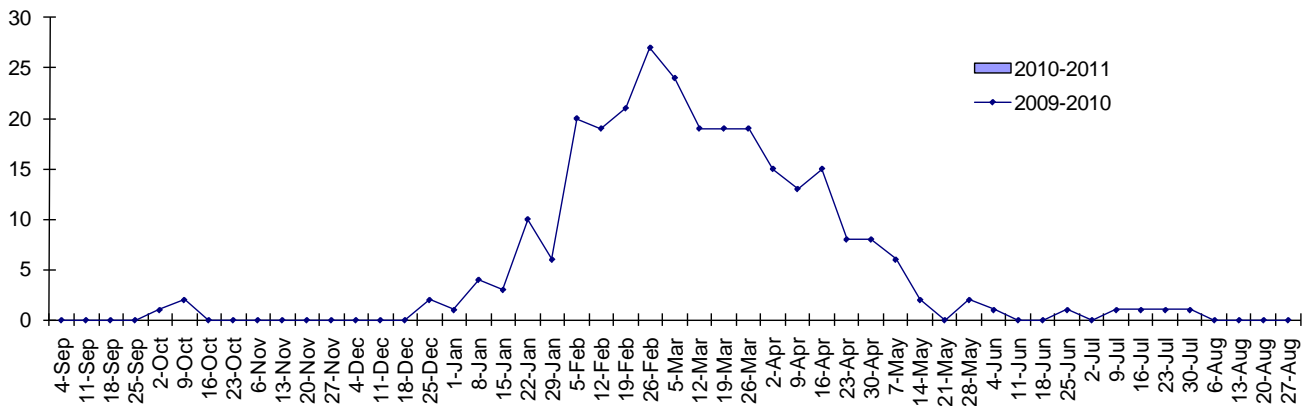
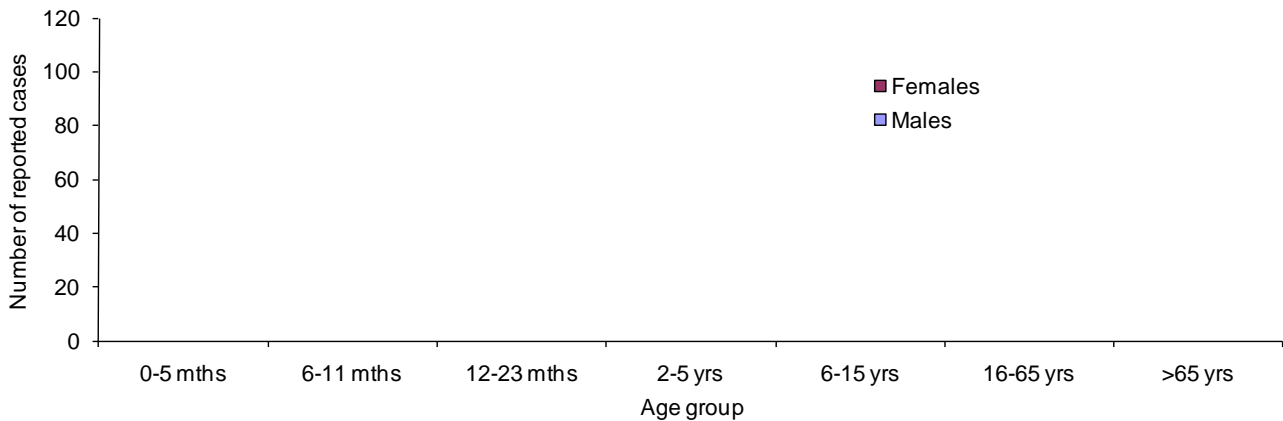


Figure 12: Cumulative number of positive RSV specimens by age group and sex, Nova Scotia, 2010-2011 (n=0)



RESPIRATORY WATCH

Weeks 39 & 40 (September 26 to October 9, 2010)

PARAINFLUENZA VIRUS (PIV) and ADENOVIRUS

Table 5: Total number of specimens tested and number (%) positive for parainfluenza and adenovirus by report week and cumulative season, Nova Scotia, 2010-2011

	Surveillance Weeks 39 & 40 September 26 to October 9, 2010		Cumulative Season-to-Date Totals	
Number of specimens tested:	37		65	
Number and percent positive for:	n positive	% positive	n positive	% positive
Parainfluenza virus 1	0	0.0	0	0.0
Parainfluenza virus 2	0	0.0	1	1.5
Parainfluenza virus 3	0	0.0	0	0.0
Parainfluenza virus 4	0	0.0	0	0.0
Total parainfluenza virus	0	0.0	0	0.0
Adenovirus	0	0.0	1	1.5



RESPIRATORY WATCH

Weeks 39 & 40 (September 26 to October 9, 2010)

APPENDIX: Definitions used in Influenza Surveillance, 2009-2010

- 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 could be due to influenza virus. In children under five years, gastrointestinal symptoms may also be present. In patients under five or over 65, fever may not be prominent.
- 2) Outbreaks of influenza / ILI by setting:
Schools and work sites:
Greater than 10% absenteeism on any day that is most likely due to ILI.
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.
- 3) National FluWatch Definitions for Influenza Activity Levels:

Influenza activity levels are defined as:

- | | |
|-------------------------|--|
| 1 = No activity: | i.e. no laboratory confirmed influenza detections during the past four weeks; however, sporadically occurring ILI may be reported |
| 2 = Sporadic: | Sporadically occurring ILI and confirmed influenza* with NO outbreaks detected within the influenza surveillance region† |
| 3 = Localized: | Sporadically occurring ILI and confirmed influenza* together with outbreaks of ILI in schools and worksites or laboratory confirmed influenza in residential institutions occurring in less than 50% of the influenza surveillance region(s)† |
| 4 = Widespread: | Sporadically occurring ILI and confirmed influenza* together with outbreaks of ILI in schools and worksites or laboratory confirmed influenza in residential institutions occurring in greater than or equal to 50% of the influenza surveillance region(s)† |

* Confirmation of influenza within the surveillance region at any time within the prior four weeks

† sub-regions within the province or territory as defined by the provincial/territorial epidemiologist

- 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



