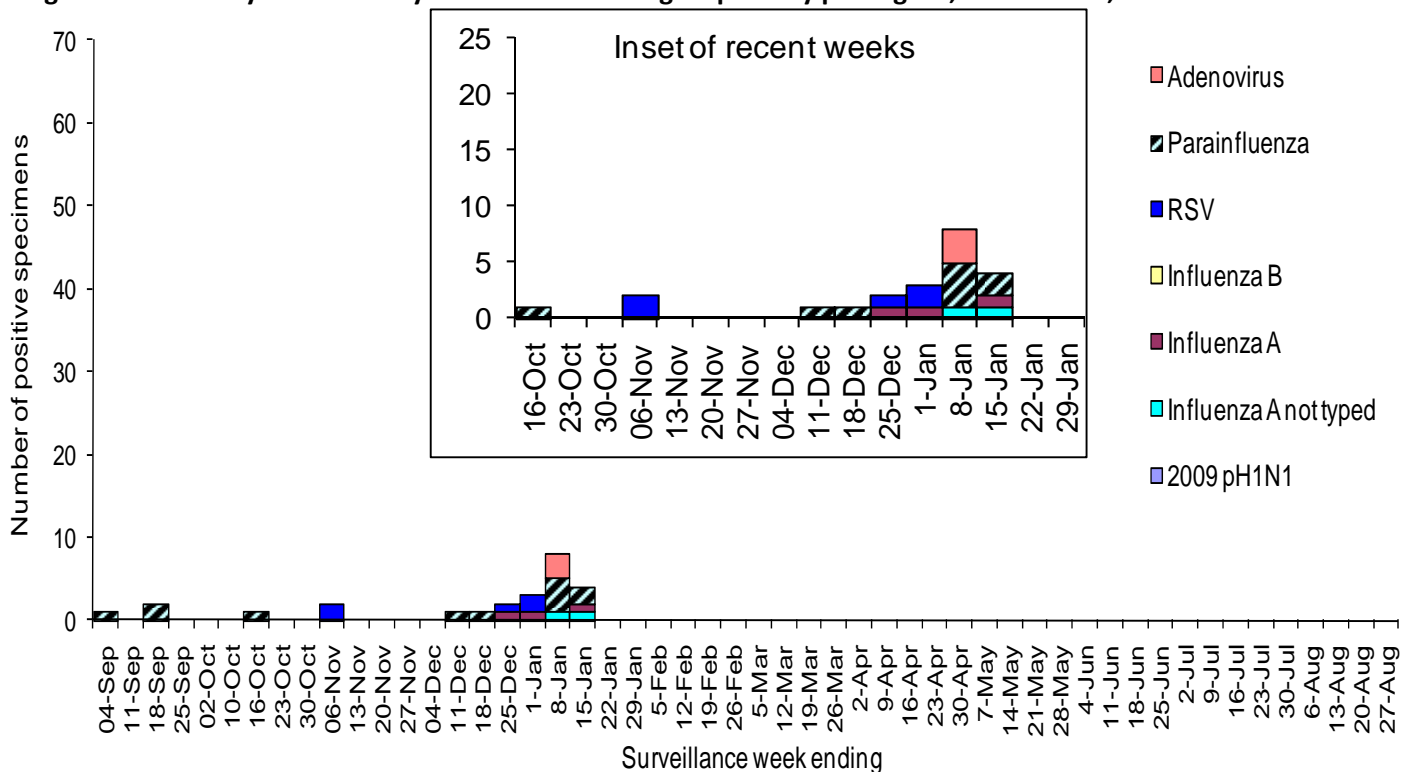


### Summary of Nova Scotia surveillance findings, for the period ending January 15, 2011:

- Sporadic activity continues for the third week in Capital District Health Authority, with the rest of the province reporting no activity.
- Two lab confirmed cases of Influenza A were detected this week. One specimen is H3N2 and the other has not been subtyped.

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

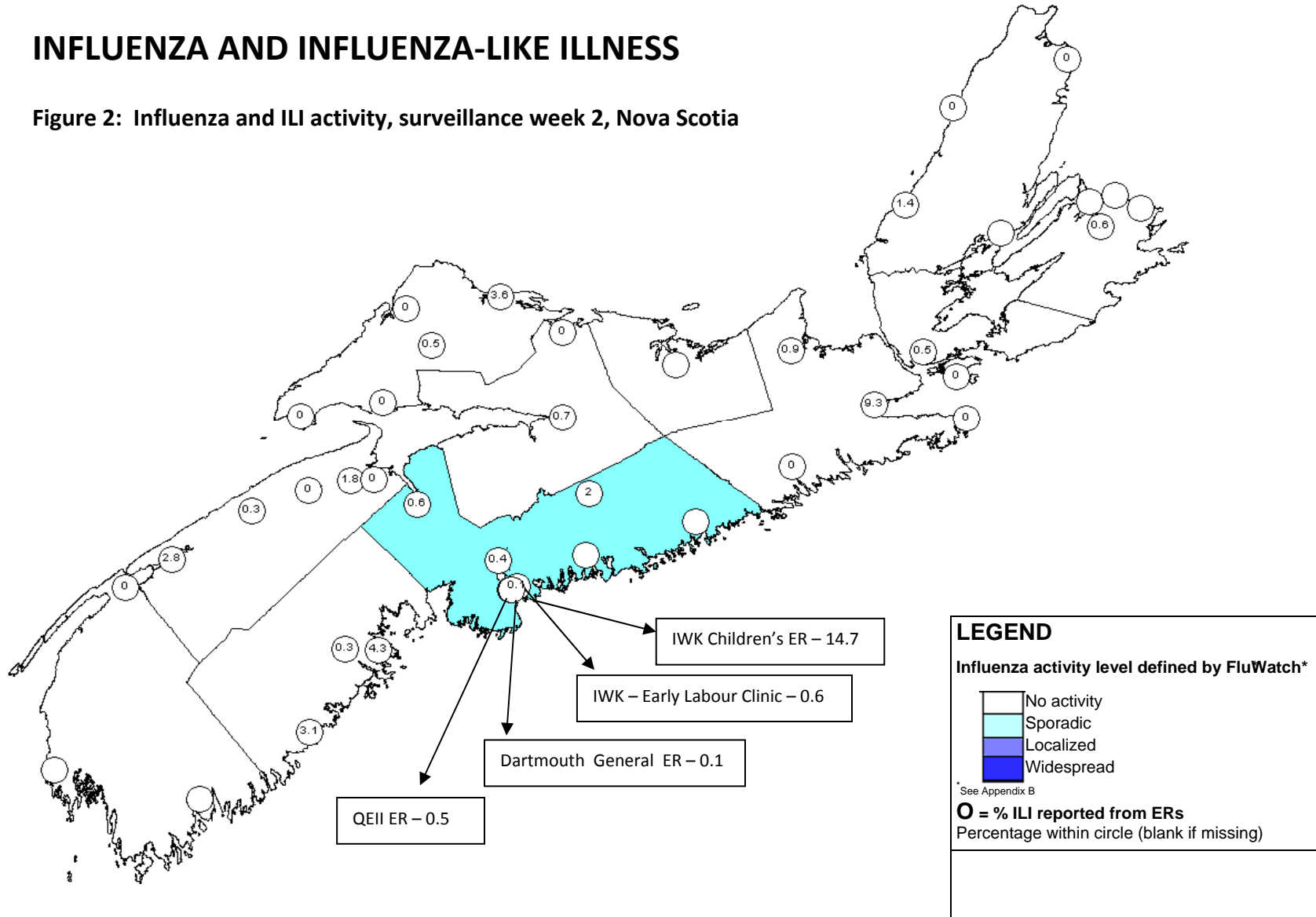


# RESPIRATORY WATCH

Week 2 (January 9 – January 15, 2011)

## INFLUENZA AND INFLUENZA-LIKE ILLNESS

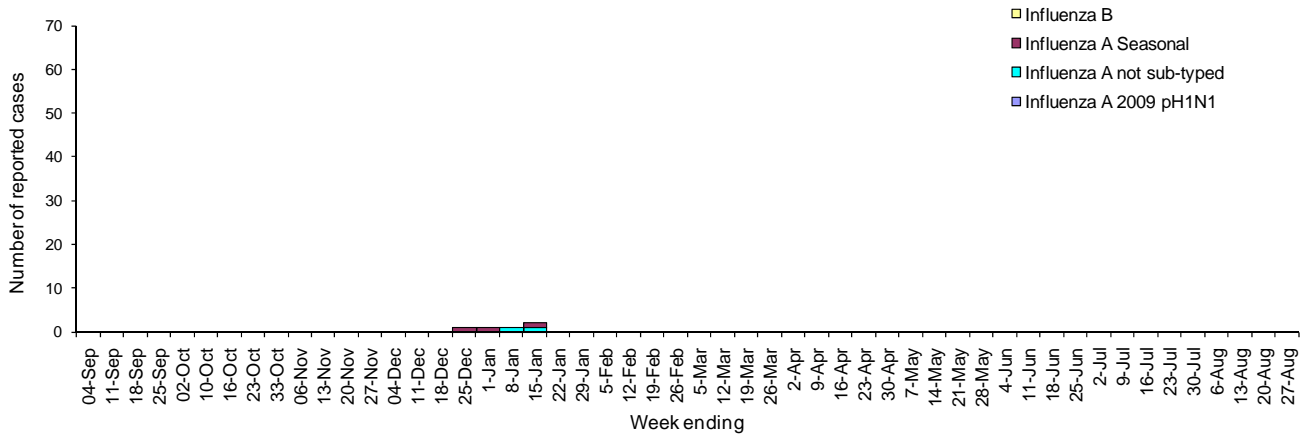
Figure 2: Influenza and ILI activity, surveillance week 2, Nova Scotia



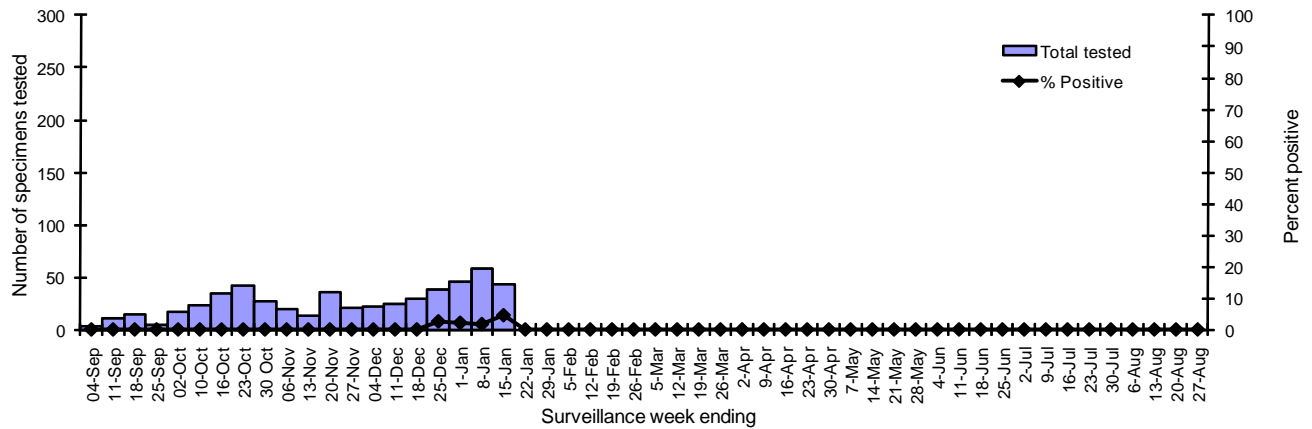
# RESPIRATORY WATCH

Week 2 (January 9 – January 15, 2011)

**Figure 3: Number of reported lab-confirmed influenza cases by type and report week, Nova Scotia, 2010–2011 (n=5)**

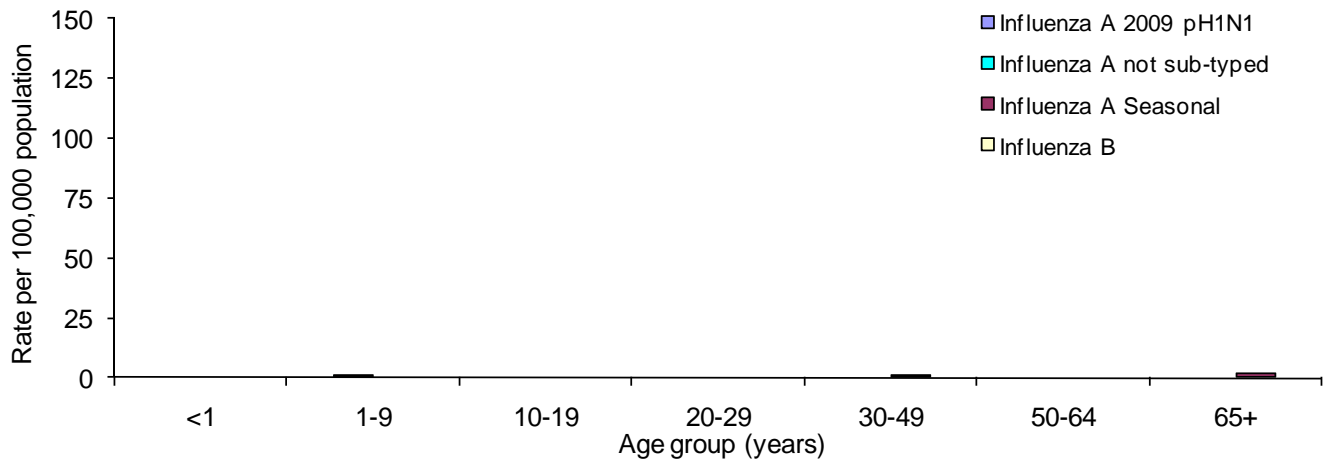


**Figure 4: Number of specimens tested for influenza and percent positive, Nova Scotia Provincial Public Health Laboratory Network, 2010–2011\***



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

**Figure 5: Influenza rate per 100,000 population by type and age group, cumulative, Nova Scotia, 2010–2011**



# RESPIRATORY WATCH

Week 2 (January 9 – January 15, 2011)

Figure 6: Influenza rate per 100,000 population by type and DHA, cumulative, Nova Scotia, 2010–2011

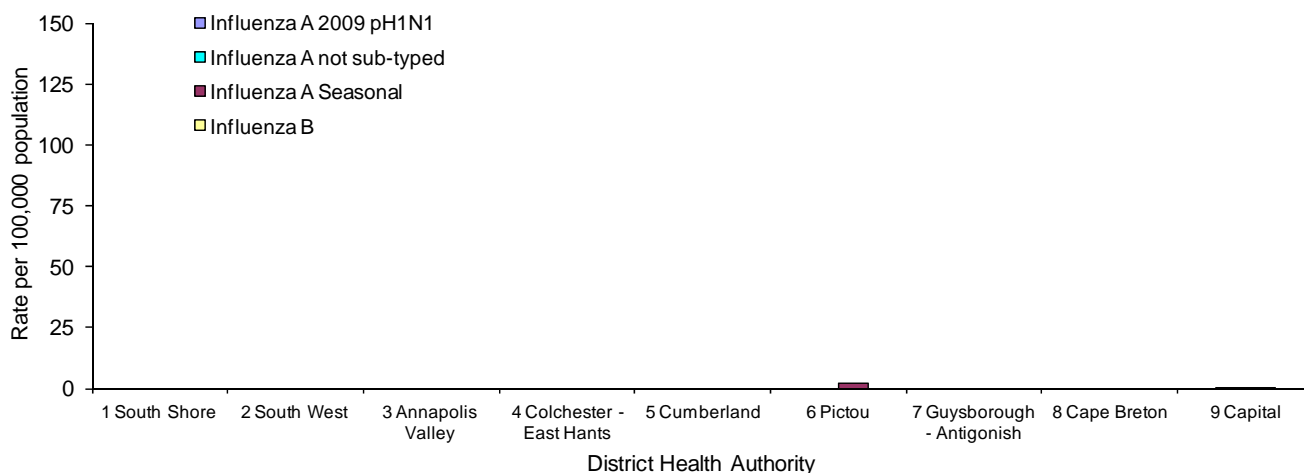


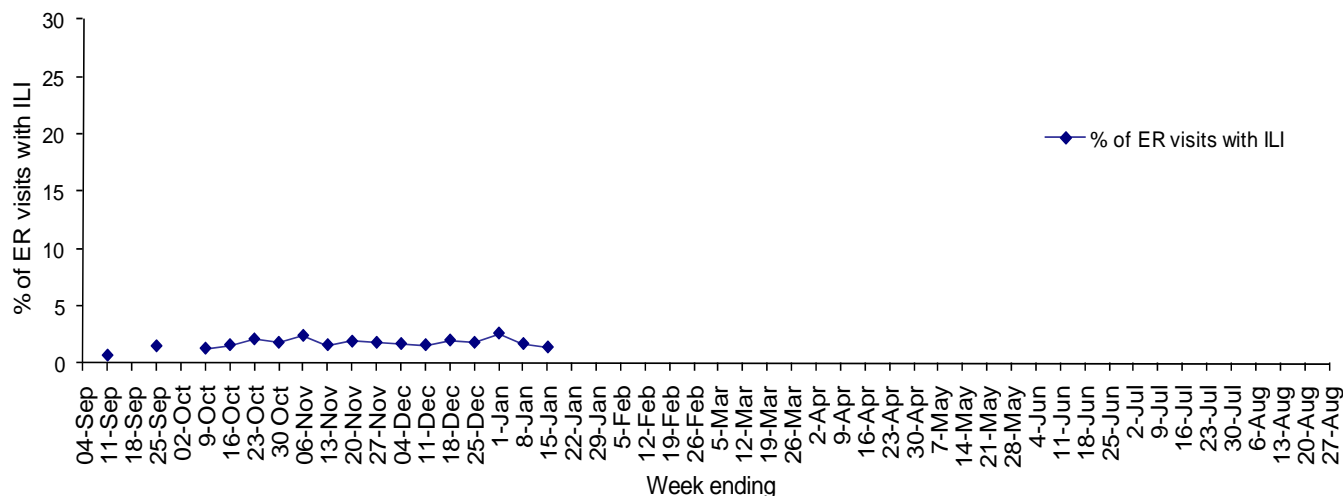
Table 1: ILI reporting from emergency departments and FluWatch sentinel physicians, Nova Scotia

	ER SURVEILLANCE		SENTINEL SURVEILLANCE*	
	%ILI	Reporting ERs	%ILI	Reporting Practices
DHA 1	2.1	3 of 3	1.5	3 of 4
DHA 2	0.0	1 of 3	—	0 of 1
DHA 3	1.0	5 of 5	—	—
DHA 4	0.6	2 of 2	—	0 of 1
DHA 5	0.7	5 of 5	0.0	1 of 1
DHA 6	0.0	1 of 1	—	0 of 2
DHA 7	1.3	6 of 6	0.0	1 of 2
DHA 8	0.5	5 of 8	3.2	2 of 3
DHA 9	0.4	5 of 7	2.0	2 of 3
IWK	11.2	1 of 1		
<b>Nova Scotia (excl. IWK)†</b>	<b>0.7</b>	<b>33 of 40 (82.5%)</b>		
<b>Nova Scotia (incl. IWK)</b>	<b>1.4</b>	<b>34 of 41 (82.9%)</b>	<b>1.8</b>	<b>9 of 17 (52.9%)</b>

\*Flu watch sentinels

†Excludes the children's ER from IWK

Figure 7: Percentage of ER visits with ILI, Nova Scotia, 2010–2011



# RESPIRATORY WATCH

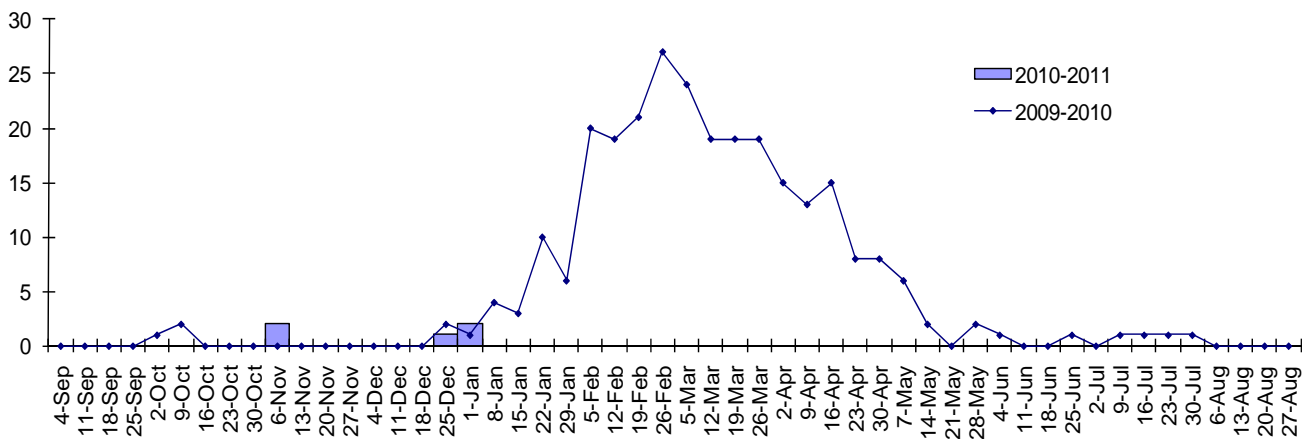
Week 2 (January 9 – January 15, 2011)

**Figure 8: Seven day moving average of antivirals and respiratory over-the-counter medications dispensed in Nova Scotia**

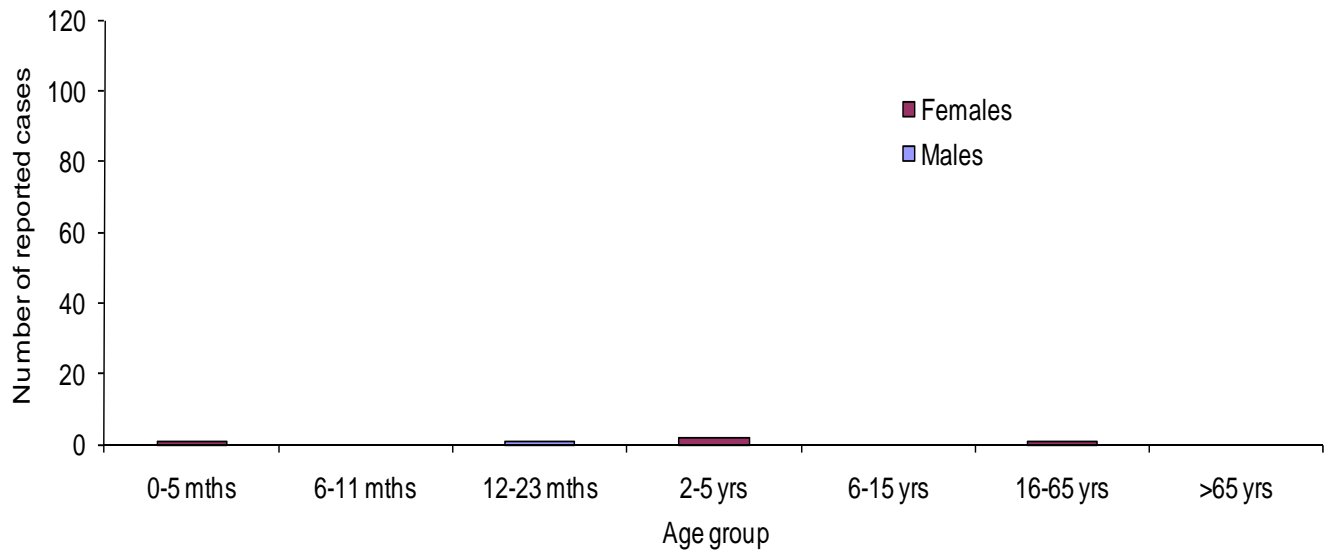
Data not received by reporting deadline

## RESPIRATORY SYNCYTIAL VIRUS (RSV)

**Figure 9: Number of positive RSV specimens by report week, Nova Scotia, 2010–2011 (n=5)**



**Figure 10: Cumulative number of positive RSV specimens by age group and sex, Nova Scotia, 2010-2011 (n=5)**



# RESPIRATORY WATCH

Week 2 (January 9 – January 15, 2011)

## OTHER RESPIRATORY PATHOGENS

**Table 2: Total number of specimens tested and number (%) positive for other respiratory pathogens, by report week and cumulative season, Nova Scotia, 2010–2011**

Number and percent positive for:	Surveillance Week 2 January 15, 2011			Cumulative Season-to-Date Totals		
	n tested	n positive	% positive	n tested	n positive	% positive
Adenovirus	13	0	0.0	237	3	1.3
Bocavirus	16	0	0.0	33	0	0.0
Chlamydomphila pneumoniae	7	0	0.0	114	1	0.9
Coronavirus	16	1	6.2	33	2	6.1
Enterovirus	16	0	0.0	33	0	0.0
Metapneumovirus	16	0	0.0	33	0	0.0
Mycoplasma pneumoniae	7	0	0.0	114	25	21.9
Parainfluenza	16	2	12.5	240	11	4.6
Pertussis	4	0	0.0	93	4	4.3
Respiratory syncytial virus A	43	0	0.0	103	0	0.0
Respiratory syncytial virus B	43	0	0.0	103	0	0.0
Respiratory syncytial virus not typed	1	0	0.0	509	5	1.0
Rhinovirus	16	0	0.0	33	0	0.0

# RESPIRATORY WATCH

Week 2 (January 9 – January 15, 2011)

## APPENDIX: Definitions used in Influenza Surveillance, 2010-2011

- 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:

- |                         |  |
|-------------------------|--|
| <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 ILI/influenza outbreaks</b> detected within the influenza surveillance region <sup>†</sup>                                   |
| <b>3 = Localized:</b>   | evidence of increased ILI* and lab confirmed influenza detection(s) together <b>with outbreaks</b> in schools, hospitals, residential institutions and/or other types of facilities occurring in <b>less</b> |
| <b>4 = Widespread:</b>  | evidence of increased ILI* and lab confirmed influenza detection(s) <b>together with outbreaks</b> in schools, hospitals, residential institutions and/or other types of facilities occurring in             |

\* 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.

- 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