# Weekly Influenza News



## Week 13: March 26 to April 1, 2017

#### Week in Review:

Influenza Activity Indicator	Assessment of Indicator*	Interpretation	
	Similar	18 local lab-confirmed case reported in week 13; 23 cases reported in week 12	
<b>Percent Positive of Flu Specimens</b> <sup>†</sup>	Similar <sup>†</sup>	Simcoe Muskoka: - flu A lower at 7.8%; flu B higher (14.1%) Ontario: - flu A lower at 10.4%; flu B higher (7.4%)	
<b>⊗</b> <u>Local Institutional Outbreaks</u>	Similar	No institutional influenza outbreaks were declared in week 13. Twenty-three influenza outbreaks reported for season to date.	
	Similar	Predominant strains: Influenza A (H3N2) (91%)	
<b>⊗</b> Local Emergency Department respiratory visits: week 13	Similar	Percentage of visits is similar compared to previous week; visits in recent weeks are lower than previous flu seasons	
Week 13 Overall Assessment March 26 to April 1, 2017		Reported Activity Level: Sporadic	
	Similar	10 new cases of Flu A in SMDHU. Eight new cases of Flu B in SMDHU.	

Notes: Reported activity level is based on the weekly submission of Appendix C to Public Health Ontario. Definition available here.

<sup>\*</sup>Compared to previous surveillance week

<sup>†</sup> Reported for week 12; assessment of indicator based primarily on provincial percent positivity due to low local counts

## **Reported Local Influenza Cases**

In Simcoe Muskoka, there have been 640 **lab-confirmed influenza cases reported** as of 4 April 2017; 18 (3%) of which were reported in week 13 – this is similar to week 12.

Of the 495 reported influenza cases with subtype information available:

- 488 (98.5%) of the cases were influenza A, subtype H3.
  - o Seventeen of these cases were further subtyped to H3N2.
  - o Of these seventeen, five were identified as A/HONG KONG/4801/2014-LIKE(H3N2)
- One case was identified as H1N1(pdm09)
- Six (1.2%) of the cases were influenza B/Phuket/3073/13-like

Table 1: Summary of influenza cases for 2016/17 season

Lab confirmed Influence Coope	Week 13		Season-to-Date	
Lab-confirmed Influenza Cases	N	%	N	%
Influenza A	10	56%	599	94%
Influenza B	8	44%	41	6%
Influenza A & B	0	0%	0	0%
Total	18	100%	640	100%
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Notes:

Data source: Communicable Disease Intake Database, extracted on April 4, 2017

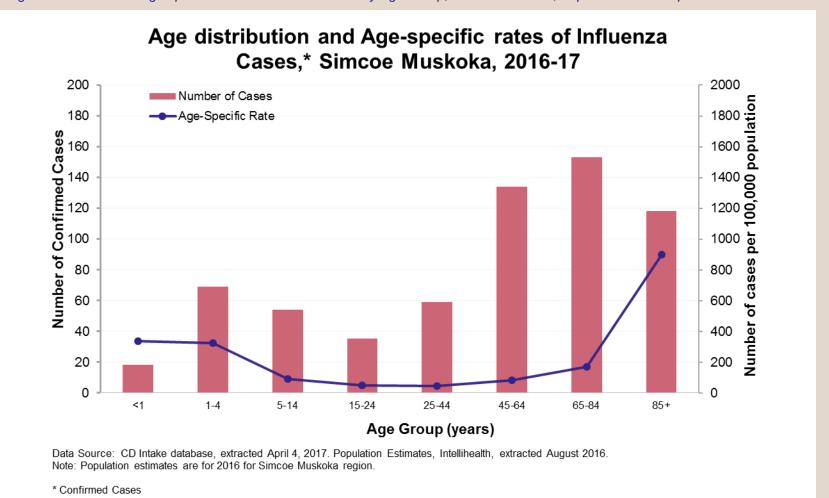
<sup>₱</sup> Figure 2 and Figure 3 below provide historic comparisons

## **Age Distribution**

For the season-to-date, nearly half (42.3%) of cases have been reported in individuals aged 65 and older. The corresponding age-specific rates are 170.2 per 100,000 population (65-84 years) and 899.8 cases per 100,000 population (85+ years), respectively. While less than 5% of cases were reported in the <1 years of age group, the age-specific rates is 337.1 cases per 100,000 population.

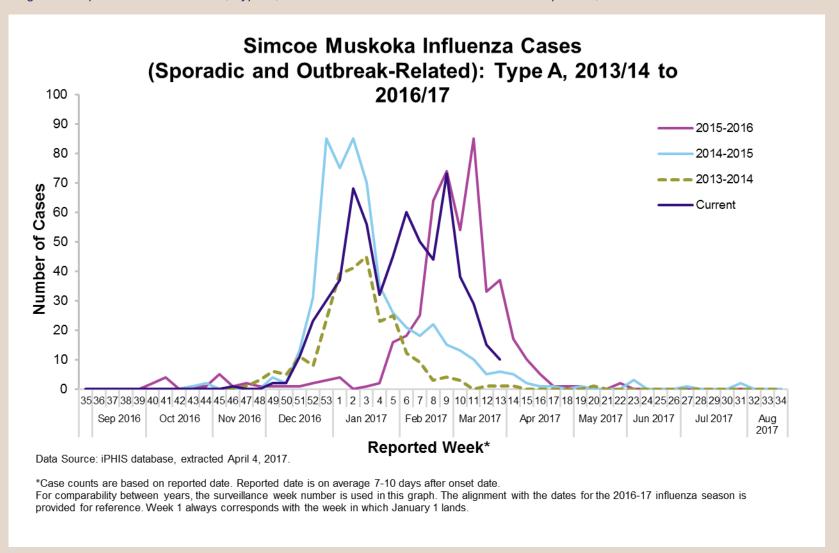
Mean age of reported flu cases: 51.5 years

Figure 1: Number and Age-specific Rate of Influenza Cases by Age Group, Simcoe Muskoka, September 2016 to present



## **Historical Comparison**

Figure 2: Reported Influenza Cases, Type A, Current Influenza Season with Historical Comparison, Simcoe Muskoka



Simcoe Muskoka Influenza Cases (Sporadic and Outbreak-Related): Type B, 2013/14 to 2016/17 100 90 80 2015-2016 Numbert of Cases 70 2014-2015 60 — 2013-2014 50 Current 30 20 10  $35\,36\,37\,38\,39\,40\,41\,42\,43\,44\,45\,46\,47\,48\,49\,50\,51\,52\,53\,\,1\,\,2\,\,3\,\,4\,\,5\,\,6\,\,7\,\,8\,\,9\,\,10\,11\,12\,13\,14\,15\,16\,17\,18\,19\,20\,21\,22\,23\,24\,25\,26\,27\,28\,29\,30\,31\,32\,33\,34$ Feb 2017 Mar 2017 Sep 2016 Oct 2016 Nov 2016 Dec 2016 Apr 2017 May 2017 Jun 2017 Jul 2017 Aug 2017 Reported Week\* Data Source: iPHIS database, extracted April 4, 2017. \*Case counts are based on reported date. Reported date is on average 7-10 days after onset date. For comparability between years, the surveillance week number is used in this graph. The alignment with the dates for the 2016-17 influenza season is provided for reference. Week 1 always corresponds with the week in which January 1 lands.

Figure 3: Reported Influenza Cases, Type B, Current Influenza Season with Historical Comparison, Simcoe Muskoka

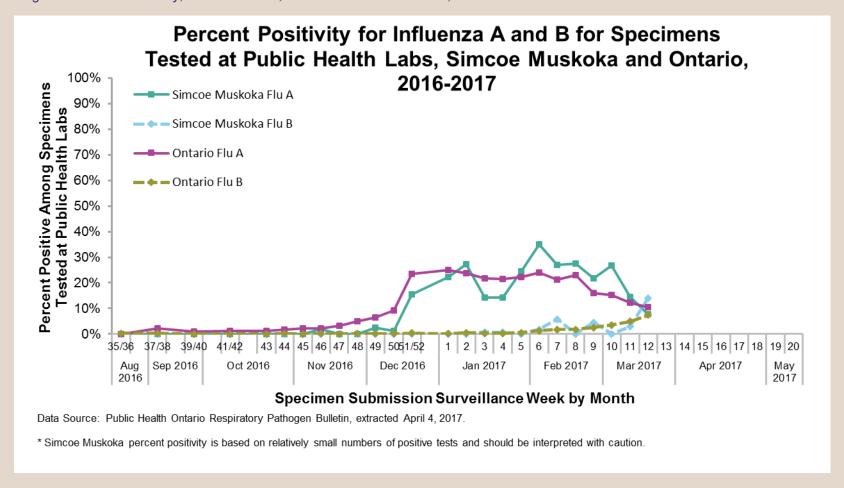
## **Percent positivity**

Note: Percent positivity is reported with one week lag and does not included week 13. Percent positivity is reported for week 12.

The percentage of flu specimens that are positive (<u>percent positivity</u>) for Influenza A continue to decline. The provincial percent positivity for influenza A in week 12 was reported at 10.4%, which is lower than week 11. Influenza B percent positivity increased to 7.4% for week 12.

Locally for week 12, percent positivity for influenza A further decreased to 7.8%, while influenza B increased to 14.1%.

Figure 4: Percent Positivity, Influenza A & B, Simcoe Muskoka & Ontario, 2016/17

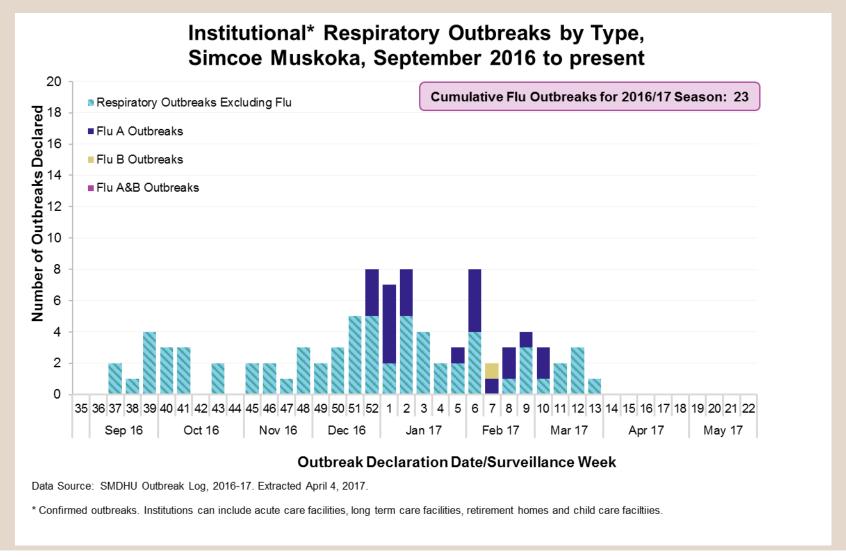


## **Institutional Respiratory Outbreaks**

There have been 23 lab-confirmed institutional flu outbreaks in Simcoe Muskoka since September 1, 2016:

- Influenza A: 22 outbreaks
- Influenza B: one outbreak

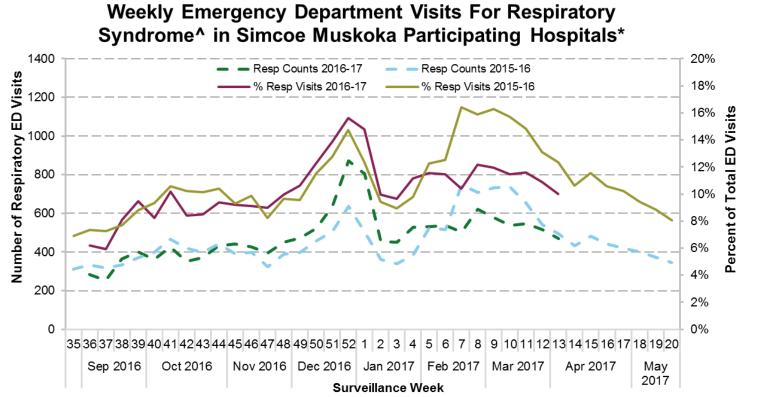
Figure 5: Institutional Outbreaks by Respiratory Pathogen, Simcoe Muskoka, 2016/17



## **Local Emergency Department Visits**

Emergency department visits for respiratory syndrome in Simcoe Muskoka accounted for 10.0% of visits in week 13. This is similar to week 12, and significantly lower compared to the same time period in the 2015/16 season. The large increase and subsequent decrease in visits at the beginning of 2017 follows the seasonal pattern observed in previous years, particularly the 2014/15 season.

Figure 6: Emergency Department Visits for Respiratory Syndrome at Participating Simcoe Muskoka Hospital, 2015/16, 2016/17 Seasons



Data Source: Acute Care Enhanced Surveillance (ACES) System, extracted April 4, 2017.

The above data is provided through Acute Care Enhanced Surveillance (ACES), an emergency department (ED) syndromic surveillance system managed by <u>KFLA Public Health Informatics</u> for participating Ontario hospitals. Five hospitals participate in Simcoe Muskoka.

<sup>^</sup> Respiratory syndrome is defined as "respiratory infection non croup, non bronchiolitis. Includes sore throat, cough, cold, ear infection, blocked ear, earache etc". This syndrome does not include influenza-like illness, which is "fever, myalgia, undifferentiated flu".

<sup>\*</sup>Participating hospitals are: RVH, OSMH, MAH (Bracebridge and Huntsville), GBGH and CGMH. Includes Simcoe Muskoka residents and visitors.

As of Oct. 2016, an additional local hospital began feeding data to ACES; comparison of previous crude counts with the current counts should not be made.

#### **Vaccine Match and Influenza Strains**

The trivalent 2016-2017 influenza vaccine contains the following strains:

- A/California/7/2009 (H1N1)pdm09-like virus;
- A/Hong Kong/4801/2014 (H3N2)-like virus;
- B/Brisbane/60/2008-like virus.

For the season to date, the vaccine appears to be a good match for the circulating influenza strains across Canada.

The World Health Organization has issued their recommendation for the 2017/2018 seasonal influenza vaccine.

Table 2: Local, Provincial and National Matched Flu Specimens and National Match Percent, 2016-17

Influenza Strains	Number of Specimens with Strain Characterization Results			National Match				
IIIIueiiza Straiiis	Simcoe Muskoka*	Ontario	Canada	Percent †				
Influenza A Vaccine Strains								
Influenza A (H3N2) A/Hong Kong/4801/2014-like	5	201	329	91%				
Influenza A (H1N1) A/California/07/09-like	0	25	31	9%				
Influenza B Vaccine Strains								
B/Brisbane/60/08-like	0	25	40	29%				
B/Phuket/3073/13-like (Quad vaccine only)	6	46	96	71%				

**Data Source:** Ontario and Canada Counts: Public Health Ontario Respiratory Pathogen Report, Table 8: Strain characterization completed on influenza isolates at the National Microbiology Laboratory, Surveillance week 12; SMDHU Counts: CD Intake Database, extracted April 4, 2017.

<sup>\*</sup>Simcoe Muskoka counts are current to the most recently completed surveillance week (week 13). A zero count indicates no strain characterization results are available. Provincial and national counts are reported with one week lag and do not include the most recently completed surveillance week. Surveillance weeks can be found <a href="https://example.com/here/beta-figure-results-new-most recently-completed surveillance-week-new-most recently-completed-surveillance-week-new-most recently-completed-surveillance-week-new-most

<sup>†</sup> Non-vaccine match strains are not reported. Percent match is based on antigenically similar strains. As of week 12, an additional 964 specimens did not grow to sufficient hemagglutination titers for antigenic characterization, but were found to be of the same genetic group as A/Hong Kong/4801/2014-like virus through sequence analysis.

### **Technical Notes**

#### **Definitions**

<u>Percentage positivity</u>: the number of positive flu cases divided by the number of specimens tested at Public Health Ontario Labs

Reported activity level: the level of influenza activity that is reported to Public Health Ontario by Simcoe Muskoka, based on influenza cases and outbreaks. Definitions available <a href="here">here</a>.

<u>Surveillance week</u>: The week number corresponding to the week of year, running Sunday to Saturday, inclusive, for reporting influenza activity. January 1 always falls within week 1. A list of the current season's surveillance weeks can be found <u>here</u>.

#### Limitations

#### Timeliness:

The provincial data are from one week previous because that is the most recent data available.

The hospital data, local counts of influenza, and outbreaks are current to date.

The number of cases listed in a given surveillance week may change as more information becomes available

#### Case-Follow-up and iPHIS Data Entry:

While Public Health Ontario only requires detailed information on every fifth case of influenza reported to SMDHU, the health unit investigates all hospitalized influenza cases in order to ensure accurate adverse outcomes and subtyping data is available.

#### Case Reporting:

Sporadic cases do not accurately describe all cases of influenza as those cases reported are skewed towards individuals more likely to seek medical care and be tested (e.g. young, elderly and immunocompromised).

## **Additional Resources**

#### Simcoe Muskoka

- Influenza Fact Sheet
- Influenza HealthSTATS page

#### **Provincial**

- Ontario Respiratory Pathogen Bulletin
- <u>Public Health Ontario Laboratory Respiratory Pathogen</u>
   Surveillance Reports
- ILI Mapper

**Week 12 Provincial Summary:** For the 2016-2017 surveillance season to week 12, 10,868 laboratory-confirmed influenza cases have been reported across Ontario, 322 (3%) of which were reported in week 12. Among cumulative cases, 94.9% (10,313/10,868) were influenza A. Of the 5693 reported influenza A cases with subtype information available, 99.3% (5651/5693) were H3N2 and 0.7% (42/5693) were (H1N1)pdm09.

(Source: Public Health Ontario Respiratory Pathogen Bulletin, Surveillance Week 12, extracted April 4, 2017.)

#### **National**

Public Health Agency of Canada FluWatch

#### **International Resources**

WHO Global Influenza Surveillance and Response System