Weekly Influenza News



Week 4: January 21 to January 27, 2018

Week in Review:

Influenza Activity Indicator	Assessment of Indicator*	Interpretation			
	Higher	77 local lab-confirmed case reported in week 4; 60 cases reported in week 3			
Percent Positive of Flu Specimens [†]	Similar	Simcoe Muskoka: - flu A (14.1%); flu B (7.1%) Ontario: - flu A (17.5%); flu B (14.0%)			
⊗ <u>Local Institutional Outbreaks</u>	Similar	Five institutional influenza outbreaks were declared in week 4. Twenty-eight influenza outbreaks reported for the season to date.			
<u>Local Emergency Department</u> <u>respiratory visits: week 4</u>	Similar	Percentage of visits is similar compared to previous week and higher compared to same period in the 2016/17 season			
Week 4 Overall Assessment January 21 to January 27, 2018		Reported Activity Level: Widespread			
	Similar	40 new cases of Flu A reported 37 new cases of Flu B reported			
Predominant Influenza Strains: Influenza A (H3), Influenza B\Phuket (Yamagata lineage)					

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

^{*}Compared to previous surveillance week

[†] Reported for week 3

Reported Local Influenza Cases

In Simcoe Muskoka, there have been **405 lab-confirmed influenza cases reported** as of 30 January 2018; 77 (19.0%) of which were reported in week 4 – this was higher when compared to week 3.

Of the 288 reported influenza A cases, only 76 have been subtyped:

- 71/76 (93%) are influenza A, H3 strain
- 5/76 (7%) are influenza A, H1N1 pdm09

Figure 2 and Figure 3 below provide historic comparisons

Table 1: Summary of influenza cases for 2017/18 season

Lab-confirmed Influenza Cases	Week 4		Season-to-Date	
	N	%	N	%
Influenza A	40	52%	288	71%
Influenza B	37	48%	117	29%
Influenza A & B	0	0%	0	0%
Total	77	100%	405	100%
Notes:				

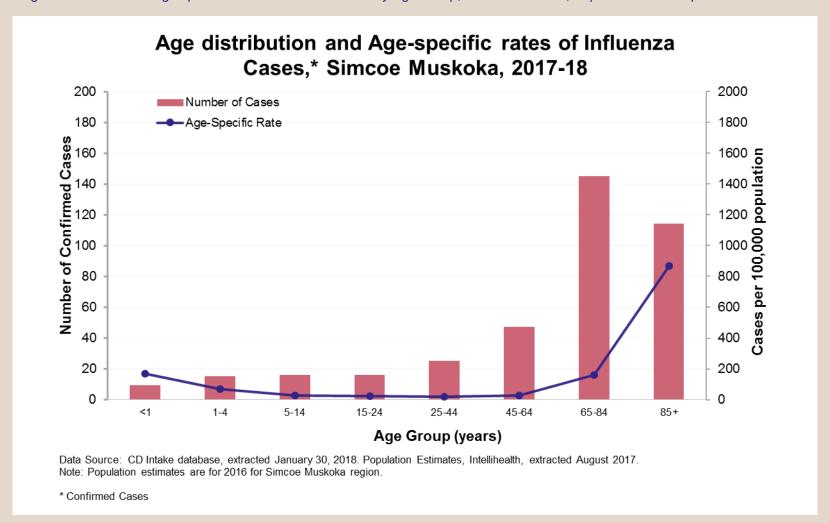
Data source: Communicable Disease Intake Database, extracted on January 30, 2018.

Age Distribution

For the season-to-date, roughly two-thirds (66.8%) of cases have been reported in individuals aged 65 and older. The corresponding age-specific rates are 161.3 cases per 100,000 population (65-84 years) and 869.3 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 168.6 cases per 100,000 population.

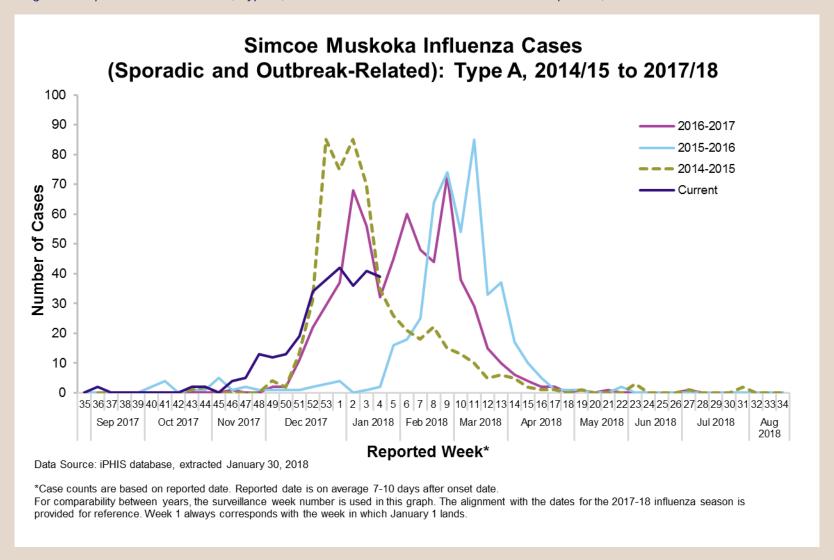
Median age of reported flu cases: 74 years

Figure 1: Number and Age-specific Rate of Influenza Cases by Age Group, Simcoe Muskoka, September 2017 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, 2014/15 to 2017/18 100 90 80 2016-2017 Number of Cases 70 2015-2016 _ 2014-2015 60 Current 50 40 30 20 10 0 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 1 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 Jan 2018 Feb 2018 Mar 2018 Sep 2017 Oct 2017 Nov 2017 Dec 2017 Apr 2018 May 2018 Jun 2018 Jul 2018 2018 Reported Week* Data Source: iPHIS database, extracted January 30, 2018 *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 2017-18 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

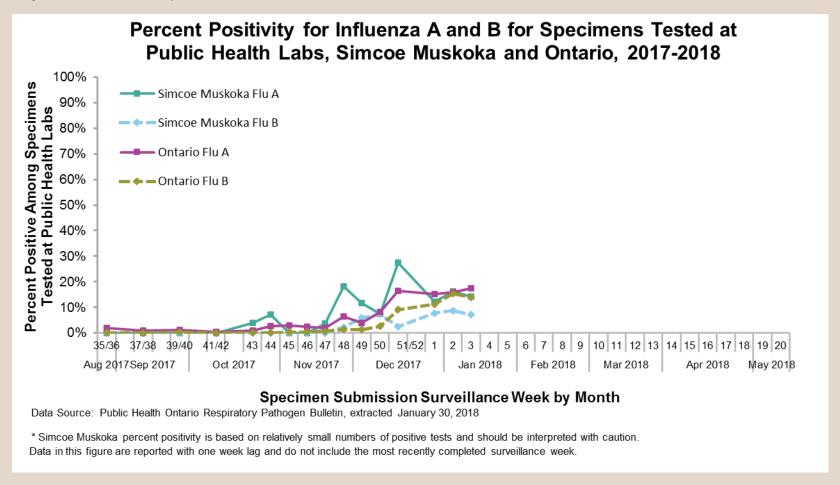
Percent positivity

Note: Percent positivity is reported with one week lag and does not included week 4.

The percentage of flu specimens that are positive (<u>percent positivity</u>) for Influenza A and Influenza B is increasing for the season. The provincial percent positivity for influenza A in week 3 was reported at 17.5%, which is similar compared to week 2. Influenza B percent positivity was reported at 14.0% for week 3.

Locally for week 3, percent positivity for influenza A was reported at 14.1%, while influenza B was 7.1%.

Figure 4: Percent Positivity, Influenza A & B, Simcoe Muskoka & Ontario, 2017/18

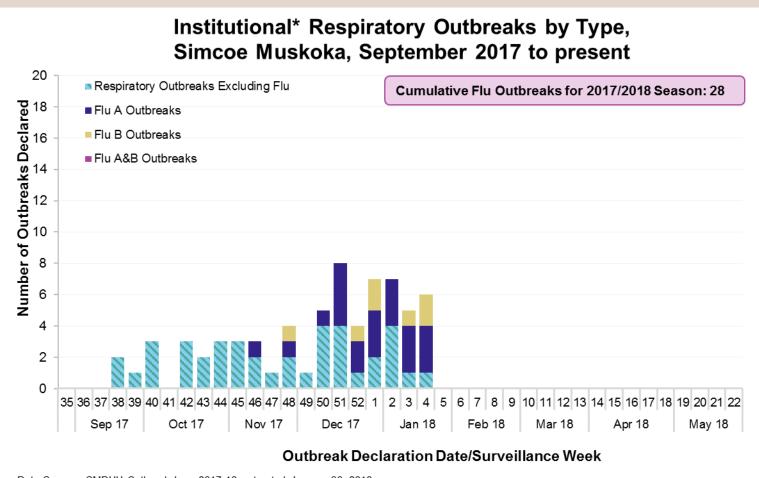


Institutional Respiratory Outbreaks

There have been 28 lab-confirmed institutional flu outbreaks in Simcoe Muskoka since September 1, 2017:

- Influenza A: 21 outbreaks
- Influenza B: seven outbreaks

Figure 5: Institutional Outbreaks by Respiratory Pathogen, Simcoe Muskoka, 2017/18



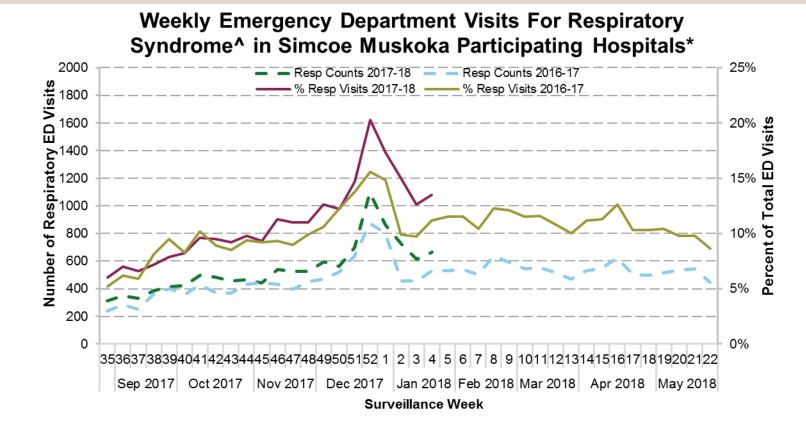
Data Source: SMDHU Outbreak Log, 2017-18, extracted January 30, 2018.

^{*} Confirmed outbreaks. Institutions can include acute care facilities, long term care facilities, retirement homes and child care facilities.

Local Emergency Department Visits

Emergency department visits for respiratory syndrome in Simcoe Muskoka accounted for 13.5% of visits in week 4. This is similar compared to week 3, and higher compared to the same point in the 2016/17 season.

Figure 6: Emergency Department Visits for Respiratory Syndrome at Participating Simcoe Muskoka Hospital, 2016/17, 2017/18 Seasons



Data Source: Acute Care Enhanced Surveillance (ACES) System, extracted January 29, 2018

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. Six hospitals participate in Simcoe Muskoka.

[^] 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".

^{*}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 2017-2018 influenza vaccine contains the following strains:

- A/Michigan/45/2015 (H1N1)pdm09-like virus;
- A/Hong Kong/4801/2014 (H3N2)-like virus; and
- B/Brisbane/60/2008-like virus.

Table 2: Local, Provincial and National Matched and Mismatched Flu Specimens and National Match Percent, 2017-18

Influenza Strains	Number of Specimens with Strain Characterization Results		National Match	
	Ontario	Canada	Percent [†]	
Influenza A Vaccine Strains				
Influenza A (H3N2) A/Hong Kong/4801/2014-like	39	84	67%	
Influenza A (H1N1) A/Michigan/45/2015-like	26	42	33%	
Influenza B Vaccine Strains				
B/Brisbane/60/2008-like	3	11	5%	
B/Phuket/3073/13-like (Quad vaccine only)	71	212	95%	

Data Source: Ontario and Canada Counts: Public Health Ontario Respiratory Pathogen Report, Table 7: Strain characterization completed on influenza isolates at the National Microbiology Laboratory Surveillance week 50, extracted January 30, 2018.

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 <u>here</u>.

† Non-vaccine match strains are not reported. Percent match is based on antigenically similar strains. As of week 3, an additional 234 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 here.

<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 here.

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
- Public Health Ontario Laboratory Respiratory Pathogen Surveillance Reports
- ILI Mapper

Week 3 Provincial Summary: For the 2017-2018 surveillance season to week 3, 4850 laboratory-confirmed influenza cases have been reported across Ontario, 1281 (26.4%) of which were reported in week 3. Among cumulative cases, 58.8% (2853/4850) were influenza A. Of the 820 reported influenza A cases with subtype information available, 95.0% (779/820) were H3N2 and 5.0% (41/820) were (H1N1)pdm09.

(Source: Public Health Ontario Respiratory Pathogen Bulletin, Surveillance Week 3, extracted January 30, 2018)

National

Public Health Agency of Canada FluWatch

International Resources

WHO Global Influenza Surveillance and Response System