

WEEKLY NEW BRUNSWICK INFLUENZA REPORT

Reporting period: October 28 to November 3 2012 (week 44)

Summary

In New Brunswick, influenza activity at typical inter-seasonal levels

New Brunswick:

- There have been no positive influenza detections during week 44.
- The ILI consultation rate was low and was slightly higher than the expected range for this time of year.
- No ILI or influenza outbreaks were reported.

Canada:

- Influenza activity in Canada increased slightly compared to the previous week; however overall activity still remains fairly low with most regions of the country reporting no activity.
- 64 laboratory detections of influenza were reported, proportion of positive tests was 2.8% in week 44.
- The ILI consultation rate was within the expected levels for this time of year. Six influenza outbreaks were reported in long-term care facilities.

International:

- United States: From July 12 to November 3, 2012, a total of 310 infections with variant influenza viruses (306 H3N2v viruses, 3 H1N2v viruses and 1 H1N1v virus) have been reported in 10 states. Of the 306 H3N2v virus infections, 16 confirmed cases have been hospitalized as a result of their illness and one death has occurred. The vast majority of cases have occurred after prolonged swine exposure, though instances of likely human-to-human transmission have been identified. At this time, no ongoing human-to-human transmission has been identified.

1) Influenza Laboratory Data¹

- Influenza activity has continued to be typical inter-seasonal levels.
- No influenza detections were reported during that period.
- Since the beginning of the season, no influenza positive lab detections have been reported.

¹ Surveillance specimens are submitted by recruited New Brunswick Sentinel Practitioner Influenza Network (NB SPIN) practitioners, which are comprised of 7 sites in Emergency Rooms, 5 sites in Family Practice, 3 sites in First Nations communities, 1 site in a Nursing Home, 3 sites in Universities and 8 sites in Community Health Centers. Diagnostic specimens are submitted by physicians in the community/hospital setting. Influenza laboratory data is comprised of results from surveillance and diagnostic specimens. All laboratory specimens are tested using a real-time PCR assay, which is a rapid detection method designed for detection of all known variants of influenza A and B. All laboratory-confirmed cases are reported for the week when laboratory confirmation was received.

Graph 1: Number and percent of positive influenza specimens in New Brunswick, by week, up to November 3, 2012 (data source: G. Dumont lab results)

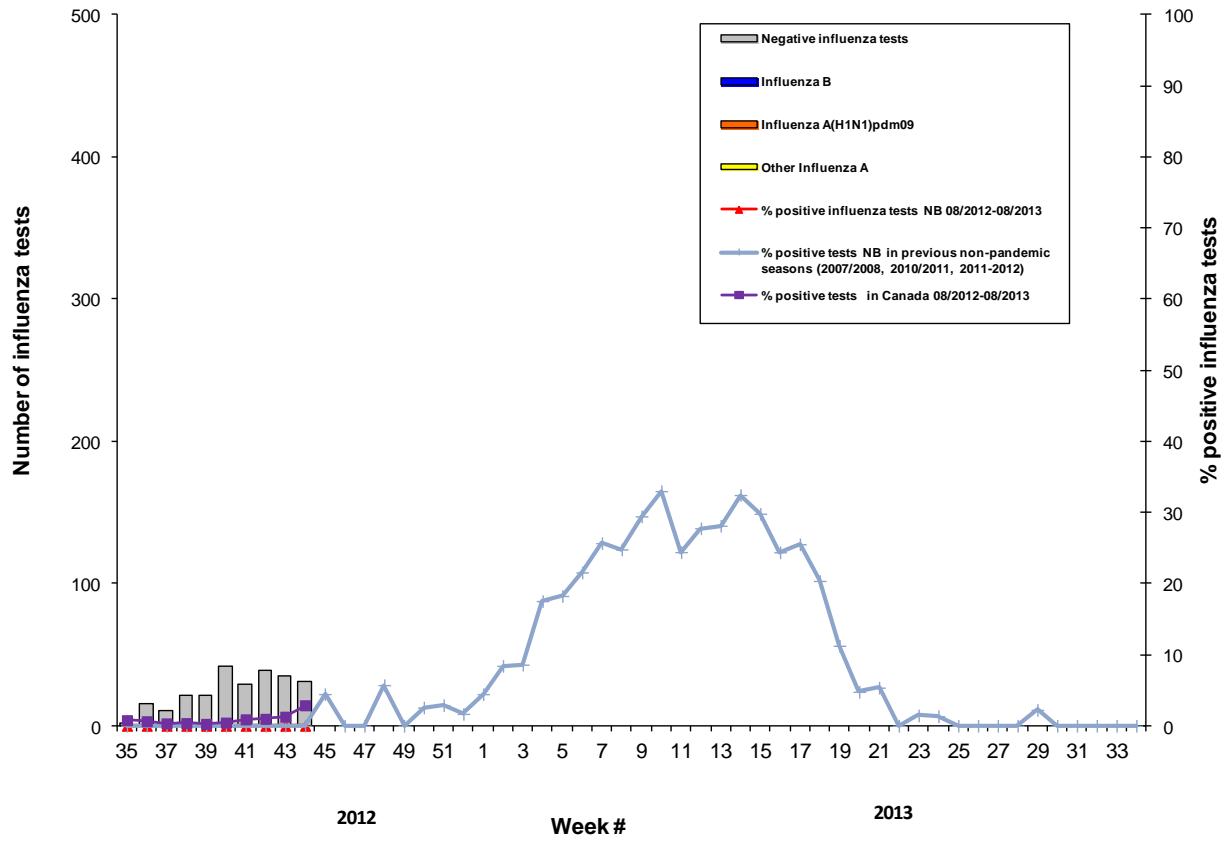


Table 1: Positive influenza test results by Health Region in New Brunswick up to November 3, 2012 (data source: G. Dumont lab results)

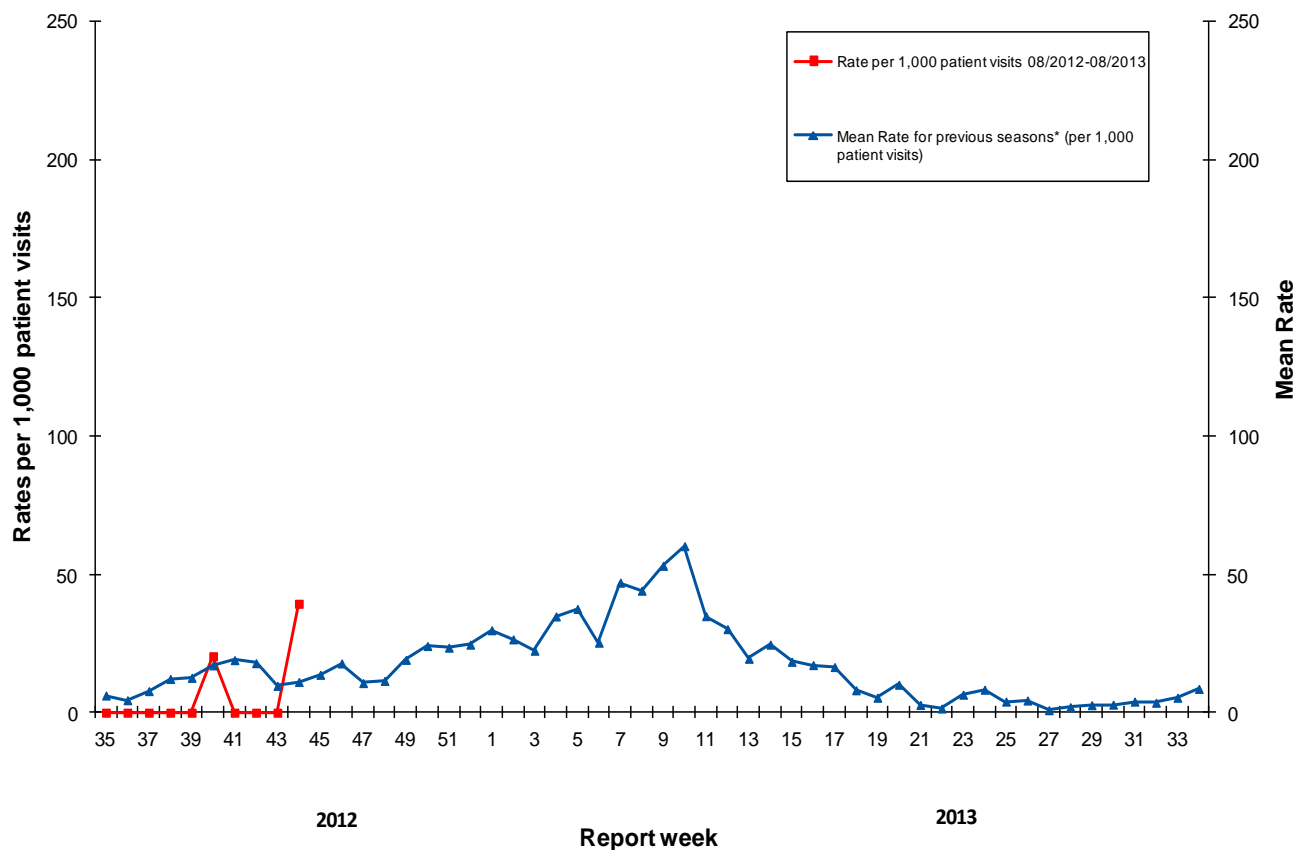
Region	Reporting period:						Cumulative: (2012/2013 season)					Cumulative: (2011/2012 season)		
	October/28/2012–November/03/2012						Aug./26/2012 –Nov./03/2012					Aug./28/2011 – Aug./25/2012		
	Activity level ²	A				B	A				B	A		B
		A(H1)	A(H3)	(H1N1) pdm09	unsubt yped		A(H1)	A(H3)	(H1N1) pdm09	unsubt yped		Non-(H1N1) pdm09	(H1N1) pdm09	
Region 1	No activity	0	0	0	0	0	0	0	0	0	0	24	17	206
Region 2	No activity	0	0	0	0	0	0	0	0	0	0	1	2	18
Region 3	No activity	0	0	0	0	0	0	0	0	0	0	1	0	3
Region 4	No activity	0	0	0	0	0	0	0	0	0	0	2	9	2
Region 5	No activity	0	0	0	0	0	0	0	0	0	0	0	2	4
Region 6	No activity	0	0	0	0	0	0	0	0	0	0	1	6	16
Region 7	No activity	0	0	0	0	0	0	0	0	0	0	1	1	12
Total NB		0	0	0	0	0	0	0	0	0	0	30	37	259

² Influenza activity level definition is available on the PHAC FluWatch website: <http://www.phac-aspc.gc.ca/fluwatch/12-13/def12-13-eng.php>

2) ILI Consultation Rates³

- During week 44, the ILI consultation rate was 39.4 consultations per 1,000 patient visits, and was slightly higher than the expected levels for this time of year.
- During week 44, the sentinel response rate was 45% for both the FluWatch sentinel physicians and the NB SPIN practitioners.

Graph 2: ILI Consultation Rates in New Brunswick, by report week, season 2012/13 compared to previous seasons*



* The mean rate was based on data from the 1996/97 to 2011/2012 seasons and excludes the Pandemic season (2009-2010).

³ A total of 38 practitioner sites (20 FluWatch sentinel physicians and 18 NB SPIN sites) are recruited this season to report the number of ILI patients and total patient consultations one day during a reporting week.

3) ILI and Laboratory-Confirmed Outbreak Data

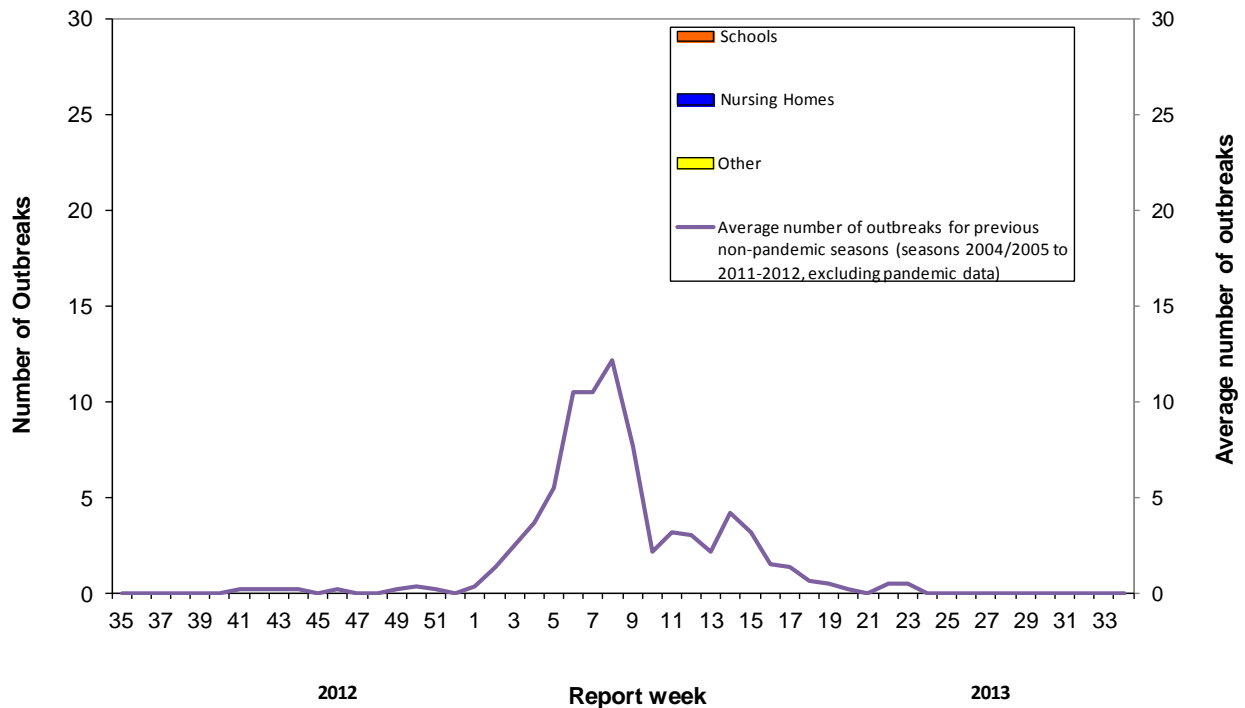
Table 2: ILI activity/outbreaks in New Brunswick nursing homes and schools for the reporting week, current and previous seasons.

	Reporting period: October/28/2012 –November/03/2012			Cumulative # of outbreaks season 2012-2013	Cumulative # of outbreaks season 2011-2012
	Lab-confirmed outbreaks in Nursing Homes*	Schools reporting ILI outbreaks**	Lab-confirmed outbreaks in Other Settings*		
Region 1	0 out of 13	0 out of 74	0	0	4
Region 2	0 out of 15	0 out of 81	0	0	6
Region 3	0 out of 14	0 out of 95	0	0	8
Region 4	0 out of 6	0 out of 22	0	0	2
Region 5	0 out of 2	0 out of 18	0	0	7
Region 6	0 out of 9	0 out of 35	0	0	2
Region 7	0 out of 4	0 out of 27	0	0	2
Total NB	0 out of 63	0 out of 352	0	0	31

*Two or more ILI cases within a seven day period, including at least one laboratory-confirmed case of influenza. Outbreaks are reported in the week when laboratory confirmation is received.

**Schools reporting greater than 10% absenteeism (or absenteeism that is higher (e.g. >5-10%) than expected level as determined by school or Public Health Authority) which is likely due to ILI.

Graph 3: Number of Influenza Outbreaks in Nursing Homes¹ and ILI Outbreaks in Schools² reported to Public Health in New Brunswick, by report week, season 2012/13.



¹ The National FluWatch definition of an outbreak in a nursing home is stated as two or more cases of ILI within a seven-day period, including at least one laboratory confirmed case.

² The National FluWatch definition of an ILI outbreak in a school is stated as absenteeism greater than 10% (or absenteeism that is higher (e.g.>5-10%) than expected level as determined by school or Public Health Authority) which is likely due to ILI.

National Flu Watch Program - Additional information on influenza activity in Canada and around the world is available on the Public Health Agency of Canada's website at:

www.phac-aspc.gc.ca/fluwatch/index.html

Other Links:

World-

http://www.who.int/influenza/surveillance_monitoring/updates/latest_update_GIP_surveillance/en/index.html

Europe: http://www.euroflu.org/cgi-files/bulletin_v2.cgi and

http://www.ecdc.europa.eu/en/healthtopics/seasonal_influenza/epidemiological_data/Pages/Weekly_Influenza_Surveillance_Overview.aspx

PAHO: http://new.paho.org/hq/index.php?option=com_content&task=blogcategory&id=805&Itemid=569

Australia: <http://www.health.gov.au/internet/main/publishing.nsf/Content/cda-surveil-ozflu-flucurr.htm>

New Zealand: [http://www.surv.esr.cri.nz/virology/influenza_weekly_update.php]

Argentina: : <http://www.msal.gov.ar/>

South Africa: <http://www.nicd.ac.za/>

US: www.cdc.gov/flu/weekly/