

### **WEEKLY NEW BRUNSWICK INFLUENZA REPORT**

Reporting period: May 12 to May 18 2013 (week 20)

### Summary

New Brunswick: low influenza activity with 11% decrease in positive detections for week 20

### **New Brunswick:**

- There have been 6 positive influenza detections during week 20 (11% decrease from previous week), 2 influenza A (H1N1)pdm09 and 4 influenza B.
- The ILI consultation rate was low and was within the expected range for this time of year.
- One new influenza outbreak was reported in a Nursing Home in Region 1.

#### Canada:

- Influenza activity in Canada continued its slow decline with the percentage of laboratory tests positive for influenza at 6.7%. Influenza B was the predominant strain, but detections continued to decrease. The number of regions reporting localized activity was similar to previous weeks.
- 161 laboratory detections of influenza were reported, proportion of positive tests was 6.7%.
- The ILI consultation rate decreased and was within the expected level for this time of year. 3 new influenza outbreaks were reported, all in long-term care facilities.

#### International:

- <u>Human infection with Avian Influenza:</u> As of May 27 2013, the WHO reported a total of 131 laboratory-confirmed cases of human infection with an avian influenza A (H7N9) virus in China including 36 deaths. Disease onset was between 19 February and 3 May 2013. There is no evidence of sustained human-to-human transmission. Contacts of confirmed cases are being closely monitored. Investigations into possible sources of infection and reservoirs of the virus are ongoing.
- <u>MERS-CoV</u>: Since April 2012, 44 laboratory-confirmed cases have been reported from Saudi Arabia (31), Qatar (2), Jordan (2), United Kingdom (3), United Arab Emirates (1), France (2), Germany (1) and Tunisia (2). Among the 44 cases, 22 were fatal. Onset of illness was between April 2012 and May 2013. The latest outbreak in Saudi Arabia (22 cases) was linked to a Health Care Facility.

<u>Note:</u> This is the final weekly influenza report for the 2012-13 influenza season. While influenza surveillance continues to be monitored weekly at provincial and national levels, reporting will occur on a biweekly basis during the summer season.

# 1) Influenza Laboratory Data<sup>1</sup>

- An 11% decrease in percent positive laboratory results compared to previous week.
- 6 influenza detections were reported during that period.
- Since the beginning of the season, 1478 positive influenza detections have been reported, 38 influenza A (H1N1)pdm09, 450 influenza A (H3) viruses, 901 influenza A (unsubtyped) and 89 influenza B.

Surveillance specimens are submitted by recruited New Brunswick Sentinel Practitioner Influenza Network (NB SPIN) practitioners, which are comprised of 8 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.

<u>Graph 1</u>: Number and percent of positive influenza specimens in New Brunswick, by week, up to May 18, 2013 (data source: G. Dumont lab results)

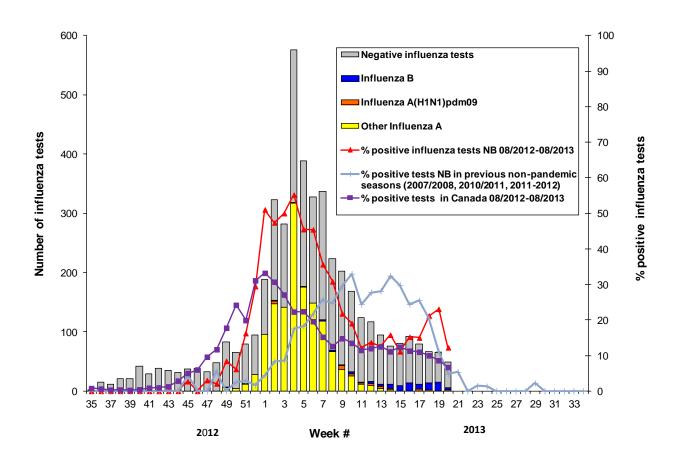


Table 1: Positive influenza test results by Health Region in New Brunswick up to May 18, 2013 (data source: G. Dumont lab results)

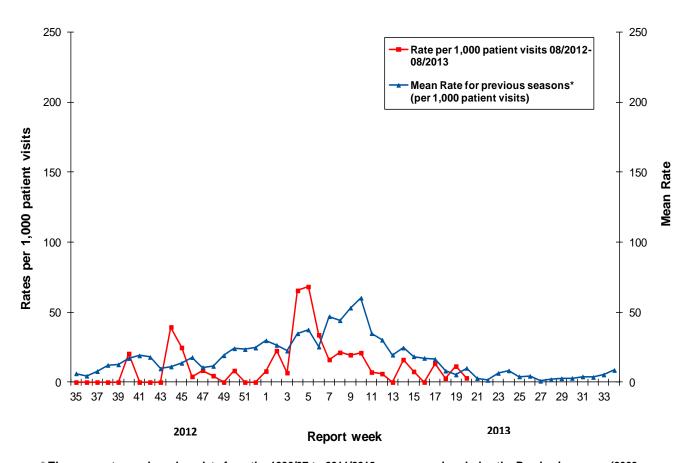
Region	Reporting period:  May/12/2012-May/18/2013						Cumulative: (2012/2013 season)  Aug./26/2012 –May/18/2013					Cumulative: (2011/2012 season) Aug./28/2011 – Aug./25/2012					
		А				В		A B					A B				
	Activity level <sup>2</sup>	A(H1)	A(H3)	(H1N1) pdm09	unsub typed		Total	A(H1)	A(H3)	(H1N1) pdm09	unsub typed		Total	Non- (H1N1) pdm09	(H1N1) pdm09		Total
Region 1	Localized	0	0	0	0	1	1	0	156	13	370	18	557	24	17	206	247
Region 2	No activity	0	0	0	0	0	0	0	52	3	159	8	222	1	2	18	21
Region 3	No activity	0	0	0	0	0	0	0	27	9	58	1	95	1	0	3	4
Region 4	No activity	0	0	0	0	0	0	0	34	5	134	3	176	2	9	2	13
Region 5	No activity	0	0	0	0	0	0	0	11	1	9	6	27	0	2	4	6
Region 6	Sporadic	0	0	2	0	3	5	0	137	5	115	42	299	1	6	16	23
Region 7	No activity	0	0	0	0	0	0	0	33	2	56	11	102	1	1	12	14
Total NB		0	0	2	0	4	6	0	450	38	901	89	1478	30	37	261	328

<sup>&</sup>lt;sup>2</sup> Influenza activity level definition is available on the PHAC FluWatch website: <a href="http://www.phac-aspc.gc.ca/fluwatch/12-13/def12-13-eng.php">http://www.phac-aspc.gc.ca/fluwatch/12-13/def12-13-eng.php</a>

## 2) ILI Consultation Rates<sup>3</sup>

- During week 20, the ILI consultation rate was 3.0 consultations per 1,000 patient visits, and was within the expected levels for this time of year.
- During week 20, the sentinel response rate was 38% for both the FluWatch sentinel physicians and the NB SPIN practitioners.

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



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

<sup>&</sup>lt;sup>3</sup> 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

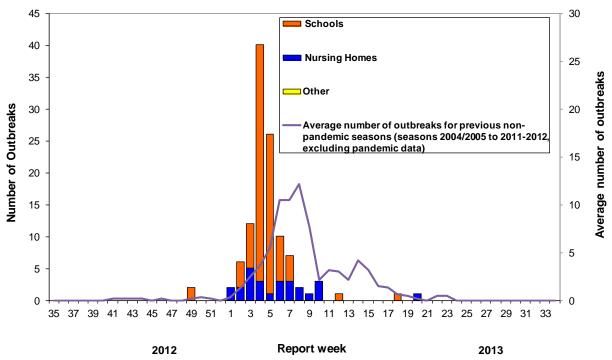
<u>Table 2:</u> ILI activity/outbreaks in New Brunswick nursing homes and schools for the reporting week, current and previous seasons.

	Ma	Reporting period: y/12/2012–May/18/2	Cumulative # of outbreaks	Cumulative # of outbreaks		
	Lab-confirmed outbreaks in Nursing Homes*	Schools reporting ILI outbreaks**	Lab-confirmed outbreaks in Other Settings*	season 2012-2013	season 2011-2012	
Region 1	1 out of 13	0 out of 74	0	15	4	
Region 2	0 out of 15	0 out of 81	0	38	6	
Region 3	0 out of 14	0 out of 95	0	20	8	
Region 4	0 out of 6	0 out of 22	0	2	2	
Region 5	0 out of 2	0 out of 18	0	6	7	
Region 6	0 out of 9	0 out of 35	0	23	2	
Region 7	0 out of 4	0 out of 27	0	10	2	
Total NB	1 out of 63	0 out of 352	0	114	31	

<sup>\*</sup>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.

<sup>\*\*</sup>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 Homes<sup>1</sup> and ILI Outbreaks in Schools<sup>2</sup> reported to Public Health in New Brunswick, by report week, season 2012/13.



<sup>&</sup>lt;sup>1</sup> The National FluWatch definition of an outbreak in a nursing home is stated as two or more cases of ILI within a seven-day

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/

period, including at least one laboratory confirmed case.

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.