
2014-2015 Community Influenza Surveillance Report Update of Current Status February 17, 2015

Overall assessment: Influenza activity in Middlesex-London is lower compared to the previous week.

Local Activity:

From February 8th to 14th, 2015, 33 laboratory-confirmed cases of influenza A were reported. Among these cases, there were 16 hospitalizations. No deaths were reported to the Health Unit in the most recent week.

Since September 1st, 2014, there has been a total of 241 confirmed influenza A cases and three influenza B cases reported, 97 of whom have been hospitalized, and six of whom have died.

In addition, two laboratory-confirmed influenza A outbreaks were declared last week. Since September 1st, 2014, there have been 30 influenza outbreaks declared in Middlesex-London facilities.

Appendix A provides more details about laboratory-based influenza activity indicators, as well as other local indicators of respiratory illness. A graph showing all 244 laboratory-confirmed cases by week is provided in Appendix B, at the end of this report.

Useful Websites

- The latest Ontario Respiratory Virus Bulletin, issued by Public Health Ontario (PHO), is available at: <http://www.publichealthontario.ca/en/ServicesAndTools/SurveillanceServices/Pages/Ontario-Respiratory-Virus-Bulletin.aspx>
- The latest FluWatch report, issued by the Public Health Agency of Canada (PHAC), is available at: <http://www.phac-aspc.gc.ca/fluwatch/>.
- To find a free flu shot clinic near you, visit the Ministry of Health and Long-Term Care's "Find a Flu Shot Clinic" web page at: <https://www.ontario.ca/health-and-wellness/get-flu-shot/>.

Appendix A

Summary of Community Influenza Surveillance Indicators for Middlesex-London February 17, 2015

Table 1: Summary of laboratory-based influenza activity indicators, Middlesex-London and Ontario, 2014-2015 influenza surveillance season

Indicator	Current Reporting Period	Number Reported: <i>Current Reporting Period</i>	Number Reported: <i>Year to Date (from September 1, 2014)</i>	Comparison to Previous Week
Laboratory-confirmed cases¹	Feb. 8-14	Influenza A – 33 cases Influenza B – 0 cases	Influenza A – 241 cases Influenza B – 3 cases	Lower compared to the previous week (Feb. 1-7), when 46 influenza A cases and 1 influenza B case were reported. Please note that the week in which cases are reported does not necessarily reflect the date of onset of illness.
Influenza sub-types¹	Feb. 8-14	Influenza A(H3) – 2 cases	Influenza A(H3) – 47 cases Not subtyped – 194 cases	All influenza A strains subtyped to date have been influenza A(H3). One sample has been typed as A/Switzerland/9715293/2013-like, which is not a component of the 2014-2015 seasonal influenza vaccine.
Hospitalizations¹	Feb 8-14	16	97	Lower compared to the previous week (Jan. 1-7) when 22 hospitalizations were reported.
Deaths¹	Feb 8-14	0	6	Lower than the previous week (Feb. 1-7) when one death was reported among people with laboratory-confirmed influenza.
Influenza outbreaks in long-term care homes/retirement homes/acute care	Feb 8-14	Influenza A – 2 outbreaks Influenza B – 0 outbreaks	Influenza A – 29 outbreaks Influenza A & B – 1 outbreak Influenza B – 0 outbreaks	Lower compared to the previous week (Feb. 1-7) when three outbreaks were declared in facilities.
Percentage of samples that are positive for influenza (Ontario)²	Feb. 1-7	Influenza A – 27.2 % positivity Influenza B – 0.6% positivity	N/A	Influenza A: Lower compared to 30.5% reported the previous week (Jan. 25-31). Influenza B: Similar to 0.3% positivity reported the previous week (Jan. 25-31).

Notes:

1 Numbers are subject to change week by week due to the retrospective nature of reporting.

2 Public Health Ontario, Ontario Respiratory Virus Bulletin 2014-2015

Table 2: Summary of community-based respiratory illness indicators, Middlesex-London, 2014-2015 influenza surveillance season

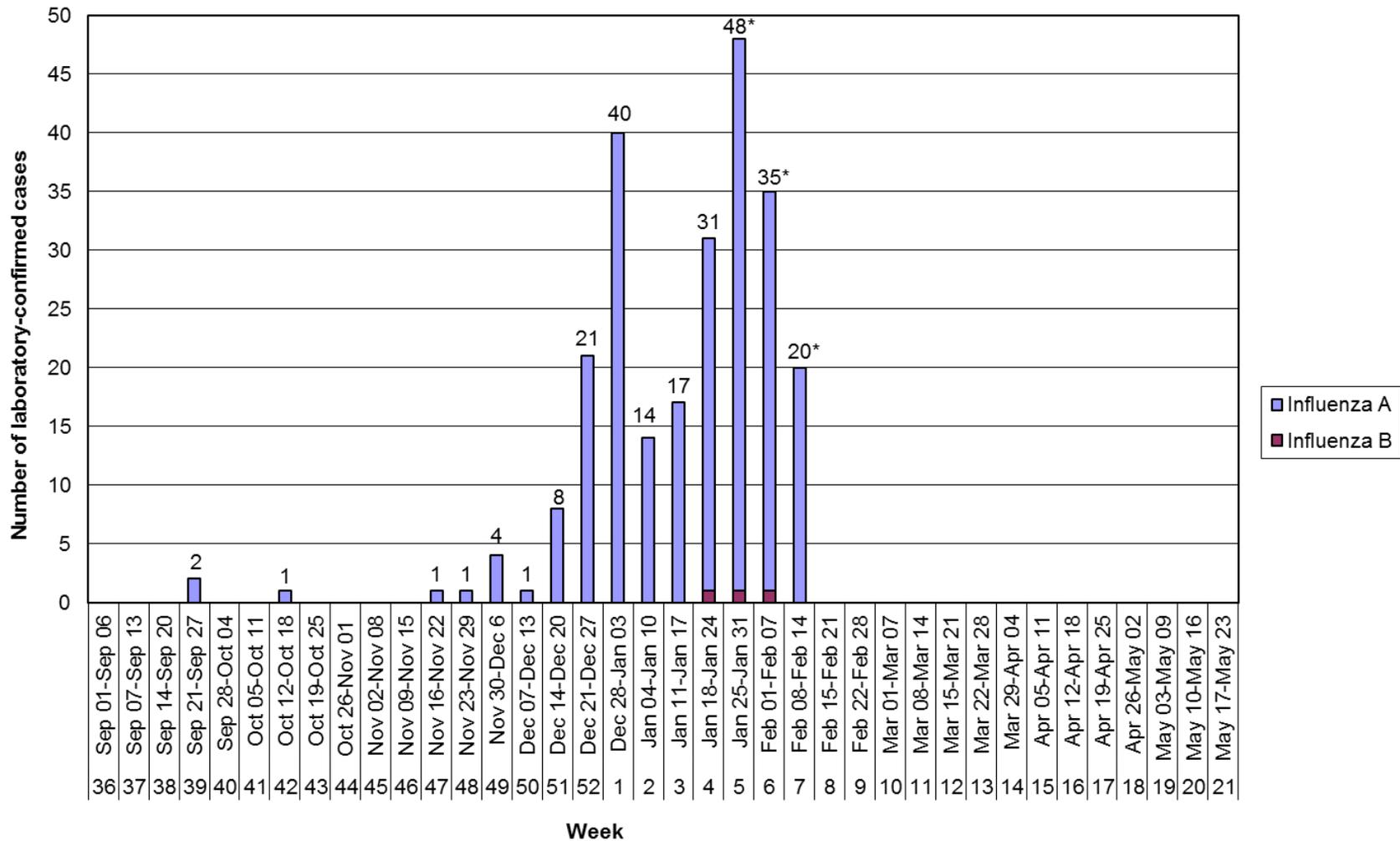
Indicator	Current Reporting Period	Number Reported: <i>Current Reporting Period</i>	Comparison to Previous Week
Hospital emergency room reports regarding the percentage of patients with fever and respiratory illness	Feb. 8-14	<p>Between February 8th and 14th, an average of 9.7% of patients at London Health Sciences Centre (LHSC) Emergency Departments and the St. Joseph's Health Care (SJHC) Urgent Care Centre presented with fever and respiratory symptoms.</p> <p>The proportion was highest at the paediatric emergency department, where 23.7% of patients presented with a fever and respiratory symptoms.</p>	<p>The percentage of patients presenting to hospital emergency departments with fever and respiratory symptoms from all LHSC sites and SJHC combined was lower than the 11.9% reported the previous week (Feb. 1-7).</p> <p>The percentage of patients presenting with fever and respiratory symptoms at the paediatric emergency department was lower than the 29.5% reported the previous week (Feb. 1-7).</p>
Absence reports from elementary schools (i.e., absenteeism > 10%)	Feb. 9-13	Between February 9 th and 13 th , 18 elementary schools from one school board reported a five-day average absenteeism rate exceeding 10%.	The number of schools reporting an average absenteeism rate exceeding 10% was lower than the previous week (Feb. 2-6), when 22 schools reported increased absenteeism.
Sentinel X-ray provider reports regarding newly identified bronchopneumonia cases	Feb. 9-14	From February 9 th and 14 th , 2.3% of chest x-rays performed were newly diagnosed bronchopneumonia cases.	The proportion of newly diagnosed bronchopneumonia cases was lower than the 5.1% reported the previous week (Feb. 2-7).

The Middlesex-London Health Unit gratefully acknowledges the contributions of the following community partners who provide data for this report:

- London Health Sciences Centre
- London X-Ray Associates
- St. Joseph's Health Care London
- Thames Valley District School Board

Appendix B

Laboratory-confirmed influenza cases, by influenza date†
Middlesex-London 2014-2015 influenza season (N=244)



Source: Middlesex-London Health Unit internal influenza tracking database, extracted February 17, 2015.

† 'Influenza date' is the earliest of: symptom onset date, specimen collection date, and reported date.

* Counts may be incomplete and are subject to change, due to the retrospective nature of reporting.