
2018-2019 Community Influenza Surveillance Report

Update of Current Status

March 13th, 2019

Overall Assessment

Influenza continues to circulate widely in the Middlesex-London region, with cases being reported across the City of London and Middlesex County.

Analysis and Action

The influenza season continues in the Middlesex-London region and elsewhere in Ontario. The Health Unit encourages local residents who have not yet received their seasonal influenza vaccine to do so as soon as possible, as it takes about two weeks for the vaccine to provide optimal protection against the flu.

Regardless of the level of local influenza activity, there are a number of easy-to-follow steps that residents can take to avoid becoming sick throughout the year. While washing your hands with soap and warm water, or using an alcohol-based hand sanitizer, remain effective ways of preventing many illnesses, including influenza, local residents should also cover their coughs and sneezes, clean and disinfect high-touch surfaces frequently, and stay home when they feel sick.

Details of Current Local Activity

Between March 3rd and March 9th, there were 34 laboratory-confirmed cases of influenza A reported to the Health Unit, 21 of whom were hospitalized and one of whom died. The Health Unit was also notified of the death of a case who was previously reported.

Appendix A provides additional details about laboratory-based influenza activity indicators for the current reporting week, as well as other local indicators of respiratory illness. A graph showing all 344 laboratory-confirmed cases by week of illness onset is provided at the end of this report in Appendix B.

Provincial and National Comparison

In this week's *Ontario Respiratory Pathogen Bulletin*, Public Health Ontario states that influenza activity across the province was similar when compared to what had been reported the previous week. Influenza A activity across Ontario is moderate, while influenza B activity remains low. Among the influenza A specimens that have been subtyped this season, 71.5% have been the A(H1N1)pdm09 strain.

In this week's *FluWatch*, the Public Health Agency of Canada reports that to date this season, the most common influenza virus identified is influenza A, with 87% of subtyped specimens being the A(H1N1)pdm09 strain. However, influenza A(H3N2) cases have been increasing since January. The majority (84%) of influenza A(H1N1)pdm09 cases have been among those under the age of 65 years, while 61% of all influenza A(H3N2) cases have been among those 65 years of age and over.

- The latest *Ontario Respiratory Pathogen 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/>

Appendix A

Summary of Community Influenza Surveillance Indicators for Middlesex-London March 3rd to March 9th, 2019

Table 1: Summary of laboratory-based influenza activity indicators, Middlesex-London and Ontario, 2018-2019 influenza surveillance season

Indicator	Reporting Period	Number Reported: <i>Current Reporting Period</i>	Number Reported: <i>Year to Date (from September 1, 2018)</i>	Recent Trends
Laboratory-confirmed cases^{1,4}	Mar. 3-9 (week 10) ²	Influenza A – 34 cases Influenza B – 0 cases	Influenza A – 343 cases Influenza B – 1 case	Influenza A: Higher than the previous week (Feb. 24-Mar. 2) when 21 cases were reported. Influenza B: Lower than the previous week (Feb. 24-Mar. 2) when one case was reported.
Influenza sub-types¹	Mar. 3-9	Influenza A (H3) – 3 cases Influenza A (H1N1)pdm09 – 0 cases Influenza A not yet subtyped – 31 cases	Influenza A (H3) – 14 cases Influenza A (H1N1)pdm09 – 51 cases Influenza A not yet subtyped – 278 cases Influenza B not yet subtyped – 1 case	
Hospitalizations^{1,5}	Mar. 3-9	21	173	Higher than the previous week (Feb. 24-Mar. 2) when eight hospitalizations were reported.
Deaths^{1,5}	Mar. 3-9	2	13	Higher than the previous week (Feb. 24-Mar. 2) when one death was reported.
Influenza outbreaks in long-term care homes/retirement homes/acute care	Mar. 3-9	Influenza A – 5 outbreaks Influenza B – 0 outbreaks	Influenza A – 21 outbreaks Influenza B – 0 outbreaks	Influenza A: Higher than the previous week (Feb. 24-Mar. 2) when one outbreak was reported. Influenza B: Same as the previous week (Feb. 24-Mar. 2) when no outbreaks were reported.
Percentage of samples that are positive for influenza (Ontario)³	Feb. 24-Mar. 2 (week 9) ²	Influenza A – 15.4% positivity Influenza B – 0.6% positivity	N/A	Influenza A: Similar to 15.3% positivity reported the previous week (Feb. 17-23). Influenza B: Similar to 0.2% positivity reported the previous week (Feb. 17-23).

Notes:

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

2 Weekly influenza monitoring often uses numbered weeks from 1 to 52 weeks per year. A reference week calendar can be found at <https://www.canada.ca/en/public-health/services/diseases/flu-influenza/influenza-surveillance/fluwatch-weeks-calendar.html>

3 Public Health Ontario, Ontario Respiratory Pathogen Bulletin 2018-2019

4 The week cases are reported to the Health Unit may not be the same as week of illness onset.

5 The week hospitalizations and deaths are reported to the Health Unit may not be the same as the week in which they occurred, or the same as the week of illness onset.

Table 2: Summary of community-based respiratory illness indicators, Middlesex-London, 2018-2019 influenza surveillance season

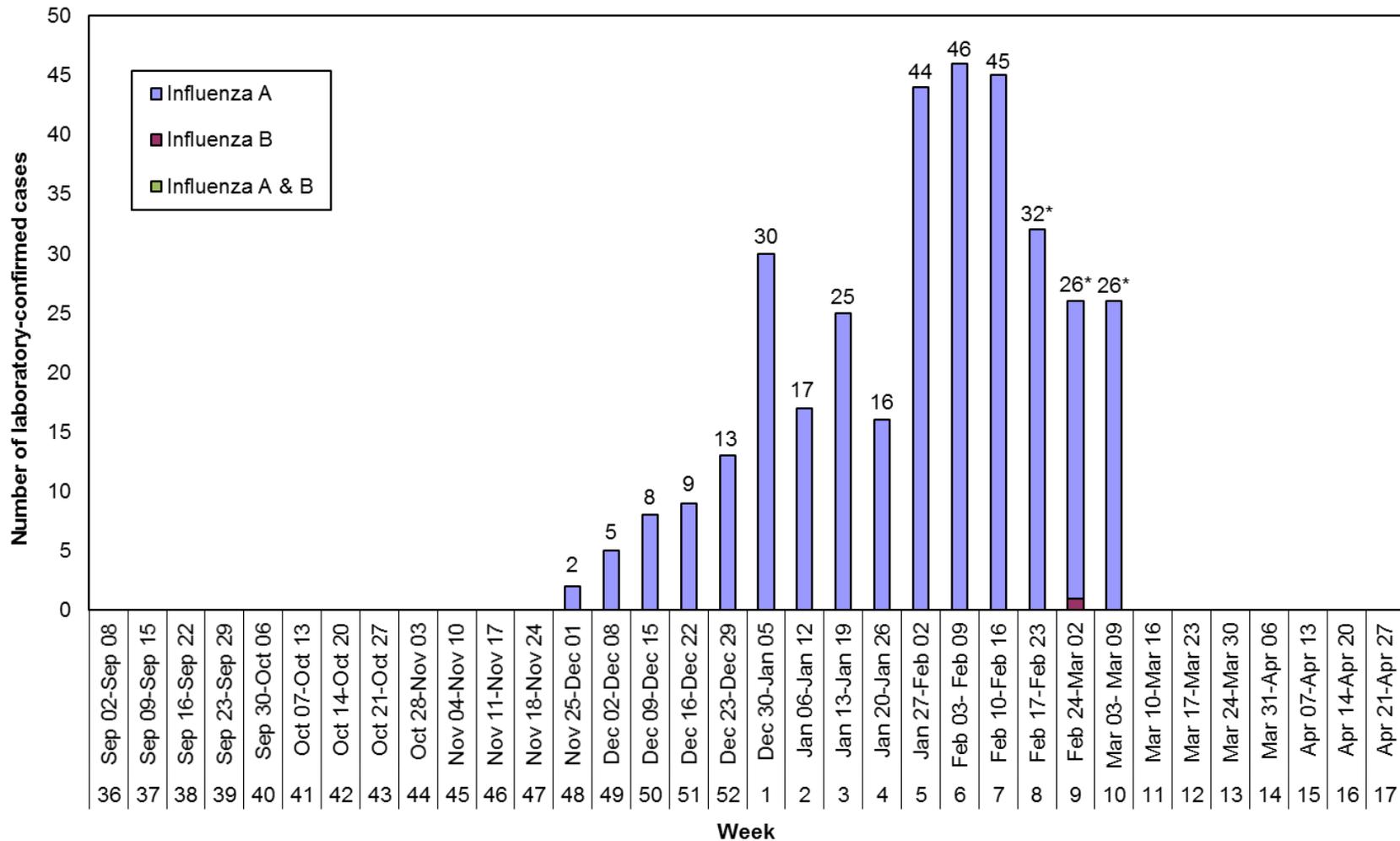
Indicator	Reporting Period	Number Reported: <i>Current Reporting Period</i>	Recent Trends
Hospital emergency room reports regarding the percentage of patients with fever and respiratory illness	Mar. 3-9	An average of 8.2% of patients presented with fever and respiratory symptoms. The proportion was highest at the pediatric emergency department, where 24.1% of patients presented with a fever and respiratory symptoms.	Same as 8.2% reported the previous week (Feb. 24-Mar. 2). Higher than 22.9% reported the previous week (Feb. 24-Mar. 2).
Absence reports from elementary schools (i.e., absenteeism > 10%)	Mar. 4-8	Fifty-one elementary schools from one school board reported average absenteeism (due to all causes) exceeding 10%. Some absenteeism may be related to the lead up to March Break (March 11-15).	Higher than the previous week (Feb. 25-Mar. 1) when 32 elementary schools reported increased absenteeism.

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

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

Appendix B

Laboratory-confirmed influenza cases, by influenza date† Middlesex-London 2018-2019 influenza season (N=344)



Source: Middlesex-London Health Unit internal influenza case tracking database, extracted March 12, 2019.

† 'Influenza date' is the earliest of: symptom onset date, specimen collection date, and reported date. As a result, the weekly counts shown in this section differ from those provided in other sections of this report.

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