
2014-2015 Community Influenza Surveillance Report Update of Current Status January 20, 2015

Overall assessment: Influenza activity in Middlesex-London is lower compared to the previous week. This may be due to reduced testing and a corresponding decrease in the detection of illness, or it may reflect a true decrease in the number of influenza infections occurring in the community.

Local Activity:

From January 11th to 17th, 2015, 13 laboratory-confirmed cases of influenza A were reported to the Health Unit. No hospitalizations or deaths have been reported among any of these newly-reported cases.

Since September 1st, 2014, there has been a total of 94 laboratory-confirmed influenza A cases reported, 34 of whom have been hospitalized, and four of whom have died.

In addition, two laboratory-confirmed influenza A outbreaks were declared last week, bringing to 17 the total number of influenza outbreaks declared in Middlesex-London facilities since September 1st, 2014.

Appendix A provides more details about laboratory-based influenza activity indicators, as well as other local indicators of respiratory illness. A graph showing all 94 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 January 20, 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: Current Reporting Period	Number Reported: Year to Date (from September 1, 2014)	Recent Trends
Laboratory-confirmed cases ¹	Jan. 11-17	Influenza A – 13 cases Influenza B – 0 cases	Influenza A – 94 cases Influenza B – 0 cases	Lower compared to the previous week (Jan. 4-10), when 21 influenza A cases were reported.
Influenza sub-types ¹	Jan. 11-17	Influenza A(H3) - 7 cases	Influenza A(H3) – 27 cases Typing pending – 67 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.
Hospitalizations ¹	Jan. 11-17	0	34	Lower compared to the previous week (Jan. 4-10) when 12 hospitalizations were reported.
Deaths ¹	Jan. 11-17	0	4	Similar to the previous week (Jan. 4-10) when one death was reported among people with laboratory-confirmed influenza.
Influenza outbreaks in long-term care homes/retirement homes/acute care	Jan. 11-17	Influenza A – 2 outbreaks Influenza B – 0 outbreak	Influenza A – 17 outbreaks Influenza B – 0 outbreaks	Similar compared to the previous week (Jan. 4-10) when three outbreaks were declared in facilities.
Percentage of samples that are positive for influenza (Ontario) ²	Jan. 4-10	Influenza A – 28.6% positivity Influenza B – 0.3% positivity	N/A	Influenza A: Lower compared to 34.5% reported the previous week (Dec. 28-Jan. 3). Influenza B: Same as 0.3% positivity reported the previous week (Dec. 28-Jan. 3).

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

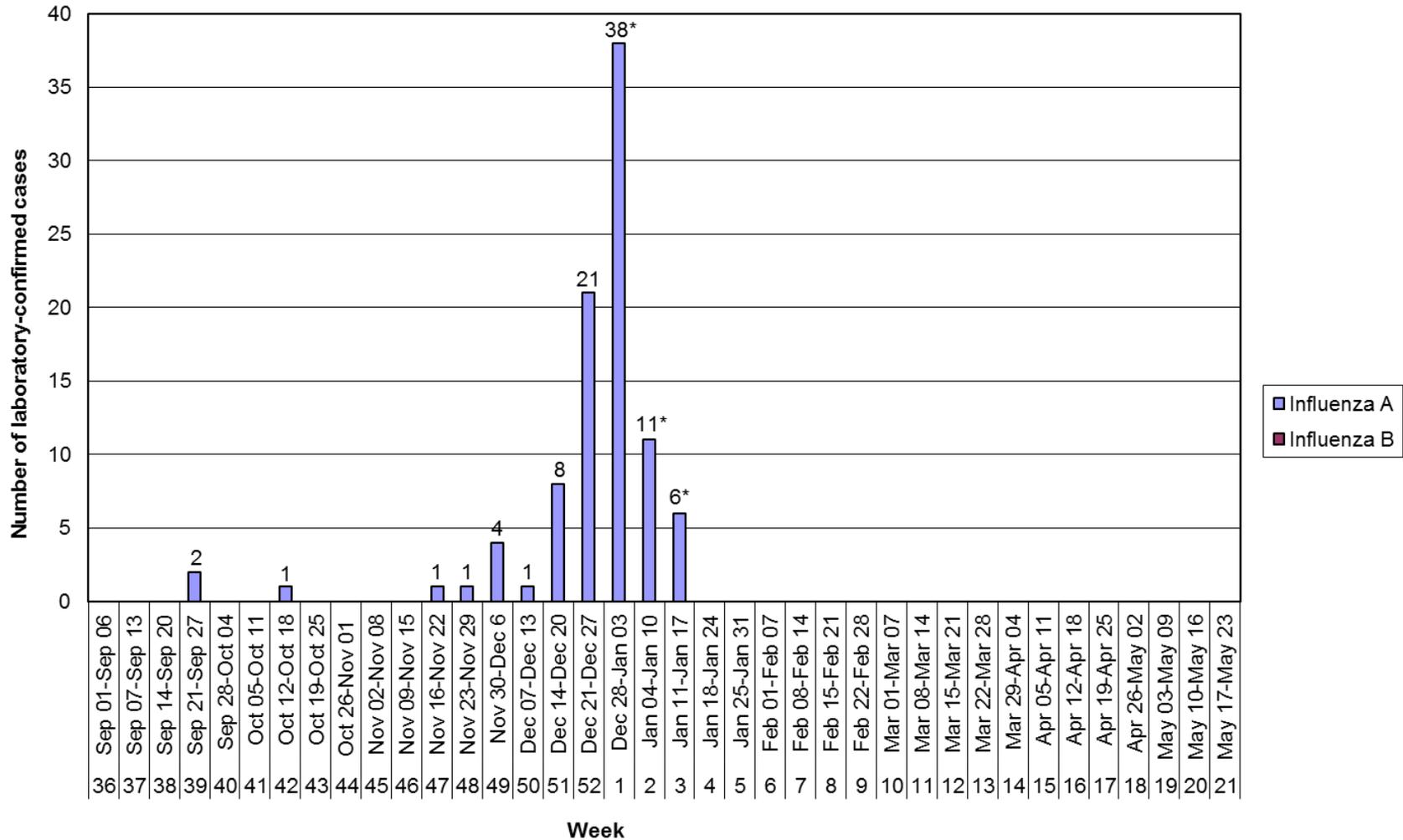
Indicator	Current Reporting Period	Number Reported: <i>Current Reporting Period</i>	Recent Trends
Hospital emergency room reports regarding the percentage of patients with fever and respiratory illness	Jan. 11-17	<p>Between January 11th and 17th, an average of 11.2% of patients at London Health Sciences 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 25.7% 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 similar to the 10.9% reported the previous week (Jan. 4-10).</p> <p>The percentage of patients presenting with fever and respiratory symptoms at the paediatric emergency department was slightly lower than the 26.4% reported the previous week (Jan. 4-10).</p>
Absence reports from elementary schools (i.e., absenteeism > 10%)	Jan. 12-16	Between January 12 th and 15 th , fourteen elementary schools from one school board reported a four-day average absenteeism rate exceeding 10%.	Data not currently available.
Sentinel X-ray provider reports regarding newly identified bronchopneumonia cases	Jan. 12-17	From January 12 th to 17 th , 4.7% of chest x-rays performed were newly diagnosed bronchopneumonia cases.	The proportion of newly diagnosed bronchopneumonia cases was lower than the 7.8% reported the previous week (Jan. 5-10)

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=94)**



Source: Middlesex-London Health Unit internal influenza tracking database, extracted January 19, 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.