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## 2017-2018 Community Influenza Surveillance Report Update of Current Status March 14<sup>th</sup>, 2018

### Overall assessment

While there continue to be moderate levels of influenza activity in the Middlesex-London region, it appears influenza B activity has peaked for the season, and the level of influenza A activity also appears to be declining.

### Analysis and Action

The Health Unit continues to recommend quadrivalent inactivated influenza vaccine (QIV) for all unimmunized individuals. In addition to being immunized, local residents can also take a number of other steps to prevent becoming sick. Handwashing is an effective way to prevent many illnesses, including influenza. In addition, local residents should stay home when they feel sick, cover coughs and sneezes, and clean and disinfect high-touch surfaces frequently.

### Details of Current Local Activity

Between March 4<sup>th</sup> and 10<sup>th</sup> there were 20 laboratory confirmed cases of influenza A and seven cases of influenza B reported to the Health Unit. There were also 19 hospitalizations and one death reported. Please note that due to the retrospective nature of reporting, the week in which hospitalizations and deaths are reported to the Health Unit may not be the same as the week in which they occurred.

Since September 1<sup>st</sup>, 2017, there have been 325 laboratory-confirmed influenza A cases, 391 cases of influenza B, and six cases infected with both influenza A and B, reported to the Health Unit. Among these cases there have been 367 hospitalizations and 38 deaths; all deaths to date have been among cases 50 years of age and over. Over this time period, there have also been 25 influenza A outbreaks, 27 influenza B outbreaks, and five outbreaks with both influenza A and B declared in hospitals, long-term care facilities, and retirement homes.

Appendix A provides more detail about laboratory-based influenza activity indicators, as well as other local indicators of respiratory illness. A graph showing all 722 laboratory-confirmed cases by week of illness onset is provided at the end of this report in Appendix B.

### Useful Websites

- 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/>.
- To find a free flu shot clinic near you, visit the Ministry of Health and Long-Term Care's "Get the flu shot" web page at <http://www.ontario.ca/page/get-flu-shot/>.

## Appendix A

### Summary of Community Influenza Surveillance Indicators for Middlesex-London March 4<sup>th</sup> to 10<sup>th</sup>, 2018

**Table 1: Summary of laboratory-based influenza activity indicators, Middlesex-London and Ontario, 2017-2018 influenza surveillance season**

Indicator	Reporting Period	Number Reported: <i>Current Reporting Period</i>	Number Reported: <i>Year to Date (from September 1, 2017)</i>	Recent Trends
<b>Laboratory-confirmed cases<sup>1,4</sup></b>	Mar. 4-10 (week 10) <sup>2</sup>	Influenza A – 20 cases Influenza B – 7 cases Influenza A&B – 0 cases	Influenza A – 325 cases Influenza B – 391 cases Influenza A & B – 6 cases	Influenza A: <b>Higher</b> than the previous week (Feb. 25-Mar. 3) when 19 cases were reported.  Influenza B: <b>Higher</b> than the previous week (Feb. 25-Mar. 3) when five cases were reported.
<b>Influenza sub-types<sup>1</sup></b>	Mar. 4-10	Influenza A not yet subtyped – 20 cases  Influenza B not yet subtyped – 7 cases	Influenza A – (H3) – 60 cases (H1N1)pdm09 – 2 cases Not subtyped – 263 cases  Influenza B – Phuket/3073/13-like –1 case Not subtyped – 390 cases	
<b>Hospitalizations<sup>1,5</sup></b>	Mar. 4-10	19	367	<b>Lower</b> than the previous week (Feb. 25-Mar. 3) when 20 hospitalizations were reported.
<b>Deaths<sup>1,5</sup></b>	Mar. 4-10	1	38	<b>Lower</b> than the previous week (Feb. 25-Mar. 3) when eight deaths were reported.
<b>Influenza outbreaks in long-term care homes/retirement homes/acute care</b>	Mar. 4-10	Influenza A – 1 outbreak Influenza B – 0 outbreaks Influenza A&B – 0 outbreaks	Influenza A – 25 outbreaks Influenza B – 27 outbreaks Influenza A&B – 5 outbreaks	Influenza A: <b>Same</b> as the previous week (Feb. 25-Mar. 3) when one outbreak was reported.  Influenza B: <b>Same</b> as the previous week (Feb. 25-Mar. 3) when no outbreaks were reported.
<b>Percentage of samples that are positive for influenza (Ontario)<sup>3</sup></b>	Feb. 25-Mar. 3 (week 9) <sup>2</sup>	Influenza A – 15.2% positivity Influenza B – 11.7% positivity	N/A	Influenza A: <b>Similar</b> to 15.4% positivity reported in the previous reporting period (Feb. 18-24).  Influenza B: <b>Lower</b> than 12.5% positivity reported in the previous reporting period (Feb. 18-24).

**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 2017-2018

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, 2017-2018 influenza surveillance season**

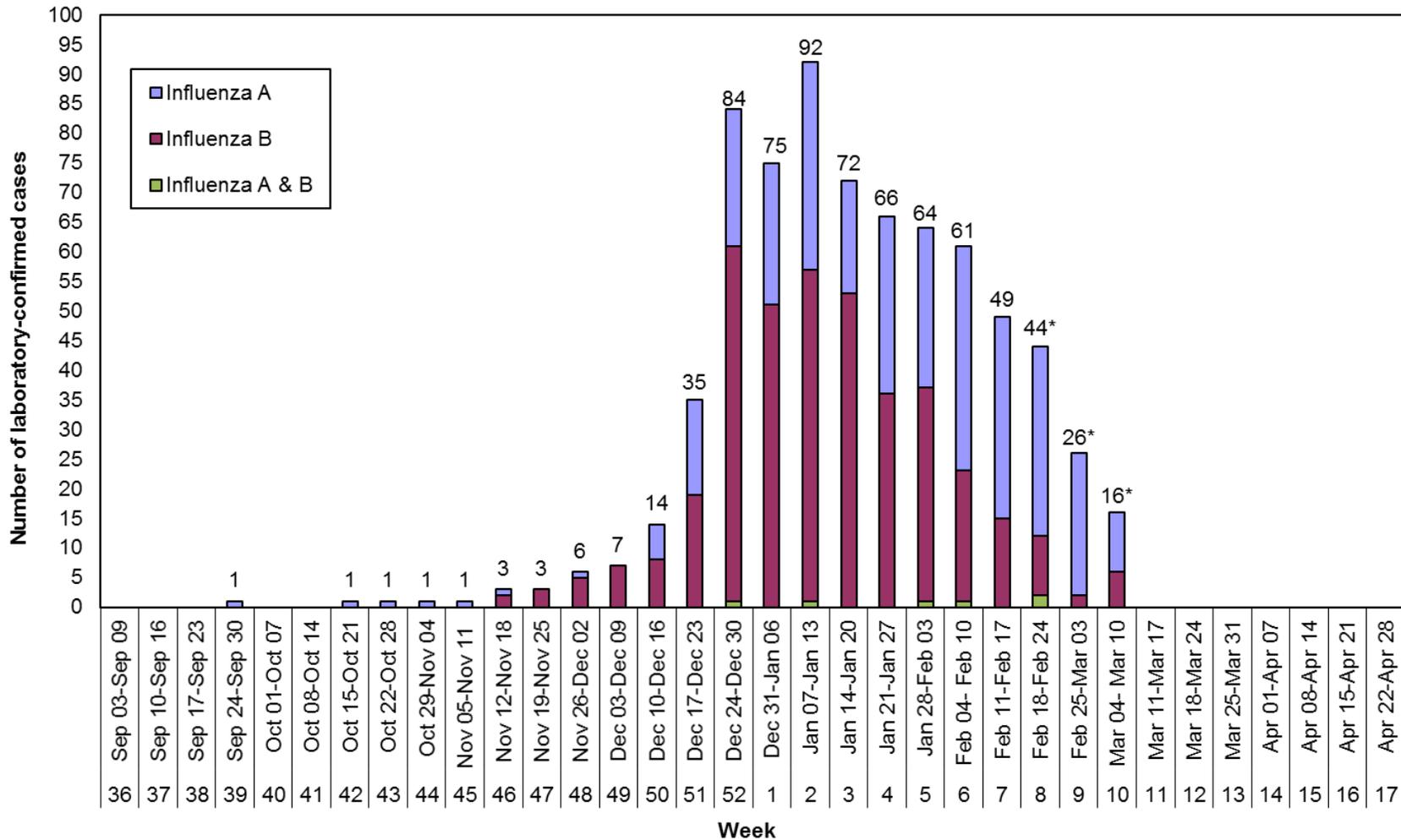
Indicator	Reporting Period	Number Reported: <i>Current Reporting Period</i>	Recent Trends
<b>Hospital emergency room reports regarding the percentage of patients with fever and respiratory illness</b>	Mar. 4-10	An average of 7.6% of patients presented with fever and respiratory symptoms.  The proportion was highest at the pediatric emergency department, where 21.2% of patients presented with a fever and respiratory symptoms.	<b>Lower</b> than 9.1% reported the previous week (Feb. 25-Mar. 3).  <b>Lower</b> than 25.8% reported the previous week (Feb. 25-Mar. 3).
<b>Absence reports from elementary schools (i.e., absenteeism &gt; 10%)</b>	Mar. 5-9	Thirty-six elementary schools from one school board reported average absenteeism (due to all causes) exceeding 10%	<b>Higher</b> than the previous week (Feb. 26-Mar. 2), when 27 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 2017-2018 influenza season (N=722)



Data source: Middlesex-London Health Unit internal influenza tracking database, extracted March 12, 2018.

† '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.