
2018-2019 Community Influenza Surveillance Report Update of Current Status November 28th, 2018

Overall Assessment

The current level of influenza activity in Middlesex-London remains low. There have been no laboratory-confirmed influenza cases identified in London or Middlesex County so far this season, however public health units in other regions of Ontario are reporting sporadic or localized activity.

Analysis and Action

Ontario's influenza season is under way. If they haven't done so already, the Health Unit is encouraging local residents to get their seasonal influenza vaccine as soon as possible, before the arrival of peak influenza activity, as it takes about two weeks for the vaccine to provide optimal protection against the flu.

Regardless of the local level of influenza activity, residents can take a number of steps 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 November 18th and 24th there were no laboratory-confirmed cases of influenza reported to the Health Unit. There have also been no laboratory-confirmed influenza cases reported to the Health Unit since the beginning of the influenza surveillance season on September 1st.

Appendix A provides more detail about laboratory-based influenza activity indicators, as well as other local indicators of respiratory illness.

Provincial and National Comparison

According to Public Health Ontario in this week's *Ontario Respiratory Pathogen Bulletin*, influenza A and influenza B activity across the province remains low, however, when compared to previous weeks, the level of activity is increasing. Both influenza A and influenza B have been detected in Ontario, although the majority of positive specimens have been influenza A. Among the influenza A specimens that have been subtyped, approximately half (53.6%) have been the A(H1N1)pdm09 strain, with the remaining subtyped specimens (46.4%) being A(H3).

The Public Health Agency of Canada's *FluWatch* reports that influenza activity continues to increase across Canada. The most common influenza virus identified is influenza A, with the majority being the A(H1N1)pdm09 strain, although A(H3) has also been detected in some provinces, including Ontario.

- 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 November 18th to November 24th, 2018

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}	Nov. 18-24 (week 47) ²	Influenza A – 0 cases Influenza B – 0 cases	Influenza A – 0 cases Influenza B – 0 cases	Influenza A: Same as the previous week (Nov. 11-17) when no cases were reported. Influenza B: Same as the previous week (Nov. 11-17) when no cases were reported.
Influenza sub-types ¹	Nov. 18-24	0	0	No local cases reported to date.
Hospitalizations ^{1,5}	Nov. 18-24	0	0	No local cases reported to date.
Deaths ^{1,5}	Nov. 18-24	0	0	No local cases reported to date.
Influenza outbreaks in long-term care homes/retirement homes/acute care	Nov. 18-24	Influenza A – 0 outbreaks Influenza B – 0 outbreaks	Influenza A – 0 outbreaks Influenza B – 0 outbreaks	No local institutional outbreaks declared to date.
Percentage of samples that are positive for influenza (Ontario) ³	Nov. 11-17 (week 46) ²	Influenza A – 2.2% positivity Influenza B – 0.3% positivity	N/A	Influenza A: Higher than 1.7% positivity reported the previous week (Nov. 4-10). Influenza B: Lower than 0.8% positivity reported the previous week (Nov. 4-10).

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	Nov. 11-17	An average of 8.2% of patients presented with fever and respiratory symptoms. The proportion was highest at the pediatric emergency department, where 25.2% of patients presented with a fever and respiratory symptoms.	Higher than 7.2% reported the previous week (Nov. 11-17). Higher than 23.3% reported the previous week (Nov. 11-17).
Absence reports from elementary schools (i.e., absenteeism > 10%)	Nov. 12-16	Twenty-one elementary schools from one school board reported average absenteeism (due to all causes) exceeding 10%.	Higher than the previous week (Nov. 12-16) when 16 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

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