

2011-2012 Influenza Surveillance Update of Current Status and Issues

February 27, 2012

Influenza activity in Middlesex-London:

Since the last report, 3 influenza B cases were reported to the Middlesex-London Health Unit. Currently, the number of influenza B cases reported to the health unit on a weekly basis is higher than influenza A. Earlier in the influenza season influenza A was the predominant strain although in very low numbers. To date, there have been nine influenza A cases and six influenza B cases identified in Middlesex London for the 2011-2012 influenza surveillance season. Six of the influenza A samples have been typed as human influenza A (H3). One of these samples has been strain typed as A/Perth/16/2009-like (H3N2) which is the H3N2 component for this year's influenza vaccine.

There continues to be no outbreaks of influenza in long-term care homes or in acute care facilities. The overall proportion of patients presenting to London emergency departments and urgent care with fever and respiratory symptoms was higher compared to the previous week, and school absenteeism was also slightly higher relative to the previous week. Based on the available information, influenza activity in Middlesex London remains low but may be showing signs of increase.

Provincial and National Influenza Activity:

Influenza: Influenza activity across the province is similar to the previous week, but continues to be lower than in previous years. According to the latest Ontario Influenza Bulletin, there were 144 laboratory-confirmed cases of influenza reported between February 12 and 18, 2012. In total, 502 influenza cases have been reported to the province for the 2011-2012 surveillance season. The majority of the influenza cases reported were subtyped as influenza B (283 cases) or influenza A(H1N1)pdm09 (formerly known as influenza A pH1N1) (93 cases), which together account for 74.9% (376/502) of cases reported to date. Provincially, two new institutional respiratory outbreaks were reported this week, neither of which was identified as influenza. In total, 11 institutional influenza outbreaks have been reported across the province this season, seven of which were influenza B, three influenza A (all subtypes) and one combined influenza A and B. Nationally, influenza activity remains similar to the previous week. The percent positivity for influenza B detections continues to increase over the past several weeks with some provinces having detected more influenza B viruses than influenza A viruses. To date, Ontario and the Atlantic provinces have had the highest proportion of influenza B detections relative to influenza A detections.

To date, strain characterization of influenza isolates in Ontario and Canada has demonstrated a generally good match with this season's influenza vaccine. Since the start of the season, the National Microbiology Lab has characterized 354 samples from across Canada with the following results: 99 Influenza A (H3N2)/Perth/16/2009-like and 66 Influenza A/California/07/2009, both of which are components of the 2011-2012 influenza vaccine; 103 influenza B strains are antigenically related to the strain B/Brisbane/60/2008, which also is a component of the 2011-2012 influenza vaccine; and the other 86 influenza B viruses are antigenically related to B/Wisconsin/01/2010-like, which belongs to a different lineage than the influenza strain B that is in this year's vaccine.

Other Respiratory Pathogens: Provincially the most notable virus this reporting week was human metapneumovirus (28.9% positivity) followed by RSV (21.0% positivity). Nationally, the main respiratory virus being identified is Respiratory Syncytial Virus (RSV) but the proportion of tests positive for RSV is declining.

Influenza vaccination opportunities:

Influenza vaccination is available at some health care providers' offices and at the Health Unit's walk-in Immunization clinics. Clinics are scheduled at 50 King Street in London on Mondays, Wednesdays and Fridays from 9:00 a.m. to 4:00 p.m. and on the first and third Wednesday of each month from 9:00 a.m. to 7:00 p.m. Clinics also take place at the Kenwick Mall in Strathroy from 3:30 p.m. to 7:30 p.m. on the first Tuesday of each month.

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Appendix A

Summary of Community Influenza Surveillance Indicators

Influenza activity in Middlesex London is low, but many be showing signs of increase.

Indicator	Recent trends / data	Comments
Hospital emergency room reports regarding the percentage of patients with fever and respiratory illness	Higher	From February 19 to 25, an average of 8.6% of patients at London Health Sciences Centre (LHSC) emergency departments and the St. Joseph's Health Care (SJHC) urgent care centre presented with a fever and respiratory symptoms. This value is higher compared to 7.5% from the previous week. The proportion was highest at the paediatric emergency department, where 26.3% of patients presented with a fever and respiratory symptoms. This value is higher compared to 21.8% from the previous week.
Absence reports from schools (i.e., absenteeism > 10%)	Slightly higher	From February 13 to 17, four elementary schools in the two main English language public school boards reported a 5-day average absenteeism exceeding 10%. This number is slightly higher than three in the previous week.
Laboratory-confirmed cases	Higher	Three cases of influenza B were reported to the Health Unit since the previous report. Since the beginning of the influenza surveillance season, nine influenza A and six influenza B cases have been reported in Middlesex-London. Six of the influenza A strains have been characterized as H3, of which one was strain typed as A/Perth/16/2009-like (H3N2), a component of this year's seasonal influenza vaccine.
Hospitalizations	Low	Two hospitalizations of individuals with lab confirmed influenza were reported to the health unit this reporting week. Since the start of the influenza surveillance season, eight people with laboratory-confirmed influenza have been hospitalized.
Deaths	None reported	
Long-term care facility outbreaks	None reported	Since the beginning of the influenza surveillance season, no institutional outbreaks of influenza have been reported to the Health Unit.
Sentinel X-ray provider reports regarding newly identified bronchopneumonia cases	Similar	From February 20 to 25, 3.4% of chest x-rays performed by the sentinel x-ray provider were newly diagnosed bronchopneumonia cases. This proportion is similar to 3.7% from the previous week.
Calls to Telehealth Ontario related to respiratory and influenza-like illness	None reported	
Percentage of influenza tests performed by the Ontario Public Health Laboratory that are positive from across the province	Similar for influenza A Lower for influenza B	Based on provincial testing done by the Ontario Public Health Laboratory from February 12 to 18, 7 of 270 samples tested positive for influenza A for a positivity rate of 2.6%, which is similar to 2.3% positivity the previous week. Twenty two of 269 samples tested positive for influenza B for a positivity rate of 8.2%, which is lower than 9.7% positivity the previous week.