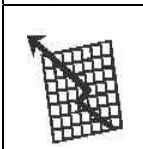
	Ontario Influenza Bulletin	Ministry of Health and Long-Term Care Public Health Branch <i>Volume 7, Issue 7, 2003</i>
			

Week #50: Week Ending December 13, 2003

Influenza Activity in Ontario

Widespread influenza activity was reported in all health regions of the province during the week ending December 13. Confirmed influenza cases and institutional influenza outbreaks were reported in at least one of the health units in each health region during this period. Ontario laboratories reported 385 influenza A isolations to the Center for Infectious Disease Prevention and Control (CIDPC), Health Canada. Also reported, were the following upper respiratory isolates and detections: 35 respiratory syncytial virus (RSV), 19 parainfluenza type 1 (PIV1), 10 parainfluenza type 2 (PIV2), 9 parainfluenza type 3 (PIV3), and 28 adenoviruses (Table 1). Fifty-four influenza like illness (ILI) outbreaks were reported during this surveillance period, and 35 (68%) of the ILI outbreaks were due to influenza A. Health units reported 262 confirmed influenza cases (all influenza A) through the Reportable Diseases Information System (RDIS) (Table 2).

Table 1. Comparison of Influenza Activity in Ontario for the 2002-03 and 2003-04 Influenza Surveillance Seasons

Indicator	2002-03 Season	2003-04 Season
	Week Ending, December 14, 2002 (week 50)	Week Ending December 13, 2003 (week 50)
	Season to Date**	Season to Date***
*Laboratory Surveillance (Flu isolates)Total	67	753
Influenza A	67	753
Influenza B	0	0
Other respiratory Viruses		
RSV	169	114
PIV1	52	125
PIV2	9	71
PIV3	164	43
PIV4	2	4
Other PIVs	0	2
Adenoviruses	49	40
No. of ILI Visits to Sentinel Physicians (ILI Rate/1000 patients seen for all reasons)	20	103
+ Institutional <u>Influenza</u> Outbreaks	3	35
+ Institutional ILI Outbreaks	3	54

*Center for Infectious Disease Prevention and Control (CIDPC), Health Canada

Consistent with Health Canada year round surveillance periods (only for Laboratory Surveillance Data)

** August, 2002 – December 14, 2002; + October 27, 2003 - December 13, 2003

***Season to Date; August 24, 2003 - December 13, 2003

Note: 16 public health and hospital laboratories in the Province report to the CIDPC

Table 2. Week Ending December 13, 2003 Influenza Cases in Ontario Reported Through the Reportable Disease Information System (RDIS), 2003-2004 (September 1, 2003 to December 6, 2003)

Health Unit	Number of Lab-Confirmed Influenza Cases			
	Influenza A		Influenza B	
	Week 49	Week 50	Week 49	Week 50
Chatham-Kent	0	1		
Durham Region	13	19		
Grey-Bruce	2	7		
Haliburton-Kawartha	21	28		
Halton	4	19		
Haldimand-Norfolk	1	2	0	1
Hamilton-Wentworth	75	127		
Hastings-Prince Edward	0	8		
Huron	0	5		
Kingston-Frontenac	19	38		
Leeds-Grenville	0	1		
Middlesex-London	4	7		
Niagara	1	10		
North Bay	0	1		
Ottawa-Carleton	1	2		
Oxford	0	4		
Peel	19	61		
Peterborough	56	67		
Porcupine	8	29		
Simcoe	4	12		
Sudbury	0	4		
Toronto	28	57		
Waterloo	1	5		
Wellington-Dufferin	0	4		
York Region	2	3		
Total	259	521*	0	1
*262 new cases of influenza A were reported during week 50				

Table 3

Influenza-related Deaths reported through RDIS for Sept. 1- December 13, 2003 = 5				
Health Unit	Age	Sex	Type of Flu	Prior Condition
York Region	87	M	Flu A	Related to Ship Cruise Outbreak
Peterborough	11	M	Flu A	Underlying Medical condition
Halton	8	F	Flu A	Underlying medical condition
Halton	78	F	Flu A	Underlying medical condition
Haliburton	98	F	Flu A	Institutional Outbreak-related

**Table 3. Institutional Influenza Outbreaks by Health Unit in Ontario, 2003-2004 for Week 50
(December 7, 2003 – December 13, 2003)**

Health Unit	Type of Institution	# of Outbreaks	Organism Identified	RAR (%)	SAR (%)	Complications
Algoma	NH	1	Flu A	0.8	0.0	None
Durham	RH	3	Flu A	5.3	0.7	None
	NH		Flu A	1.3	0.0	None
	NH/RH		Flu A	7.5	0.9	1 pneumonia
Grey-Bruce	NH	2	Flu A	9.4	0.0	None
	HFA		Flu A	0.7	1.3	None
Halton	NH	1	Flu A	9.0	0.0	1 Pneumonia
Hastings	NH	2	Flu A	0.4	0.0	1 Hospitalized
	LTCF		Flu A	8.6	4.5	None
Hamilton City	ACH	1	Flu A	7.4	4.0	N/A
Leeds Grenville	LTCF	1	Flu A	34.8	8.6	2 Hospitalization
Middlesex-London	LTCF	1	Flu A	0.5	1.4	None
Niagara	NH	6	Flu A	9.9	1.9	None
	NH		Flu A	12.5	0.0	1 hospitalization
	HFA		Flu A	13.4	2.7	1 hospitalization
	HFA		Flu A	N/A	N/A	None
	HFA		Flu A	20.0	0.0	None
	CCH		Flu A	13.3	0.0	None
Northwestern	ACH	1	Flu A	1.3	0.0	N/A
Ottawa	RH	6	Flu A	7.6	0.0	None
	RH		Flu A	10.7	0.0	None
	RH		Flu A	17.2	0.0	None
	NH		Flu A	22.2	3.2	None
	NH		Flu A	1.8	0.0	None
	NH		Flu A	3.6	0.0	None
	ACH		Flu A	3.8	5.3	None Reported
Perth	HFA	1	Flu A	4.7	0.0	None
Simcoe	LTCF	1	Flu A	13.2	3.3	2 pneumonia, 1 hospitalization
Sudbury	NH	1	Flu A	2.1	0.4	1 hospitalization, 1 death
Toronto	NH	1	Flu A	6.6	1.1	None
Waterloo	RH	2	Flu A	1.2	0.0	None
	ACH		Flu A	35.3	0.0	N/A
Wellington-Dufferin	RH	1	Flu A	16.7	0.0	None
Windsor	NH	2	Flu A	7.1	0.0	none
	NH		Flu A	1.6	0.3	none
York Region	HFA	1	Flu A	4.4	0.0	1 hospitalization
TOTAL		35				

Summary of Types of Institutions that Experienced Flu Outbreaks

No. of Institutions	No. Outbreaks
LTCFs	
NHs	14
HFA	6
Other LTCFs	4
RHs	6
ACH	3
CCH	1
Combined Institutions	1

RAR: Resident Attack Rate (# of residents ill/total number of residents)*100

SAR: Staff Attack Rate (# of staff ill/total number of staff)*100

NH = nursing home, RH= retirement home, combined facility consists of 2 or more types of institutions, e.g., a NH section and a retirement home (RH) section; CCH = chronic care hospital, ACH= Acute Care Hospital, LTCF = long term care facility

Federal FluWatch Sentinel Physician Surveillance Activity in Ontario

The overall rate of influenza-like illness (ILI) reported through the Federal FluWatch system were 103 ILI patients seen per 1,000 patients that were seen by the sentinel physicians for all reasons, including ILI. This is the first week that the rate has exceeded 100 ILI patients per 1, 000 patients seen by sentinel physicians for all reasons in the province. The ILI patients rates among

children were higher than the overall rate: 122 ILI patients/1,000 patients seen for all reasons in the 0-4 year age group and 275 ILI patients/1,000 patients seen for all reasons among the 5-19 year age group.

Canada: December 7 to December 13, 2003 (Week 50)

Widespread activity reported in the Interior of British Columbia and throughout Ontario. Localized or sporadic activity in all other provinces and territories, except Newfoundland and Labrador. Across Canada, during the week ending December 13 (week 50), sentinel physicians reported 52 cases of influenza-like illness (ILI) per 1000 patient visits, which is within the baseline rate for this time of year.

Laboratory Confirmations

Health Canada received 3,983 reports of laboratory tests for influenza, including 691 (17%) influenza A detections and 0 (0%) influenza B detections. Detections of other respiratory viruses are at or below the expected range for this time of year.

Source: http://www.hc-sc.gc.ca/pphb-dgspsp/fluwatch/03-04/w44_03/index.html#top

Vaccine and Strain Characterization

The National Microbiology Laboratory has antigenetically characterized 294 influenza viruses to date; 267 (91%) A/Fujian/411/02(H3N2)-like, 25 (8.5%) A/Panama/2007/99(H3N2)-like, 1(0.3%) A/NewCaledonia/20/99(H1N1)-like and 1(0.3%) H1N2. **The Ontario laboratories submitted 111 influenza viruses and all were antigenically characterized as A/Fujian/411/02(H3N2)-like.**

Source: *National Microbiology Laboratory (NML), Population and Public Health Branch (PPHB)*

Influenza Activity in the United States:

Influenza activity in the United States continued to increase during week 50 (December 7 - 13, 2003). One thousand three hundred sixty-five (35.8%) of 3,814 specimens collected from throughout the United States and tested by U.S. World Health Organization (WHO) and National Respiratory and Enteric Virus Surveillance System (NREVSS) collaborating laboratories were positive for influenza. Of these, 262 were influenza A(H3N2) viruses, 1,080 were influenza A viruses that were not sub-typed, and 23 were influenza B viruses. Of the influenza A(H3N2) isolates that have been characterized to date; 25% were antigenically similar to the vaccine strain A/Panama/2007/99 and 75% were similar to the new drift variant A/Fujian/411/2002. The proportion of patient visits to sentinel providers for influenza-like illness (ILI) overall was 7.4%, which is above the national baseline of 2.5%. The proportion of deaths attributed to pneumonia and influenza was 7.2%, which is below the epidemic threshold for the week. Thirty-six state health departments reported widespread influenza activity, 12 states and New York City reported regional activity, 1 state and the District of Columbia reported local influenza activity, and 1 state and Puerto Rico reported sporadic influenza activity.

CDC advises that for details of the 2003-04 influenza season in the US to date, with details on severe illness and deaths, to see: MMWR: <<http://www.cdc.gov/mmwr/preview/mmwrhtml/mm5249a1.htm>>

Source: *Centers for Disease Control and Prevention (CDC):* <<http://www.cdc.gov/ncidod/diseases/flu/weekly.htm>>

International Influenza Activity:

WHO/EISS summary: Influenza activity associated with influenza A(H3N2) viruses continues to rise substantially in some countries in Europe (Finland, France, Norway, Russian Federation and Switzerland), but has declined in the UK, Portugal and Spain. An increasing trend has also been observed in a number of other European countries (Denmark, Italy and Ukraine) where influenza activity currently remains low. Most outbreaks to date have been due to A/Fujian/411/2002(H3N2)-like viruses with some due to A/Panama/2007/99(H3N2)-like viruses and to a lesser extent other viruses. So far, there have been very few reports of influenza A/Fujian/411/2002-like virus being detected in Asia.

Note: Globally, approximately 60 % of strains are well inhibited by A/Panama antisera.

Sources: *WHO:* <http://rhone.b3e.jussieu.fr/flunet/www/index.html>

EISS: <http://www.eiss.org>

Influenza Vaccine Components and Protection for 2003-04 Season

NACI recommended that the trivalent vaccine for the 2003-04 season in Canada contain an A/Panama/2007/99 (H3N2)-like, an A/New Caledonia/20/99 (H1N1)-like, and either B/Hong Kong/330/2001-like virus or B/Shandong/7/97-like antigens.

Source: <http://www.hc-sc.gc.ca/pphb-dgspsp/publicat/ccdr-rmtc/03vol29/index.html#acs>

Note: WHO advises that A/Fujian/411/2002-like strains are drift variants of the A/Panama/2007/99 vaccine virus. Therefore antibodies produced against the A/Panama/2007/99-like strain do cross-react with A/Fujian/411/2002-like strains, but at a lower level than to the vaccine strain itself.

Visit the Ministry of Health and Long-Term Care website weekly for the current issue, or back issues, of the Ontario Influenza Bulletin: http://www.health.gov.on.ca/english/providers/program/pubhealth/flu/flu_03/flubul_mn.html

Erratum Flu Bulletin Vol. 7 Issue 6: For the week ending December 6, Ontario Laboratories reported 132 (not 296) influenza A isolations to the Center for Infectious Disease Prevention and Control (CIDPC) of Health Canada : 24 respiratory syncytial virus (RSV), 18 parainfluenza type 1 (PIV1), 7 parainfluenza type 2 (PIV2), 6 parainfluenza type 3 (PIV3), 0 parainfluenza type 4 (PIV4), 1 other PIVs, and 5 adenoviruses.

**Influenza Activity Level by Health Unit
Week Ending December 13, 2003**

