

SURVEILLANCE WEEK 10 (March 8, 2009– March 14, 2009)

This issue of the Ontario Influenza Bulletin provides information on the surveillance period from March 8, 2009-March 14, 2009, (Week 10). The analysis for this issue occurred on March 19, 2009, therefore all data is current to that date unless otherwise specified.

Overall, influenza activity in Ontario during week 10, 2009 was higher than week 9, 2009. There were 133 confirmed cases of influenza reported through iPHIS from health units. There were four new reports of institutional influenza outbreaks. For week 10, North East and North West health regions reported 'sporadic' level activity while the remaining health regions reported 'localized' level activity.

In Canada for week 9, influenza activity in Canada continued to increase: 2 regions (in British Columbia) reported widespread activity, 15 regions localized (in British Columbia, Alberta, Saskatchewan, Ontario, Quebec, New Brunswick & Newfoundland/Labrador), 30 regions sporadic and 7 regions reported no activity.[†]

From March 8, 2009 to March 14, 2009 there was one influenza A isolate received by the Central Public Health Laboratory from Hastings & Prince Edward Counties health unit that was H3N2.

For a definition of influenza-like illness (ILI) activity levels and links to websites providing current influenza information from other sources, please refer to the attached Appendix- I. If you would like to provide feedback on the Bulletin, please contact Christine D'Souza (christine.dsouza1@ontario.ca, 416-212-5323) or Anne-Luise Winter (anne-luise.winter@ontario.ca, 416-327-7301).

Table 1: Summary of confirmed influenza cases and institutional influenza outbreaks by health region (Week 10, 2009).

Confirmed influenza cases*	HEALTH REGION							TOTAL
	North West	North East	Eastern	Central East	Toronto	South West	Central West	
Influenza A	0	0	8	23	18	5	27	81
Influenza B	0	0	9	11	17	2	13	52
Influenza A & B	0	0	0	0	0	0	0	0
Total new cases	0	0	17	34	35	7	40	133
Institutional influenza outbreaks‡	0	0	0	1	0	1	2	4

SOURCE: Ontario Ministry of Health and Long-Term Care, integrated Public Health Information System (iPHIS) database, extracted [19/03/2009].

* Includes reports of confirmed influenza through iPHIS, as well as cases in institutional outbreaks, with dates of onset in the surveillance period.

† These data have been obtained from the FluWatch report of the Public Health Agency of Canada for Week 9, 2009.

‡ Confirmed outbreaks in institutions with onset date of symptoms during the surveillance period.

Table 2: Confirmed cases of influenza by health unit & health region, with an episode date[†] during Week 10, 2008-09

Region	Health Unit	Confirmed Influenza			
		Influenza A	Influenza A & B	Influenza B	TOTAL
North West	Northwestern	0	0	0	0
	Thunder Bay District	0	0	0	0
	TOTAL NORTH WEST	0	0	0	0
North East	Algoma	0	0	0	0
	North Bay Parry Sound District	0	0	0	0
	Porcupine	0	0	0	0
	Sudbury & District	0	0	0	0
	Timiskaming	0	0	0	0
	TOTAL NORTH EAST	0	0	0	0
Eastern	City of Ottawa	5	0	5	10
	Eastern Ontario	0	0	0	0
	Hastings & Prince Edward Counties	0	0	0	0
	Kingston, Frontenac, Lennox & Addington	2	0	0	2
	Leeds, Grenville And Lanark District	1	0	4	5
	Renfrew County And District	0	0	0	0
	TOTAL EASTERN	8	0	9	17
Central East	Durham Region	3	0	3	6
	Haliburton, Kawartha, Pine Ridge	6	0	1	7
	Peel Region	11	0	2	13
	Peterborough County-City	0	0	1	1
	Simcoe Muskoka District	3	0	4	7
	York Region	0	0	0	0
	TOTAL CENTRAL EAST	23	0	11	34
Toronto	Toronto	18	0	17	35
	TOTAL TORONTO	18	0	17	35
South West	Chatham-Kent	0	0	0	0
	Elgin-St. Thomas	0	0	0	0
	Grey Bruce	0	0	1	1
	Huron County	1	0	0	1
	Lambton County	1	0	1	2
	Middlesex-London	3	0	0	3
	Oxford County	0	0	0	0
	Perth District	0	0	0	0
	Windsor-Essex County	0	0	0	0
	TOTAL SOUTHWEST	5	0	2	7
Central West	Brant County	1	0	0	1
	City Of Hamilton	11	0	3	14
	Haldimand-Norfolk	0	0	0	0
	Halton Region	4	0	1	5
	Niagara Region	4	0	2	6
	Waterloo Region	6	0	6	12
	Wellington-Dufferin-Guelph	1	0	1	2
	TOTAL CENTRAL WEST	27	0	13	40
	TOTAL ONTARIO	81	0	52	133

SOURCE: Ontario Ministry of Health and Long-Term Care, integrated Public Health Information System (iPHIS) database, extracted [19/03/2009].

[†] Episode Date for a case corresponds to the earliest date on record for the case according to the iPHIS hierarchy (Symptom Date > Clinical Diagnosis Date > Specimen Collection Date > Lab Test Date > Reported Date)

Table 3: Cumulative* confirmed cases of influenza by health unit & health region with an episode date[†] between September 1, 2008 – March 14, 2009

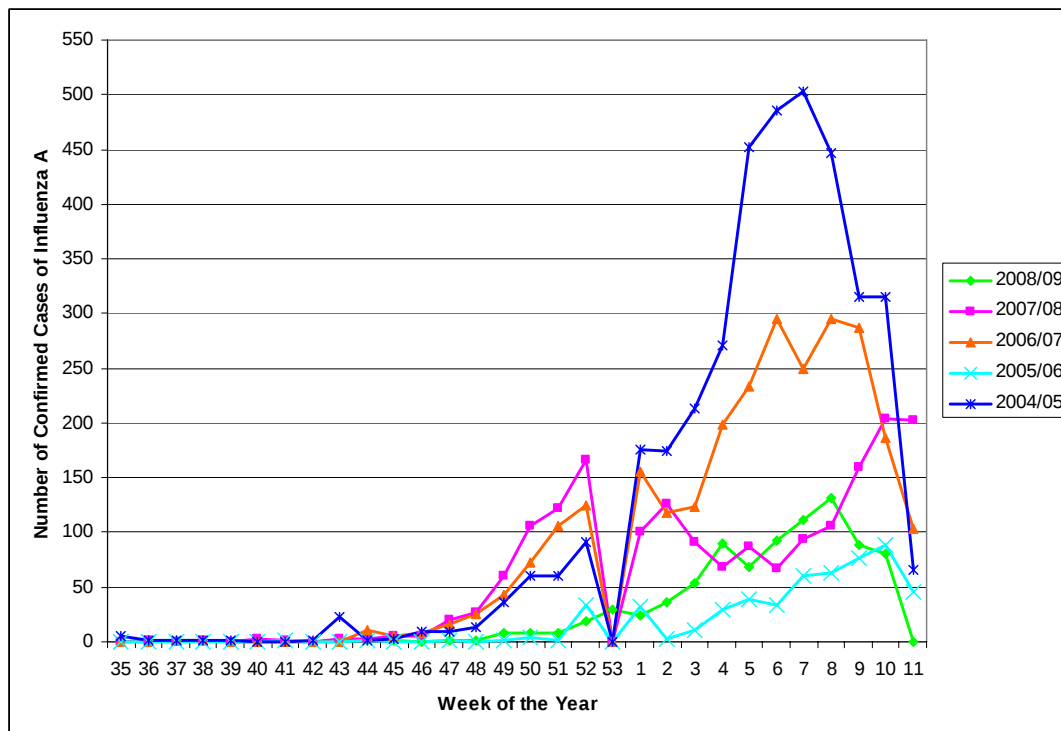
Region	Health Unit	Confirmed Influenza			
		Influenza A	Influenza A & B	Influenza B	TOTAL
North West	Northwestern	1	0	1	2
	Thunder Bay District	3	0	6	9
	TOTAL NORTH WEST	4	0	7	11
North East	Algoma	0	0	10	10
	North Bay Parry Sound District	5	0	73	78
	Porcupine	0	0	29	29
	Sudbury & District	2	0	6	8
	Timiskaming	0	0	4	4
	TOTAL NORTH EAST	7	0	122	129
Eastern	City Of Ottawa	66	2	51	119
	Eastern Ontario	5	0	35	40
	Hastings & Prince Edward Counties	3	0	17	20
	Kingston, Frontenac, Lennox & Addington	19	0	29	48
	Leeds, Grenville And Lanark District	10	0	18	28
	Renfrew County And District	6	0	9	15
	TOTAL EASTERN	109	2	159	270
Central East	Durham Region	36	1	54	91
	Haliburton, Kawartha, Pine Ridge	55	0	49	104
	Peel Region	93	0	122	215
	Peterborough County-City	10	0	10	20
	Simcoe Muskoka District	28	0	66	94
	York Region	31	0	24	55
	TOTAL CENTRAL EAST	253	1	325	579
Toronto	Toronto	211	2	214	427
	TOTAL TORONTO	211	2	214	427
South West	Chatham-Kent	3	0	4	7
	Elgin-St. Thomas	0	0	1	1
	Grey Bruce	9	1	52	62
	Huron County	8	0	26	34
	Lambton County	4	0	2	6
	Middlesex-London	12	0	7	19
	Oxford County	7	0	7	14
	Perth District	10	0	7	17
	Windsor-Essex County	16	0	29	45
	TOTAL SOUTHWEST	69	1	135	205
Central West	Brant County	5	0	10	15
	City Of Hamilton	61	0	84	145
	Haldimand-Norfolk	3	0	6	9
	Halton Region	28	0	38	66
	Niagara Region	25	0	22	47
	Waterloo Region	63	0	68	131
	Wellington-Dufferin-Guelph	23	0	31	54
	TOTAL CENTRAL WEST	208	0	259	467
	TOTAL ONTARIO	861	6	1,221	2,088

SOURCE: Ontario Ministry of Health and Long-Term Care, integrated Public Health Information System (iPHIS) database, extracted [19/03/2009].

* Cumulative case counts include late reports and records that are otherwise reconciled. Therefore, cumulative counts may not equal new cases plus previous cumulative value.

[†] Episode Date for a case corresponds to the earliest date on record for the case according to the iPHIS hierarchy (Symptom Date > Clinical Diagnosis Date > Specimen Collection Date > Lab Test Date > Reported Date)

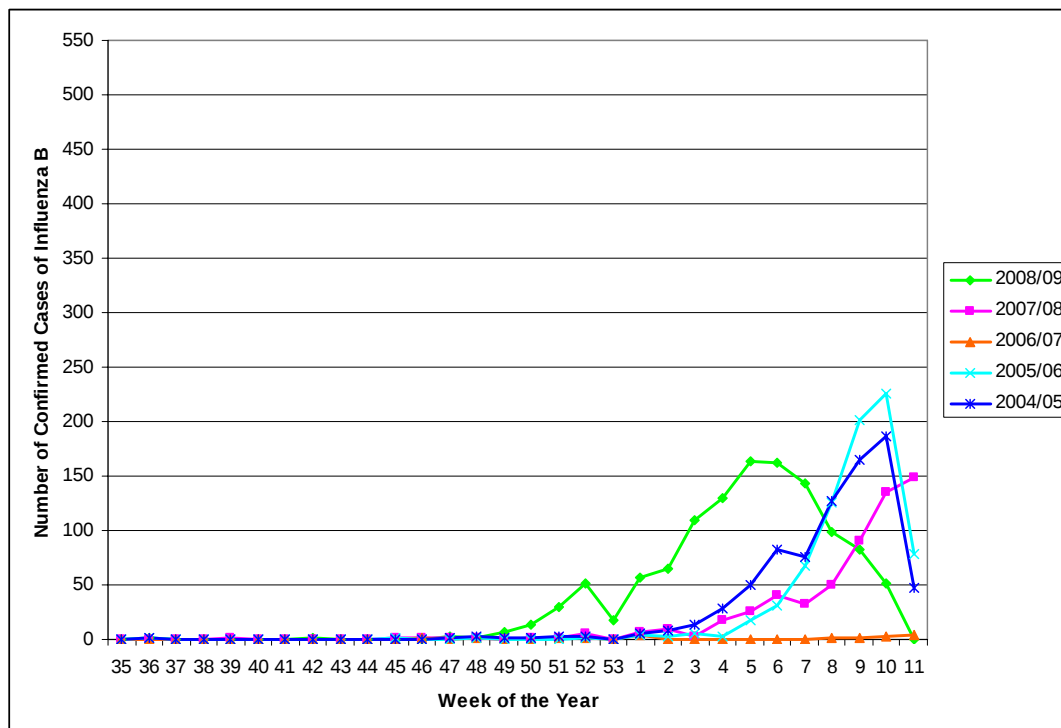
Figure 1: Confirmed Cases of Influenza A in Ontario by week between September 1 and March 14, 2004-2009[†]



SOURCE: Ontario Ministry of Health and Long-Term Care, integrated Public Health Information System (iPHIS) database, extracted [19/03/2009].

[†] Episode Date for a case corresponds to the earliest date on record for the case according to the iPHIS hierarchy (Symptom Date > Clinical Diagnosis Date > Specimen Collection Date > Lab Test Date > Reported Date)

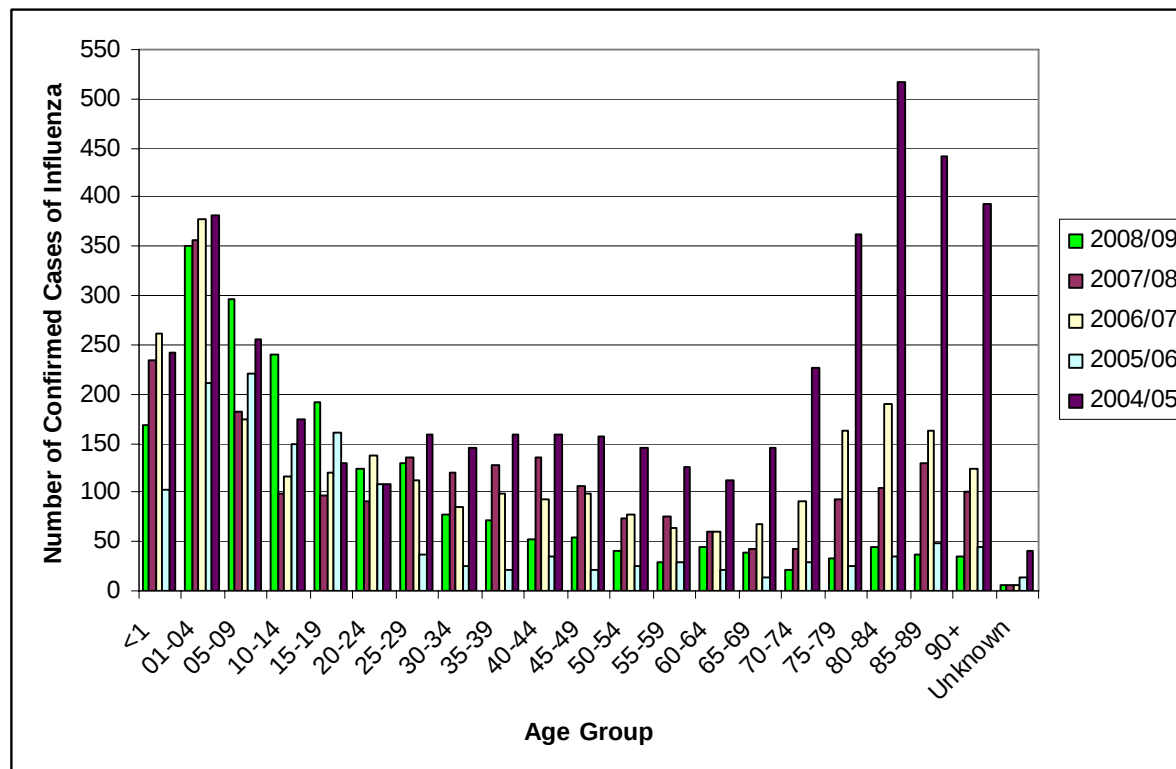
Figure 2: Confirmed Cases of Influenza B in Ontario by week between September 1 and March 14, 2004-2009[†]



SOURCE: Ontario Ministry of Health and Long-Term Care, integrated Public Health Information System (iPHIS) database, extracted [19/03/2009].

[†] Episode Date for a case corresponds to the earliest date on record for the case according to the iPHIS hierarchy (Symptom Date > Clinical Diagnosis Date > Specimen Collection Date > Lab Test Date > Reported Date)

Figure 3: Confirmed Cases of Influenza in Ontario by age group between September 1 and March 14, 2004-2009[†]



SOURCE: Ontario Ministry of Health and Long-Term Care, integrated Public Health Information System (iPHIS) database, extracted [19/03/2009].

[†] Episode Date for a case corresponds to the earliest date on record for the case according to the iPHIS hierarchy (Symptom Date > Clinical Diagnosis Date > Specimen Collection Date > Lab Test Date > Reported Date)

Influenza Subtype(s):

During week 10, a total of 5211 isolates were received by the Public Health Agency of Canada, with 545 testing positive for influenza A and 320 positive for influenza B. 259 reported influenza A isolates were from Quebec (47.5%), 80 were from Alberta (14.7%), 69 were from Ontario (12.7%) and 59 were from British Columbia (10.8%). 135 of the influenza B isolates were from Quebec (42.2%), 106 were from Ontario (33.1), 26 (8.1%) were from Alberta and 24 (7.5%) were from Saskatchewan.*

Antigenic Characterization (National):

Since the start of the season, the NML has antigenically characterized 596 influenza viruses that were received from Canadian provincial and hospital laboratories: 103 influenza A (H3N2), 136 influenza A (H1N1) and 357 B viruses. The 103 influenza A/H3N2 isolates characterized were antigenically similar to A/Brisbane/10/07, which is the influenza A (H3N2) component recommended for the 2008-09 influenza vaccine. The 136 influenza A/H1N1 isolates characterized were antigenically similar to A/Brisbane/59/2007, which is the influenza A (H1N1) component recommended for the 2008-09 influenza vaccine.

Influenza B viruses currently circulating can be divided into two antigenically distinct lineages represented by B/Yamagata/16/88 and B/Victoria/2/87 viruses. Of the 357 influenza B isolates characterized, six were antigenically similar to B/Florida/4/2006, which is the B component recommended for the 2008-09 influenza vaccine and belongs to B/Yamagata lineage. 351 B isolates were characterized as B/Malaysia/2506/04-like, which belongs to the Victoria lineage and it was the recommended B component for the 2007-08 influenza vaccine. †

Antigenic Characterization (Provincial):

The National Microbiology Laboratory (NML) has antigenically characterized the following strains from Ontario: 59 influenza A/Brisbane/59/2007(H1N1)-like, 15 influenza A (H3N2)/A/Brisbane/10/2007-like, 4 influenza B/Florida/4/2006-like, and 177 B/Malaysia/2506/2004-like.†

Antiviral Resistance (National):

Since the start of the season, the NML has tested 322 influenza A isolates (160 H1N1 and 162 H3N2) for amantadine resistance. All of the H1N1 isolates were sensitive; however all of the H3N2 isolates were resistant to amantadine. The NML has also tested 566 influenza isolates (125 A/H1N1, 89 A/H3N2 & 352 B) for oseltamivir (Tamiflu) resistance. All of the A/H3N2 and B isolates were sensitive; however all of the A/H1N1 isolates were resistant to oseltamivir due to the H274Y mutation (resistance = 100% or 125/125).

All 552 influenza isolates (113 A/H1N1, 88 A/H3N2 & 351 B) tested for zanamivir resistance to date were sensitive to zanamivir. †

The WHO recommends that the vaccines to be used in the 2009-2010 season (northern hemisphere) contain the following: an A/Brisbane/59/2007 (H1N1)-like virus; an A/Brisbane/10/2007 (H3N2)-like virus; and a B/Brisbane/60/2008-like virus. <http://www.who.int/csr/disease/influenza/recommendations2009_10north/en/index.html>

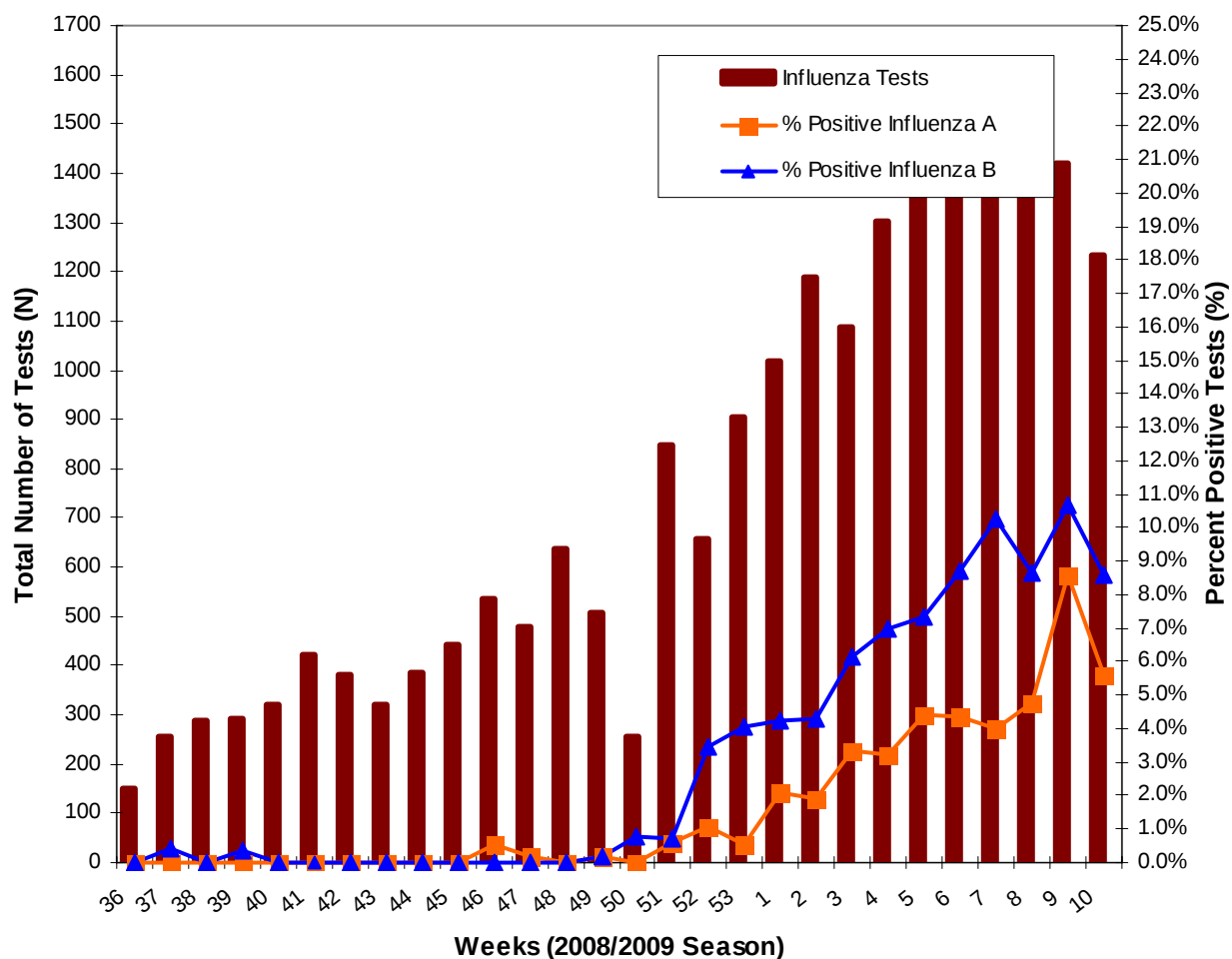
Antiviral Resistance (Provincial):

All 34 A/H3N2 isolates tested were resistant to amantadine in Ontario. All of the 70 H1N1 isolates tested were sensitive to amantadine. All 61 of the tested A/H1N1 isolates were resistant to oseltamivir due to the H274Y mutation.†

* These data have been obtained from the Respiratory Virus Detection tables of Public Health Agency of Canada and do not include data from late reports to PHAC: Week 10, 2009

† These data have been obtained from the National Microbiology Laboratory of the Public Health Agency of Canada for Week 10, 2009.

Figure 4: Total number of influenza tests performed and percent of positive tests in Ontario reported to the Centre for Immunization and Respiratory Infectious Diseases (CIRID), by report week*.



Source: Public Health Agency of Canada

* Total numbers reported include late reports; therefore totals may not be equal to the sum of the weekly numbers.

Note: Cumulative numbers for season to date are available through FluWatch: <http://www.phac-aspc.gc.ca/fluwatch/>

Table 4a: Institutional respiratory infection outbreaks in Ontario: New Outbreaks* in Week 10 and Total Outbreaks for the Season**

Institutional Respiratory Infection Outbreaks		
New Outbreaks*	N	% (of outbreaks)
Influenza A	2	28.6
Influenza B	2	28.6
Influenza A and B	0	0.0
Parainfluenza (All types)	0	0.0
RSV	1	14.3
Other organisms	0	0.0
No organism identified	2	28.6
TOTAL	7	100.0
Total Respiratory Infection Outbreaks of the Season to date**	N	% (of outbreaks)
Influenza A	26	6.0
Influenza B	12	2.8
Influenza A and B	1	0.2
Parainfluenza (All types)	14	3.3
RSV	33	7.7
Combined Outbreaks [†]	0	0.0
Other organisms	26	6.0
No organism identified	319	74.0
TOTAL	431	100.0
Types of Institutions (All Outbreaks) **	N	% (of outbreaks)
Long-Term Care Homes	274	63.6
Hospitals	14	3.3
Retirement Homes	31	7.2
Other	1	0.2
Unknown	111	25.8
TOTAL	431	100.0

SOURCE: Ontario Ministry of Health and Long-Term Care, integrated Public Health Information System (iPHIS) database, extracted [19/03/2009]

* New outbreaks are those in which the date of onset of illness in the first case occurred and recorded through iPHIS in the current surveillance period; i.e. March 7, 2009 – March 14, 2009

** Season to date includes all outbreaks in which the date of onset of illness in the first case occurred from September 1, 2008 – March 14, 2009

[†] Combined outbreaks include outbreaks in which more than one non-influenza organism has been identified (e.g. RSV, parainfluenza, rhinovirus, etc.)

Table 4b: Outbreak Related Complications in institutional respiratory infection outbreaks in Ontario during the Surveillance Season*

Outbreak Related Complications (All Outbreaks)	N	% (of total cases)
Total Cases		
Residents	5154	74.5
Patients	213	3.1
Staff	1495	21.6
Total Cases	6917	100.0
Deaths		% (of cases per role)
Residents	102	2.0
Patients	7	3.3
Staff	0	0.0
Pneumonia (Chest x-ray confirmed)		% (of cases per role)
Residents	160	3.1
Patients	21	9.9
Staff	4	0.3
Hospitalizations		% (of cases per role)
Residents	190	3.7
Staff	1	0.1
Outbreak Related Complications (Influenza Outbreaks)	N	% (of total cases)
Total Cases		
Residents	354	71.7
Patients	14	2.8
Staff	117	23.7
Total Cases	494	100.0
Deaths		% (of cases per role)
Residents	8	2.3
Patients	0	0.0
Staff	0	0.0
Pneumonia (Chest x-ray confirmed)		% (of cases per role)
Residents	12	3.4
Patients	2	14.3
Staff	1	0.9
Hospitalizations		% (of cases per role)
Residents	27	7.6
Staff	0	0.0

SOURCE: Ontario Ministry of Health and Long-Term Care, integrated Public Health Information System (iPHIS) database, extracted [19/03/2009]

* Season to date includes all outbreaks in which the date of onset of illness in the first case occurred from September 1, 2008 – March 14, 2009

Figure 5: Institutional respiratory infection outbreaks in Ontario by onset of illness in the first case: Total Outbreaks from September 1, 2008 – March 14, 2009 by causative organism

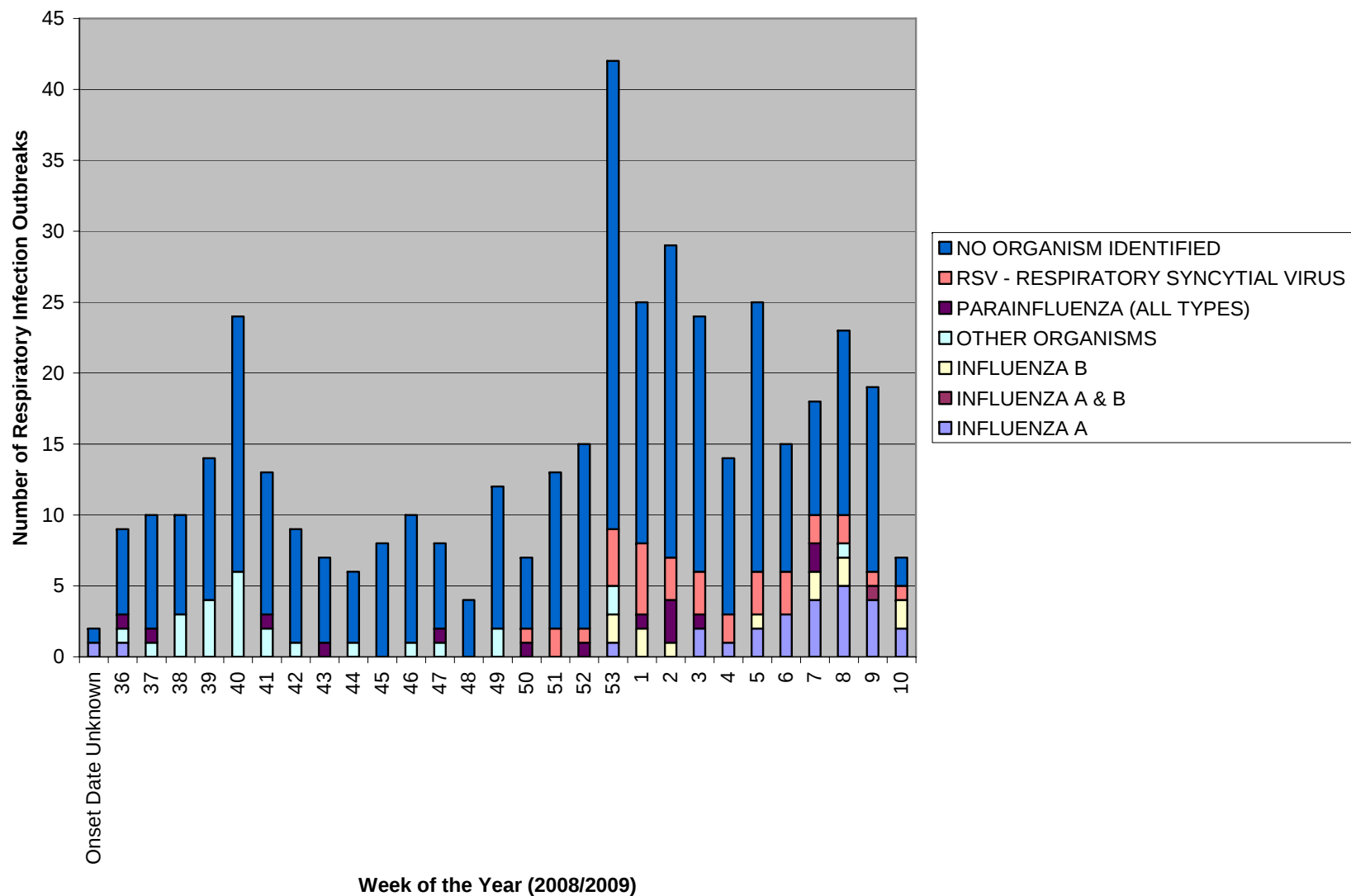
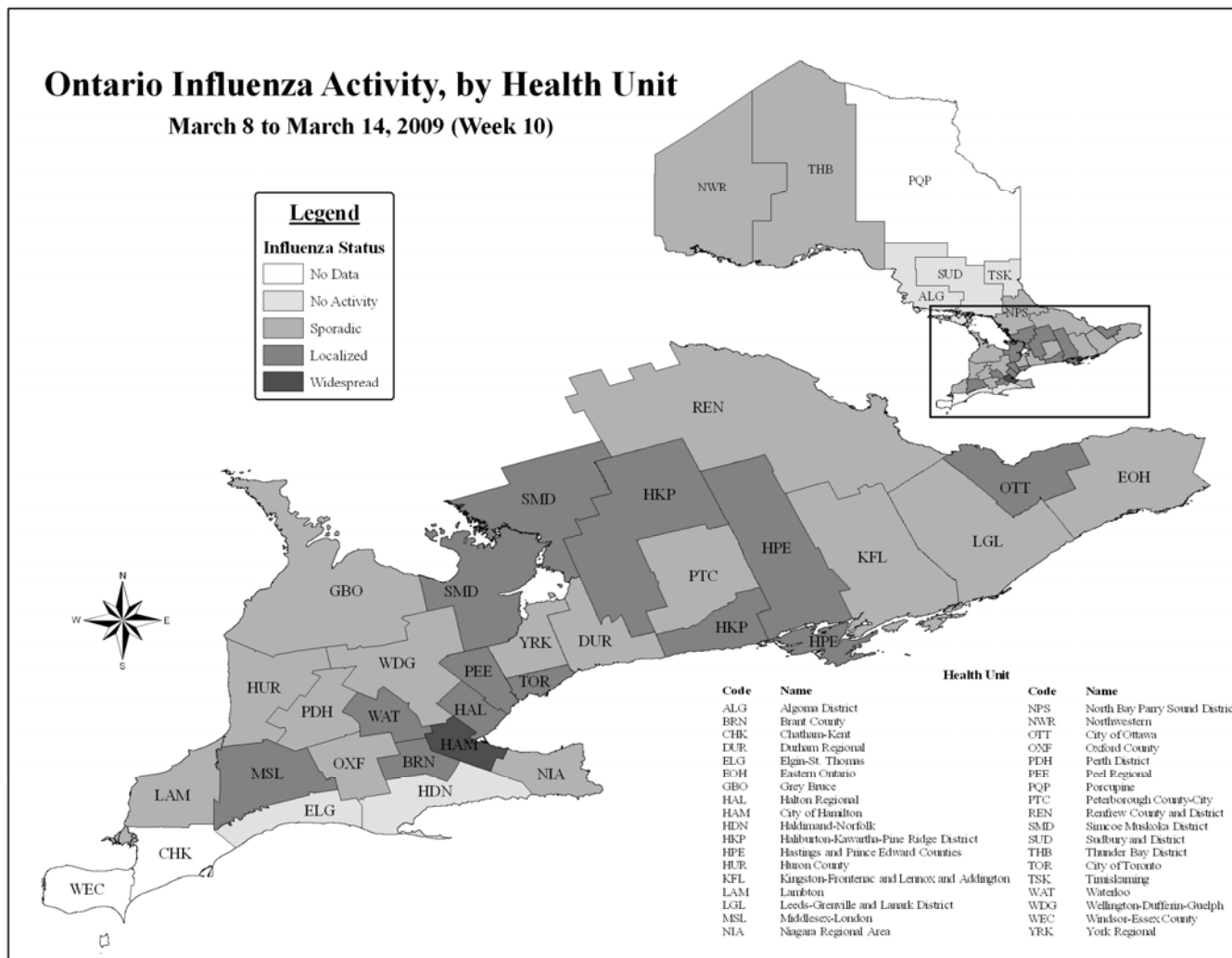


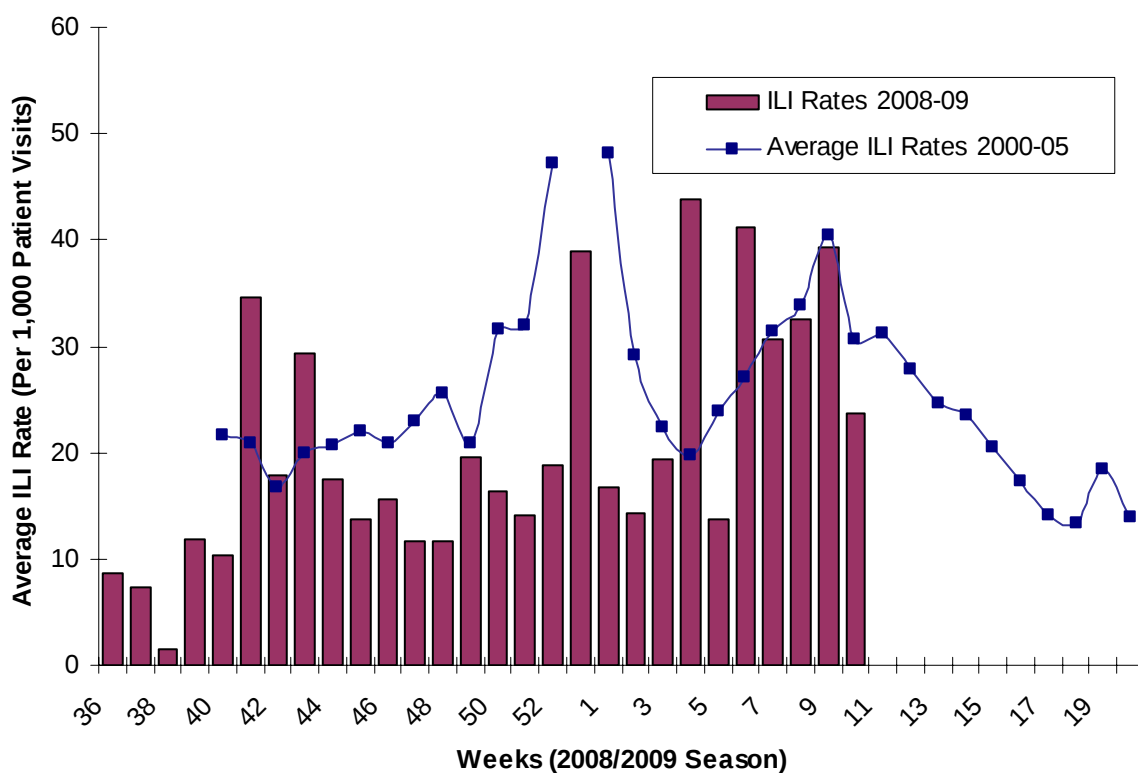
Figure 6: Influenza Activity* levels in Ontario by health unit for Week 10, 2009



SOURCE: MOHLTC [Provincial Influenza Activity Report (Appendix C) Database]

* Influenza activity levels are assigned by local public health units and reported to the MOHLTC by the Tuesday following the end of the surveillance week at 4 pm. Activity levels are assigned based on laboratory confirmations, ILI reports from various sources, and laboratory confirmed institutional outbreaks. [Please refer to detailed definitions for the 2007-2008 season included in the Appendix-1]

Figure 7: Average influenza-like illness (ILI) consultation rate (per 1,000 patient visits) reported by sentinel physicians* in Ontario in 2008- 2009 season, by report week, compared to Ontario average† (1999/2000 to 2004/05 seasons).



Source: Public Health Agency of Canada

* Sentinel physician information is reported to Public Health Agency of Canada.

† No data available for mean rate in previous years for weeks 21 to 39 (1999-2000 through 2004-2005 seasons). During weeks 20-39, 2002-2003/2004-2005 seasons, ILI is reported once every two weeks, on even weeks only.

Note: For Week 41, the number of sentinel physicians reporting is lower than previous years, which may affect the average ILI rate for this period.

Table 5: Average Influenza-like illness consultation rate (per 1,000 patient visits) by age group and postal code as reported by Sentinel Physicians* in Ontario, for Week 10.

Postal Code	0 – 4	5 – 19	20 – 64	65 +	Unknown
K1L8H2	0	0	0	0	0
K2P1V3	0	0	1	0	0
K1J9M2	0	0	1	1	0
K1V2G2	2	2	7	0	0
K7H2W6	0	0	0	0	0
K0K2T0	0	0	0	0	0
K0K2T0	0	0	0	0	0
K0M1A0	0	0	0	0	0
L4L4Y7	0	0	1	1	0
L4J7Y3	0	0	0	0	0
M4E1V8	0	0	0	0	0
M8Y1W3	0	0	0	0	0
M8V2Z5	0	0	0	0	0
L5J2W4	0	0	0	0	0
L4Y2N8	0	0	0	0	0
L6W2A4	0	1	0	0	0
L6V4H6	0	0	1	0	0
L9W1G2	0	0	0	0	0
N1H4G2	0	0	0	0	0
L6L2X4	0	0	1	0	0
L7R1M6	0	0	0	0	0
L9H1V1	0	0	0	0	0
L0R1H0	0	0	0	0	0
L8W3J6	0	0	0	0	0
L2V1P1	0	0	0	0	0
L2E7H1	0	0	0	0	0
L3M1P2	0	1	2	0	0
N0A1H0	0	0	0	0	0
N3R7K8	0	0	0	1	0
N2G1P2	0	0	0	0	0
N2M3B5	0	0	0	0	0
N4W1P9	0	0	0	0	0
N0P2K0	0	0	0	1	0
N0P2C0	0	0	1	0	0
N0M1T0	0	0	1	0	0
N6C2R5	0	0	0	0	0
N0M1L0	0	0	1	0	0
N0G1L0	0	0	0		0
N0C1E0	0	0	0	0	0
L3V5W6	0	0	0	0	0
L3V5S2	0	1	0	0	0
L4R4P4	0	1	0	0	0
P0H2H0	0	0	0	0	0
P0A1C0	0	0	2	0	0
P0M2L0	0	0	0	0	0
P4N1C6	0	0	0	0	0
P0M1Z0	0	0	0	0	0
P7E1H5	0	0	0	0	0
P7B6Y9	0	0	0	0	0
P0W1E0	0	0	0	0	0
P8N2Z6	1	0	0	0	0
ILI Sum	3	6	19	4	0
ILI Consultation Rate (per 1,000 patient visits)	31.25	45.80	26.17	10.05	0.00

Source: Public Health Agency of Canada

* Sentinel physician information is reported to the Public Health Agency of Canada

Note: The small numbers of sentinel physicians reporting at the local level make the ILI rates unstable. Please interpret these data correspondingly.

FURTHER INFORMATION

1. Ontario Ministry of Health and Long-Term Care
Previous issues of the *Ontario Influenza Bulletin* can be accessed at:
http://www.health.gov.on.ca/english/providers/program/pubhealth/flu/flu_08/flubul_mn.html
2. Public Health Agency of Canada
Issues of FluWatch can be accessed at:
www.phac-aspc.gc.ca/fluwatch/
3. United States Centers for Disease Control and Prevention
<http://www.cdc.gov/flu/weekly/fluactivity.htm>
4. European Influenza Surveillance Scheme
http://www.eiss.org/cgi-files/bulletin_v2.cgi

INFORMATION ABOUT AVIAN INFLUENZA

For latest information on the status of avian influenza worldwide please use the following link:

Public Health Agency of Canada

<http://www.phac-aspc.gc.ca/h5n1/index.html>

APPENDIX - I

Definitions for influenza activity levels:

No Data: No activity report corresponding to the surveillance week was received at the Ministry of Health and Long-Term Care Call Centre by the Tuesday (at 4 p.m.) following the end of the surveillance period.

No Activity: **No laboratory-confirmed* influenza and NO outbreaks detected** within the health unit/ influenza surveillance area, within the prior week, although sporadically occurring ILI may or may not be present.†

Sporadic: Sporadically (infrequently) occurring **ILI and at least one lab-confirmed influenza* case with NO outbreaks** detected within the health unit area.†

Localized: sporadically occurring **ILI and lab-confirmed influenza* together with outbreaks of ILI** in schools and work sites, or laboratory-confirmed influenza in residential institutions occurring in < 50% of the health unit . Outbreaks affect a single and/or adjacent geographic area within the health unit jurisdiction, e.g. outbreaks in a nursing home and a school in close proximity to each other.†

Widespread: sporadically occurring **ILI and lab-confirmed influenza* together with outbreaks of ILI** in schools and work sites, or laboratory-confirmed influenza in residential institutions occurring in > 50% of the health unit. Outbreaks affect multiple and non-adjacent geographic areas within the health unit jurisdiction, such as two or more regions of the health unit, two or more municipalities, two or more electoral wards, etc.†

* Confirmation of influenza within the surveillance region at any time within the prior week

† Sub-regions within the province or territory as defined by the provincial/territorial epidemiologist

Influenza-Like Illness (ILI) Definitions:

A) ILI in the general population:

Acute onset of respiratory illness with fever and cough and with one or more of the following - sore throat, arthralgia, myalgia, or prostration which could be due to influenza virus. In children under 5, gastrointestinal symptoms may also be present. In patients under 5 or 65 and older, fever may not be prominent.

B) ILI/Influenza outbreaks:

Schools and work sites: greater than 10% absenteeism on any day, most likely due to ILI.

Residential institutions: two or more cases of ILI within a seven-day period, **including at least one laboratory confirmed case.**

Influenza Surveillance Weeks 2008-2009 and date of submission of Appendix C

WEEKS	START	END	Appendix C Submission to MOHLTC
WK11	15-Mar-09	21-Mar-09	24-Mar-09
WK12	22-Mar-09	28-Mar-09	31-Mar-09
WK13	29-Mar-09	4-Apr-09	7-Apr-09
WK14	5-Apr-09	11-Apr-09	14-Apr-09
WK15	12-Apr-09	18-Apr-09	21-Apr-09
WK16	19-Apr-09	25-Apr-09	28-Apr-09
WK17	26-Apr-09	2-May-09	5-May-09
WK18	3-May-09	9-May-09	12-May-09
WK19	10-May-09	16-May-09	19-May-09
WK20	17-May-09	23-May-09	26-May-09
WK21	24-May-09	30-May-09	2-Jun-09
WK22	31-May-09	6-Jun-09	9-Jun-09
WK23	7-Jun-09	13-Jun-09	16-Jun-09
WK24	14-Jun-09	20-Jun-09	23-Jun-09
WK25	21-Jun-09	27-Jun-09	30-Jun-09
WK26	28-Jun-09	4-Jul-09	7-Jul-09
WK27	5-Jul-09	11-Jul-09	14-Jul-09
WK28	12-Jul-09	18-Jul-09	21-Jul-09
WK29	19-Jul-09	25-Jul-09	28-Jul-09
WK30	26-Jul-09	1-Aug-09	4-Aug-09
WK31	2-Aug-09	8-Aug-09	11-Aug-09
WK32	9-Aug-09	15-Aug-09	18-Aug-09
WK33	16-Aug-09	22-Aug-09	25-Aug-09
WK34	23-Aug-09	29-Aug-09	1-Sep-09
WK35	30-Aug-09	5-Sep-09	8-Sep-09