

SURVEILLANCE WEEK 22 (May 29, 2011– June 4, 2011) & 23 (June 5, 2011– June 11, 2011)

This issue of the Ontario Influenza Bulletin provides information on the surveillance period from May 29, 2011 to June 11, 2011 (Weeks 22 & 23). **All data are for weeks 22 & 23 unless otherwise specified.** Data extraction and analysis for this issue of the Bulletin occurred on June 15, 2011

Publication of the Ontario Influenza Bulletin

This abbreviated version of the Ontario Influenza Bulletin will be published on alternate weeks until November 4, 2011. Influenza activity level maps will be available during weeks the Bulletin is not published at:
<http://www.health.gov.on.ca/en/pro/programs/publichealth/flu/bulletins/2010/default.aspx>

Assessment of Influenza Activity in Ontario

Measure	Assessment of measure compared to previous week (Lower, Similar, Higher)	Reasoning behind assessment
Laboratory Confirmed Cases	Lower	Five influenza cases were reported* in weeks 22 and 23 compared to 14 cases reported in weeks 20 and 21. The percent positivity of laboratory tests for influenza (A and B) in Ontario was 0.49% in weeks 22 & 23 compared to 2.63% in weeks 20 & 21. Among other circulating respiratory viruses, rhinovirus had the highest percent positivity in week 23 (11.47%)
Influenza Outbreaks	No Change	No new institutional influenza outbreaks were reported for the current reporting weeks.
Influenza Activity Levels Reported by Health Units	Lower	One health region reported 'sporadic' level activity in week 23 and the remaining 6 reported 'no activity'. By health unit, none reported widespread or localized activity and the remainder reported sporadic activity, no activity or did not report for week 23 (Figure 1).
ILI Consultation Rate reported by Sentinel Physicians	Lower	The overall ILI consultation rate decreased from 17.66/1,000 patient visits in Week 22 to 14.27/1,000 patient visits in Week 23. The ILI consultation rate for week 23 is higher than the average rate for week 23 from previous years.
Hospitalizations Among Lab Confirmed Cases of Influenza	Higher	23 late-entry hospitalizations of influenza cases were reported from May 29 to June 11, which is more than the 9 reported in the previous two week period (May 14 to May 28).
Deaths Among Lab Confirmed Cases of Influenza	Similar	Three, late-entry deaths in influenza cases were reported from May 29 to June 11, which is similar to the two reported in the previous two week period (May 14 to May 28).
OVERALL ASSESSMENT	Influenza activity in Ontario is <i>lower</i> compared to the previous week.	Overall, the indicators show that influenza activity was lower in weeks 22 & 23 compared to weeks 20 & 21.

*The number of **reported** cases needs to be interpreted with caution because there is a lag between the onset of illness, hospital admission or death and when this information is reported to public health.

Ontario Influenza Bulletin, 2010-2011
Surveillance Weeks 22 & 23 (May 29, 2011 – June 11, 2011)

Overall, influenza activity in Ontario during weeks 22 and 23, 2011, was *lower* when compared to weeks 20 and 21, 2011. Ontario health units reported 5 new confirmed cases of influenza for weeks 22 and 23 through the integrated Public Health Information System (iPHIS). No new institutional influenza outbreaks were reported for Weeks 22 and 23. A total of 946 institutional respiratory infection outbreaks were reported in the 2010/2011 season up to Week 23, of which 434 were influenza outbreaks. For week 23, Central West health region reported 'sporadic' level activity; Southwest, North West, North East, Eastern, Toronto and Central East health regions reported 'no activity'. The ILI consultation rate of 14.27/1,000 patient visits is slightly higher than the average rate for week 23 from the previous years, which was 8.80/1,000 patient visits.

For a definition of 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 Soma Sarkar (soma.sarkar@ontario.ca, 416-326-3095) or Michael Whelan (michael.whelan@ontario.ca, 416-327-9174).

Table 1: Summary of confirmed influenza cases and institutional influenza outbreaks by health region (Weeks 22 and 23, 2010-2011)

Confirmed influenza cases*†	HEALTH REGION							TOTAL
	North West	North East	Eastern	Central East	Toronto	South West	Central West	
Pandemic (H1N1) 2009	0	0	0	0	0	0	0	0
Influenza A (Not Subtyped/No Subtype)	0	0	0	0	0	0	0	0
Influenza A (Seasonal H1)	0	0	0	0	0	0	0	0
Influenza A (Seasonal H3)	0	0	0	0	1	0	0	1
Influenza A** (Other)	0	0	0	0	0	0	0	0
Influenza B	0	0	0	0	1	1	2	4
Influenza A & B	0	0	0	0	0	0	0	0
Total new cases	0	0	0	0	2	1	2	5
Institutional outbreaks of pandemic (H1N1) 2009 ‡	0	0	0	0	0	0	0	0
Institutional outbreaks of Influenza (Other Subtypes/Not Subtyped)‡	0	0	0	0	0	0	0	0

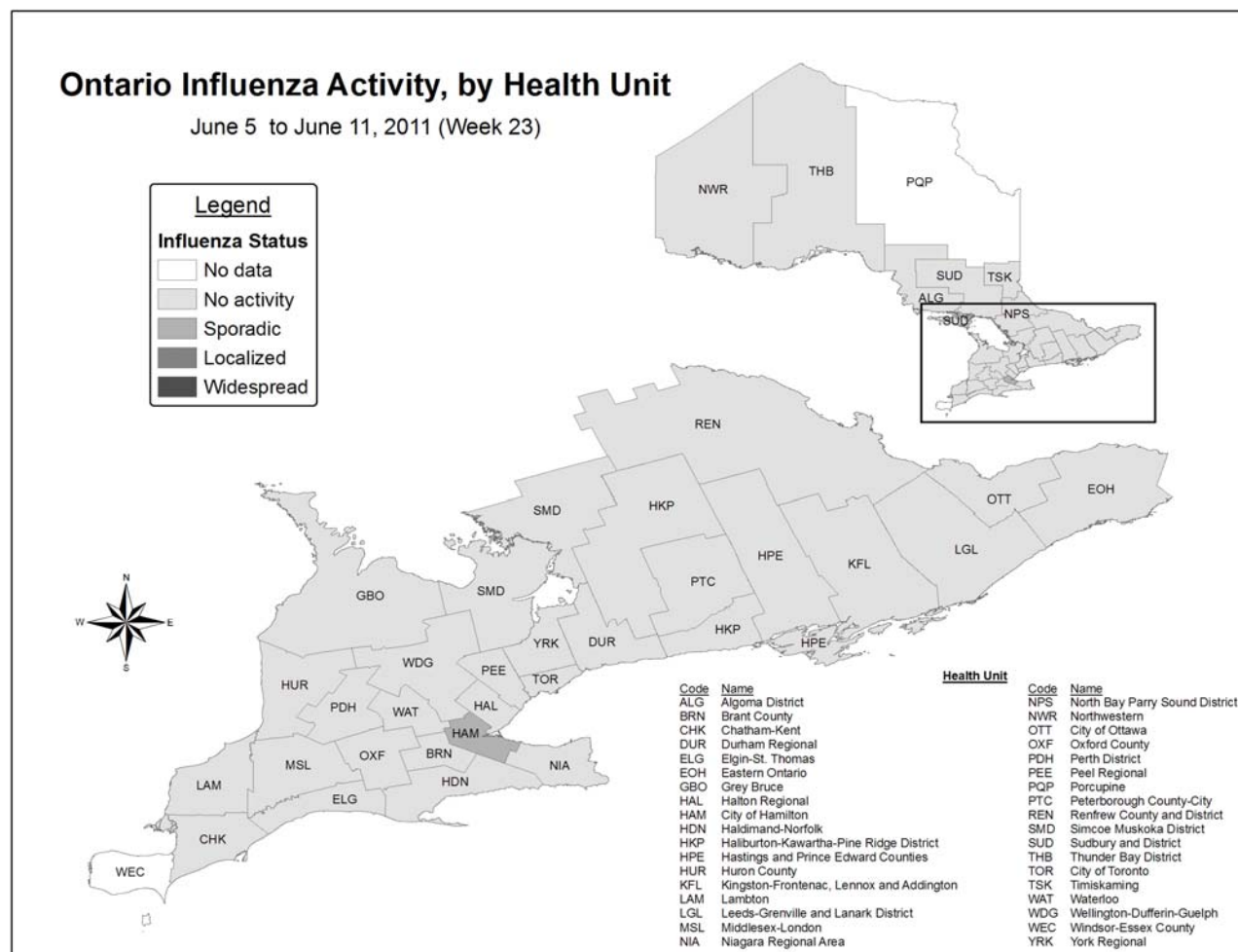
SOURCE: Ontario Ministry of Health and Long-Term Care, integrated Public Health Information System (iPHIS) database, extracted [2011/06/15].

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

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

** Includes indeterminate, untypeable and other subtypes.

Figure 1: Influenza Activity* levels in Ontario by health unit for Week 23, 2011



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 2010-2011 season included in the Appendix-1]

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/en/pro/programs/publichealth/flu/bulletins/2010/default.aspx>

When referencing material from the Ontario Influenza Bulletin please use the following format:
Ontario Ministry of Health and Long-Term Care, Ontario Influenza Bulletin 2010-2011 Season, Surveillance Week ##. <URL>
2. Ontario Agency for Health Protection and Promotion
OAHPP Weekly Laboratory Surveillance Update
<http://www.oahpp.ca/SRI%20Bulletin.php>
3. Public Health Agency of Canada
Issues of FluWatch can be accessed at:
www.phac-aspc.gc.ca/fluwatch/
4. United States Centers for Disease Control and Prevention
<http://www.cdc.gov/flu/weekly/fluactivitysurv.htm>
5. European Influenza Surveillance Scheme
<http://www.ecdc.europa.eu/en/activities/surveillance/EISN/Pages/home.aspx>

INFORMATION ABOUT H1N1 INFLUENZA (HUMAN SWINE INFLUENZA)

1. CDC (Human swine flu investigation)
<http://www.cdc.gov/swineflu/investigation.htm>
2. PHAC (Human swine flu investigation)
http://www.phac-aspc.gc.ca/alert-alerte/swine_200904-eng.php
3. WHO Swine Flu general info
<http://www.who.int/csr/disease/swineflu/en/index.html>
4. Ontario Ministry of Health (Important Health Notices)
<http://www.health.gov.on.ca/english/providers/program/emu/ihn.html>

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>

Influenza Surveillance Weeks for 2010-2011 and date of submission of Appendix C

WEEKS	START	END	Appendix C Submission to MOHLTC
WK24	12-Jun-11	18-Jun-11	21-Jun-11
WK25	19-Jun-11	25-Jun-11	28-Jun-11
WK26	26-Jun-11	2-Jul-11	5-Jul-11
WK27	3-Jul-11	9-Jul-11	12-Jul-11
WK28	10-Jul-11	16-Jul-11	19-Jul-11
WK29	17-Jul-11	23-Jul-11	26-Jul-11
WK30	24-Jul-11	30-Jul-11	2-Aug-11
WK31	31-Jul-11	6-Aug-11	9-Aug-11
WK32	7-Aug-11	13-Aug-11	16-Aug-11
WK33	14-Aug-11	20-Aug-11	23-Aug-11
WK34	21-Aug-11	27-Aug-11	30-Aug-11
WK35	28-Aug-11	3-Sep-11	6-Sep-11

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

§Health units have been requested to consider laboratory confirmed pH1N1 outbreaks in camps in their region when evaluating ILI activity levels

Influenza-Like Illness (ILI) Definitions:

A) ILI in the general population:

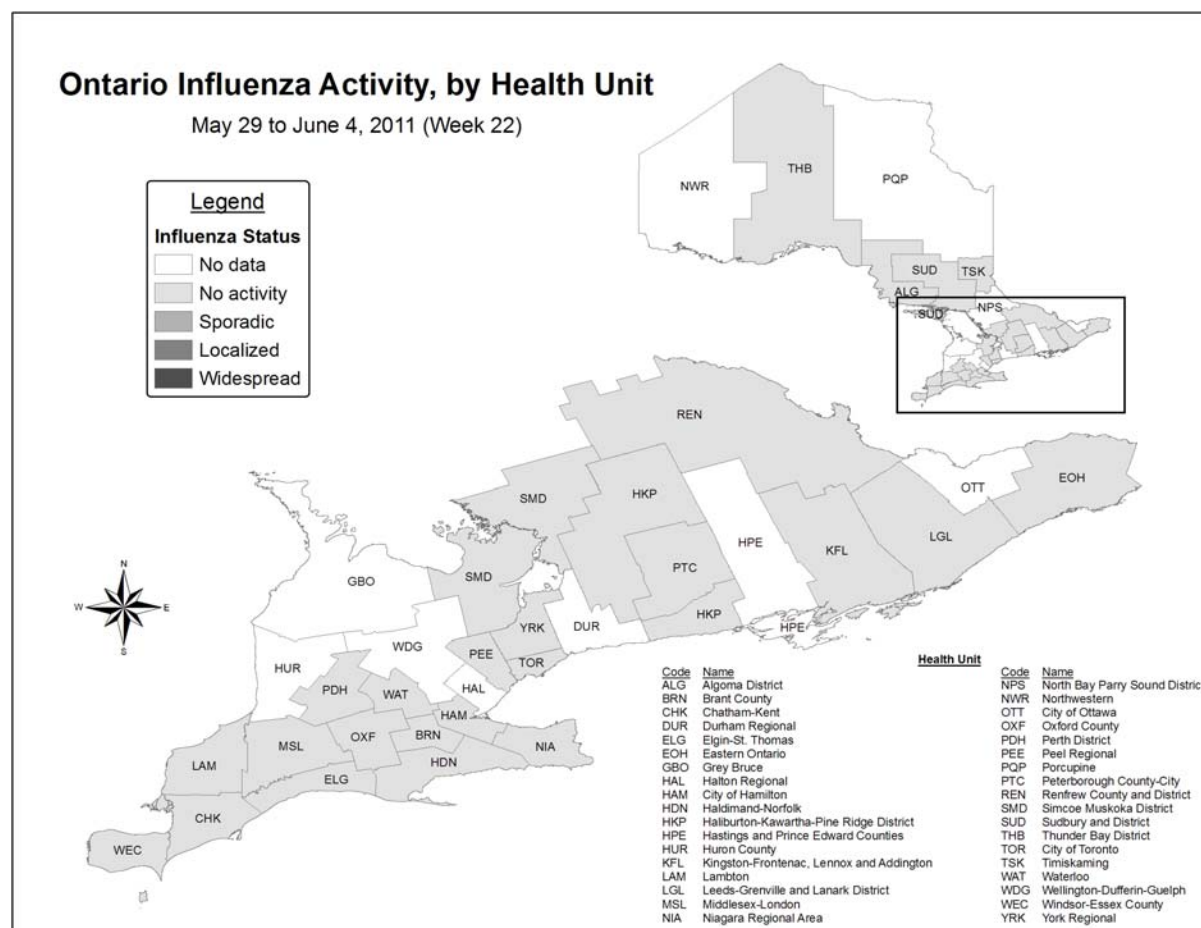
Acute onset of respiratory illness with fever and cough and with one or more of the following - sore throat, arthralgia, myalgia, or prostration which could be due to influenza virus. In children under 5, gastrointestinal symptoms may also be present. In patients under 5 or 65 and older, fever may not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

Weekly Ontario Influenza Activity Map



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

Influenza Activity levels are assigned by local public health units and reported to the MOHLTC every week. Activity levels are assigned based on laboratory confirmation of influenza, influenza like illness (ILI) reports from various sources including hospitals, institutions experiencing respiratory infection outbreaks, physicians' offices, etc.

Activity level definitions for the 2010-11 influenza season are as follows:

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

§ Health units have been requested to consider laboratory confirmed pH1N1 outbreaks in camps in their region when evaluating ILI activity levels

Note: The Weekly Ontario Influenza Activity Map will be posted on this site bi-weekly, alternating with the *Ontario Influenza Bulletin* (which contains the Influenza Activity map), until the end of October, 2011. As of November 4, 2011, the *Ontario Influenza Bulletin* will be published weekly.