



Ontario Influenza Bulletin | 2011-2012

SURVEILLANCE WEEK 6 (February 5, 2012 – February 11, 2012)

This issue of the Ontario Influenza Bulletin provides information on the surveillance period from February 5, 2012 to February 11, 2012 (week 6). **All data are for week 6** and data extraction and analysis for this issue of the Bulletin occurred on February 15, 2012 unless otherwise specified. In order to enable our readers to better assess influenza activity in Ontario, we have combined various sources of information in the following table.

Assessment of Influenza and Other Respiratory Virus Activity in Ontario

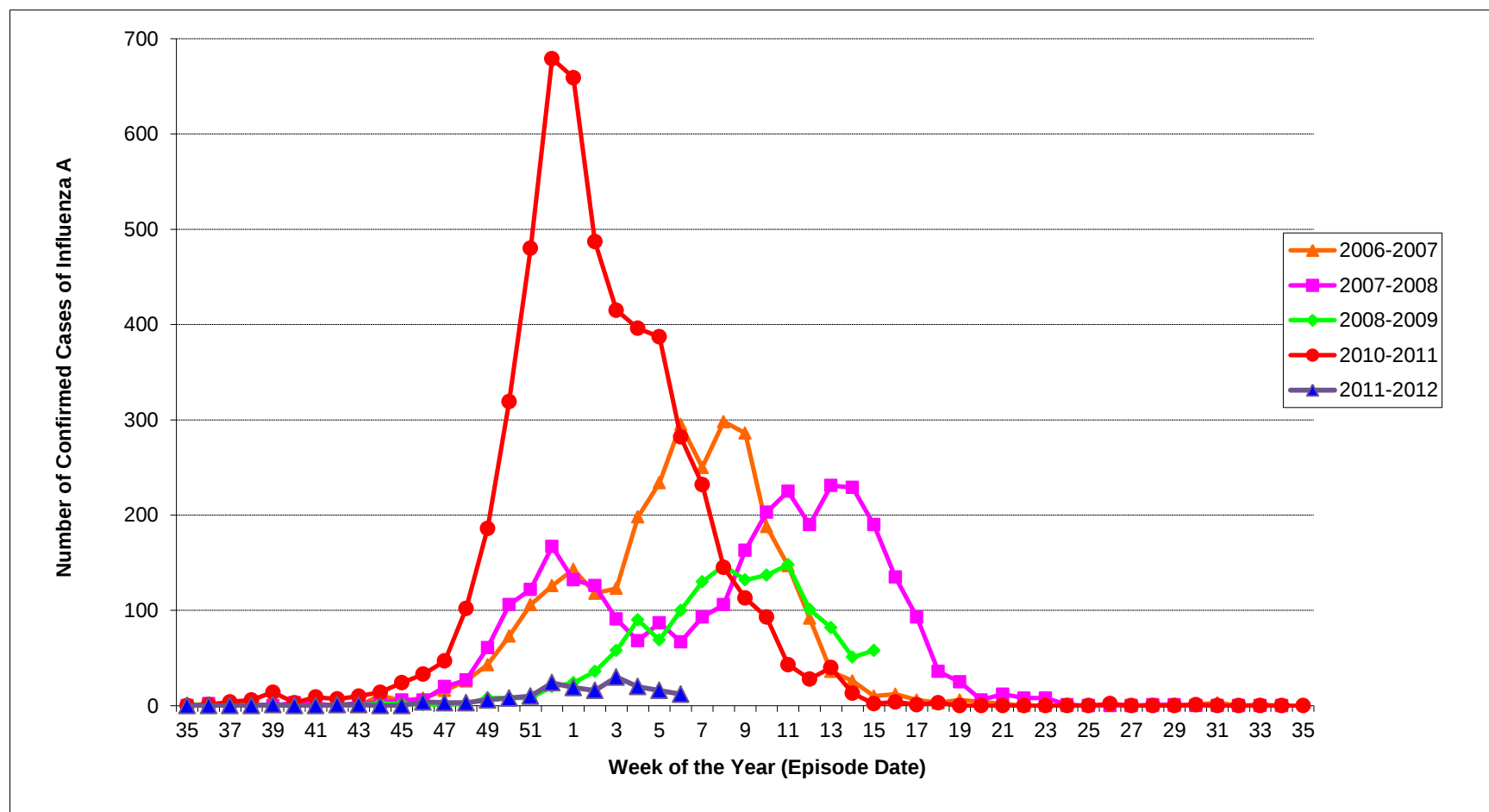
Measure of Activity	Assessment of measure compared to previous week (Lower, Similar, Higher)	Reasoning behind assessment
Laboratory Confirmed Influenza Cases	Higher	Ninety-nine (99) new influenza cases were reported* in week 6, which is higher than the number reported in week 5 (60). The percent positivity of laboratory tests for influenza in Ontario was 7.81% (2.27% for influenza A and 5.54% for influenza B) for week 6, which was higher than week 5 (6.35%) (Figure 3).
Respiratory virus activity	RSV activity is similar	Among circulating respiratory viruses, respiratory syncytial virus (RSV) had the highest percent positivity at 22.72% (Table 3).
Institutional Respiratory Infection Outbreaks	Similar	Eight (8) new institutional respiratory outbreaks, including one influenza B outbreak, were reported for week 6. Eleven (11) institutional influenza outbreaks have been reported to date this season.
Influenza Activity Levels Reported by Health Units	Similar	Central East, Central West, Eastern and Toronto regions reported 'localized' level influenza activity, while North East and South West regions reported 'sporadic' level influenza activity. The North West region reported no activity for week 6.
Influenza-Like Illness (ILI) Consultation Rate reported by Sentinels	Higher	The provincial ILI consultation rate increased from 34.14/1,000 patient visits in week 5 to 43.54/1,000 patient visits in week 6. This rate is higher than the average rate for week 5 from previous years.
OVERALL ASSESSMENT FOR VIRUS ACTIVITY	Influenza activity in Ontario was <i>higher</i> compared to the previous week.	Overall, the indicators show that influenza activity was <i>higher</i> during week 6 compared to week 5.
Measure of Severity for Influenza		
Hospitalizations Among Lab Confirmed Cases of Influenza	Higher	There were 26 hospitalizations reported among cases from February 5 to February 11, which is higher than the number (18) reported from January 29 to February 4*.
Deaths Among Lab Confirmed Cases of Influenza	Similar	One death was reported from February 5 to February 11, which is less than the number (2) reported from January 29 to February 4*.

*This is the number of cases by **reported** date from iPHIS and needs to be interpreted with caution as there is a lag between the onset of illness, hospital admission or death and when this information is reported to public health.

Summary of current and season to date influenza activity

- Year-to-date influenza activity for the 2011-2012 season has been lower than the same period in previous years, but activity has been increasing recently:
 - A total of 355 influenza cases have been reported for the 2011-2012 surveillance season to date, of which 99 were reported during week 6.
 - The majority of influenza cases reported for the 2011-2012 season to date were subtyped as influenza A(H1N1)pdm09 (77 cases) or influenza B (181 cases), which together account for 72.7% (258/355) of cases this season.
 - The majority of influenza cases this season have been children under 5 years old (124 cases) and adults 65 years of age and older (72 cases), which together account for 55.2% (196/355) of cases reported to date. The highest number of cases (88) has occurred in the 1 to 4 year old age group, which represents 24.8% of cases.
 - Among influenza cases that have been hospitalized, 35.8% (39/109) were children under 5 years old and 23.9% (26/109) were in adults over the age of 65 (Table 2).
 - Compared to the same period in the 2010-2011 season, fewer influenza cases and outbreaks have been reported this season from September 1, 2011 to February 11, 2012.
- The cause(s) of ILI in Ontario from September 1, 2011 to February 4, 2012 has changed as the season progressed:
 - Since week 5, influenza B has been the dominant circulating influenza virus.
 - Since week 1, 11 institutional influenza outbreaks have been reported: three influenza A, seven influenza B, and one combined A and B outbreak. Since week 1, RSV has been the most common virus identified in institutional respiratory outbreaks.
 - RSV had the highest percent positivity among laboratory tests of respiratory samples during week 6 at 22.72% (Table 3). RSV also has had the highest percent positivity among isolates submitted for testing for the season to date at 12.36%.
 - Levels of coronavirus have been increasing since week 51. For week 6, coronavirus had a percent positivity of 16.51%.
 - The provincial ILI consultation rate increased from 34.14/1,000 patient visits in week 5 to 43.54/1,000 patient visits in week 6, the bulk of which was due to increased rates in the 0-4 age group.

Figure 1: Confirmed cases of influenza A in Ontario by episode date reported from Sep. 1, 2006 to Feb. 11, 2012[†]



Source: Ontario Ministry of Health and Long-Term Care, integrated Public Health Information System (iPHIS) database, extracted by Public Health Ontario [2012/02/15].

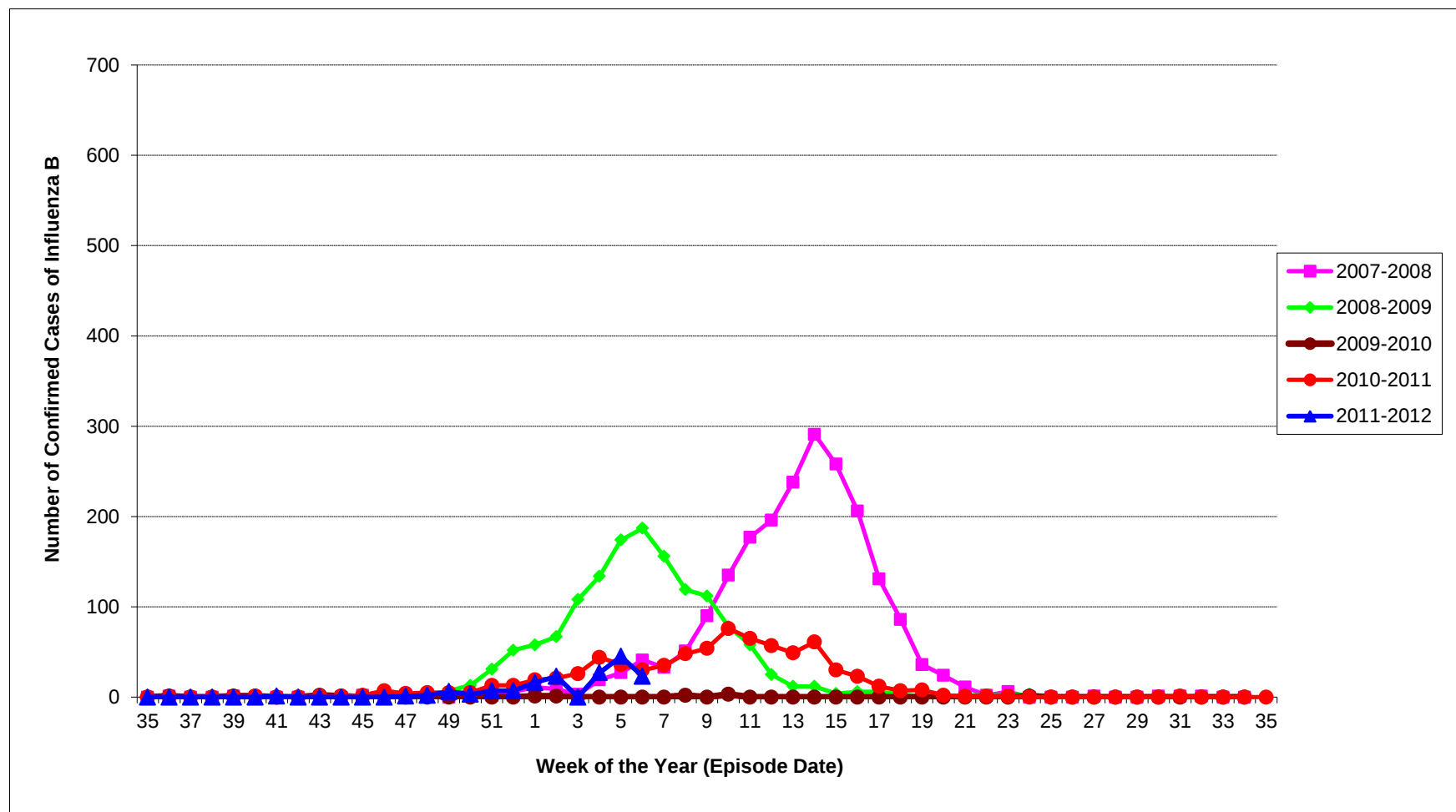
[†] Episode Date for a case corresponds to the earliest date on record for the case according to the iPHIS hierarchy (Symptom Date > Clinical Diagnosis Date > Specimen Collection Date > Lab Test Date > Reported Date)

Note: Cases after week 14 in the 2008-09 season were excluded because seasonal influenza cases from this period may have been detected due to heightened surveillance for all influenza-like illness, therefore this period is not comparable to a regular influenza season. Additionally, all cases from the 2009-10 influenza season were excluded from this graph due to its incomparability to a regular influenza season as a result of the influenza A(H1N1)pdm09 pandemic.

Note: week 53 of the 2008-09 season has been removed for continuity in displaying trends.

Note: Interpret tail of 2011-2012 line with caution due to reporting lags.

Figure 2: Confirmed cases of influenza B in Ontario by episode date reported from Sep. 1, 2007 to Feb. 11, 2012[†]



Source: Ontario Ministry of Health and Long-Term Care, integrated Public Health Information System (iPHIS) database, extracted by Public Health Ontario [2012/02/15].

[†] 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)

Note: Interpret tail of 2011-2012 line with caution due to reporting lags.

Ontario Influenza Bulletin, 2011-2012 (September 1, 2011 – February 11, 2012)

Table 1: Confirmed cases with a reported date during week 6 and cumulative cases (in brackets) of influenza by health unit and health region since September 1, 2011

Region	Health Unit	Influenza A				Influenza A & B	Influenza B	TOTAL
		(H1N1) pdm09	No Subtype/Not Subtyped	Other*	H3			
North West	Northwestern	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)
	Thunder Bay District	0 (0)	0 (0)	0 (0)	0 (1)	0 (0)	0 (0)	0 (1)
	TOTAL NORTH WEST	0 (0)	0 (0)	0 (0)	0 (1)	0 (0)	0 (0)	0 (1)
North East	Algoma	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)
	North Bay Parry Sound District	0 (1)	0 (0)	0 (0)	0 (1)	0 (0)	0 (2)	0 (4)
	Porcupine	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)
	Sudbury & District	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)	2 (3)	2 (3)
	Timiskaming	1 (1)	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)	1 (1)
	TOTAL NORTH EAST	1 (2)	0 (0)	0 (0)	0 (1)	0 (0)	2 (5)	3 (8)
Eastern	City of Ottawa	0 (0)	2 (4)	0 (0)	0 (1)	0 (0)	1 (7)	3 (12)
	Eastern Ontario	0 (0)	0 (0)	0 (0)	0 (1)	0 (0)	0 (0)	0 (1)
	Hastings & Prince Edward Counties	0 (0)	0 (0)	0 (0)	0 (1)	0 (0)	1 (2)	1 (3)
	Kingston, Frontenac, Lennox & Addington	0 (1)	0 (1)	0 (0)	0 (0)	0 (0)	0 (1)	0 (3)
	Leeds, Grenville And Lanark District	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)
	Renfrew County And District	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)
	TOTAL EASTERN	0 (1)	2 (5)	0 (0)	0 (3)	0 (0)	2 (10)	4 (19)
Central East	Durham Region	1 (4)	0 (0)	0 (0)	1 (1)	0 (0)	1 (4)	3 (9)
	Haliburton, Kawartha, Pine Ridge	0 (0)	1 (2)	0 (0)	0 (0)	0 (0)	0 (3)	1 (5)
	Peel Region	0 (20)	2 (8)	0 (2)	0 (2)	0 (0)	21 (49)	23 (81)
	Peterborough County-City	0 (0)	0 (1)	0 (0)	0 (0)	0 (0)	0 (0)	0 (1)
	Simcoe Muskoka District	0 (2)	0 (1)	0 (0)	0 (2)	0 (0)	2 (7)	2 (12)
	York Region	1 (3)	0 (1)	0 (0)	0 (2)	0 (0)	0 (1)	1 (7)
	TOTAL CENTRAL EAST	2 (29)	3 (13)	0 (2)	1 (7)	0 (0)	24 (64)	30 (115)
Toronto	Toronto	8 (40)	5 (14)	0 (0)	1 (8)	1 (1)	19 (51)	34 (114)
	TOTAL TORONTO	8 (40)	5 (14)	0 (0)	1 (8)	1 (1)	19 (51)	34 (114)
South West	Chatham-Kent	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)
	Elgin-St. Thomas	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)
	Grey Bruce	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)	0 (1)	0 (1)
	Huron County	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)
	Lambton County	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)
	Middlesex-London	0 (0)	0 (3)	0 (0)	1 (6)	0 (0)	1 (2)	2 (11)
	Oxford County	0 (0)	0 (1)	0 (0)	0 (0)	0 (0)	2 (2)	2 (3)
	Perth District	0 (0)	0 (1)	0 (0)	0 (0)	0 (0)	1 (1)	1 (2)
	TOTAL SOUTH WEST	0 (0)	0 (5)	0 (0)	1 (7)	0 (0)	4 (6)	5 (18)
Central West	Brant County	0 (0)	0 (2)	0 (0)	0 (0)	0 (0)	1 (2)	1 (4)
	City Of Hamilton	0 (1)	1 (10)	0 (0)	0 (1)	0 (0)	6 (14)	7 (26)
	Haldimand-Norfolk	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)
	Halton Region	0 (2)	2 (2)	0 (0)	0 (1)	0 (0)	8 (16)	10 (21)
	Niagara Region	0 (0)	0 (1)	0 (0)	0 (1)	0 (0)	0 (3)	0 (5)
	Waterloo Region	1 (2)	1 (3)	0 (0)	0 (0)	0 (0)	3 (9)	5 (14)
	Wellington-Dufferin-Guelph	0 (0)	0 (1)	0 (0)	0 (8)	0 (0)	0 (1)	0 (10)
	TOTAL CENTRAL WEST	1 (5)	4 (19)	0 (0)	0 (11)	0 (0)	18 (45)	23 (80)
	TOTAL ONTARIO	12 (77)	14 (56)	0 (2)	3 (38)	1 (1)	69 (181)	99 (355)

Source: Ontario Ministry of Health and Long-Term Care, integrated Public Health Information System (iPHIS) database, extracted by Public Health Ontario [2012/02/15].

*Includes indeterminate, untypeable and other subtypes

Ontario Influenza Bulletin, 2011-2012 (September 1, 2011 – February 11, 2012)

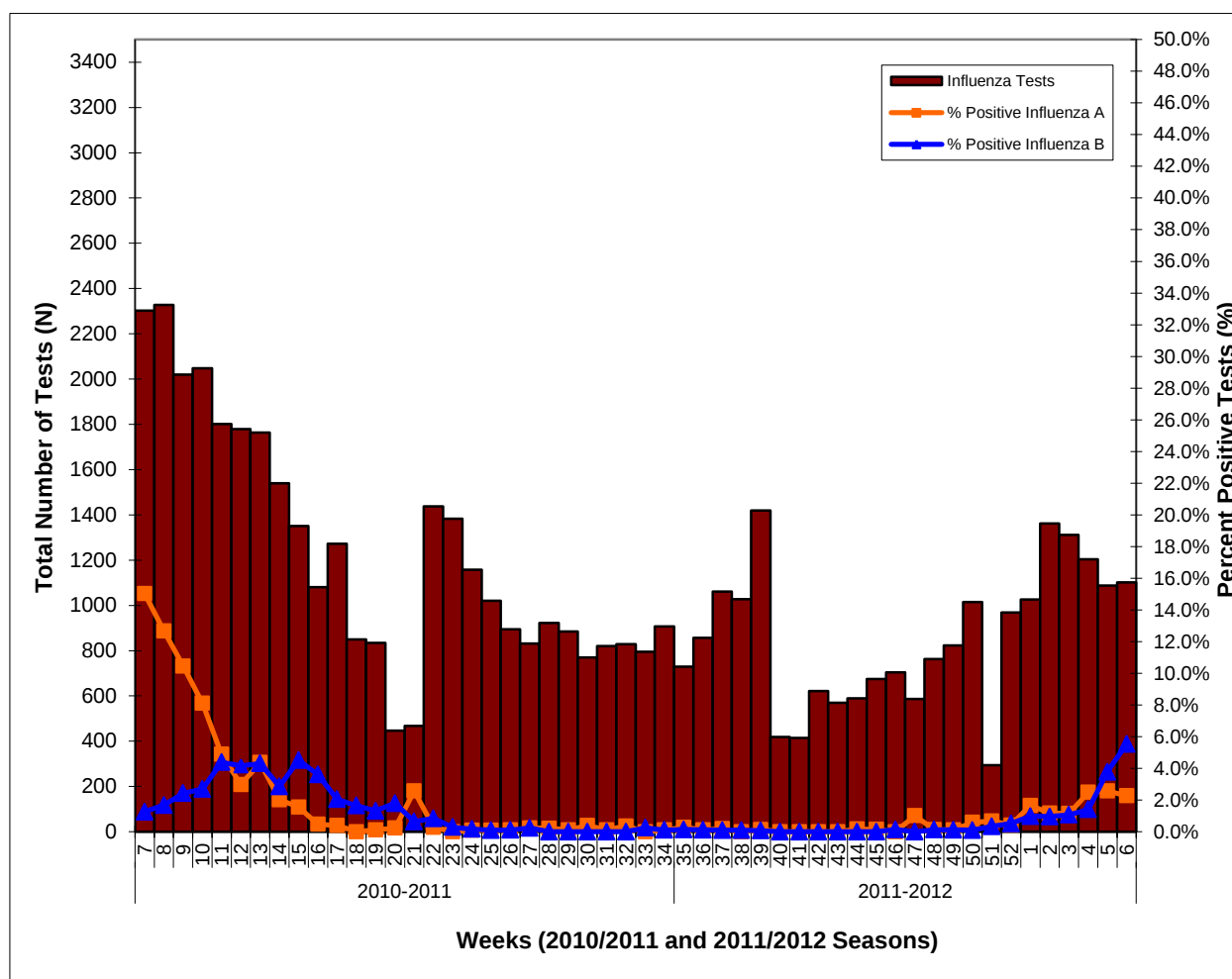
Table 2. Number of hospitalizations and deaths among influenza cases during week 6 and cumulative (in brackets) for the season by age group since September 1, 2011

Age Group	Number of Hospitalizations	Cumulative Rate per 100,000	Number of Deaths	Cumulative Rate per 100,000
<1	3 (12)	8.48	0 (0)	0.00
1-4	8 (27)	4.74	0 (1)	0.18
5-14	5 (10)	0.67	0 (0)	0.00
15-24	1 (2)	0.11	0 (0)	0.00
25-44	1 (14)	0.38	0 (0)	0.00
45-64	2 (18)	0.49	0 (0)	0.00
65+	6 (26)	1.42	1 (4)	0.22
Total	26 (109)	0.83	1 (5)	0.04

Source: Ontario Ministry of Health and Long-Term Care (MOHLTC), integrated Public Health Information System (iPHIS) database, extracted by Public Health Ontario [2012/02/16]. Population data obtained from IntelliHEALTH Ontario, retrieved by Public Health Ontario [2012/01/13].

Ontario Influenza Bulletin, 2011-2012 (September 1, 2011 – February 11, 2012)

Figure 3: Total number of influenza tests performed and percent of positive tests in Ontario, by report week*



Source: Public Health Agency of Canada. These data have been obtained from the Respiratory Virus Detection tables of the Public Health Agency of Canada from 16 labs in Ontario and do not include data from late reports to PHAC for the current season: week 6, 2012. Please note that the last version received from PHAC as of 10:00AM on February 15, 2012 was used.

* Total numbers reported include late reports from previous seasons; 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/>

Ontario Influenza Bulletin, 2011-2012 (September 1, 2011 – February 11, 2012)

Table 3. Number of respiratory specimens tested by all methods for influenza and other respiratory viruses and percent positivity, week 6

Detected viruses	Number and percent positive specimens		Total number of specimens tested	
	Current n (%)	Cumulative n (%)	Current n	Cumulative n
Influenza A (all)	25 (2.27)	171 (0.92)	1101	18540
Influenza B	61 (5.54)	181 (0.98)	1101	18540
Parainfluenza virus	13 (1.43)	607 (3.89)	906	15596
Adenovirus	10 (1.1)	285 (1.83)	906	15596
Respiratory syncytial virus	209 (22.72)	1962 (12.36)	920	15871
Enterovirus	16 (1.77)	802 (5.99)	906	13387
Human metapneumovirus	7 (2.13)	81 (1.08)	328	7485
Coronavirus	35 (16.51)	228 (4.32)	212	5282

Source: CIRID, Public Health Agency of Canada. These data have been obtained from the Respiratory Virus Detection tables of Public Health Agency of Canada from 16 labs in Ontario and do not include data from late reports to PHAC for the current season: week 6, 2012. Please note that the last version received from PHAC as of 10:00AM on February 15, 2012 was used.

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Ontario Influenza Bulletin, 2011-2012 (September 1, 2011 – February 11, 2012)

Table 4: Institutional respiratory infection outbreaks in Ontario: new outbreaks* in week 6 and total outbreaks for the season**

Institutional Respiratory Infection Outbreaks		
New Outbreaks*	N	% (of outbreaks)
Influenza A (All subtypes)	0	0.0
Influenza B	1	12.5
Influenza A and B	0	0.0
Parainfluenza (All types)	1	12.5
RSV	0	0.0
Combined Outbreaks [†]	1	12.5
Other organisms ^α	1	12.5
Enterovirus/rhinovirus	0	0.0
No organism identified/reported	4	50.0
TOTAL	8	100.0
Total Respiratory Infection Outbreaks of the Season to date**	N	% (of outbreaks)
Influenza A (All subtypes)	3	1.0
Influenza B	7	2.4
Influenza A and B	1	0.3
Parainfluenza (All types)	28	9.4
RSV	19	6.4
Combined Outbreaks [†]	25	8.4
Other organisms ^α	27	9.1
Enterovirus/rhinovirus	100	33.7
No organism identified/reported	87	29.3
TOTAL	297	100.0
Types of Institutions – All Outbreaks **	N	% (of outbreaks)
Long-Term Care Homes	190	64.0
Hospitals	16	5.4
Retirement Homes	31	10.4
Other	1	0.3
Not Reported	59	19.9
TOTAL	297	100.0

Source: Ontario Ministry of Health and Long-Term Care, integrated Public Health Information System (iPHIS) database, extracted by Public Health Ontario [2012/02/15]

* New outbreaks are those in which the date of onset of illness in the first case occurred and was recorded through iPHIS in the current surveillance period; i.e. February 5, 2012 – February 11, 2012

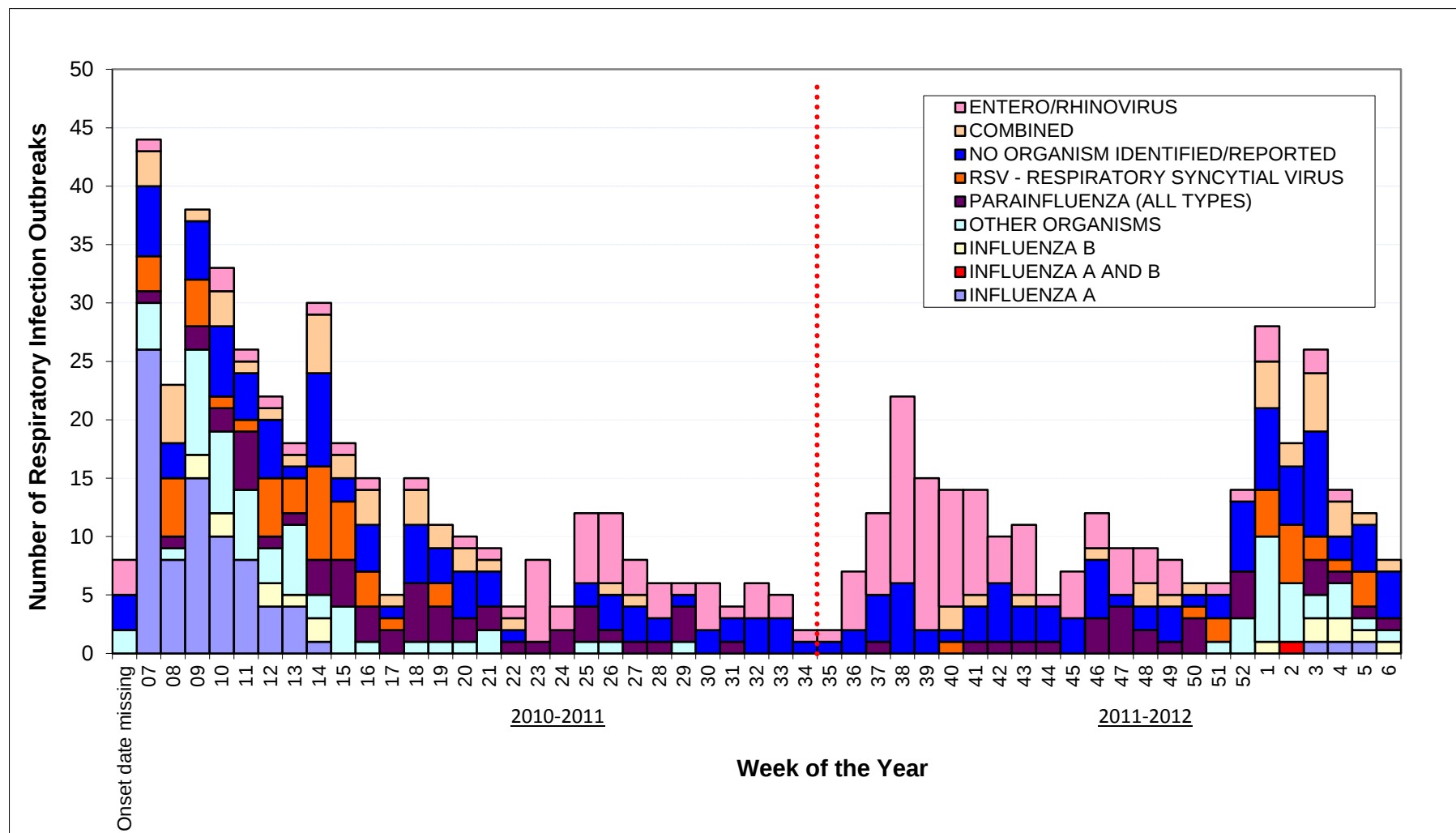
** Season to date includes all outbreaks in which the date of onset of illness in the first case occurred up to week 6, 2012.

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

^α Other organisms include outbreaks involving other aetiological agents, such as human metapneumovirus, adenovirus and coronavirus.

Ontario Influenza Bulletin, 2011-2012 (September 1, 2011 – February 11, 2012)

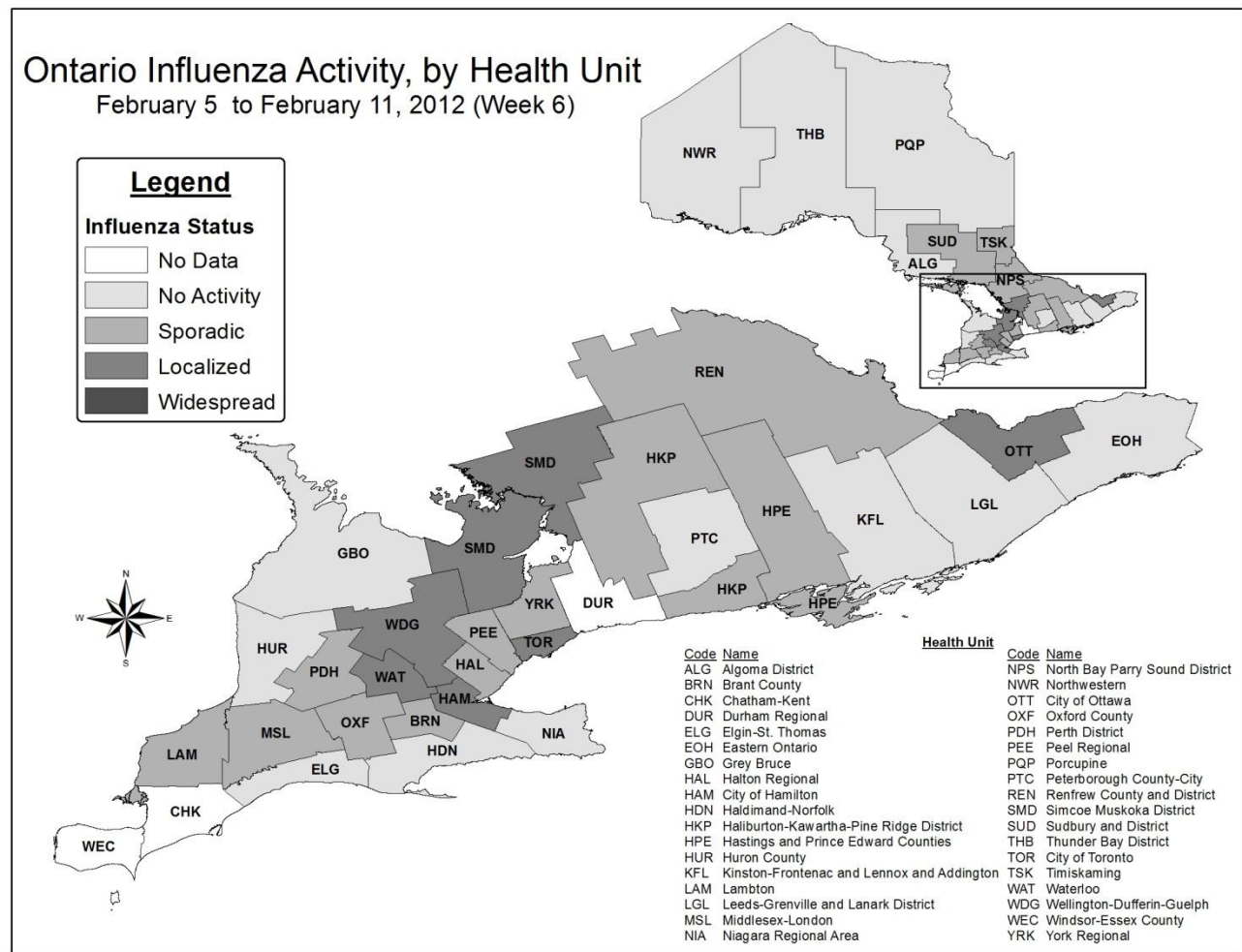
Figure 4: Institutional respiratory infection outbreaks in Ontario by onset of illness in the first case: Total outbreaks up to and including week 6 of the 2011-2012 season by causative organism



Source: Ontario Ministry of Health and Long-Term Care, integrated Public Health Information System (iPHIS) database, extracted by Public Health Ontario [2012/02/015]

Ontario Influenza Bulletin, 2011-2012 (September 1, 2011 – February 11, 2012)

Figure 5: Influenza activity* levels in Ontario by health unit for week 6, 2012

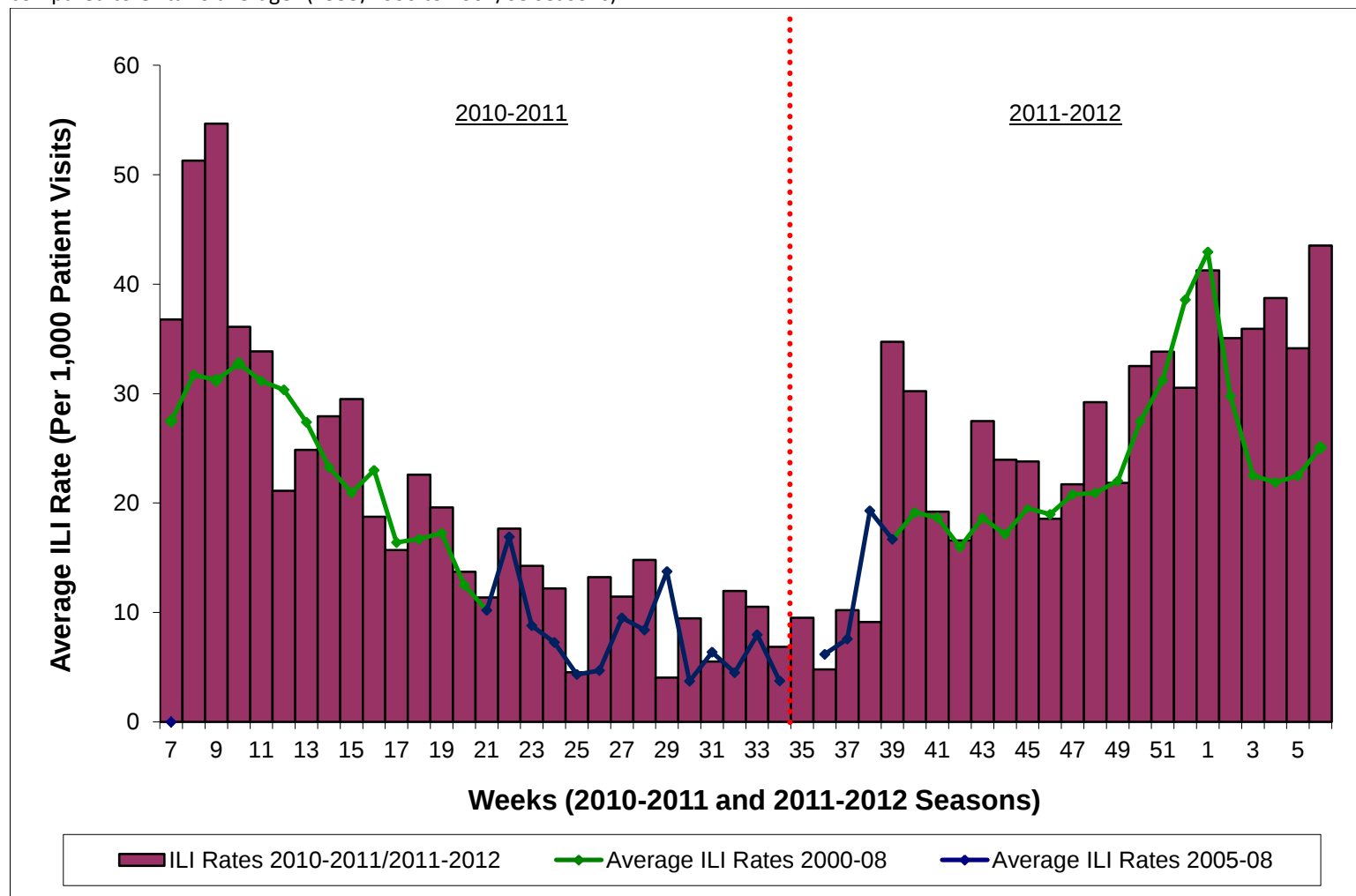


Source: PHO [Provincial Influenza Activity Report (Appendix C) Database]

* Influenza activity levels are assigned by local public health units and reported to PHO 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 respiratory infection outbreaks. Please refer to [detailed definitions for the 2011-2012 season](#).

Ontario Influenza Bulletin, 2011-2012 (September 1, 2011 – February 11, 2012)

Figure 6: Average ILI consultation rate (per 1,000 patient visits) reported by sentinels* in Ontario up to week 6 of the 2011-2012 surveillance season, by report week, compared to Ontario average[†] (1999/2000 to 2007/08 seasons).



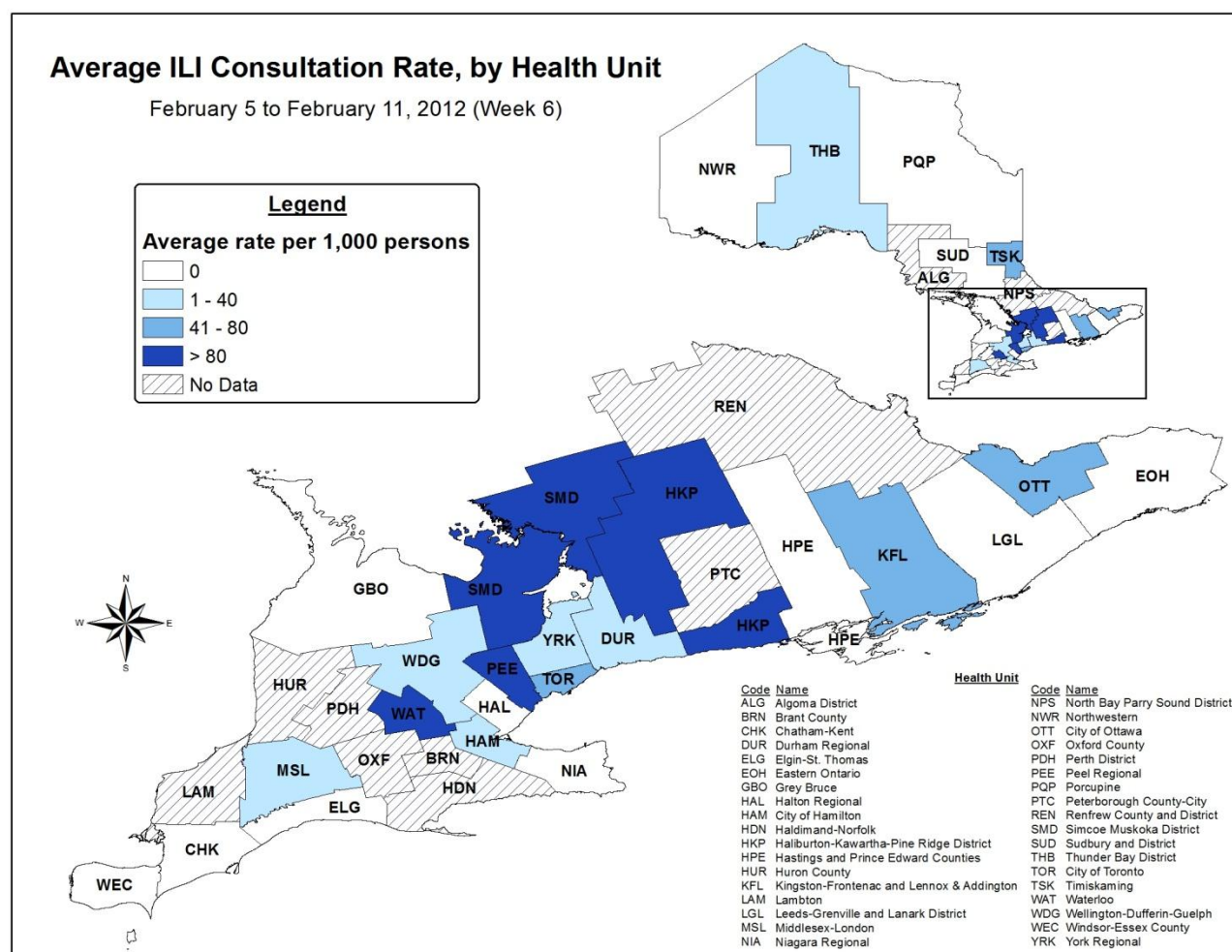
Source: Public Health Agency of Canada

* Sentinel information is reported to Public Health Agency of Canada, 79 sentinels reported in week 6.

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

Ontario Influenza Bulletin, 2011-2012 (September 1, 2011 – February 11, 2012)

Figure 7: Average ILI consultation rate (per 1,000 patient visits) by health unit as reported by sentinels * in Ontario, for week 6



Source: Public Health Agency of Canada

* Sentinels report ILI and patient data to the Public Health Agency of Canada; 79 sentinels reported in week 6, of which 76 were matched to a health unit and represented in the above map.

Note: The small numbers of sentinels reporting at the local level can make the ILI rates unstable. Please interpret these data accordingly.

Table 5: Average influenza-like illness consultation rate (per 1,000 patient visits) by age group as reported by sentinels*in Ontario, for week 6.

Age Category	0 – 4	5 – 19	20 – 64	65 +	Unknown	TOTAL
Number of ILI Consultations	22	18	44	13	0	97
ILI Consultation Rate (per 1,000 patient visits)	127.17	70.31	34.21	25.34	0.00	43.54

Source: Public Health Agency of Canada

* Sentinel information is reported to the Public Health Agency of Canada; 79 sentinels reported in week 6.

Ontario Influenza Bulletin, 2011-2012 (September 1, 2011 – February 11, 2012)

APPENDIX - I

Table 1: NML strain characterization, influenza isolates in Ontario and Canada, September 1, 2011 to February 16, 2012.

	Ontario	Canada
Influenza A (H3N2) A/Perth/16/2009-like*	11	73
Influenza A(H1N1)pdm09 A/California/07/09-like*	42	48
Influenza B B/Brisbane/60/2008-like*	33	70
Influenza B B/Wisconsin/01/2010-like	38	51

Source: Influenza and Respiratory Viruses Section, National Microbiology Laboratory (NML)

Please note that the last version received from PHAC as of 4:00PM on February 16, 2012 was used.

* These strains are components of the seasonal trivalent vaccine for 2011-2012, which contains the same three components as the 2010-2011 vaccine.

Table 2: Amantadine, Oseltamivir and Zanamivir susceptibility assays completed on Canadian influenza isolates by NML, September 1, 2011 to February 16, 2012.

Influenza strains	Amantadine				Oseltamivir				Zanamivir			
	Ontario		Canada		Ontario		Canada		Ontario		Canada	
	R	S	R	S	R	S	R	S	R	S	R	S
Influenza A (H3N2)	22	1	109	1	0	9	0	68	0	9	0	66
Influenza A(H1N1)pdm09	43	0	55	0	0	38	0	43	0	38	0	43
Influenza B	NA	NA	NA	NA	0	52	0	93	0	50	0	91

(R-Resistant, S- Susceptible, NA-Not applicable)

Source: Influenza and Respiratory Viruses Section, National Microbiology Laboratory (NML)

Please note that the last version received from PHAC as of 4:00PM on February 16, 2012 was used.