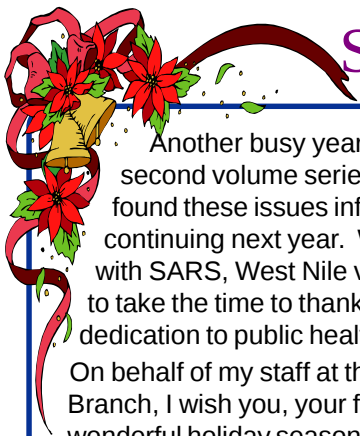


# COMMUNICABLE DISEASE PROFILES

## Volume 2, Issue 6: December 2003

*A bi-monthly newsletter from Disease Control Service, Public Health Branch for Ontario public health units*



### Seasons Greetings

Another busy year has come to an end, and so has the second volume series of CD Profiles. We hope that you found these issues informative, and we look forward to continuing next year. We have had a hectic year, dealing with SARS, West Nile virus, and now, influenza. I would like to take the time to thank everyone for their hard work and dedication to public health.

On behalf of my staff at the Public Health Branch, I wish you, your family, and friends a wonderful holiday season, and a very healthy and prosperous New Year.

Dr. Eng-Soon Chan  
Physician Manager  
Surveillance and Outbreak  
Management Section (SOMS)



### New Circulating Influenza Strain in Ontario

The National Microbiology Laboratory (NML) in Canada have sub-typed 111 cases of A/Fujian/411/2002 (H3N2) in Ontario, as of December 16, 2003. The World Health Organization (WHO) has advised that the A/Fujian/411/2002-like strains are drift variants of the A/Panama/2007/99 vaccine virus. The 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.

Since September 2003, the European Influenza Surveillance Scheme (EISS) has reported cases of the A/Fujian/411/2002 (H3N2) strain that has circulated in Australia, Denmark, Ireland, New Zealand, Norway, Portugal, Switzerland, and the United Kingdom. The WHO has also indicated that the majority of influenza A (H3N2) viruses isolated around the world were closely related to A/Fujian/411/2002 (H3N2).

**Source: Influenza/ARO/Infection Control Unit, SOMS.**

*Communicable Disease Profiles* is published six times a year (February, April, June, August, October, and December), and is distributed to all Ontario public health units.

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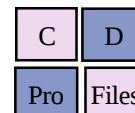
### Health Canada Warning: Avian Flu in South Korea

Recent postings in Promed and updates in the Public Health Intelligence Network (GPHIN), have confirmed a highly pathogenic avian influenza (HPAI) is responsible for an estimated 21,000

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chicken deaths on a farm southeast of Seoul since early December. According to a 12 December 2003 GPHIN article, the Agriculture Ministry has confirmed the strain to be influenza A (H5N1). As a precaution, all remaining 5,000 chickens on the farm were culled. Korea's chicken industry is mainly for local consumption so the risk of exportation is considered low. Farms within a 10 kilometer radius of the affected farm are being monitored. As well, there have been no reports of human infection. The WHO has received the original report through GPHIN, reports are being followed on ProMed mail and Health Canada is continuing to monitor this situation. The head of the Canadian Animal Surveillance Network (CAHNET) has been advised of this and similar reports.

**Source: Health Canada, Population and Public Health Branch.**

## Avian Flu in Hong Kong

An influenza A(H9N2) case was confirmed on 9 Dec 2003 by the Department of Health of Hong Kong, Special Administrative Region of China. The case involved a five-year old boy who was admitted to hospital at the end of November. The boy had mild clinical symptoms and was discharged two days later. This appears to be an isolated case, with no evidence of further spread or of human-to-human transmission, but the investigation continues. This is the second time that avian influenza A(H9N2) viruses have been isolated from humans in Hong Kong SAR. The first cases detected in 1999 had involved two girls who also made full recoveries after having influenza-like symptoms. Influenza A(H9N2) viruses have circulated among birds in the region over the past few years.

**Source: World Health Organization (WHO), CSR, WER, Disease Outbreak Report, Wed., Dec., 17 2003 [edited].**

## Health Canada:

### Notifiable Diseases On-line

Notifiable Diseases On-line is a web based application developed by the Centre for Infectious Disease Prevention and Control, Health Canada, to enhance the dissemination of surveillance data collected on notifiable diseases in Canada. The application contains information on the number

of cases reported for several of the notifiable diseases as well as their rate in the population. The data are available for each province and territory for each year starting from 1987 up to the end of 1999 and will be updated as new data for each year becomes available. For 1999, the data from the Northwest Territories and Nunavut have been combined. Visit this link for the notifiable diseases monthly reports:

<http://www.hc-sc.gc.ca/pphb-dgspsp/bid-bmi/dsd-dsm/ndmr-rmmdo/index.html>

**Source: Centre for Infectious Disease Prevention and Control, Health Canada.**

## The Difference Between Cold, Flu, and SARS Symptoms

| Difference Between Cold/Flu/SARS |                                         |                                                                                                      |                                                                                                    |
|----------------------------------|-----------------------------------------|------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------|
| Symptom                          | Cold                                    | Flu                                                                                                  | SARS                                                                                               |
| Fever                            | Rare                                    | Usual, high sudden onset, lasts 3 – 4 days (39° – 40°C)                                              | Fever is quite high and present at some time in almost every patient (> 38 °C) and begins suddenly |
| Headache                         | Rare                                    | Usual, can be sudden                                                                                 | Yes, may be reported                                                                               |
| General aches and pains          | Generally mild                          | Usual, often severe                                                                                  | Sore muscles                                                                                       |
| Fatigue (malaise)                | Generally mild                          | Usual, severe, may last 2 – 3 weeks                                                                  | Common                                                                                             |
| Runny, stuffy nose               | Common                                  | Common                                                                                               | Not common                                                                                         |
| Sneezing                         | Common                                  | Sometimes                                                                                            | Not common                                                                                         |
| Sore throat                      | Common                                  | Common                                                                                               | Not common                                                                                         |
| Chest discomfort, cough          | Sometimes, mild                         | Usual, can be severe to moderate. Cough may last for weeks.                                          | Within 3 – 7 days of onset cough, shortness of breath or difficulty breathing develop              |
| Complications                    | Can lead to sinus congestion or earache | Can lead to pneumonia & respiratory failure, can worsen a chronic condition, can be life-threatening | X-ray of the lungs show signs of pneumonia                                                         |
| Initial signs                    | No – begins with respiratory symptoms   | No – begins with fever and respiratory symptoms                                                      | Yes – fever 3 – 7 days before respiratory symptoms                                                 |

To print additional copies, please visit the Ministry of Health and Long-Term Care web-site:

[http://www.health.gov.on.ca/english/public/program/pubhealth/flu/flu\\_03/flu\\_cold\\_sars.html](http://www.health.gov.on.ca/english/public/program/pubhealth/flu/flu_03/flu_cold_sars.html)

Or for the French version of this chart, visit this web-site:

[http://www.gov.on.ca/health/french/programf/pubhealthf/flu\\_03/flu\\_cold\\_sarsf.html](http://www.gov.on.ca/health/french/programf/pubhealthf/flu_03/flu_cold_sarsf.html)

**Source: Influenza/ARO/Infection Control Unit, SOMS.**



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