

Ontario Influenza Bulletin 2005-2006 Season

SURVEILLANCE WEEK 12 (March 19 - 25, 2006)

This issue of the Ontario Influenza Bulletin provides information on the surveillance period from March 19 – 25, 2006. The analysis for this issue occurred on Wednesday March 29, 2006, therefore all data is current to that date.

During week 12 of 2006, influenza activity in Ontario was similar compared to that of the previous week. Ninety sporadically occurring cases of influenza (54 influenza A and 36 influenza B) were reported through iPHIS. In addition, there were 9 institutional outbreaks (all influenza A) reported. The highest level of influenza activity in Ontario was ‘widespread activity’ reported from Toronto, although six individual health units from other regions also reported ‘widespread activity’. Overall ‘localized activity’ were reported from Eastern, Central East, Central West and Southwest regions. North East and North West regions reported ‘sporadic activity’.

When entering laboratory confirmed influenza cases in iPHIS, please enter the “type” (i.e. A vs. B) of influenza reported. Your attention to this matter is most appreciated

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. If you would like to provide feedback on the Bulletin, please contact Shafiq Chowdhury (shafiq.chowdhury@moh.gov.on.ca, 416-327-7807) or Anne-Luise Winter (anne-luise.winter@moh.gov.on.ca, 416-327-7301).

Table 1: Summary of laboratory-confirmed influenza cases and institutional influenza outbreaks, by health region, March 19 - 25, 2006.

Lab-confirmed Influenza cases*	HEALTH REGION							TOTAL
	North West	North East	Eastern	Central East	Toronto	South West	Central West	
Influenza A	0	1	12	3	23	5	10	54
Influenza B	0	1	2	11	10	4	8	36
Influenza A & B	0	0	0	0	0	0	0	0
Unspecified †	0	0	0	0	0	0	0	0
Total new cases	0	2	14	14	33	9	18	90
Institutional influenza outbreaks‡	0	0	3	0	3	2	1	9

SOURCE: MOHLTC [iPHIS, Health Unit Reports to PHD, Provincial Appendix D and Appendix E Database]

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

† Type of influenza, i.e. A vs B, was not specified in iPHIS (i.e. Influenza subtype dropdown menu left blank or reported as “Unspecified”).

‡ Laboratory-confirmed outbreaks in institutions during the surveillance period.

Table 2: Confirmed* cases of influenza by health unit & health region, with an episode date† between March 19 - 25, 2006.

Region	Health Unit	Laboratory-Confirmed Influenza			TOTAL
		Influenza A	Influenza B	Unspecified‡	
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	1	1	0	2
	Sudbury & District	0	0	0	0
	Timiskaming	0	0	0	0
	TOTAL NORTH EAST	1	1	0	2
Eastern	Eastern Ontario	0	0	0	0
	Hastings & Prince Edward Counties	0	0	0	0
	Kingston, Frontenac, Lennox & Addington	0	0	0	0
	Leeds, Grenville & Lanark	0	0	0	0
	Ottawa	12	2	0	14
	Renfrew	0	0	0	0
	TOTAL EASTERN	12	2	0	14
Central East	Durham Region	0	1	0	1
	Haliburton, Kawartha, Pine Ridge District	2	8	0	10
	Peterborough County-City	0	0	0	0
	Simcoe Muskoka District	0	0	0	0
	York Region	0	0	0	0
	Peel Region	1	2	0	3
	TOTAL CENTRAL EAST	3	11	0	14
Toronto	Toronto	23	10	0	33
	TOTAL TORONTO	23	10	0	33
South West	Grey-Bruce	0	0	0	0
	Elgin-St. Thomas	0	0	0	0
	Huron County	0	4	0	4
	Chatham-Kent	0	0	0	0
	Lambton	0	0	0	0
	Middlesex-London	5	0	0	5
	Oxford	0	0	0	0
	Perth District	0	0	0	0
	Windsor-Essex County	0	0	0	0
	TOTAL SOUTHWEST	5	4	0	9
Central West	Brant	0	0	0	0
	Haldimand-Norfolk	0	0	0	0
	Hamilton	8	6	0	14
	Niagara Region	1	0	0	1
	Halton Region	0	0	0	0
	Waterloo Region	1	0	0	1
	Wellington-Dufferin-Guelph	0	2	0	2
	TOTAL CENTRAL WEST	10	8	0	18
	TOTAL ONTARIO	54	36	0	90

SOURCE: MOHLTC [iPHIS, Health Unit Reports to PHD]

* Confirmed cases of influenza can include laboratory-confirmed cases and epi-linked cases.

† 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)

‡ Type of influenza, i.e. A vs B, was not specified in iPHIS (i.e. Influenza subtype dropdown menu left blank or reported as unspecified)

Table 3: Cumulative* confirmed† cases of influenza by health unit & health region, September 1, 2005 to March 25, 2006.

Region	Health Unit	Laboratory-Confirmed Influenza			TOTAL
		Influenza A	Influenza B	Unspecified‡	
North West	Northwestern	0	2	0	2
	Thunder Bay District	2	0	0	2
	TOTAL NORTH WEST	2	2	0	4
North East	Algoma	2	2	0	4
	North Bay Parry Sound District	0	1	7	8
	Porcupine	6	9	0	15
	Sudbury & District	2	10	0	12
	Timiskaming	0	0	0	0
	TOTAL NORTH EAST	10	22	7	39
Eastern	Eastern Ontario	1	0	0	1
	Hastings & Prince Edward Counties	14	11	0	25
	Kingston, Frontenac, Lennox & Addington	17	17	0	34
	Leeds, Grenville & Lanark	1	0	0	1
	Ottawa	41	4	0	45
	Renfrew	5	1	0	6
	TOTAL EASTERN	79	33	0	112
Central East	Durham Region	4	1	1	6
	Haliburton, Kawartha, Pine Ridge District	16	39	0	55
	Peterborough County-City	2	3	0	5
	Simcoe Muskoka District	20	29	0	49
	York Region	16	47	0	63
	Peel Region	26	44	0	70
	TOTAL CENTRAL EAST	84	163	1	248
Toronto	Toronto	132	167	0	299
	TOTAL TORONTO	132	167	0	299
South West	Grey-Bruce	8	27	0	35
	Elgin-St. Thomas	1	0	0	1
	Huron County	3	19	0	22
	Chatham-Kent	0	0	1	1
	Lambton	0	0	0	0
	Middlesex-London	17	16	1	34
	Oxford	3	5	0	8
	Perth District	1	4	0	5
	TOTAL SOUTHWEST	47	73	2	122
Central West	Brant	0	0	0	0
	Haldimand-Norfolk	0	5	0	5
	Hamilton	53	79	0	132
	Niagara Region	4	18	2	24
	Halton Region	18	12	0	30
	Waterloo Region	18	28	0	46
	Wellington-Dufferin-Guelph	2	28	0	30
	TOTAL CENTRAL WEST	95	170	2	267
	TOTAL ONTARIO	449	630	12	1091

SOURCE: MOHLTC [iPHIS, Health Unit Reports to PHD]

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

† Confirmed cases of influenza can include laboratory-confirmed cases and epi-linked cases.

‡ Type of influenza, i.e. A vs B, was not specified in iPHIS (i.e. Influenza subtype dropdown menu left blank or reported as unspecified)

Influenza Subtype(s):

During Week 12, 3,156 isolates were received by the Public Health Agency of Canada, with a total of 376 and 255 testing positive for influenza A and B respectively. The majority of the influenza A isolates (188) were from Quebec (50.0%), Ontario 76 (20.2%), and Alberta 65 (17.3%). The majority of the influenza B isolates (155) were from Ontario (60.8%), Saskatchewan 26 (10.2%) and Alberta 18 (7.1%).*

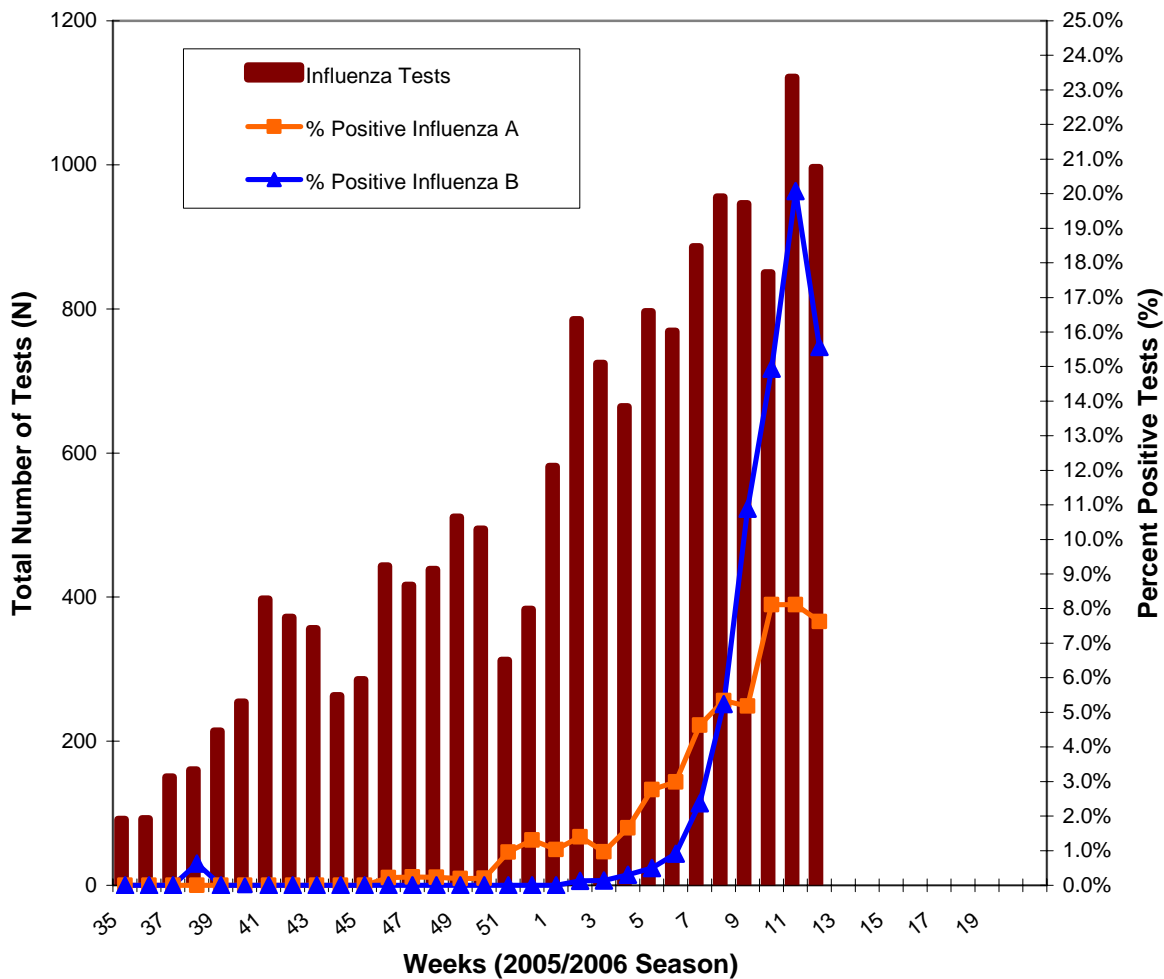
Since the start of the 2005-2006 influenza season, the National Microbiology Laboratory (NML) has antigenically characterized 596 influenza viruses: 260 A/California/07/2004(H3N2)-like viruses; 26 A/New Caledonia/20/1999(H1N1)-like viruses; 136 B/Hong Kong/330/2001-like and 168 B/Malaysia/2506/2004-like viruses both belonging to the B/Victoria/2/1987 lineage; and 6 B/Shanghai/361/2002-like viruses belonging to the B/Yamagata/16/1988 lineage. The B/Malaysia/2506/2004-like strain is the WHO-recommended influenza B component for the Northern Hemisphere 2006-2007 influenza vaccine.**

Note: The 2005-2006 season Canadian vaccine contains an A/ New Caledonia/20/1999(H1N1)-like, an A/ California/7/2004(H3N2)-like, and a B/Shanghai/361/2002-like virus strain.

* These data have been obtained from the Respiratory Virus Detection table of Public Health Agency of Canada for week 12, 2006

** These data have been obtained from the FluWatch report of the Public Health Agency of Canada for week 11 (March 12 - 18) 2006

Figure 1: Total number of influenza tests performed and percent of positive tests in Ontario reported to the Centre for Infectious Disease Prevention and Control (CIDPC), 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 4: Institutional respiratory outbreaks in Ontario, September 1, 2005 to March 25, 2006

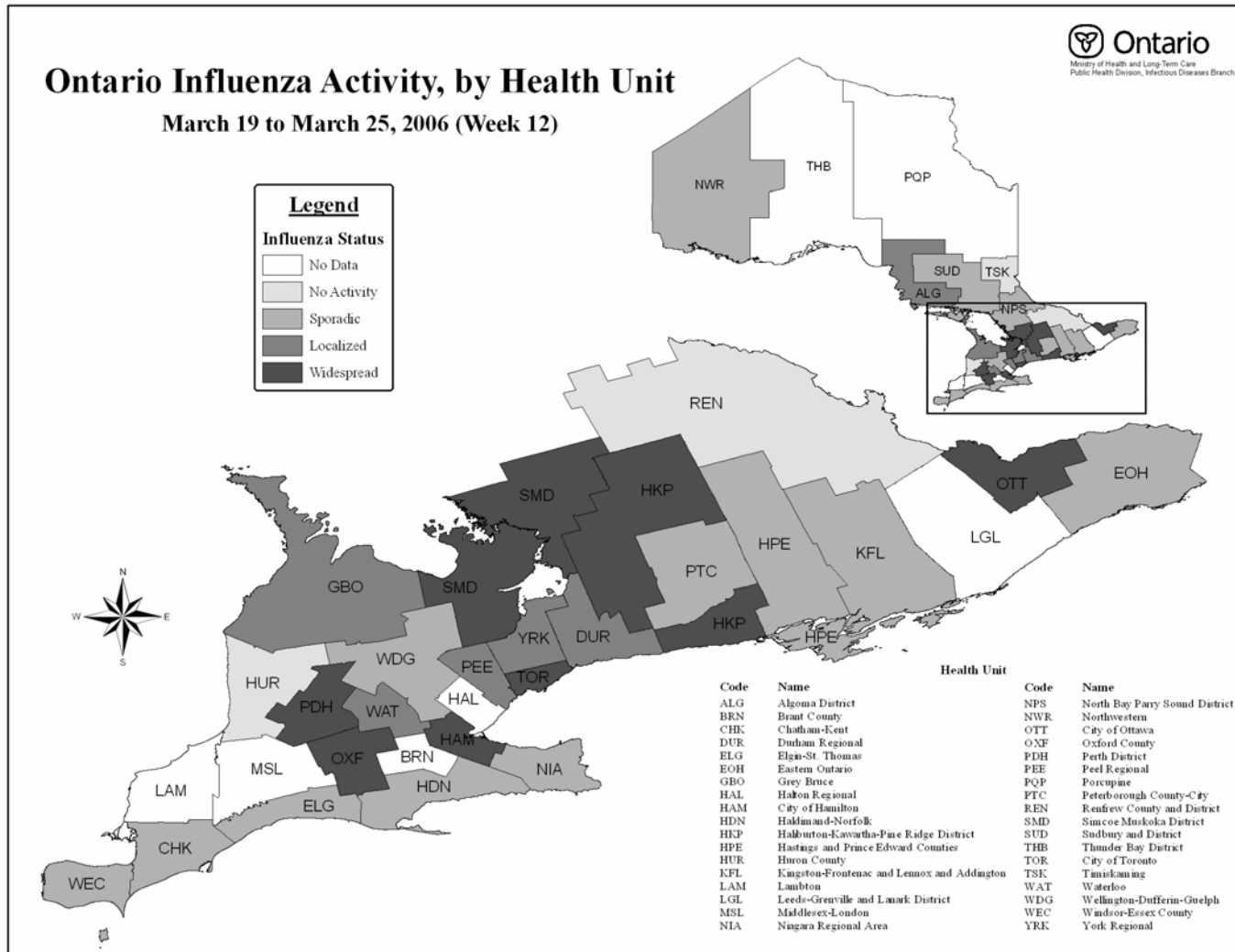
Institutional Respiratory Infection Outbreaks		
New Outbreaks*	N	% (of outbreaks)
Influenza A	9	33.3
Influenza B	0	0.0
Influenza A and B	0	0.0
Parainfluenza (All types)	1	3.7
Other organisms	1	3.7
No organism identified	16	59.3
TOTAL	27	100
Total Respiratory Infection Outbreaks, Season to Date**	N	% (of outbreaks)
Influenza A	62	11.3
Influenza B	10	1.8
Influenza A and B	1	0.2
Parainfluenza (All types)	41	7.5
Other organisms	75	13.7
No organism identified	358	65.5
TOTAL	547	100
Types of Institutions (All Outbreaks) **	N	% (of outbreaks)
Long-Term Care Homes	455	83.2
Hospitals	30	5.5
Retirement Homes	57	10.4
Other	5	0.9
TOTAL	547	100
Outbreak Related Complications (All Outbreaks) **	N	% (of cases)
Deaths		
Residents	161	2.6
Staff	0	0.0
Pneumonia (Chest x-ray confirmed)		
Residents	290	4.6
Staff	19	0.9
Hospitalizations		
Residents	331	5.3
Staff	10	0.5

SOURCE: MOHLTC [Provincial Appendix D and Appendix E Database]

* New outbreaks are those in which the date of onset of the first case occurred in the current surveillance period (March 19 - 25, 2006)

** Season to date includes all outbreaks in which the date of onset of the first case occurred between September 1, 2005 and March 25, 2006.

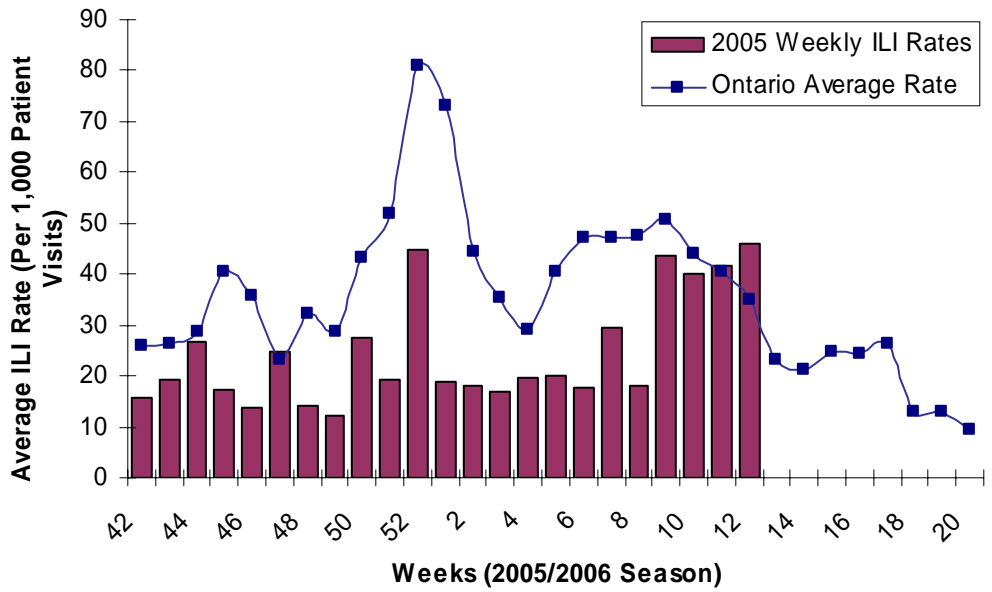
Figure 2: Influenza activity* in Ontario by health unit, Week 12 (March 19 - 25) 2006.



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

* Influenza activity levels, as represented on this map, 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 2005-2006 season included in the Appendix.

Figure 3: Average influenza-like illness consultation rate (per 1,000 patient visits) reported by sentinel physicians* in Ontario in 2005- 2006 season, by report week, Compared to Ontario average† (1996/96 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 (1996-1997 through 2002-2003 seasons). During weeks 20-39, 2002-2003/2004-2005 seasons, ILI is reported once every two weeks, on even weeks only.

Table 5: Average Influenza-like illness consultation rate (per 1,000 patient visits) reported by Sentinel Physicians* in Ontario, by age group and postal code for week 12 (March 19-25), 2006.

Postal Code	0 – 4	5 – 19	20 – 64	65 +	Unknown
K0C1A0	0	0	0	0	0
K2P1V3	0	0	0	0	0
K2P1V3	0	0	2	0	0
K0H2N0	2	0	0	0	0
K7H2W6	0	0	0	0	0
K7L1E9	0	0	0	0	0
K0L1C0	0	0	0	0	0
K0K1H0	0	0	0	0	0
L1A3W4	0	1	0	0	0
K0L1H0	0	0	0	0	0
K0M1A0	0	0	0	0	0
L1B1H8	0	0	0	0	0
L4L4Y7	0	0	0	0	0
L4J7Y3	0	0	0	0	0
M5M1B2	2	2	0	0	0
M4X1W4	0	0	0	0	0
M4E1V8	0	0	0	0	0
M8Y1W3	0	0	0	0	0
M2N6H7	0	0	0	0	0
M2J2Z1	0	0	0	0	0
M2K1E1	0	0	0	0	0
M9W4L6	0	1	1	0	0
M8V2Z5	0	0	0	0	0
L4Y2N8	0	1	0	2	0
L6W2A4	0	5	0	0	0
L9W1G2	0	0	0	0	0
L7R1M6	0	0	0	0	0
L9H1V1	0	0	0	0	0
L9H2G2	0	1	2	0	0
L0R1H0	0	0	0	0	0
L2E1Y3	0	0	0	0	0
L0R1B0	2	0	3	3	0
N3C2E2	0	0	1	0	0
N2G1P2	0	0	0	0	0
N5H1K9	0	0	0	0	0
N8X2G3	1	1	2	1	0
N0M1T0	0	0	0	0	0
N6C2R5	0	0	0	0	0
N0M1L0	1	3	2	0	0
N0G1L0	0	6	2	1	0
N0C1E0	1	0	0	0	0
L4T4P4	0	0	0	0	0
P0H2H0	0	0	0	0	0
P0A1C0	0	1	3	0	0
P3E5V5	0	0	0	0	0
P4N1C6	0	0	0	0	0
P7E1H5	0	0	0	0	0
P8N2Z6	0	0	0	0	0
ILI Sum	9	22	18	7	0
ILI Consultation Rate (per 1,000 patient visits)	112.50	192.98	27.07	19.77	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:
www.health.gov.on.ca/english/providers/program/pubhealth/flu/flu_04/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
www.cdc.gov/flu/
4. Public Health Agency of Canada
For latest information on avian influenza worldwide:
<http://www.phac-aspc.gc.ca/h5n1/index.html>

APPENDIX

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 ILI and no laboratory-confirmed cases* or outbreaks occurred.

Sporadic: sporadically occurring ILI **AND** laboratory-confirmed influenza* with NO outbreaks detected within the influenza surveillance region†

Localized: sporadically occurring ILI **AND** laboratory-confirmed influenza* together with outbreaks of ILI in schools and worksites or laboratory confirmed influenza in residential institutions occurring in less than 50% of the influenza surveillance region(s)

Widespread: sporadically occurring ILI **AND** laboratory-confirmed influenza* together with outbreaks of ILI in schools and worksites or laboratory-confirmed influenza in residential institutions occurring in greater than or equal to 50% of the influenza surveillance region(s)

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

† 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.