

Ontario Influenza Bulletin 2005-2006 Season

SURVEILLANCE WEEK 4 (January 22 to 28, 2006)

This issue of the Ontario Influenza Bulletin provides information on the surveillance period from January 22 to 28, 2006. The analysis for this issue occurred on Thursday February 2, 2006, therefore all data is current to that date.

During week 4 of 2006, influenza activity in Ontario increased compared to that of the previous week. Five sporadically occurring cases of influenza (4 influenza A and 1 unspecified) were reported through iPHIS. In addition, 2 institutional outbreaks attributed to influenza A, one in an acute care hospital and the other in a retirement home, were also reported. The highest level of influenza activity in Ontario remains at 'localized activity', reported in Eastern, Southwest and Central West regions.

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 (sporadic) and institutional outbreaks, by health region, January 22 to 28, 2006.

	HEALTH REGION							
	North West	North East	Eastern	Central East	Toronto	South West	Central West	TOTAL
Lab-confirmed Influenza cases*								
Influenza A	0	0	0	1	0	1	2	4
Influenza B	0	0	0	0	0	0	0	0
Unspecified †	0	0	1	0	0	0	0	1
Total new cases	0	0	1	1	0	1	2	5
Institutional influenza outbreaks‡	0	0	1	0	0	1	0	2

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.

Confirmed* cases of influenza by health unit & health region, with an episode date[†] between Table 2: January 22 to 28, 2006.

		Laboratory-Confirmed Influenza				
Region	Health Unit	Influenza A	Influenza B	Unspecified [‡]	TOTAL	
North West	Northwestern	0	0	0	0	
ĕ≥	Thunder Bay District	0	0	0	0	
	TOTAL NORTH WEST	0	0	0	0	
+	Algoma	0	0	0	0	
Eas	North Bay Parry Sound District	0	0	0	0	
North East	Porcupine	0	0	0	0	
2	Sudbury & District	0	0	0	0	
	Timiskaming TOTAL NORTH EAST	0 0	0	0 0	0	
	Eastern Ontario	0	0 0	0	0 0	
	Hastings & Prince Edward Counties	0	0	0	0	
Ľ,	Kingston, Frontenac, Lennox & Addington	0	0	0	0	
Eastern	Leeds, Grenville & Lanark	0	0	0	0	
Щ	Ottawa	0	0	0	0	
	Renfrew	0	0	1	1	
	TOTAL EASTERN	0	0	1	1	
	Durham Region	0	0	0	0	
ast	Haliburton, Kawartha, Pine Ridge District	0	0	0	0	
<u>ж</u> Ш	Peterborough County-City	0	0	0	0	
Central East	Simcoe Muskoka District	1	0	0	1	
రి	York Region	0	0	0	0	
	Peel Region	0	0	0	0	
	TOTAL CENTRAL EAST	1	0	0	1	
Toronto	Toronto	0	0	0	0	
	TOTAL TORONTO	0	0	0	0	
	Grey-Bruce	0	0	0	0	
	Elgin-St. Thomas	0	0	0	0	
ts ts	Huron County	0	0	0	0	
South West	Chatham-Kent	0	0	0	0	
뒫	Lambton	0	0	0	0	
Sor	Middlesex-London	1	0	0	1	
	Oxford	0	0	0	0	
	Perth District Windsor-Essex County	0 0	0 0	0 0	0 0	
	TOTAL SOUTHWEST	1	0	0	1	
	Brant	0	0	0	0	
+-	Haldimand-Norfolk	0	0	0	0	
Nes	Hamilton	1	0	0	1	
<u>ia</u>	Niagara Region	0	0	0	0	
Central West	Halton Region	1	0	0	1	
ŏ	Waterloo Region	0	0	0	0	
	Wellington-Dufferin-Guelph	0	0	0	0	
	TOTAL CENTRAL WEST	2	0	0	2	

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)

Cumulative* confirmed[†] cases of influenza by health unit & health region, September 1, Table 3: 2005 to January 28, 2006.

Region	Health Unit				
Region	Health Offit	Influenza A	Influenza B	Unspecified [‡]	TOTAL
North West	Northwestern	0	1	0	1
žš	Thunder Bay District	0	0	0	0
	TOTAL NORTH WEST	0	1	0	1
	Algoma	0	0	0	0
a	North Bay Parry Sound District	0	0	0	0
North East	Porcupine	0	1	0	1
<u>o</u>	Sudbury & District	0	0	0	0
Z	Timiskaming	0	0	0	0
	TOTAL NORTH EAST	0	1	0	1
	Eastern Ontario	0	0	0	0
_	Hastings & Prince Edward Counties	0	0	0	0
er	Kingston, Frontenac, Lennox & Addington	1	0	0	1
Eastern	Leeds, Grenville & Lanark	3	0	0	3
ш	Ottawa	1	0	0	1
	Renfrew	0	0	1	1
	TOTAL EASTERN	5	0	1	6
	Durham Region	0	0	0	0
ast	Haliburton, Kawartha, Pine Ridge District	2	0	0	2
Ш́	Peterborough County-City	0	0	1	1
Central East	Simcoe Muskoka District	4	0	0	4
e L	York Region	0	3	0	3
0	Peel Region	1	0	0	1
	TOTAL CENTRAL EAST	7	3	1	11
Toronto	Toronto	8	0	0	8
	TOTAL TORONTO	8	0	0	8
	Grey-Bruce	0	0	0	0
	Elgin-St. Thomas	1	0	0	1
#	Huron County	2	0	0	2
Še	Chatham-Kent	0	0	1	1
South West	Lambton	0	0	0	0
ort	Middlesex-London	2	0	0	2
ν̈	Oxford	0	0	0	0
	Perth District	1	1	0	2
	Windsor-Essex County	0	0	0	0
	TOTAL SOUTHWEST	6	1	1	8
	Brant	0	0	0	0
st	Haldimand-Norfolk	0	0	0	0
Central West	Hamilton	4	2	0	6
<u>.</u>	Niagara Region	0	0	1	1
nt.	Halton Region	6	0	0	6
ပိ	Waterloo Region	2	2	0	4
	Wellington-Dufferin-Guelph	0	0	0	0
	TOTAL CENTRAL WEST	12	4	1	17

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)

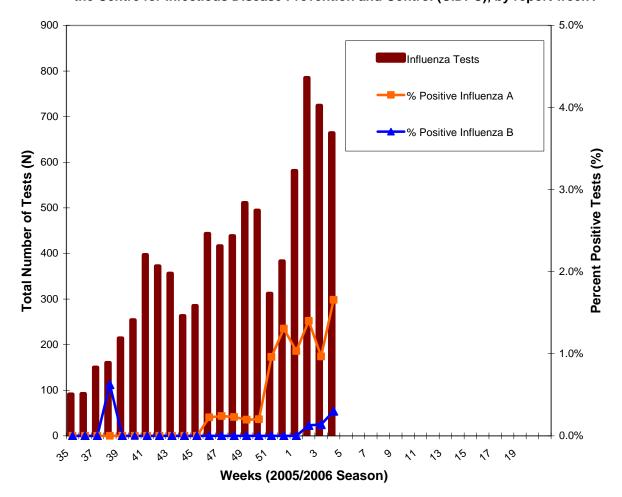
Influenza Subtype(s):

During Week 4, 2,579 isolates were received by the Public Health Agency of Canada, with a total of 97 and 110 testing positive for influenza A and B respectively. The majority of the influenza A isolates (47) were from British Columbia (48.5%), Alberta 26(26.8%) and Ontario 11(11.3%). The majority of the influenza B isolates (55) were from Alberta (50.0%), British Columbia 37 (33.6%) and Saskatchewan 15 (13.6%).*

Since the start of the 2005-2006 influenza season, the National Microbiology Laboratory (NML) has antigenically characterized 125 influenza viruses: 74 A/California/07/2004(H3N2)-like viruses (49 in British Columbia, 6 in Alberta, 3 in Saskatchewan & 16 in Ontario), 1 A/New Caledonia/20/1999(H1N1)-like virus (Quebec), 47 B/Hong Kong/330/2001-like viruses (3 in the Yukon, 1 in British Columbia, 35 in Alberta, 6 in Saskatchewan & 2 in Ontario) belonging to the B/Victoria/2/1987 lineage, and 3 B/Shanghai/361/2002-like viruses (British Columbia, Alberta & Ontario) belonging to the B/Yamagata/16/1988 lineage.**

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.

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

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

^{*} These data have been obtained from the Respiratory Virus Detection table of Public Health Agency of Canada for week 4, 2006

^{**} These data have been obtained from Flu Watch report of Public Health Agency of Canada for week 3, 2006

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

Table 4: Institutional respiratory outbreaks in Ontario, September 1, 2005 to January 28, 2006

New Outbreaks*	N	% (of outbreaks)		
Influenza A	2	15.4		
Influenza B	0	0.0		
Influenza A and B	0	0.0		
Parainfluenza (All types)	0	0.0		
Other organisms	0	0.0		
No organism identified	11	84.6		
TOTAL	13	100		
Total Respiratory Infection Outbreaks, Season to Date**	N	% (of outbreaks)		
Influenza A	8	2.5		
Influenza B	0	0.0		
Influenza A and B	0	0.0		
Parainfluenza (All types)	25	7.9		
Other organisms	53	16.8		
No organism identified	230	72.8		
TOTAL	316	100		
Types of Institutions (All Outbreaks)	N	% (of outbreaks)		
Long-Term Care Homes	266	84.2		
Hospitals	11	3.5		
Retirement Homes	36	11.4		
Other	3	0.9		
TOTAL	316	100		
Outbreak Related Complications (All Outbreaks)	N	% (of cases)		
Deaths				
Residents	90	2.5		
Staff	0	0.0		
Pneumonia (Chest x-ray confirmed)				
Residents	161	4.4		
Staff	9	0.7		
Hospitalizations				
5 11 1				
Residents	203	5.6		

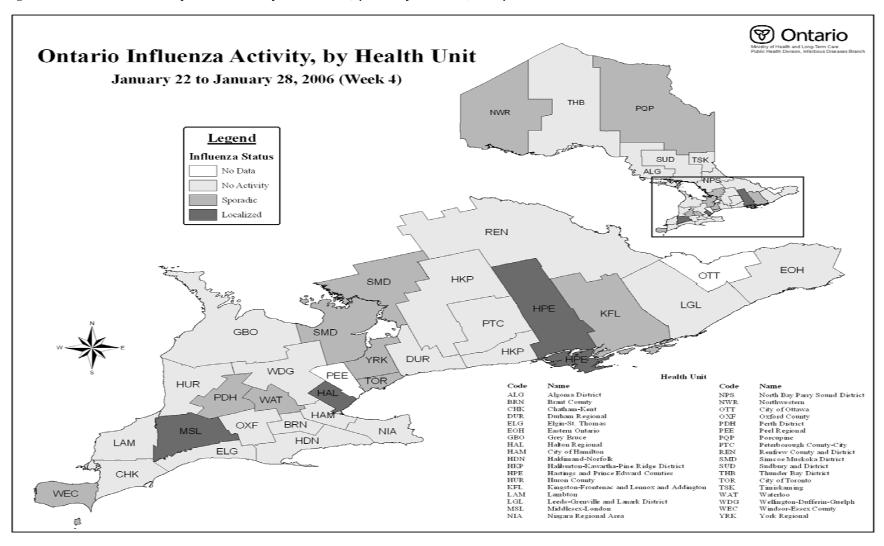
SOURCE: MOHLTC [Provincial Appendix D and Appendix E Database]

^{**} Season to date includes all outbreaks in which the date of onset of the first case occurred between September 1, 2005 and January 28, 2006.

New outbreaks are those in which the date of onset of the first case occurred in the current surveillance period (January 22 to

^{28, 2006).}

Figure 2: Influenza activity* in Ontario by health unit, (January 22 to 28, 2006).

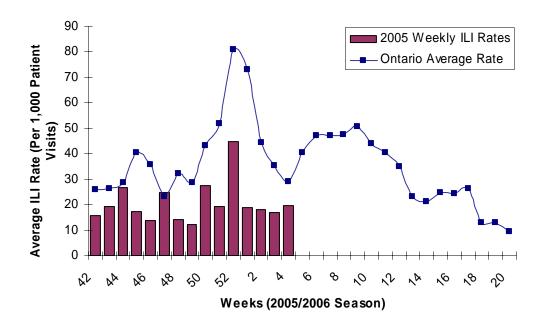


SOURCE: MOHLTC [Provincial Influenza Activity Report (Appendix C) Database]

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^{*} 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 rate (per 1,000 patient visits) reported by sentinel physicians* in Ontario in 2006, 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.

Postal Code	0 – 4	5 – 19	20 – 64	65 +	Unknown
K0C1A0	0	1	0	1	0
K2P1V3	0	0	0	0	0
K1J9M2	0	0	0	0	0
K2P1V3	0	0	Ō	0	0
K7H2W6	0	0	0	0	0
K7L1E9	Ö	Ö	Õ	Ö	Ö
K0L1C0	Õ	Õ	Õ	Õ	Õ
K0L1H0	Õ	Õ	Õ	Ő	Õ
K0M1A0	Õ	0	Õ	Ö	Ö
L1B1H8	0	0	0	0	0
L4L4Y7	0	0	0	0	0
L4J7Y3	0	0	0	0	0
L4G3W3	0	0	0	0	0
M5M1B2	0	0	0	0	0
M4X1W4	0	0	0	0	0
M6G4A1	0	0	1	0	0
M4E1V8	0	0	1	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
M9W6N5	0	0	0	0	0
M9W4L6	2	1	1	0	0
M8V2Z5	0	0	0	0	0
L5J2W4	0	0	0	0	0
L5G3H5	0	0	0	0	0
L4Y2N8	0	0	0	0	0
L9W1G2	0	0	0	0	0
N1H4G2	0	0	0	0	0
L7R1M6	0	0	0	0	0
L9H1V1	0	0	0	0	0
L9H2G2	0	0	1	0	0
L0R1H0	0	0	0	0	0
L2E1Y3	0	0	1	0	0
L0R1B0	1	0	2	0	0
N3C2E2	0	0	0	0	0
N2G1P2	0	0	0	0	0
N2M3B5	2	0	2	0	0
N5C1G5	0	0	0	0	0
N0R1G0	0	0	0	0	0
N8X2G3	1	0	1	0	0
N0M1T0	0	0	0	0	0
N6C2R5	0	0	0	0	0
N0M1L0	0	0	2	0	0
N0G1L0	0	0	0	0	0
N0C1E0	0	0	0	0	0
L4R4P4	Ö	Ö	Ö	Ö	Ö
K0J1B0	0	0	0	0	0
P0H2H0	Ö	Ö	Ö	Ö	Ö
P0A1C0	Ö	0	Ö	Ö	Ö
P0P1S0	Ö	Ö	Ö	1	Ö
P3E5V5	0	0	Ö	0	0
P4N1C6	Ŏ	Õ	Ö	ő	Ö
P0T2E0	4	Ö	2	0	Ö
P0W1E0	0	ő	0	Ő	ő
P9N3W7	0	0	0	0	0
P8N2Z6	Ö	ő	0	0	Ö
ILI Sum	10	2	14	2	0
ILI Consultation		-	• •	_	ŭ
Rate (per 1,000	102.0	13.5	17.6	5.1	0.0
patient visits)	102.0	10.0	17.0	5.1	0.0

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

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

FURTHER INFORMATION

- 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/
- United States Centers for Disease Control and Prevention www.cdc.gov/flu/

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 <u>AND</u> laboratory-confirmed influenza* with NO outbreaks detected within the influenza surveillance region†

Localized: sporadically occurring ILI <u>AND</u> 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 <u>AND</u> 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)

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.

^{*} 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