

## **WEEKLY NEW BRUNSWICK INFLUENZA REPORT**

Reporting period: September 11, 2011 – September 24, 2011 (weeks 37 & 38)

### **Summary**

#### **In New Brunswick, low influenza activity for weeks 37 & 38 and within expected levels**

##### **New Brunswick:**

- There have been no positive influenza detections during weeks 37 & 38, consistent with baseline levels.
- The ILI consultation rate in week 38 was lower than week 37 and within the expected range for this time of year.
- No ILI or influenza outbreaks were reported in weeks 37 & 38, consistent with baseline levels.

##### **Canada:**

- Influenza activity continues at low inter-seasonal levels with few detections of influenza in weeks 37 & 38. Three regions in Quebec and British Columbia reported sporadic influenza activity in weeks 37 & 38, similar to previous 2 weeks. An increase in detections of rhinovirus was observed during the 2-week period.
- Four influenza detections were reported in weeks 37 & 38, similar to weeks 35 & 36.
- The ILI consultation rate was low but within seasonal range. No outbreaks were reported in weeks 37 & 38.

**Note: The weekly New Brunswick influenza reports will resume on October 24, 2011 (week 41).**

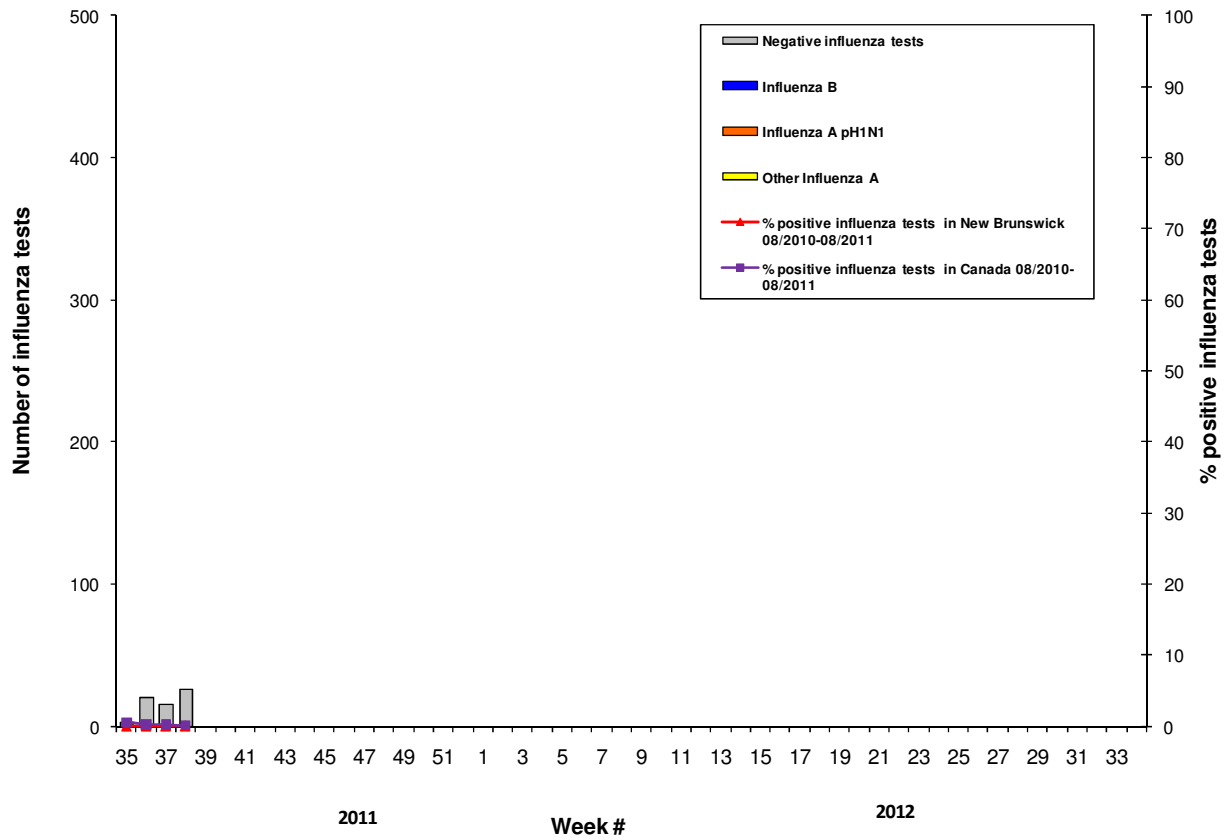
#### **1) Influenza Laboratory Data<sup>1</sup>**

- Overall influenza activity remains low in weeks 37 & 38.
- No influenza detections were reported during that period.
- Since the beginning of the season, no positive influenza detections have been reported.

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<sup>1</sup> Surveillance specimens are submitted by recruited New Brunswick Sentinel Practitioner Influenza Network (NB SPIN) practitioners, which are comprised of 7 sites in Emergency Rooms, 5 sites in Family Practice, 3 sites in First Nations communities, 1 site in a Nursing Home, 3 sites in Universities and 8 sites in Community Health Centers. Diagnostic specimens are submitted by physicians in the community/hospital setting. Influenza laboratory data is comprised of results from surveillance and diagnostic specimens. All laboratory specimens are tested using a real-time PCR assay, which is a rapid detection method designed for detection of all known variants of influenza A and B. All laboratory-confirmed cases are reported for the week when laboratory confirmation was received.

**Graph 1:** Number and percent of positive influenza specimens in New Brunswick, by week, up to September 24, 2011 (data source: G. Dumont lab results)



**Table 1: Positive influenza test results by Health Region in New Brunswick up to September 24, 2011 (data source: G. Dumont lab results)**

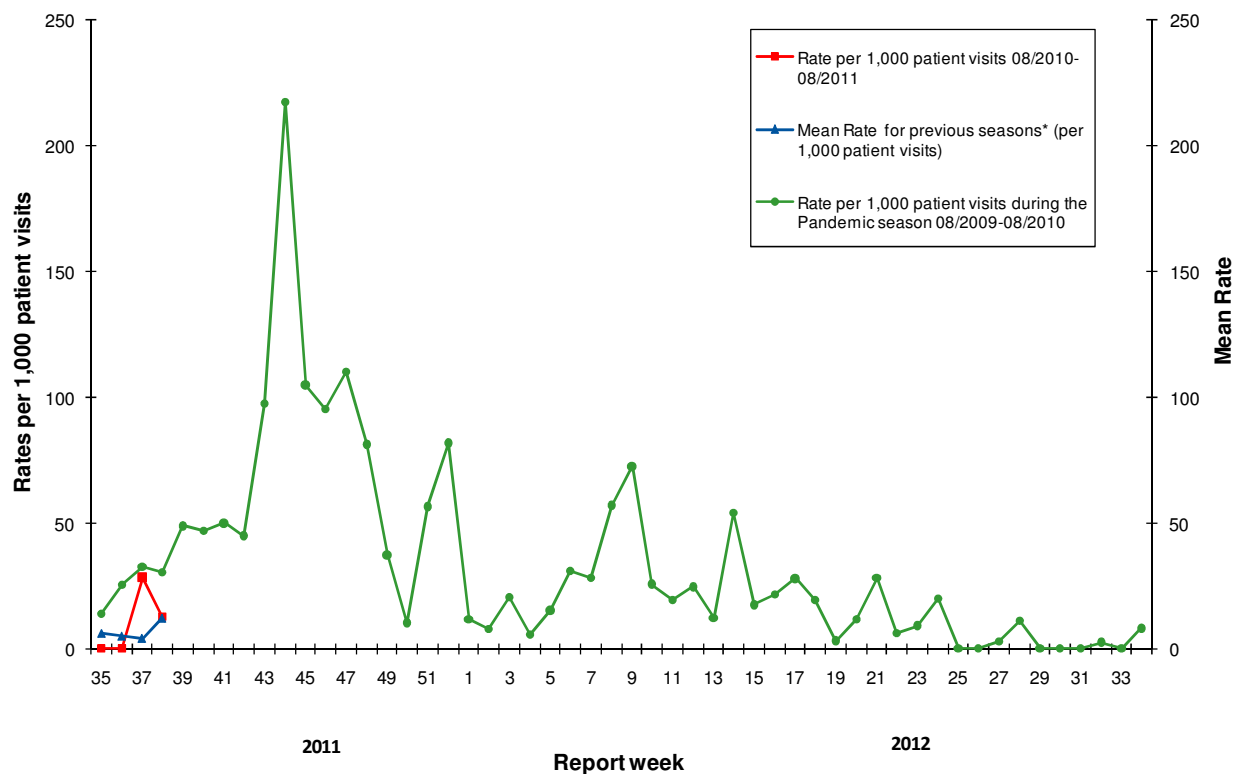
Region	Reporting period:						Cumulative: (2011/2012 season)					Cumulative: (2010/2011 season)		
	September/11/2011–September/24/2011						Aug./28/2011 –Sept./24/2011					Aug./29/2010 – Aug./27/2011		
	Activity level <sup>2</sup>	A				B	A				B	A		B
A(H1)		A(H3)	pH1N1	unsubtyped		A(H1)	A(H3)	pH1N1	unsubtyped		Non-pH1N1	pH1N1		
Region 1	No activity	0	0	0	0	0	0	0	0	0	0	433	56	29
Region 2	No activity	0	0	0	0	0	0	0	0	0	0	57	2	13
Region 3	No activity	0	0	0	0	0	0	0	0	0	0	112	16	19
Region 4	No activity	0	0	0	0	0	0	0	0	0	0	79	58	56
Region 5	No activity	0	0	0	0	0	0	0	0	0	0	26	3	1
Region 6	No activity	0	0	0	0	0	0	0	0	0	0	46	27	5
Region 7	No activity	0	0	0	0	0	0	0	0	0	0	32	3	3
Total NB		0	0	0	0	0	0	0	0	0	0	785	165	126

<sup>2</sup> Influenza activity level definition is available on the PHAC FluWatch website: <http://www.phac-aspc.gc.ca/fluwatch/11-12/def11-12-eng.php>

## 2) ILI Consultation Rates<sup>3</sup>

- During week 38, the ILI consultation rate was 12.8 consultations per 1,000 patient visits, a lower rate than week 37 (28.5 consultations per 1,000 patient visits) and within the expected levels for this time of year.
- During week 38, the sentinel response rate was 50% for the FluWatch sentinel physicians and 32% for the NB SPIN practitioners. (6 FluWatch and 6 NB SPIN)

**Graph 2:** ILI Consultation Rates in New Brunswick, by report week, season 2011/12 compared to previous seasons\*



\* The mean rate was based on data from the 1996/97 to 2010/2011 seasons and excludes the Pandemic season (2009-2010).

<sup>3</sup> A total of 31 practitioner sites (12 FluWatch sentinel physicians and 19 NB SPIN sites) are recruited this season to report the number of ILI patients and total patient consultations one day during a reporting week.

### 3) ILI and Laboratory-Confirmed Outbreak Data

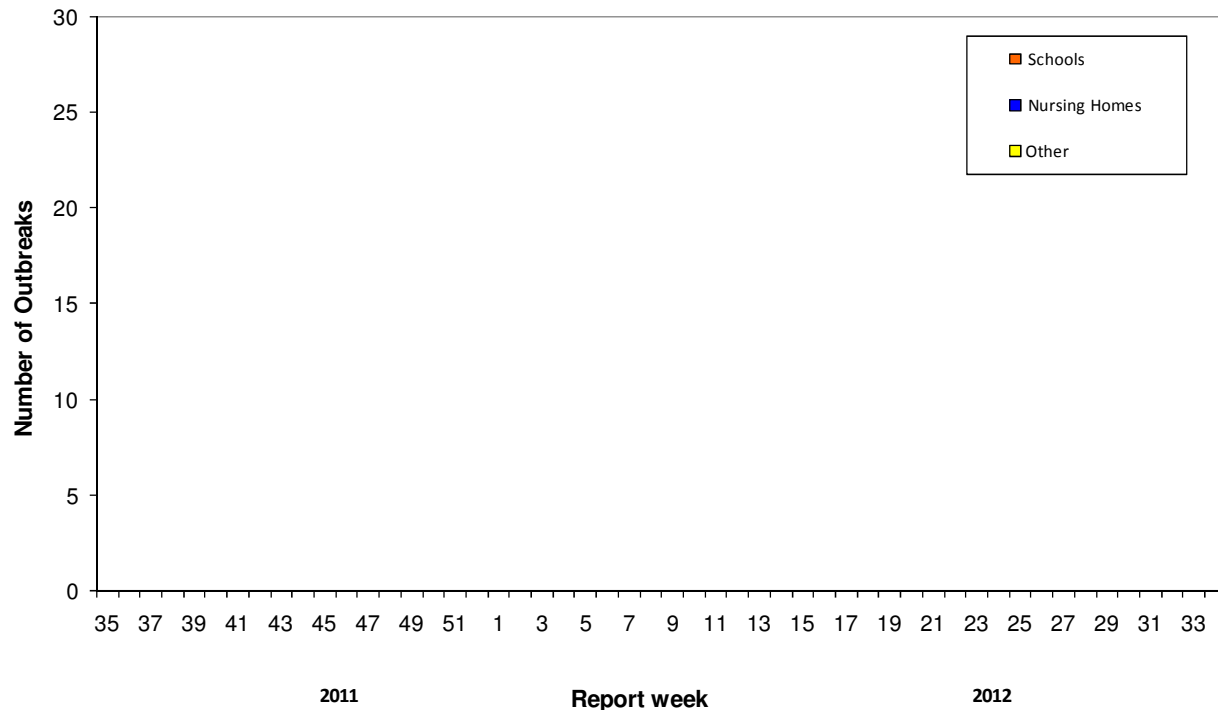
Table 2: ILI activity/outbreaks in New Brunswick nursing homes and schools for the reporting week, current and previous seasons.

	Reporting period: September/11/2011 –September/24/2011			Cumulative # of outbreaks season 2011-2012	Cumulative # of outbreaks season 2010-2011
	Lab-confirmed outbreaks in Nursing Homes*	Schools reporting ILI outbreaks**	Lab-confirmed outbreaks in Other Settings*		
Region 1	0 out of 13	0 out of 74	0	0	17
Region 2	0 out of 15	0 out of 81	0	0	21
Region 3	0 out of 14	0 out of 95	0	0	12
Region 4	0 out of 6	0 out of 22	0	0	12
Region 5	0 out of 2	0 out of 18	0	0	17
Region 6	0 out of 9	0 out of 35	0	0	10
Region 7	0 out of 4	0 out of 27	0	0	22
Total NB	0 out of 63	0 out of 352	0	0	111

\*Two or more ILI cases within a seven day period, including at least one laboratory-confirmed case of influenza. Outbreaks are reported in the week when laboratory confirmation is received.

\*\*Schools reporting greater than 10% absenteeism (or absenteeism that is higher (e.g. >5-10%) than expected level as determined by school or Public Health Authority) which is likely due to ILI.

**Graph 3: Number of Influenza Outbreaks in Nursing Homes<sup>1</sup> and ILI Outbreaks in Schools<sup>2</sup> reported to Public Health in New Brunswick, by report week, season 2011/12.**



<sup>1</sup> The National FluWatch definition of an outbreak in a nursing home is stated as two or more cases of ILI within a seven-day period, including at least one laboratory confirmed case.

<sup>2</sup> The National FluWatch definition of an ILI outbreak in a school is stated as absenteeism greater than 10% (or absenteeism that is higher (e.g.>5-10%) than expected level as determined by school or Public Health Authority) which is likely due to ILI.

**National Flu Watch Program** - Additional information on influenza activity in Canada and around the world is available on the Public Health Agency of Canada’s website at:

[www.phac-aspc.gc.ca/fluwatch/index.html](http://www.phac-aspc.gc.ca/fluwatch/index.html)

**Other Links:**

World-

[http://www.who.int/influenza/surveillance\\_monitoring/updates/latest\\_update\\_GIP\\_surveillance/en/index.html](http://www.who.int/influenza/surveillance_monitoring/updates/latest_update_GIP_surveillance/en/index.html)

Europe: [http://www.euroflu.org/cgi-files/bulletin\\_v2.cgi](http://www.euroflu.org/cgi-files/bulletin_v2.cgi) and

[http://www.ecdc.europa.eu/en/healthtopics/seasonal\\_influenza/epidemiological\\_data/Pages/Weekly\\_Influenza\\_Surveillance\\_Overview.aspx](http://www.ecdc.europa.eu/en/healthtopics/seasonal_influenza/epidemiological_data/Pages/Weekly_Influenza_Surveillance_Overview.aspx)

PAHO: [http://new.paho.org/hq/index.php?option=com\\_content&task=blogcategory&id=805&Itemid=569](http://new.paho.org/hq/index.php?option=com_content&task=blogcategory&id=805&Itemid=569)

Australia: <http://www.health.gov.au/internet/main/publishing.nsf/Content/cda-surveil-ozflu-flucurr.htm>

New Zealand: [http://www.surv.esr.cri.nz/virology/influenza\\_weekly\\_update.php](http://www.surv.esr.cri.nz/virology/influenza_weekly_update.php)

Argentina: <http://www.msal.gov.ar/archivos/INFORME%20INFLUENZA%20PANDÉMICA%20 H1N1 %2005-08-2009.pdf>

South Africa: <http://www.nicd.ac.za/>

US: [www.cdc.gov/flu/weekly/](http://www.cdc.gov/flu/weekly/)