

2019-2020 Community Influenza Surveillance Report Update of Current Status November 27th, 2019

Overall Assessment

While the first local case of influenza has been reported, the current level of influenza activity in London and Middlesex County is low. Other regions of Ontario are also reporting sporadic influenza activity, with both influenza A and influenza B cases being reported.

Analysis and Action

The influenza season in Ontario has begun. If they haven't done so already, local residents are encouraged to get their seasonal influenza vaccine as soon as possible, well in advance of peak influenza activity.

Regardless of the level of local influenza activity, there are a number of easy-to-follow steps that local residents can take to avoid becoming sick throughout the year. While washing your hands with soap and warm water, or using an alcohol-based hand sanitizer, remain effective ways to prevent many illnesses, including influenza, local residents should also cover their coughs and sneezes, clean and disinfect high-touch surfaces frequently, and stay home when they feel sick.

Details of Current Local Activity

Between November 17th and November 23rd there was one laboratory-confirmed case of influenza A reported to the Middlesex-London Health Unit.

Appendix A provides more detail about laboratory-based influenza activity indicators for the current reporting week, as well as other local indicators of respiratory illness.

Provincial and National Comparison

In this week's *Ontario Respiratory Pathogen Bulletin*, Public Health Ontario states that influenza activity across the province is low, but higher when compared to what had been reported the previous week. Both influenza A and influenza B have been identified in the most recent week of influenza surveillance.

In this week's *FluWatch*, the Public Health Agency of Canada reports that while 32% of cases identified in the most recent week were influenza B, the most commonly identified influenza strain so far this season is influenza A, with 77% of subtyped specimens being the A(H3N2) strain. The greatest percentage of influenza A(H3N2) cases (45%) have been among those aged 65 and over, while 87% of influenza B cases have been among those under the age of 45.

- The latest Ontario Respiratory Pathogen Bulletin, issued by Public Health Ontario (PHO), is available at <u>https://www.publichealthontario.ca/en/data-and-analysis/commonly-used-products/respiratory-pathogens-weekly</u>
- The latest *FluWatch* report, issued by the Public Health Agency of Canada (PHAC), is available at http://www.phac-aspc.gc.ca/fluwatch/

Appendix A Summary of Community Influenza Surveillance Indicators for Middlesex-London November 17th to November 23rd, 2019

Table 1: Summary of laboratory-based influenza activity i	indicators, Middlesex-London and Ontario, 2019-2020 influenza surveillance season
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Indicator	Reporting Period	Number Reported: Current Reporting Period	Number Reported: Year to Date (from September 1, 2019)	Recent Trends
Laboratory-confirmed cases ^{1, 4}	Nov. 17-23 (week 47) ²	Influenza A – 1 case Influenza B – 0 cases	Influenza A – 1 case Influenza B – 0 cases	Influenza A: Higher than the previous week (Nov. 10- 16) when no cases were reported.
				Influenza B: Same as the previous week (Nov. 10-16) when no cases were reported.
Influenza sub-types ¹	Nov. 17-23	Influenza A (H3) – 0 cases Influenza A (H1N1)pdm09 – 1 case Influenza A not yet subtyped – 0 cases	Influenza A (H3) – 0 cases Influenza A (H1N1)pdm09 – 1 case Influenza A not yet subtyped – 0 cases	
Hospitalizations ^{1, 5}	Nov. 17-23	0	0	Same as the previous week (Nov. 10-16) when no hospitalizations were reported.
Deaths ^{1, 5}	Nov. 17-23	0	0	Same as the previous week (Nov. 10-16) when no deaths were reported.
Influenza outbreaks in long- term care homes/retirement homes/acute care	Nov. 17-23	Influenza A – 0 outbreaks Influenza B – 0 outbreaks	Influenza A – 0 outbreaks Influenza B – 0 outbreaks	Influenza A: Same as the previous week (Nov. 10-16) when no outbreaks were reported. Influenza B: Same as the previous week (Nov. 10-16) when no outbreaks were reported.
Percentage of samples that are positive for influenza (Ontario) ³	Nov. 10-16 (week 46) ²	Influenza A – 1.4% positivity Influenza B – 0.4% positivity	N/A	Influenza A: Higher than 0.8% positivity reported the previous week (Nov. 3-9). Influenza B: Similar to 0.2% positivity reported the previous week (Nov. 3-9).

Notes:

1 Numbers are subject to change week by week due to the retrospective nature of reporting.

2 Weekly influenza monitoring often uses numbered weeks from 1 to 52 weeks per year. A reference week calendar can be found at https://www.canada.ca/en/public-health/services/diseases/flu-influenza/influenza-surveillance/fluwatch-weeks-calendar.html

3 Public Health Ontario, Ontario Respiratory Pathogen Bulletin 2019-2020

4 The week cases are reported to the Health Unit may not be the same as week of illness onset.

5 The week hospitalizations and deaths are reported to the Health Unit may not be the same as the week in which they occurred, or the same as the week of illness onset.

Table 2: Summary of community-based respiratory illness indicators, Middlesex-London, 2019-2020 influenza surveillance season

Indicator	Reporting	Number Reported:	Recent Trends
	Period	Current Reporting Period	
Hospital emergency room reports regarding the percentage of patients with	Nov. 17-23	An average of 7.7% of patients presented with fever and respiratory symptoms.	Higher than 6.4% reported the previous week (Nov. 10-16).
fever and respiratory illness		The proportion was highest at the pediatric emergency department, where 23.5% of patients presented with a fever and respiratory symptoms.	Higher than 20.8% reported the previous week (Nov. 10-16).
Absence reports from elementary schools (i.e., absenteeism > 10%)	Nov. 18-22	Sixteen elementary schools from one school board reported average absenteeism (due to all causes) exceeding 10%.	Higher than the previous week (Nov. 11-15) when 15 elementary schools reported increased absenteeism.

The Middlesex-London Health Unit gratefully acknowledges the contributions of the following community partners who provide data for this report: London Health Sciences Centre St. Joseph's Health Care London Thames Valley District School Board

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