## INFLUENZA IN MANITOBA - 2010/2011 SEASON

# Cases reported up to December 11, 2010

The public health disease surveillance system of Manitoba Health received its first laboratory-confirmed positive case of influenza for the 2010/2011 season (running from July 1, 2010 to June 30, 2011) during Week 39, September 26 – October 2, 2010. This season there have been **106** laboratory-confirmed cases of Influenza A and **0** lab-confirmed cases of Influenza B in the province.

## LABORATORY-CONFIRMED INFLUENZA

- > Reports from Cadham Provincial Laboratory (CPL) are forwarded to the public health disease surveillance system of Manitoba Health weekly.
- > The number of positive cultures is an underestimate of the total number of cases, since not all persons with influenza seek medical attention, and of those that do, not all are cultured for the virus
- ➤ Information contained within this update is based on positive lab reports confirmed on or before December 11, 2010. The date the laboratory specimen is taken is used to assign cases to the appropriate week/month.

#### INFLUENZA A

- There have been 106 cases of Influenza A reported this season in Manitoba.
- Refer to Table 1 for a summary of cases by Regional Health Authority (RHA) and week of specimen collection and Table 3 for a summary of cases by age group.
- Refer to Figure 1 for an illustration of the number of laboratory-confirmed cases of Influenza A by month in Manitoba, 2003/2004-2010/2011.

#### **INFLUENZA B**

- There have been 0 cases of Influenza B reported this season in Manitoba.
- > Refer to **Table 2** for a summary of cases by Regional Health Authority (RHA) and week of specimen collection and **Table 3** for a summary of cases by age group.
- Refer to **Figure 2** for an illustration of the number of laboratory-confirmed cases of Influenza B by month in Manitoba, 2003/2004-2010/2011.

#### REPORTS OF INFLUENZA-LIKE ILLNESS OUTBREAKS

- > ILI outbreaks are defined as:
  - Schools: 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.
  - <u>Hospitals and Residential institutions</u>: two or more cases of ILI within a seven-day period, including at least one laboratory confirmed case.
  - Other settings: two or more cases of ILI within a seven-day period, including at least one laboratory confirmed case; i.e. workplace, closed communities.
- These outbreaks of influenza must be accompanied by a positive influenza lab report to be counted. The outbreak-related cases reflected on tables and figures within this report are labconfirmed. Most outbreak-related cases are not lab-confirmed.

As of December 11, 2010, there were **four** regional outbreaks of lab-confirmed Influenza A reported to the public health disease surveillance system for the 2010-2011 season (a community outbreak in Burntwood RHA, a workplace outbreak in Winnipeg RHA, and two personal care home outbreaks in Winnipeg RHA). There were no lab-confirmed outbreaks of Influenza B reported.

### **NATIONAL FLUWATCH PROGRAM**

Manitoba Health participates in the National FluWatch Program coordinated by the Public Health Agency of Canada and the College of Family Physicians of Canada. In addition to laboratoryconfirmation of influenza, this program relies on weekly reports of influenza-like illness (ILI) as reported by 22 current Manitoban sentinel physicians. These sentinels reflect cases found in eight regional health authorities.

- Manitoba Health receives weekly reports from the Public Health Agency of Canada presenting the provincial ILI rate and the specific data for each of the participating sentinel physicians. Not all sentinel physicians participate in the program each week, and 8 of the 22 sentinels participate in swabbing for influenza with their ILI patients.
- For the 2010/2011 season, ILI in the general population is defined as: Acute onset of respiratory illness with fever and cough and with one or more of the following - sore throat, arthralgia, myalgia, or prostration which is likely due to influenza. In children under 5, gastrointestinal symptoms may also be present. In patients under 5 or 65 and older, fever may not be prominent.
- > Refer to Figure 3 for an illustration of the ILI rate and number of reporting sentinels as it relates to the number of laboratory-confirmed cases of influenza.

#### SUB-TYPING, STRAIN CHARACTERIZATION, AND ANTIVIRAL RESISTANCE

> Sub-Typing: The following summarizes the breakdown of influenza by type and sub-type, as reported by CPL:

A/H1N1	A/H3N2	A unsubtyped	A Total
0	52	54	106

- Strain Characterization: Since September 1<sup>st</sup>, 2010, National Microbiology Laboratory (NML) reports that it has antigenically characterized 3 influenza viruses that were received from CPL. The Influenza A/H3N2 viruses characterized by NML were antigenically related to A/Perth/16/2009-like.
- Antiviral Resistance: Since September 1<sup>st</sup>, 2010, NML has tested for antiviral resistance on Manitoba isolates with the following results:

Influenza A/H3N2:	Resistant	Sensitive
Amantadine	4	0
Oseltamivir	0	3
Zanamivir	0	2

#### INFLUENZA-RELATED HOSPITALIZATIONS, ICU ADMISSIONS, AND DEATHS

- > Lab-confirmed report of influenza infection is required for a hospitalization, ICU admission, or death to be counted.
- > Reporting of influenza-related deaths is likely incomplete due to the possibility that cause of death may only be suspected and not lab-confirmed. Notification of deaths are reported by:

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- (a) Chief Medical Examiner;
- (b) Medical Officers of Health in the Regional Health Authorities
- (c) Infection Control Practitioners in long term care facilities

	Weekly Total	Cumulative Total
Hospitalizations:	6	12
ICU Admissions:	2	5
Deaths:	0	2

# **HEALTH LINKS – INFO SANTÉ (HL-IS)**

- ➤ HL-IS is a 24-hour, 7-days a week telephone information service staffed by registered nurses with the knowledge to provide answers over the phone to health care questions and guidance to appropriate care.
- From December 5-11, there were a total of **78 calls** made to HL-IS Influenza Service. Of these calls:

	caller(s) selected to hear the Flu Appointment option
3	caller(s) selected the Influenza Program
41	caller(s) selected Flu Management
11	caller(s) selected the Free Flu Shot Program

See Figure 4 for an illustration of the number of calls as it relates to the number of lab-confirmed cases of influenza.

For other Epidemiology and Surveillance reports, please view the Manitoba Health Internet Website: http://www.gov.mb.ca/health/publichealth/surveillance/index.html

For national surveillance data, refer to: <a href="http://www.phac-aspc.gc.ca/fluwatch/index-eng.php">http://www.phac-aspc.gc.ca/fluwatch/index-eng.php</a>

Table 1. Reported Cases of Influenza A by RHA and Week of Specimen Collection, Manitoba 2010-2011												
PHN 26/09 - 02/10 03/10 - 09/10 10/10 - 16/10 17/10 - 23/10 24/10 - 30/10 31/10 - 06/11 14/11 - 20/11 28/11 - 04/12 05/12 - 11/12												
Winnipeg	0	0	0	0	0	1	0	4	5	7	15	32
Brandon	0	0	0	0	0	0	0	0	0	0	0	0
North Eastman	0	0	0	0	0	0	0	0	0	5	2	7
South Eastman	0	0	0	0	0	0	0	0	0	0	2	2
Interlake	0	0	0	0	0	0	0	0	0	0	0	0
Central	0	0	0	0	0	0	0	0	0	0	0	0

0

0

0

0 0 0

Assiniboine

Parkland

Norman

Churchill

Burntwood

**MANITOBA** 

0 0 0 0 0 0 0 0 0 0 1 1

0 0 0 0 0 0 0 0 1 0 1 2

1 0 0 0 0 0 0 0 1 0 6 8

0 0 0 0 0 0 0 0 0 27 16 9 52

0 0 0

1 0 0 0 0 1 0 4 34

Table 2. Reported Cases of Influenza B by RHA and Week of Specimen Collection, Manitoba 2010-2011												
PHA 26/09 - 02/10 03/10 - 09/10 10/10 - 16/10 17/10 - 23/10 24/10 - 30/10 31/10 - 06/11 14/11 - 20/11 21/11 - 27/11 28/11 - 04/12 05/12 - 11/12									TOTAL			
Winnipeg	0	0	0	0	0	0	0	0	0	0	0	0
Brandon	0	0	0	0	0	0	0	0	0	0	0	0
North Eastman	0	0	0	0	0	0	0	0	0	0	0	0
South Eastman	0	0	0	0	0	0	0	0	0	0	0	0
Interlake	0	0	0	0	0	0	0	0	0	0	0	0
Central	0	0	0	0	0	0	0	0	0	0	0	0
Assiniboine	0	0	0	0	0	0	0	0	0	0	0	0
Parkland	0	0	0	0	0	0	0	0	0	0	0	0
Norman	0	0	0	0	0	0	0	0	0	0	0	0
Burntwood	0	0	0	0	0	0	0	0	0	0	0	0
Churchill	0	0	0	0	0	0	0	0	0	0	0	0
MANITOBA	0	0	0	0	0	0	0	0	0	0	0	0

Source: CDC Unit, Manitoba Health

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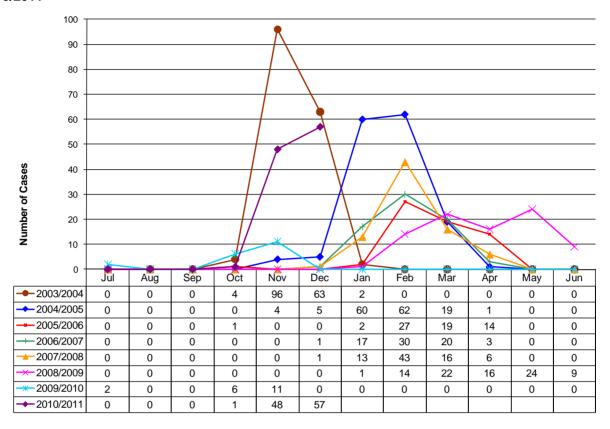
Table 3. Repo 2011	orted Cases of Infl	uenza A and B by	y Age Group, in M	anitoba 2010-		
	Influe	enza A	Influe	nza B		
Age Group	# of cases	% of total	# of cases	% of total		
<1 yrs	14	13.2%	0	0.0%		
1-4 yrs	17	16.0%	0	0.0%		
5-9 yrs	4	3.8%	0	0.0%		
10-14 yrs	7	6.6%	0	0.0%		
15-19 yrs	3	2.8%	0	0.0%		
20-24 yrs	4	3.8%	0	0.0%		
25-29 yrs	8	7.5%	0	0.0%		
30-39 yrs	19	17.9%	0	0.0%		
40-49 yrs	11	10.4%	0	0.0%		
50-59 yrs	12	11.3%	0	0.0%		
60-69 yrs	0	0.0%	0	0.0%		
70-79 yrs	2	1.9%	0	0.0%		
>79 yrs	5	4.7%	0	0.0%		
Missing	0	0.0%	0	0.0%		
TOTAL	106		0			

2

0 2

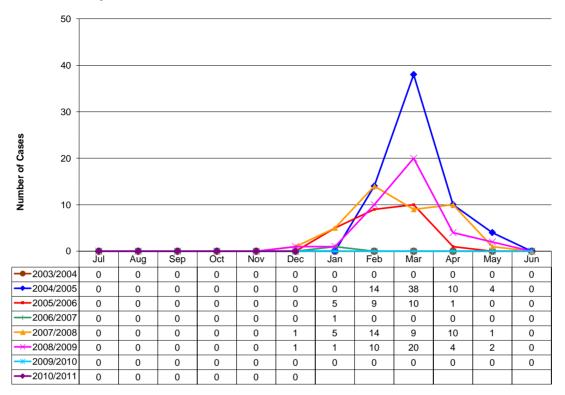
30 36 106

Figure 1. Laboratory-Confirmed Cases of Influenza A (Excluding Pandemic H1N1), 2003/2004-2010/2011\*



<sup>\*</sup> December 2010 monthly total up to December 11, 2010.

Figure 2. Laboratory-Confirmed Cases of Influenza B, 2003/2004-2010/2011\*



<sup>\*</sup> December 2010 monthly total up to December 11, 2010.

Figure 3. Influenza-Like Illness (ILI) Rate, Number of Influenza A and B Cases by Week of Specimen Collection, and Number of Sentinels Participating in FluWatch, 2010-2011 Season by Week

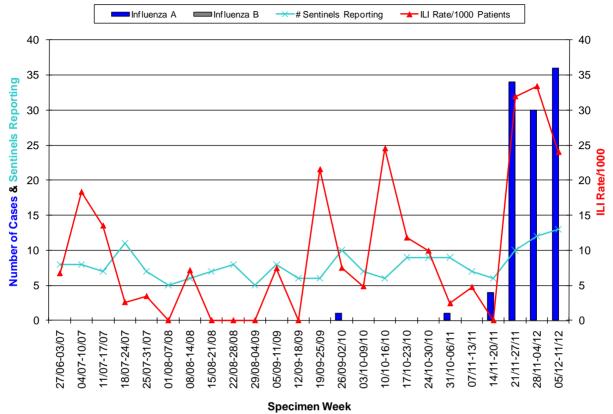
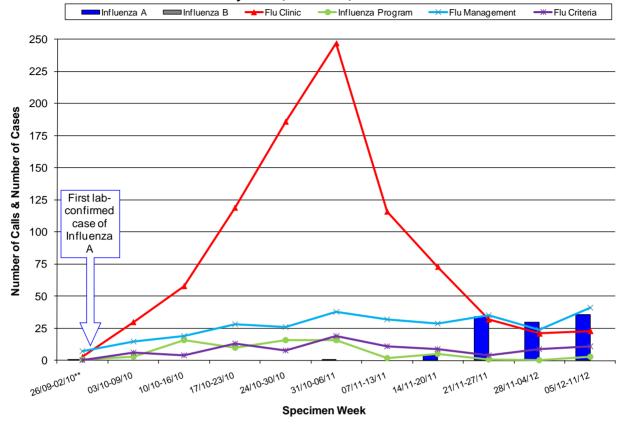


Figure 4. Number of Calls to Health Links – Info Santé Influenza Service by Type of Enquiry\* and Number of Influenza A and B Cases by Week, Manitoba, 2010/2011 Influenza Season



\* Influenza Program
Flu Management
Flu Shot Criteria
Flu Clinic

The number of calls where the caller selected the Influenza Program
The number of calls where the caller selected the Flu Management
The number of calls where the caller selected the Free Flu Shot Program
The number of calls where the caller selected to hear the Flu Appointment option

<sup>\*\*</sup> Number of calls to Health Links – Info Santé available for October 1-2 only (2010-2011 Health Links – Info Santé Seasonal Influenza Service was launched on October 1, 2010).