

- The proportion of patients visiting sentinel physicians for influenza-like-illness was **6.1%** (up slightly from **4.9%** last week)

Outpatient ILL (sentinels)



- This week there were **0** cases of influenza A and **2** cases of influenza B reported
- A total of **9** cases of influenza A and **4** cases of influenza B have been reported since the start of the current influenza season
- Cadham Provincial Laboratory has detected a variety of respiratory viruses this week, with no dominant type identified

Laboratory



- There were **2** hospitalizations associated with a laboratory-confirmed diagnosis of influenza reported this week, **1** ICU admission and **0** deaths.
- There have been **5** hospitalizations, of which **1** resulted in ICU admission, this season
- So far this season, **0** Manitobans with laboratory-confirmed influenza have died

Severity



- The following regional proportions are observed among cases of influenza to date: Winnipeg (75%), Northern (8%), Prairie Mountain (0%), Southern (17%), Interlake-Eastern (0%)

Geography



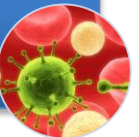
- Between Nov. 24 and Nov. 30, 2013, 20 units of oseltamivir were dispensed from community retail pharmacies.
- The total number of units dispensed since November 1, 2013 was 70

Treatment



- No Manitoba isolates have been tested for antiviral resistance yet this season

Antiviral Resistance



- Manitoba's influenza activity, as estimated by Google search data, is **moderate**
- There were **15** calls to Health Links - Info Santé this week, which is lower than the previous week (**40** calls).

Syndromic Surveillance



- As of November 30, 2013, there have been **0** lab-confirmed outbreaks of influenza reported this season

Institutional Outbreaks



- As of November 1, 2013, **4.7%** of Manitobans had received the seasonal influenza vaccine.

Immunization



In Summary

- There were 0 laboratory-confirmed cases of influenza A and 2 cases of influenza B reported last week.

Surveillance Measures

1. Laboratory Surveillance

Reports of influenza nucleic acid detection, culture isolation, and enzyme immunoassay (EIA) detections are received from Cadham Provincial Laboratory (CPL) and occasionally other laboratories, and are forwarded to the Public Health Surveillance (PHS) Unit within 24 hours of confirmation.

CPL performs testing for other respiratory viruses including parainfluenza, RSV, adenovirus, rhinovirus, coronavirus, enterovirus, and bocavirus. The total number of other respiratory viruses detected are reported to PHS on a weekly basis.

This week, there were:

- 0 cases of influenza A reported;
- 2 cases of influenza B reported.

Since the beginning of this season, there have been:

- 9 cases of influenza A reported;
- 4 cases of influenza B reported.

2. Outpatient ILI (Sentinel Physicians)

Manitoba Health participates in the National *FluWatch* Program coordinated by PHAC. In addition to laboratory-confirmation of influenza, this program relies on weekly reports of ILI as reported by 22 current Manitoban sentinel physicians in all five RHAs (Northern, Southern, Prairie Mountain, Interlake-Eastern, and Winnipeg).

The proportion of patients seen for an ILI this week was higher than last week (6.1% from 4.9%). The proportion is comparable to what was observed at the same time last season.

Manitoba Health receives weekly reports from PHAC presenting the provincial ILI rate and the specific data for each of the participating sentinel physicians. The graph below depicts the proportion of total patients who were seen for an ILI. **These numbers should be interpreted with caution as the number of sentinel physicians reporting to *FluWatch* varies from week to week and may not be representative of ILI activity across the province.**

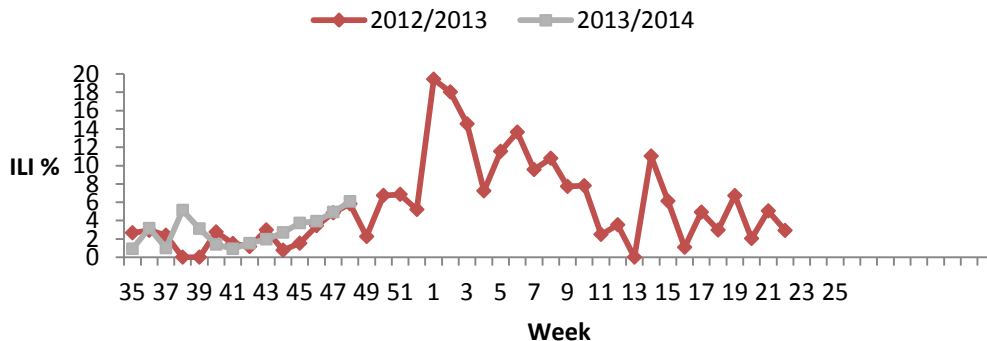


Figure 1. Proportion of patients seen for influenza-like illness as reported by *FluWatch* sentinel physicians by week for the 2012/13 and 2013/14 influenza seasons, Manitoba

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. When a caller phones HL-IS and selects the Influenza Service, they are given an option to select information on (1) the groups of individuals who are at an increased risk of serious illness, (2) how to arrange a flu shot, (3) the annual influenza immunization campaign, or (4) the management of flu and its potential complications.

This week there were 15 calls, which was lower than the previous week (40 calls). The weekly total is lower than the total observed at the same time last season.

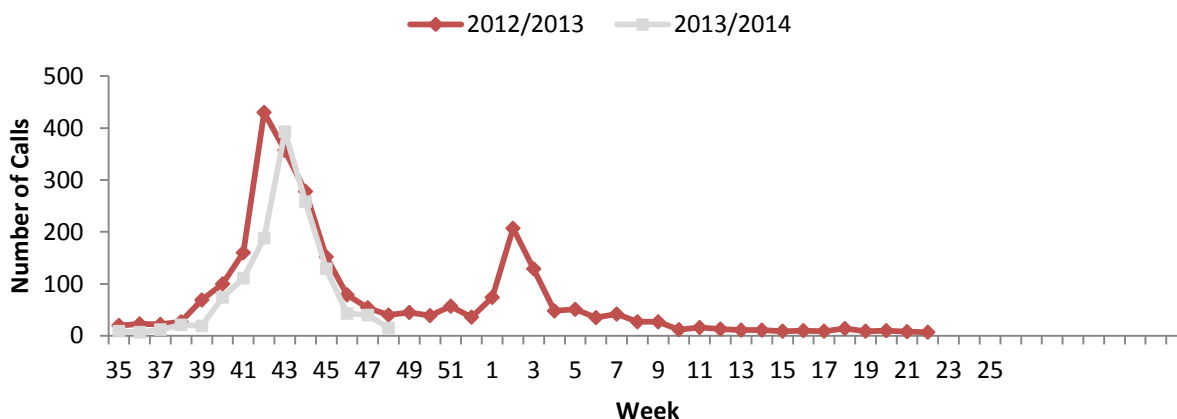


Figure 2. The number of calls to Health Links – Info Santé in the 2012/13 and 2013/14 influenza seasons, Manitoba

Severity (Clinically Severe Cases)

This season, PHAC is requesting provinces and territories to report the number of hospitalizations, ICU admissions, and deaths associated with a lab-confirmed report of influenza. The reason for hospitalization, ICU admission, or death does not have to be attributable to the influenza diagnosis in order to be included in this count. These data are collected in order to continue with the surveillance system implemented during the 2009 H1N1 pandemic to help monitor the severity/burden of illness during the influenza season.

This week there were:

- 2 hospitalizations, of which
- 1 resulted in an ICU admission; and
- 0 deaths.¹

*Since the beginning of the season, there have been:

- 5 hospitalizations, of which
- 1 resulted in an ICU admission; and
- 0 deaths.¹

There was 1 child (aged 9 or under) admitted to hospital with laboratory-confirmed influenza A or B since the start of the season.

*Hospitalized cases are reported based on laboratory report date.

¹ The reason for hospitalization, ICU admission, or death does not have to be attributable to the influenza diagnosis in order to be included in this count.

Institutional Outbreaks

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 lab-confirmed. However, most outbreak-related cases will not be lab-confirmed.

This week there were:

- 0 outbreaks of influenza A;
- 0 outbreaks of influenza B.

From the beginning of the season until Nov. 30, 2013 there have been:

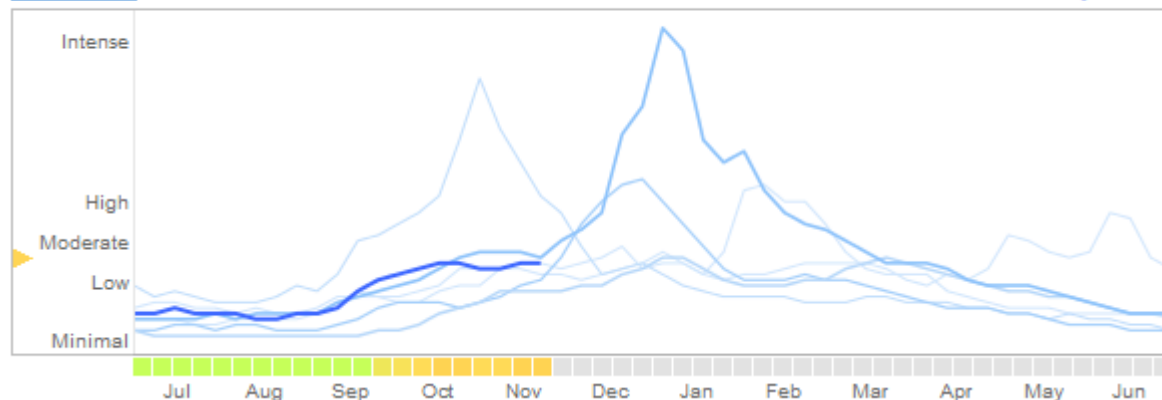
- 0 outbreaks of influenza A;
- 0 outbreaks of influenza B.

Syndromic Surveillance

[Google Flu Trends](#) uses aggregated Google search data to estimate influenza activity. As of December 6, 2013 Manitoba's influenza activity was **moderate**.

Canada > Manitoba

● 2013-2014 ● Past years ▼



Abbreviations

ACF = acute care facility
CPL = Cadham Provincial Laboratory
HL-IS = Health Links – Info Santé
PHAC = Public Health Agency of Canada
ICU = intensive care unit
ILI = influenza-like-illness
LTCF = long term care facility
NML = National Microbiology Laboratory
PHS = Public Health Surveillance
RHA = Regional Health Authority
WRHA = Winnipeg Regional Health Authority

Explanatory Notes and Definitions

Cumulative data:

Cumulative data includes updates to previous weeks; due to reporting delays or amendments, the sum of weekly report totals may not add up to cumulative totals.

Data extraction date:

Manitoba-specific information contained within this update is based on data confirmed in Manitoba's PHS Unit databases on or before **Dec 6, 2013**, the date of data extraction.

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 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.

ILI outbreaks:

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.

Hospitals and residential institutions: 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.

Specimen collection date:

The date the laboratory specimen is taken is used to assign cases to the appropriate week in this report. However, hospitalized/ICU cases are reported based on laboratory report date.

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:

<http://www.phac-aspc.gc.ca/fluwatch/index-eng.php>