

Weekly Report

January 18, 2011

The purpose of this report is to inform Public Health staff, primary care providers, acute care staff and other community practitioners about recent respiratory virus activity in the province of Alberta. Unless otherwise noted, all data presented are current as of the Saturday prior to the day the report is released.

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What's New?

- The UK and several other European countries continue to report increased numbers of severe and fatal illness attributed mostly to influenza A (H1N1) 2009. The latest WHO report states that 25% of intensive care beds in the UK are occupied by patients with influenza. The majority of the severe and fatal cases have been in people with underlying risk factors between the ages of 15 and 64 years. In addition, an alert has been issued to clinicians warning of increasing rates of bacterial infections such as Streptococcus Pneumoniae, Group A Streptococcus and Meningococcus, although the association between these infections and the current circulation of influenza are still under investigation.
- Influenza activity in the US recently decreased in several indicators. Unlike in Canada, approximately 1/3 of influenza detections in the US are type B and 2/3 are type A. Of the type A viruses sub-typed, around 86% are H3N2 and the remaining are H1N1 2009.
- In Canada, although the ILI consultation rate decreased slightly in the first week of January, the percentage of specimens that tested positive for influenza increased. Influenza A is the predominant type (around 97% of all influenza specimens identified according to the latest FluWatch report). Of those characterized this season, around 93% are H3N2 and the remaining 7% are H1N1 2009. The province of Ontario recently reported that the number of confirmed cases of influenza A (all subtypes) in that province this season is comparable to the number confirmed during the 2004-2005 influenza season, which is a relatively higher number of isolates compared to other seasons since 2004. Of note, the number of cases from the 2009-2010 season were excluded from this comparison due to its incomparability to a regular flu season as a result of the pH1N1 pandemic.
- For the first time since mid-November, the overall number of laboratory confirmed respiratory virus cases confirmed in Alberta last week decreased from the previous week. This was the trend for several respiratory viruses including RSV and influenza. Other indicators, such as emergency room/urgent care center visits for cough and respiratory related calls to Health Link Alberta are also suggesting a decrease in activity over the last week. The total number of confirmed cases of influenza in the province this season is now 196; 77.0% influenza A (H3), 14.8% influenza A (H1N1) 2009, 5.1% influenza type B, and 3.1% influenza A with unresolved sub-typing. At this point in the season, the age specific rates for confirmed cases of type A (H3), A (H1N1) and type B in infants 0 to <2 years of age are slightly higher than in other age groups.
- Despite a decrease in some respiratory activity indicators, there are several additional respiratory outbreaks to report since last week's update. One in a Central Zone seniors' lodge, mentioned in last week's report, has since been confirmed as an influenza A (H3) outbreak. Three Edmonton Zone outbreaks, with varying onset dates, have also been confirmed: one in a daycare was attributed to influenza A (H3); another, also in a daycare, was attributed to RSV; and one in a long term care facility was attributed to influenza A (H1N1) 2009. Notably, this is the first outbreak of influenza A (H1N1) 2009 to be confirmed in the province this season. Also, three respiratory outbreaks in the Central Zone are currently pending laboratory confirmation.

If you have questions about the Alberta Respiratory Virus Surveillance Update, or any of the indicators, please contact: AHSPublicHealthSurveillance@albertahealthservices.ca Or phone: 780-342-0210

Alberta Snapshot

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Indicators			Cumulative Counts					Alberta
			Week 35 (starting Aug 29/10) to week 2 (starting Jan 9/11)					
			South	Calgary	Central	Edmonton	North	
Laboratory Confirmed Cases	Number of cases with a positive respiratory specimen ¹	Adenovirus	3	25	8	38	12	86
		Coronavirus	5	27	17	66	21	136
		Human metapneumovirus (hMPV)	7	2	0	2	3	14
		Influenza A	13	64	30	63	16	186*
		Influenza B	0	6	2	1	1	10
		Parainfluenza	18	42	23	104	60	247
		Respiratory syncytial virus (RSV)	23	179	31	250	73	556*
		Rhino enterovirus	74	348	134	471	220	1,247
		Mixed	12	70	21	72	49	224
		Total		155	763	266	1067	455
Outbreaks	# laboratory confirmed respiratory outbreaks ²	0	9	3	13	1	26	
Influenza Immunizations	Total number of clients who have received 1 dose administered by AHS Public Health ³ (cumulative since Oct 3, 2010)	42,382	183,039	60,183	157,051	60,621	503,276	

-- Information not available

*Note: Six specimens were positive for both influenza A and RSV. These cases have been included in the influenza A and RSV counts. They have not been included in the 'Mixed' category.

¹ Sources: DIAL – Provincial Laboratory and the Outbreak Response Toolkit (includes cases with positive respiratory specimens received on or before Jan 15, 2011).

² Source: Alberta Health and Wellness Outbreak Reporting Form (Fillable PDF) from All Zones

³Source: AHS Zones (number does not include doses provided by external providers); includes first doses only for those that require two doses

For more information on data definitions and sources see [Annex: Data Notes section at the end of this report](#)

SURVEILLANCE AND HEALTH STATUS ASSESSMENT

Public Health Surveillance

Report Date: January 18, 2011

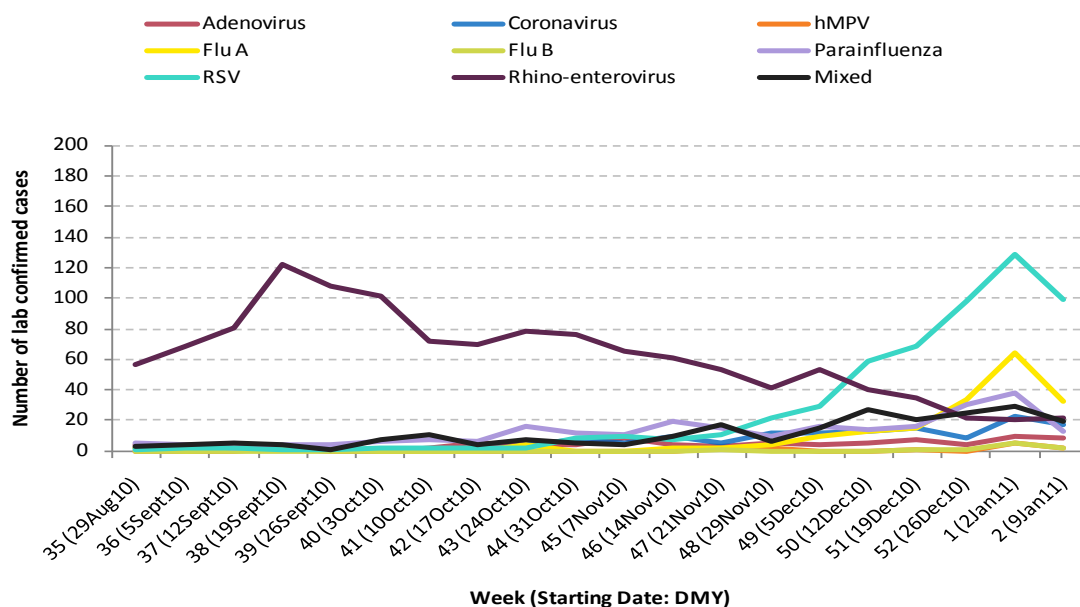
An influenza report targeted to the general public is available at: <http://www.health.alberta.ca/health-info/influenza-evidence.html>

SECTION 1: ALBERTA

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The number of laboratory confirmed cases of several types of respiratory viruses, including RSV and influenza, decreased last week compared to the previous week. This is the first time since mid-November that this has occurred. As of the end of last week (Jan 15, 2011), the total number of confirmed cases of influenza in the province this season is 196 (7.0% influenza A (H3), 14.8% influenza A (H1N1) 2009, 5.1% influenza type B, and 3.1% influenza A with unresolved sub-typing). At this point in the season, the age specific rates for confirmed influenza cases in infants 0 to <2 years of age are slightly higher than the rates in other age groups, at 2.1 per 10,000 for influenza A (H3), 0.7 per 10,000 for influenza A (H1N1) 2009, and 0.2 per 10,000 for influenza B.

Figure 1A: Laboratory confirmed respiratory virus cases, by virus type, by week, Alberta (2010-2011)



Sources: DIAL – Provincial Laboratory and the Outbreak Response Toolkit (includes cases with positive respiratory specimens received on or before Jan 15, 2011). For more information on data definitions and sources see [Annex: Data Notes section at the end of this report](#)

SURVEILLANCE AND HEALTH STATUS ASSESSMENT

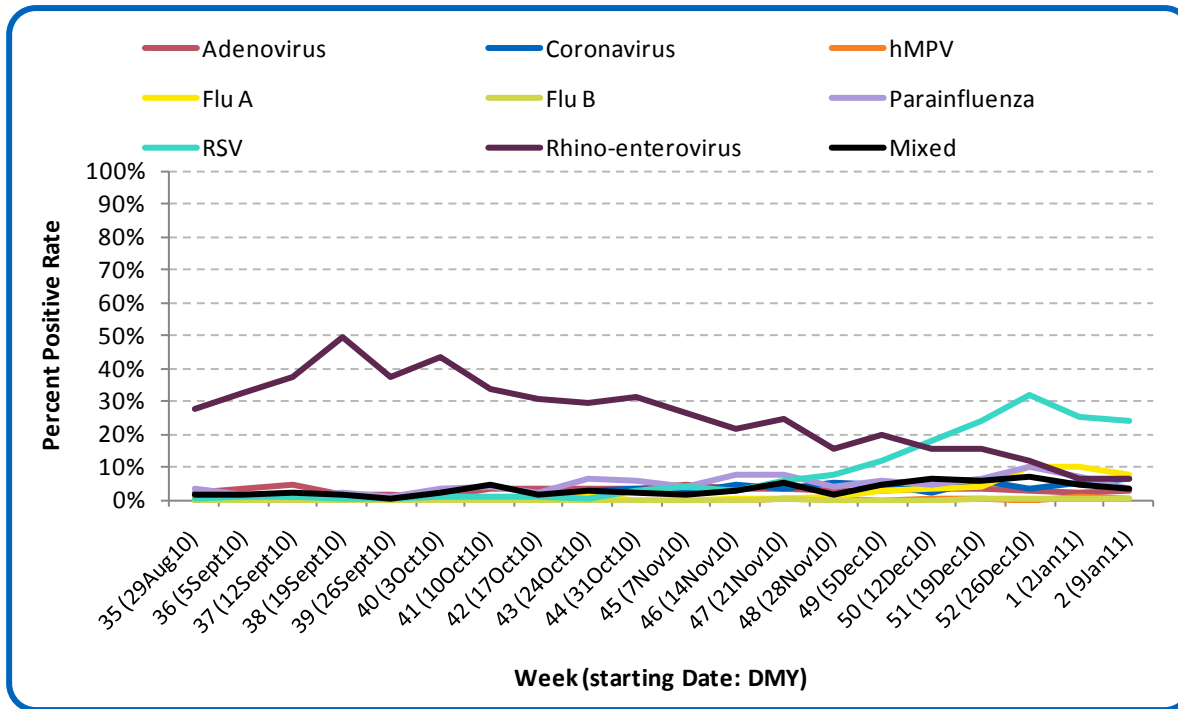
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Figure 1B: Respiratory Specimen Percent Positive Rates, by virus type, by week, Alberta (2010-2011)

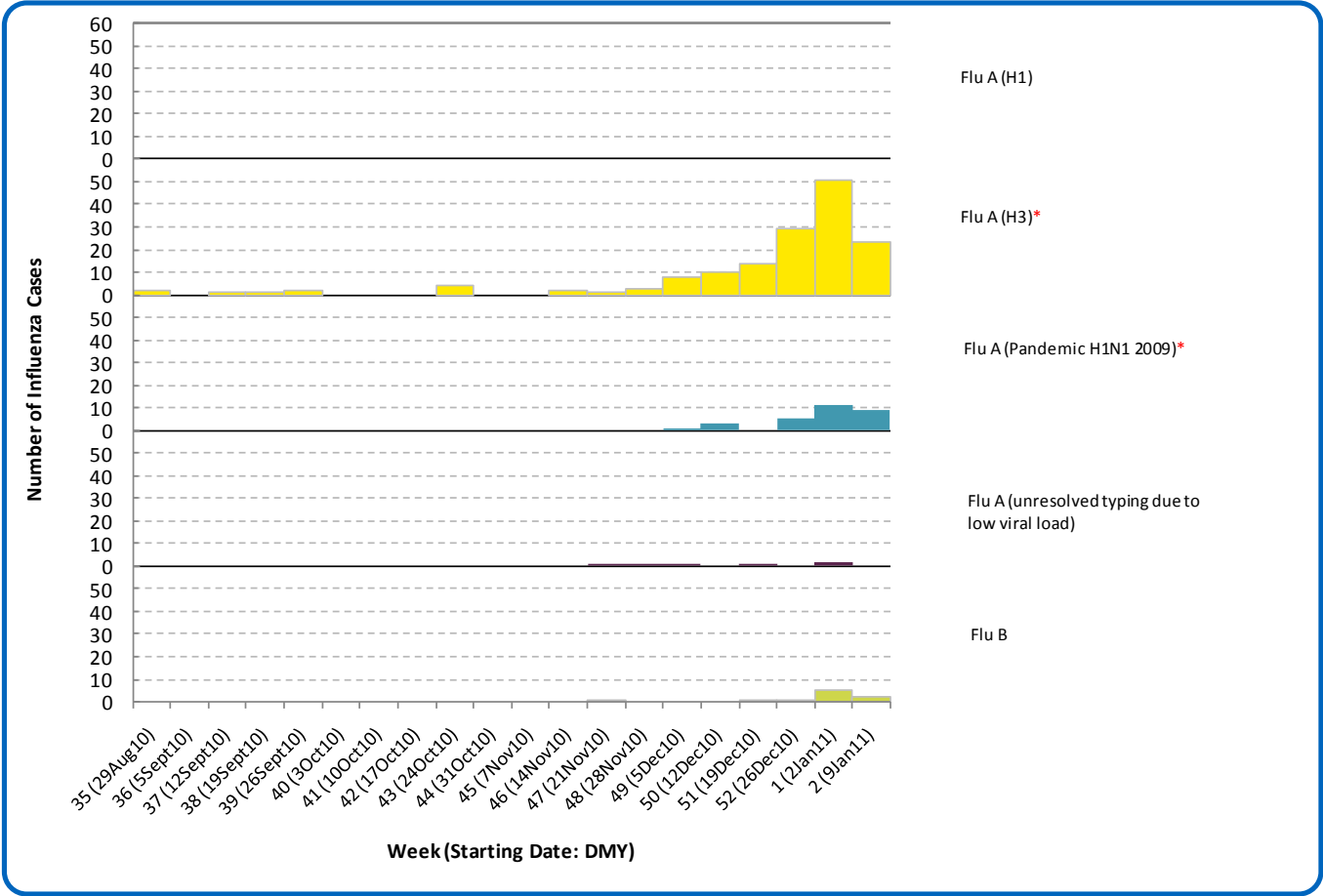
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Source: DIAL – Provincial Laboratory (includes cases with positive respiratory specimens received on or before Jan 15, 2011)
 For more information on data definitions and sources see [Annex: Data Notes section at the end of this report](#)

Figure 1C: Laboratory confirmed Influenza cases, by subtype, by week specimen received, Alberta (2010-2011)

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*Note: Two specimens were positive for both RSV and influenza A (H1N1) 2009 and four specimens were positive for both RSV and influenza A (H3).
 Source: Outbreak Response Toolkit (includes cases with positive respiratory specimens received on or before Jan 15, 2011).
 For more information on data definitions and sources see [Annex: Data Notes section at the end of this report](#)

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Table 1A: New Influenza cases (and age specific rates), by subtype, by age group, Alberta (Week 2: Jan 9-15, 2011)

	Flu A (Seasonal-H1)		Flu A (Seasonal-H3)		Flu A (Pandemic H1N1 2009)		Flu A (unresolved typing due to low viral load)		Flu B		Total	
	#	Rate (per 10,000)	#	Rate (per 10,000)	#	Rate (per 10,000)	#	Rate (per 10,000)	#	Rate (per 10,000)	#	Rate (per 10,000)
0 to <2 years	0	0.0	6	0.6	2	0.2	0	0.0	0	0.0	8	0.8
2 to <5 years	0	0.0	1	0.1	0	0.0	0	0.0	0	0.0	1	0.1
5 to <9 years	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
9 to <18 years	0	0.0	1	<0.1	0	0.0	0	0.0	1	<0.1	2	<0.1
18 to <65 years	0	0.0	9	<0.1	7	<0.1	0	0.0	1	<0.1	17	0.1
65 to <75 years	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
75+ years	0	0.0	6	0.3	0	0.0	0	0.0	0	0.0	6	0.3
Total	0	0.0	23	0.1	9	<0.1	0	0.0	2	<0.1	34	0.1

Table 1B: Cumulative Influenza cases (and age specific rates), by subtype, by age group, Alberta (Aug 29, 2010 – Jan 15, 2011)

	Flu A (Seasonal-H1)		Flu A (Seasonal-H3)		Flu A (Pandemic H1N1 2009)		Flu A (unresolved typing due to low viral load)		Flu B		Total	
	#	Rate (per 10,000)	#	Rate (per 10,000)	#	Rate (per 10,000)	#	Rate (per 10,000)	#	Rate (per 10,000)	#	Rate (per 10,000)
0 to <2 years	0	0.0	21	2.1	7	0.7	1	0.1	2	0.2	31	3.1
2 to <5 years	0	0.0	11	0.8	1	0.1	1	0.1	2	0.1	15	1.1
5 to <9 years	0	0.0	4	0.2	0	0.0	0	0.0	0	0.0	4	0.2
9 to <18 years	0	0.0	6	0.1	0	0.0	1	<0.1	1	<0.1	8	0.2
18 to <65 years	0	0.0	64	0.3	21	0.1	2	<0.1	5	<0.1	92	0.4
65 to <75 years	0	0.0	10	0.5	0	0.0	0	0.0	0	0.0	10	0.5
75+ years	0	0.0	35	2.0	0	0.0	1	0.1	0	0.0	36	2.0
Total	0	0.0	151	0.4	29	0.1	6	<0.1	10	<0.1	196	0.5

Source for Table 1A & 1B: Outbreak Response Toolkit (includes cases with positive respiratory specimens received on or before Jan 15, 2011).

Population data values used to calculate rates are for June 30, 2009 and are estimated using actual population values from the Alberta Health Care Insurance Plan (AHCIP) Registration File as of March 31, 2009.

For more information on data definitions and sources see [Annex: Data Notes section at the end of this report](#)

SURVEILLANCE AND HEALTH STATUS ASSESSMENT

Public Health Surveillance

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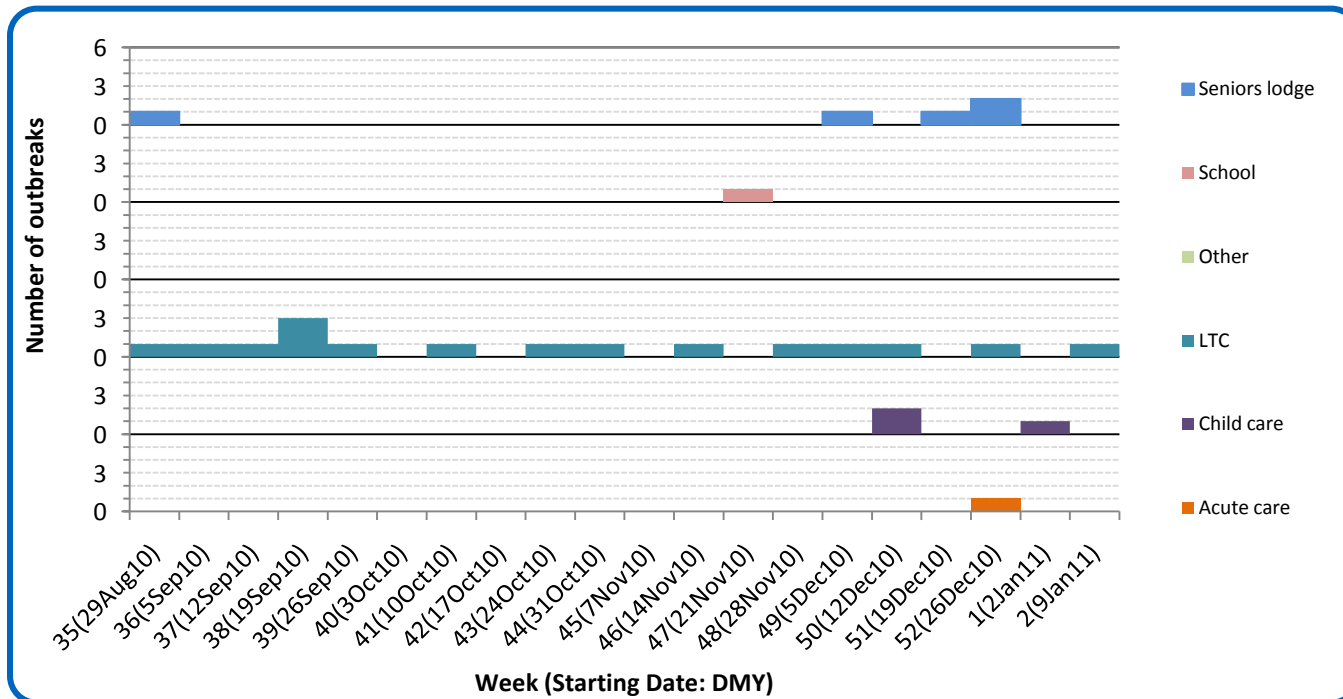
An influenza report targeted to the general public is available at: <http://www.health.alberta.ca/health-info/influenza-evidence.html>

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Four respiratory outbreaks have been confirmed in Alberta since the last report. The outbreak in a Central Zone seniors' lodge, mentioned last week, has now been confirmed as an Influenza A (H3) outbreak. In addition, two Edmonton Zone outbreaks (with onset dates of Dec 17, 2010 and Jan 2, 2011) have been attributed to Influenza A (H3) and RSV, respectively. A fourth outbreak in an Edmonton Zone long term care facility has been confirmed as an influenza A (H1N1) 2009 outbreak. Of note, this is the first influenza A (H1N1) 2009 outbreak in the province this season.

In addition to the above, three respiratory outbreaks, all in Central Zone (one in a seniors' lodge and two in long term care facilities, are currently pending laboratory confirmation.

Figure 1D: Respiratory outbreaks, by facility type, by onset week, Alberta (2010-2011; school outbreaks may not have a laboratory confirmation)



Source: Alberta Outbreak Reporting Form as of 23:59 on Jan 15, 2011. LTC stands for long term care facility. For more information on data definitions and sources see [Annex: Data Notes section at the end of this report](#)

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Attack rates in respiratory outbreaks

The influenza A (H3) outbreak in the Central Zone seniors' lodge had an attack rate of 6%. The two Edmonton Zone daycare outbreaks had preliminary attack rates of 18% and 9%. The influenza A (H1N1) 2009 outbreak in the Edmonton Zone long term care facility had a preliminary attack rate of 1%.

Influenza-like illness visits and "Left Without Being Seen"

The number of visits, hospital admissions, and visits of patients who left without being seen in the emergency departments/urgent care centers (ED's) for influenza-like illness (ILI) in both the City of Calgary and Edmonton Zone decreased by 27%, 19% and 79%, respectively in Week 2 (Jan 9 – 15, 2011) from the previous week. Similarly, the number of visits, hospital admissions and visits of patients who left the ED's without being seen for cough/ congestion symptoms also decreased by 26%, 29% and 88%, respectively. These are two consecutive declines from the peak in Week 52 of 2010.

Respiratory related calls to Health Link Alberta

The number of calls to Health Link Alberta for cough or breathing difficulties by Albertans was 9% less in Week 2 (Jan 9 – 15, 2011) compared to Week 1 (Jan 2 - 8, 2011), conforming to the decreasing pattern of ED visits for cough symptoms.

Percentage of visits to sentinel offices with influenza-like illness (ILI)

In Week 1 (Jan 2-8, 2011), the province-wide percentage of ILI-related visits to sentinel physician offices was close to 1%, the highest it has been this season.

Percentage of visits to sentinel offices with lower respiratory tract infection (LRTI)

The province-wide percentage of LRTI-related visits to sentinel physician offices was similar in Week 1 (Jan 2 -8, 2011) compared to Week 52 (Dec 26, 2010 – Jan 1, 2011).

The combined percentage of ILI- and LRTI-related visits was 18% higher in Week 1 (Jan 2 – 8, 2011) than in Week 52 (Dec 26, 2010 – Jan 1, 2011), the highest it has been this season due to the increased ILI-related visits.

SURVEILLANCE AND HEALTH STATUS ASSESSMENT

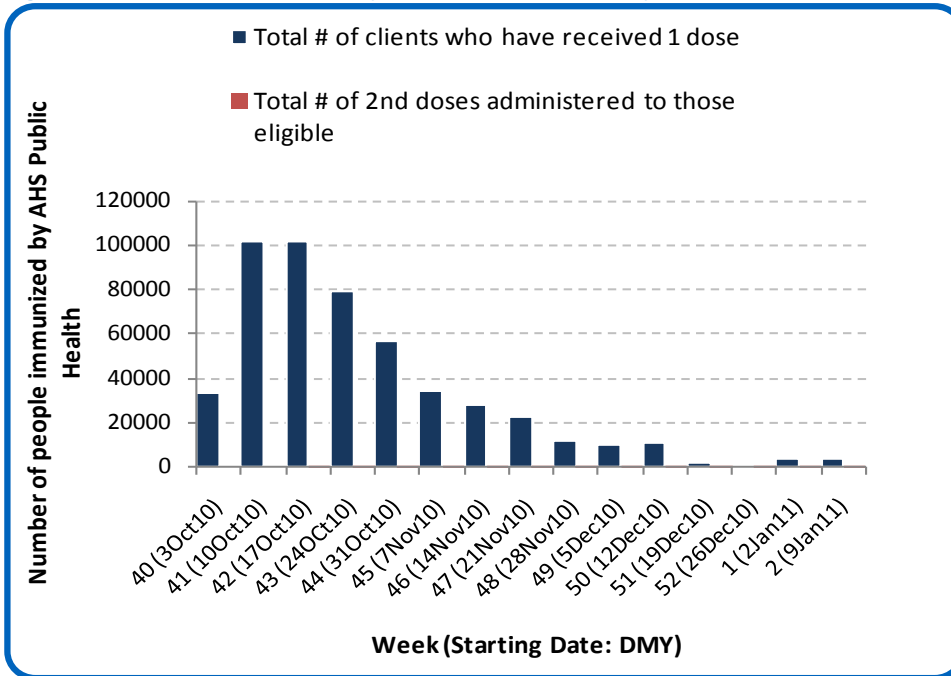
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Figure 1E: Number Immunized by AHS (Public Health), by week, Alberta (2010-2011)



Source: AHS Zones (doses do not include those delivered by external providers);
 Note: Immunization coverage rates will be reported at the end of the influenza season
 For more information on data definitions and sources see [Annex: Data Notes section at the end of this report](#)

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Table 1C: AHS (Public Health) Delivered Influenza Immunizations (with Cumulative totals), by priority group, Alberta (2010-2011)

Priority Group	Number Immunized (Week 2 – Jan 9-15, 2011)	Cumulative Number Immunized (since Oct 3, 2010)
Long term care staff	15	2,578
Health care workers	109	18,640
Pregnant women	64	4,430
Residents of long term care	6	4,813
65 years of age and over	360	145,715
All children 6 months up to and including 23 months*	Dose #1	829
	Dose #2	514
All children 24 months up to and including 59 months*	Dose #1	355
	Dose #2	100
High risk: 5 years up to and including 8 years*	Dose #1	83
	Dose #2	8
High risk: 9 years up to and including 64 years	310	54,844
Healthy: 5 years up to and including 8 years*	Dose #1	245
	Dose #2	48
Healthy: 9 years up to and including 64 years	1,827	203,670
Total number of clients who have received 1 dose	4,203	503,276
Total number of 2nd doses administered to those eligible*	670	7,073

Source: AHS Zones (doses do not include those delivered by external providers)

*Children under 9 years of age who have not received at least one dose of seasonal influenza vaccine in past years require two doses, given at least four weeks apart.

Note: Immunization coverage rates will be reported at the end of the influenza season

For more information on data definitions and sources see [Annex: Data Notes section at the end of this report](#)

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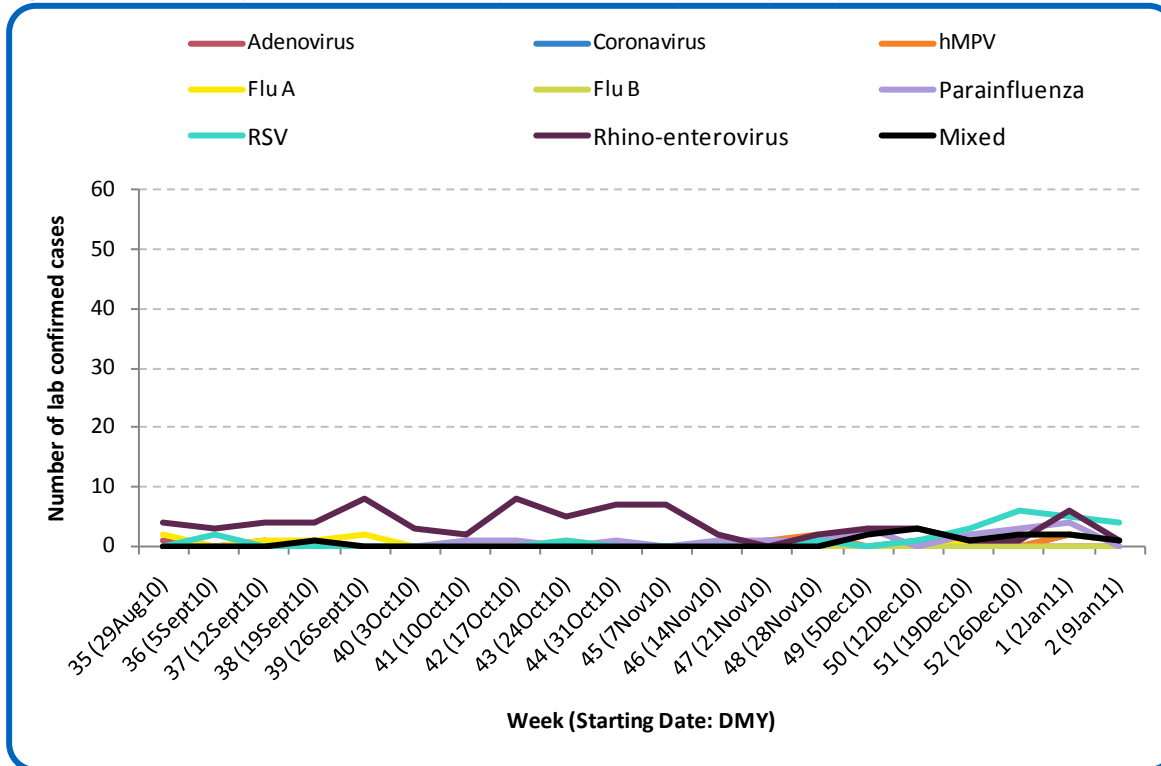
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SECTION 2: ZONE 1 - SOUTH

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Last week, one new influenza A (H3) case was confirmed in a child less than 5 years old. In total, there have now been 13 confirmed cases of influenza in South Zone this season. Eight cases have been in adults aged 18 to less than 65 years and five cases have been in children under the age of 5 years (including one infant).

Figure 2A: Laboratory confirmed respiratory virus cases, by virus type, by week, South Zone (2010-2011)



Sources: DIAL – Provincial Laboratory and the Outbreak Response Toolkit (includes cases with positive respiratory specimens received on or before Jan 15, 2011). For more information on data definitions and sources see [Annex: Data Notes section at the end of this report](#)

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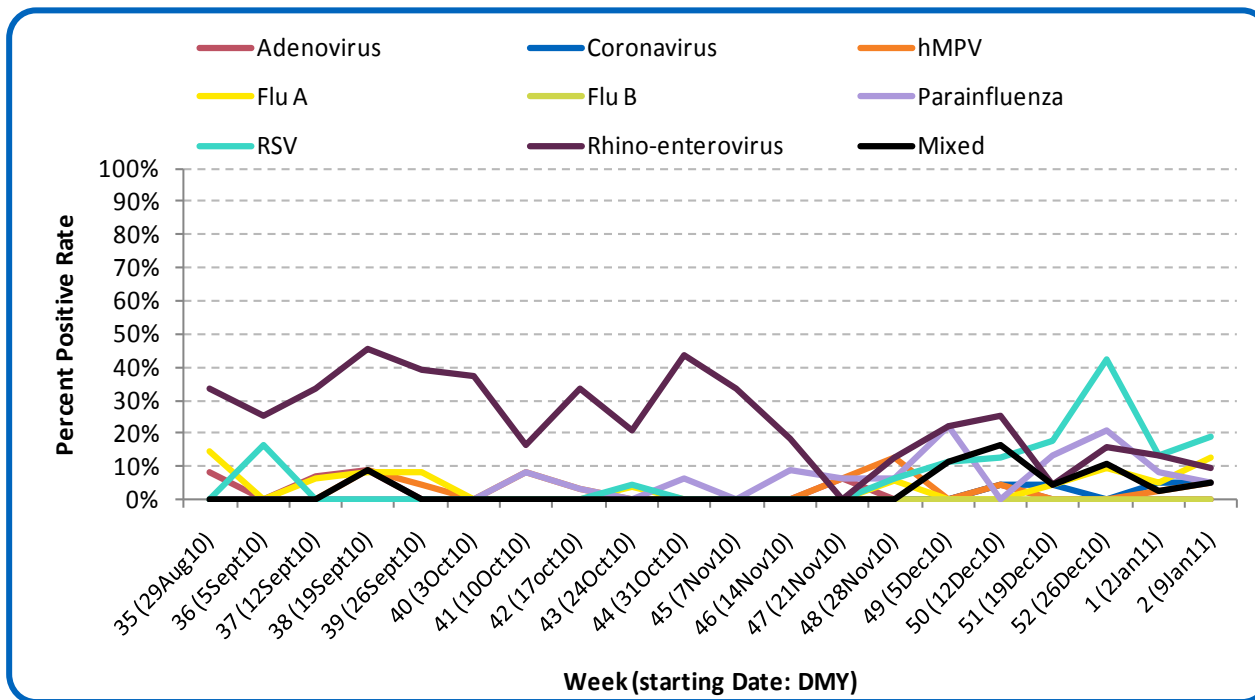
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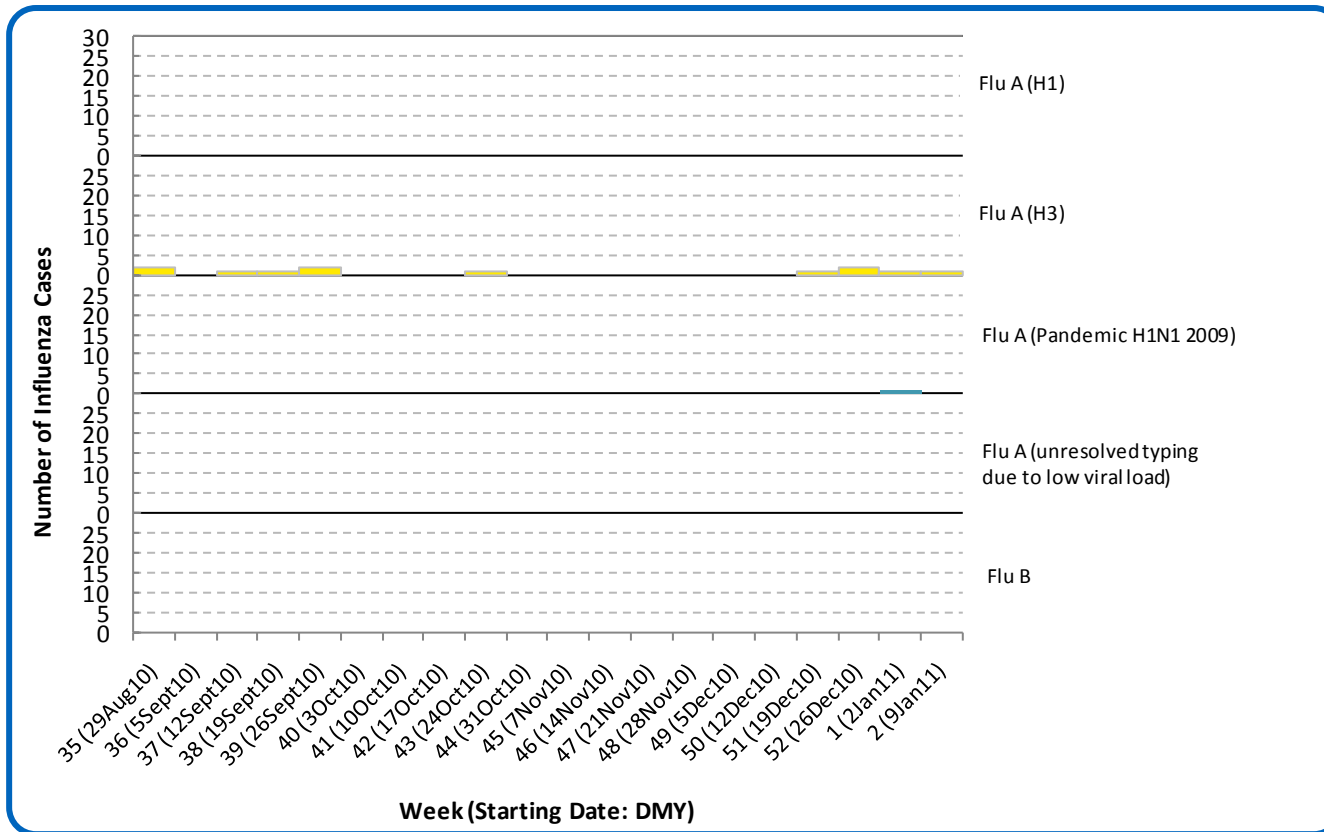
Figure 2B: Respiratory Specimen Percent Positive Rates, by virus type, by week, South Zone (2010-2011)



Source: DIAL – Provincial Laboratory (includes cases with positive respiratory specimens received on or before Jan 15, 2011)
For more information on data definitions and sources see [Annex: Data Notes section at the end of this report](#)

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Figure 2C: Laboratory confirmed Influenza cases, by subtype, by week specimen received, South Zone (2010-2011)



Source: Outbreak Response Toolkit (includes cases with positive respiratory specimens received on or before Jan 15, 2011). For more information on data definitions and sources see [Annex: Data Notes section at the end of this report](#)

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Table 2A: New Influenza cases (and age specific rates), by subtype, by age group, South Zone (Week 2: Jan 9-15, 2011)

	Flu A (Seasonal-H1)		Flu A (Seasonal-H3)		Flu A (Pandemic H1N1 2009)		Flu A (unresolved typing due to low viral load)		Flu B		Total	
	#	Rate (per 10,000)	#	Rate (per 10,000)	#	Rate (per 10,000)	#	Rate (per 10,000)	#	Rate (per 10,000)	#	Rate (per 10,000)
0 to <2 years	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
2 to <5 years	0	0.0	1	0.9	0	0.0	0	0.0	0	0.0	1	0.9
5 to <9 years	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
9 to <18 years	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
18 to <65 years	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
65 to <75 years	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
75+ years	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
Total	0	0.0	1	0.1	0	0.0	0	0.0	0	0.0	1	<0.1

Table 2B: Cumulative Influenza cases (and age specific rates), by subtype, by age group, South Zone (Aug 29, 2010–Jan 15, 2011)

	Flu A (Seasonal-H1)		Flu A (Seasonal-H3)		Flu A (Pandemic H1N1 2009)		Flu A (unresolved typing due to low viral load)		Flu B		Total	
	#	Rate (per 10,000)	#	Rate (per 10,000)	#	Rate (per 10,000)	#	Rate (per 10,000)	#	Rate (per 10,000)	#	Rate (per 10,000)
0 to <2 years	0	0.0	1	1.2	0	0.0	0	0.0	0	0.0	1	1.2
2 to <5 years	0	0.0	4	3.5	0	0.0	0	0.0	0	0.0	4	3.5
5 to <9 years	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
9 to <18 years	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
18 to <65 years	0	0.0	7	0.4	1	0.1	0	0.0	0	0.0	8	0.5
65 to <75 years	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
75+ years	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
Total	0	0.0	12	0.4	1	0.0	0	0.0	0	0.0	13	0.5

Source for Tables 2A & 2B: Outbreak Response Toolkit (includes cases with positive respiratory specimens received on or before Jan 15, 2011).

Population data values used to calculate rates are for June 30, 2009 and are estimated using actual population values from the Alberta Health Care Insurance Plan (AHCIP) Registration File as of March 31, 2009.

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Attack rates in respiratory outbreaks

There have been no respiratory outbreaks reported in the South Zone this season.

Influenza-like illness visits and “Left Without Being Seen”

This information is not available for the South Zone.

Respiratory related calls to Health Link Alberta

The number of calls to Health Link Alberta for cough or breathing difficulties by residents of South Zone was 42% lower in Week 2 (Jan 9 – 15, 2011) than in Week 1 (Jan 2 -8, 2011).

Percentage of visits to sentinel offices with Influenza-like illness (ILI)

In Week 1 (Jan 2–8, 2011), the percentage of ILI-related visits to sentinel physician offices by residents of South Zone was 1.5%. The previous week, there were no reports. This indicator is currently the highest it has been this season.

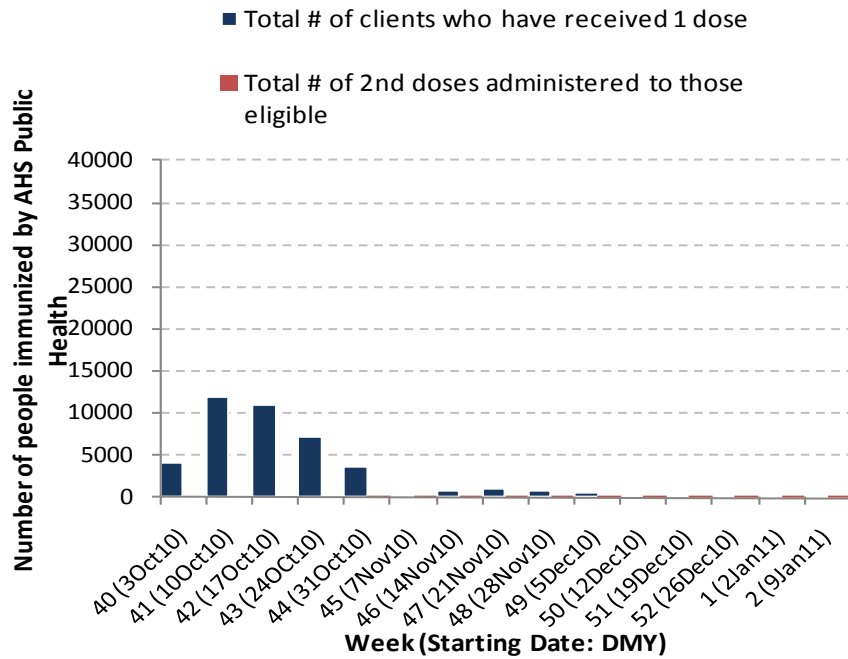
Percentage of visits to sentinel offices with lower respiratory tract infection (LRTI)

There were no reports of LRTI-related visits to sentinel physician offices by residents of South Zone in Week 1 (Jan 2 - 8, 2011).

In the first week of January, the combined percentage of ILI- and LRTI-related visits to sentinel physician offices by residents of South Zone was 2x higher than it was in the last week of December. This is the highest it has been this season.

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Figure 2D: Number Immunized by AHS (Public Health), by week, South Zone (2010-2011)



Source: AHS Zones (doses do not include those delivered by external providers)
 Note: Immunization coverage rates will be reported at the end of the influenza season
 For more information on data definitions and sources see [Annex: Data Notes section at the end of this report](#)

Table 2C: AHS (Public Health) Delivered Influenza Immunizations (with Cumulative totals), by priority group, South Zone (2010-2011)

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Priority Group	Number Immunized (Week 2 – Jan 9-15, 2011)	Cumulative Number Immunized (since Oct 3, 2010)
Long term care staff	4	610
Health care workers	6	1,549
Pregnant women	2	294
Residents of long term care	1	729
65 years of age and over	7	15,560
All children 6 months up to and including 23 months*	Dose #1	1,319
	Dose #2	403
All children 24 months up to and including 59 months*	Dose #1	1,896
	Dose #2	96
High risk: 5 years up to and including 8 years*	Dose #1	488
	Dose #2	13
High risk: 9 years up to and including 64 years	10	4,067
Healthy: 5 years up to and including 8 years*	Dose #1	1,440
	Dose #2	43
Healthy: 9 years up to and including 64 years	71	14,430
Total number of clients who have received 1 dose	160	42,382
Total number of 2nd doses administered to those eligible*	65	555

Source: AHS Zones (doses do not include those delivered by external providers)

*Children under 9 years of age who have not received at least one dose of seasonal influenza vaccine in past years require two doses, given at least four weeks apart.

Note: Immunization coverage rates will be reported at the end of the influenza season

For more information on data definitions and sources see [Annex: Data Notes section at the end of this report](#)

SURVEILLANCE AND HEALTH STATUS ASSESSMENT

Public Health Surveillance

Report Date: January 18, 2011

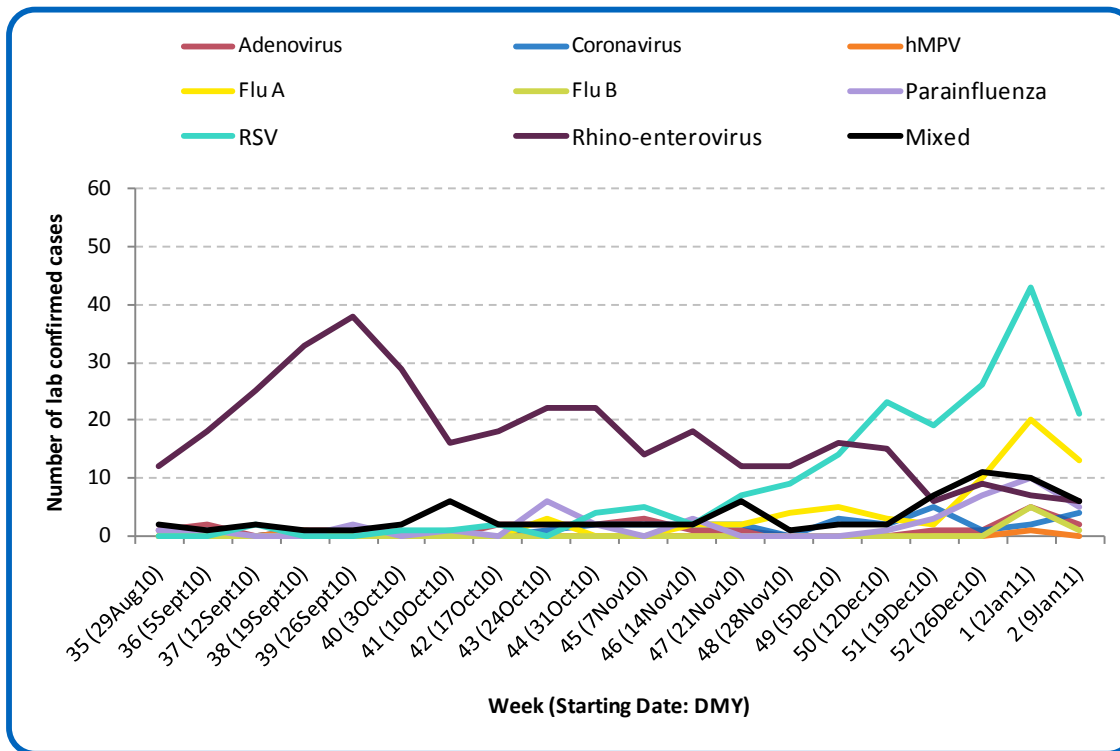
An influenza report targeted to the general public is available at: <http://www.health.alberta.ca/health-info/influenza-evidence.html>

SECTION 3: ZONE 2 - CALGARY

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RSV and influenza continue to be the predominant viruses in Calgary Zone, although the number of laboratory confirmed cases decreased last week compared to the previous week. Since the beginning of the season, a total of 70 cases of influenza have been confirmed in Calgary Zone; 44 sub-typed as influenza A (H3), 17 sub-typed as influenza A (H1N1) 2009, three typed as influenza A with unresolved sub-typing and six sub-typed as influenza B.

Figure 3A: Laboratory confirmed respiratory virus cases, by virus type, by week, Calgary Zone (2010-2011)



Sources: DIAL – Provincial Laboratory and the Outbreak Response Toolkit (includes cases with positive respiratory specimens received on or before Jan 15, 2011). For more information on data definitions and sources see [Annex: Data Notes section at the end of this report](#)

SURVEILLANCE AND HEALTH STATUS ASSESSMENT

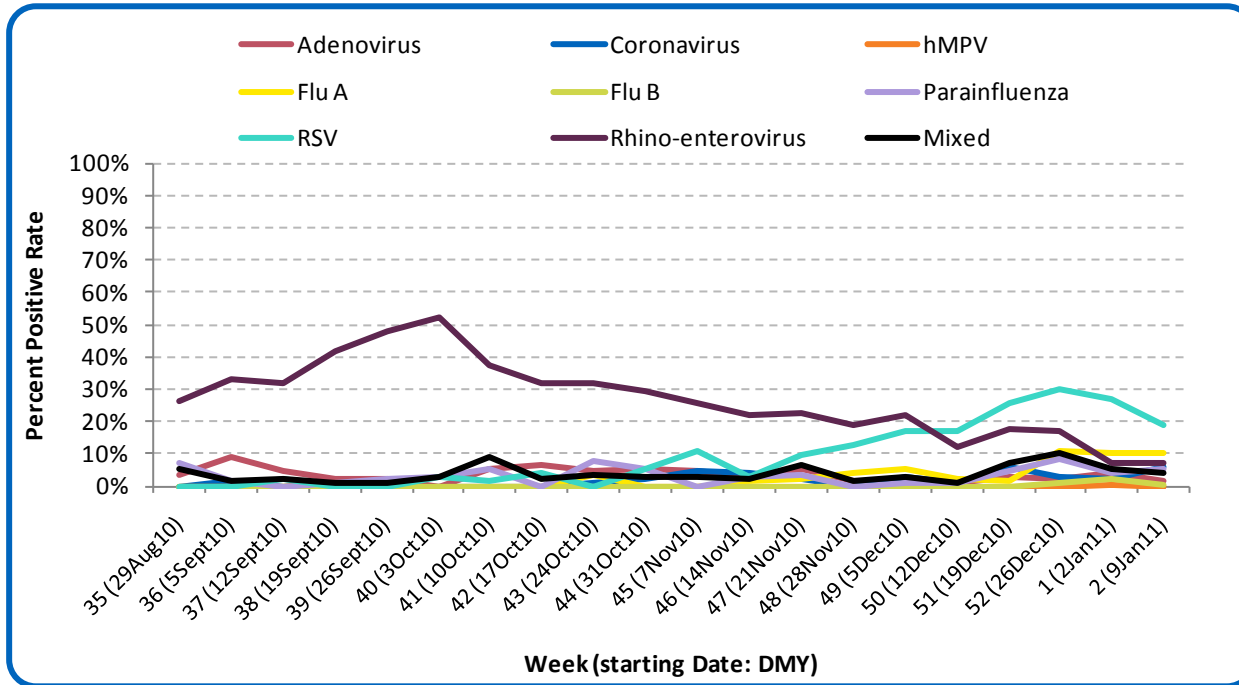
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An influenza report targeted to the general public is available at: <http://www.health.alberta.ca/health-info/influenza-evidence.html>

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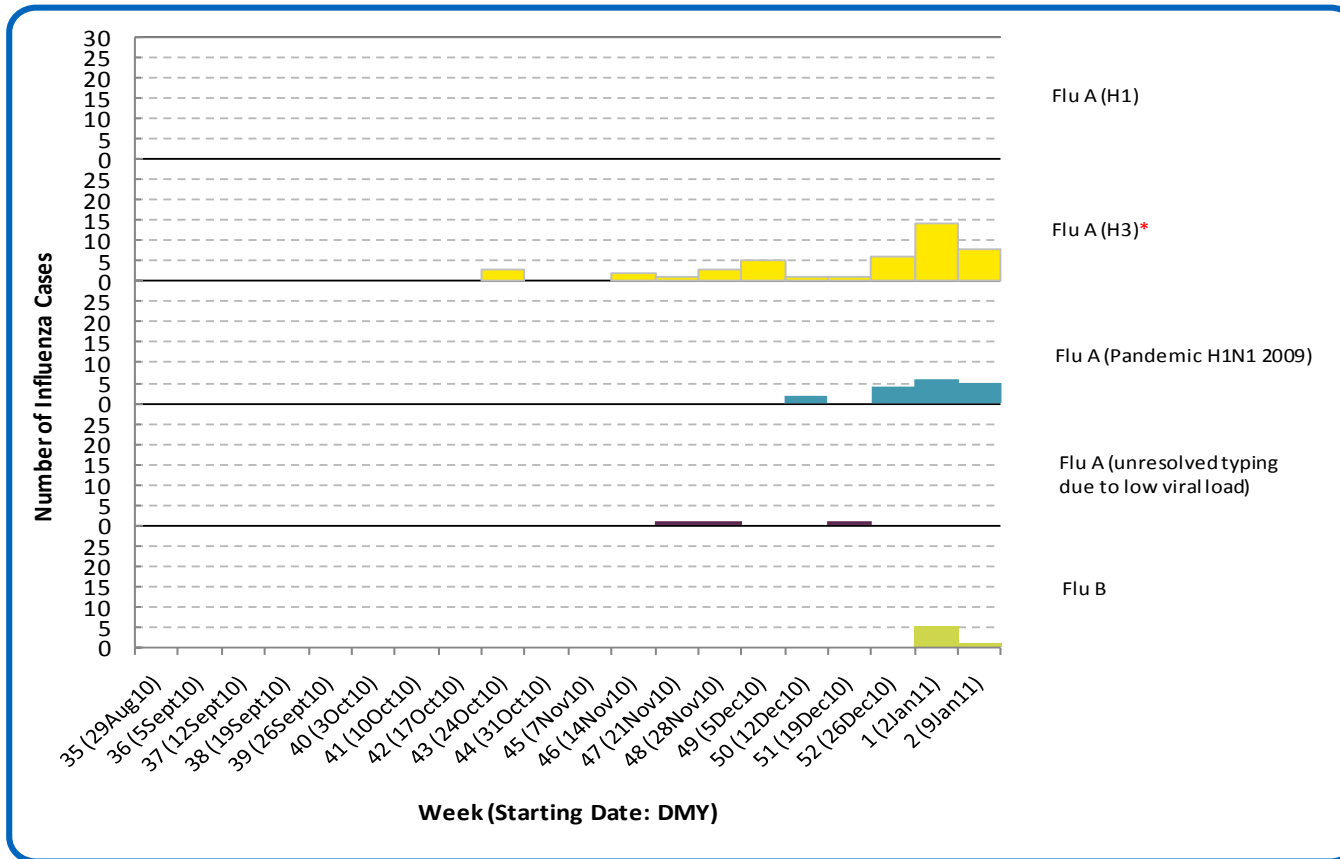
Figure 3B: Respiratory Specimen Percent Positive Rates, by virus type, by week, Calgary Zone (2010-2011)



Source: DIAL – Provincial Laboratory (includes cases with positive respiratory specimens received on or before Jan 15, 2011)
For more information on data definitions and sources see [Annex: Data Notes section at the end of this report](#)

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Figure 3C: Laboratory confirmed Influenza cases, by subtype, by week specimen received, Calgary Zone (2010-2011)



*Note: One specimen was positive for both RSV and influenza A (H3).

Source: Outbreak Response Toolkit (includes cases with positive respiratory specimens received on or before Jan 15, 2011).

For more information on data definitions and sources see [Annex: Data Notes section at the end of this report](#)

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An influenza report targeted to the general public is available at: <http://www.health.alberta.ca/health-info/influenza-evidence.html>

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Table 3A: New Influenza cases (and age specific rates), by subtype, by age group, Calgary Zone (Week 2: Jan 9-15, 2011)

	Flu A (Seasonal-H1)		Flu A (Seasonal-H3)		Flu A (Pandemic H1N1 2009)		Flu A (unresolved typing due to low viral load)		Flu B		Total	
	#	Rate (per 10,000)	#	Rate (per 10,000)	#	Rate (per 10,000)	#	Rate (per 10,000)	#	Rate (per 10,000)	#	Rate (per 10,000)
0 to <2 years	0	0.0	1	0.3	1	0.3	0	0.0	0	0.0	2	0.5
2 to <5 years	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
5 to <9 years	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
9 to <18 years	0	0.0	0	0.0	0	0.0	0	0.0	1	0.1	1	0.1
18 to <65 years	0	0.0	4	0.1	4	<0.1	0	0.0	0	0.0	8	0.1
65 to <75 years	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
75+ years	0	0.0	3	0.5	0	0.0	0	0.0	0	0.0	3	0.5
Total	0	0.0	8	0.1	5	<0.1	0	0.0	1	0.0	14	0.1

Table 3B: Cumulative Influenza cases (and age specific rates), by subtype, by age group, Calgary Zone (Aug 29, 2010 – Jan 15, 2011)

	Flu A (Seasonal-H1)		Flu A (Seasonal-H3)		Flu A (Pandemic H1N1 2009)		Flu A (unresolved typing due to low viral load)		Flu B		Total	
	#	Rate (per 10,000)	#	Rate (per 10,000)	#	Rate (per 10,000)	#	Rate (per 10,000)	#	Rate (per 10,000)	#	Rate (per 10,000)
0 to <2 years	0	0.0	3	0.8	3	0.8	0	0.0	1	0.3	7	1.9
2 to <5 years	0	0.0	2	0.4	1	0.2	1	0.2	1	0.2	5	1.0
5 to <9 years	0	0.0	1	0.2	0	0.0	0	0.0	0	0.0	1	0.2
9 to <18 years	0	0.0	2	0.1	0	0.0	1	0.1	1	0.1	4	0.3
18 to <65 years	0	0.0	24	0.3	13	0.1	1	0.0	3	<0.1	41	0.5
65 to <75 years	0	0.0	4	0.6	0	0.0	0	0.0	0	0.0	4	0.6
75+ years	0	0.0	8	1.4	0	0.0	0	0.0	0	0.0	8	1.4
Total	0	0.0	44	0.3	17	0.1	3	<0.1	6	<0.1	70	0.5

Source for tables 3A & 3B: Outbreak Response Toolkit (includes cases with positive respiratory specimens received on or before Jan 15, 2011).

Population data values used to calculate rates are for June 30, 2009 and are estimated using actual population values from the Alberta Health Care Insurance Plan (AHCIP) Registration File as of March 31, 2009.

For more information on data definitions and sources see [Annex: Data Notes section at the end of this report](#)

SURVEILLANCE AND HEALTH STATUS ASSESSMENT

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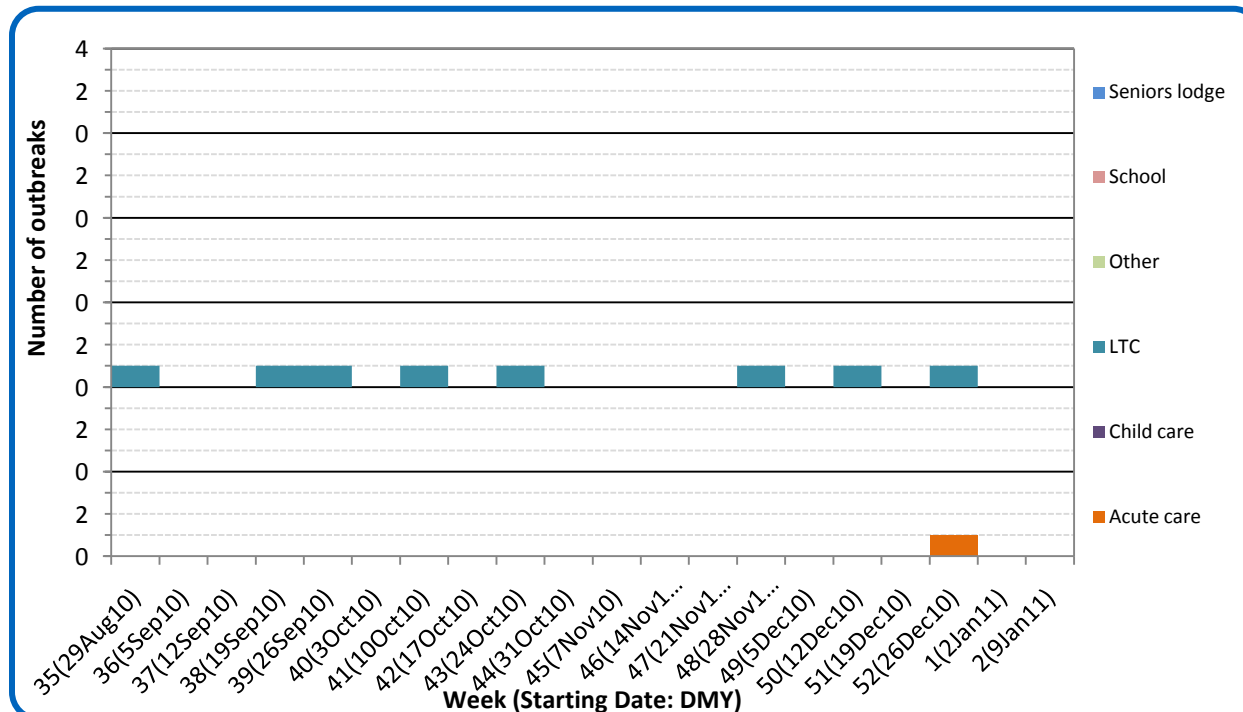
Report Date: January 18, 2011

An influenza report targeted to the general public is available at: <http://www.health.alberta.ca/health-info/influenza-evidence.html>

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Since last report, there have been no reports of respiratory outbreaks in the Calgary Zone.

Figure 3D: Respiratory outbreaks, by facility type, by onset week, Calgary Zone (2010-2011; school outbreaks may not have a laboratory confirmation)

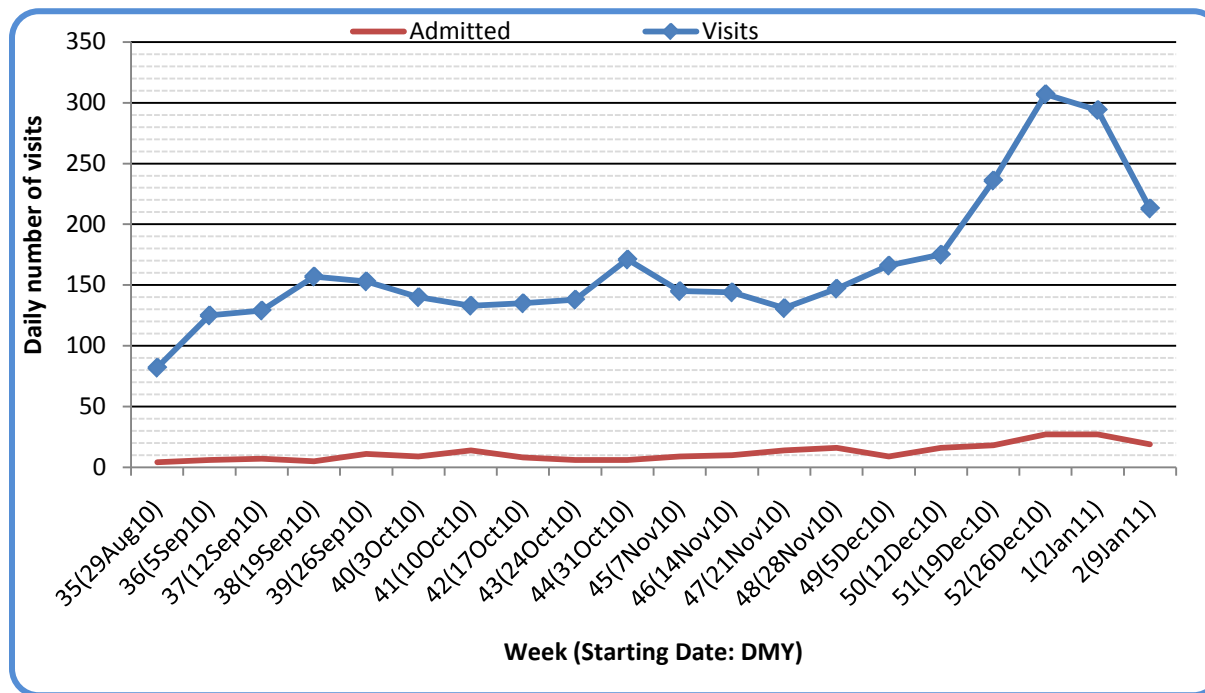


Source: Alberta Outbreak Reporting Form as of 23:59 on Jan 15, 2011. LTC stands for long term care facility. For more information on data definitions and sources see [Annex: Data Notes section at the end of this report](#)

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The number of visits, hospital admissions and visits of patients with cough symptoms who left without being seen in the six urban emergency departments/urgent care centers by residents of the City of Calgary decreased by 31%, 30% and 90%, respectively, in Week 2 (Jan 9-15, 2011) from the previous week. These are two consecutive declines in the last two weeks from the peak in Week 52 of 2010.

Figure 3E: Visits to urban emergency departments/urgent care centers in the City of Calgary with cough symptoms and admissions to hospitals, by visit week (2010-2011)



Source: Alberta Real Time Syndromic Surveillance Net (ARTSSN) as of 23:59 on Jan 15, 2011.
For more information on data definitions and sources see [Annex: Data Notes section at the end of this report](#)

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An influenza report targeted to the general public is available at: <http://www.health.alberta.ca/health-info/influenza-evidence.html>

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Attack rates in respiratory outbreaks

There have been no new reports of respiratory outbreaks in the Calgary Zone.

Influenza-like illness visits and “Left Without Being seen”

The number of visits, hospital admissions and visits of patients with influenza-like illness (ILI) symptoms who left without being seen in the six urban emergency departments/ urgent care centers (ED’s) in the City of Calgary were 48%, 23% and 100% lower, respectively, in Week 2 (Jan 9-15, 2011) than in Week 1 (Jan 2-8, 2011), bringing the percentage of ILI positive visits down to 5% of all screened visits from the 7% level in Week 1.

Respiratory related calls to Health Link Alberta

The number of calls to Health Link Alberta for cough or breathing difficulties by residents of Calgary Zone was 30% less in Week 2 (Jan 9 – 15, 2011) compared to the previous week, conforming to the decreasing pattern of ED visits for cough symptoms in the last two weeks.

Percentage of visits to sentinel offices with influenza-like illness (ILI)

The percentage of ILI-related visits to sentinel physician offices by residents of Calgary Zone was 7% lower in Week 1 (Jan 2-8, 2011) compared to Week 52 (Dec 26, 2010 – Jan 1, 2011).

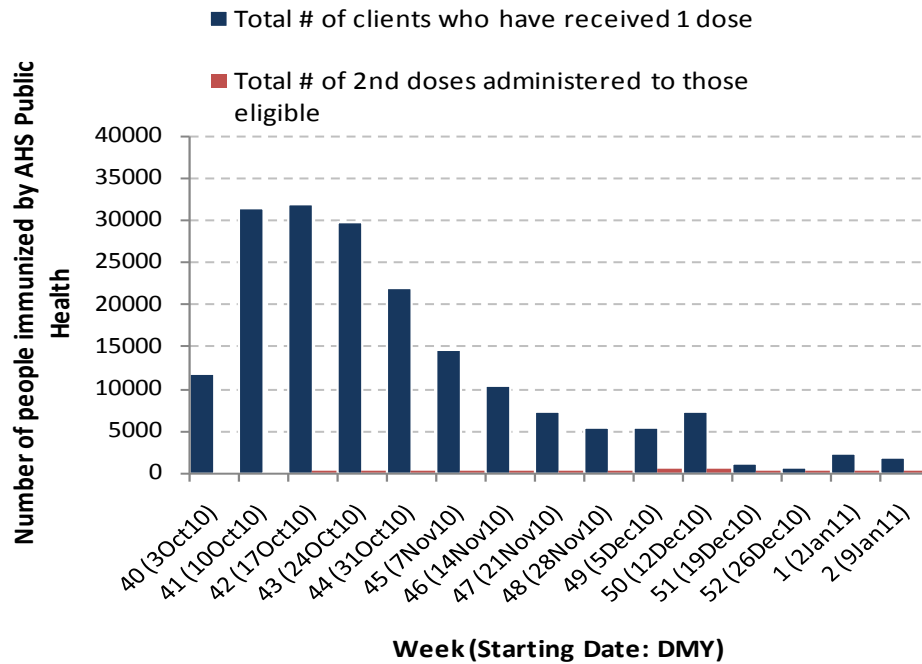
Percentage of visits to sentinel offices with lower respiratory tract infection (LRTI)

The percentage of LRTI-related visits to sentinel physician offices by residents of Calgary Zone was 8% higher in Week 1 (Jan 2-8, 2011) compared to Week 52 (Dec 26, 2010 – Jan 1, 2011).

Due to the increase in one and a decrease in the other, the combined percentage for ILI- and LRTI-related visits was essentially unchanged in Week 1 (Jan 2-8) compared to the week before that. This combined indicator remains the highest it has been this season.

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Figure 3F: Number Immunized by AHS (Public Health), by week, Calgary Zone (2010-2011)



Source: AHS Zones (doses do not include those delivered by external providers)
 Note: Immunization coverage rates will be reported at the end of the influenza season
 For more information on data definitions and sources see [Annex: Data Notes section at the end of this report](#)

Table 3C: AHS (Public Health) Delivered Influenza Immunizations (with Cumulative totals), by priority group, Calgary Zone (2010-2011)

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Priority Group		Number Immunized (Week 2 – Jan 9-15, 2011)	Cumulative Number Immunized (since Oct 3, 2010)
Long term care staff		1	442
Health care workers		22	5,237
Pregnant women		32	1,831
Residents of long term care		1	706
65 years of age and over		103	44,478
All children 6 months up to and including 23 months*	Dose #1	486	10,503
	Dose #2	200	2,268
All children 24 months up to and including 59 months*	Dose #1	204	10,382
	Dose #2	40	411
High risk: 5 years up to and including 8 years*	Dose #1	29	2,222
	Dose #2	3	33
High risk: 9 years up to and including 64 years		103	19,616
Healthy: 5 years up to and including 8 years*	Dose #1	97	6,892
	Dose #2	13	183
Healthy: 9 years up to and including 64 years		864	80,730
Total number of clients who have received 1 dose		1,942	183,039
Total number of 2nd doses administered to those eligible*		256	2,895

Source: AHS Zones (doses do not include those delivered by external providers)

*Children under 9 years of age who have not received at least one dose of seasonal influenza vaccine in past years require two doses, given at least four weeks apart.

Note: Immunization coverage rates will be reported at the end of the influenza season

For more information on data definitions and sources see [Annex: Data Notes section at the end of this report](#)

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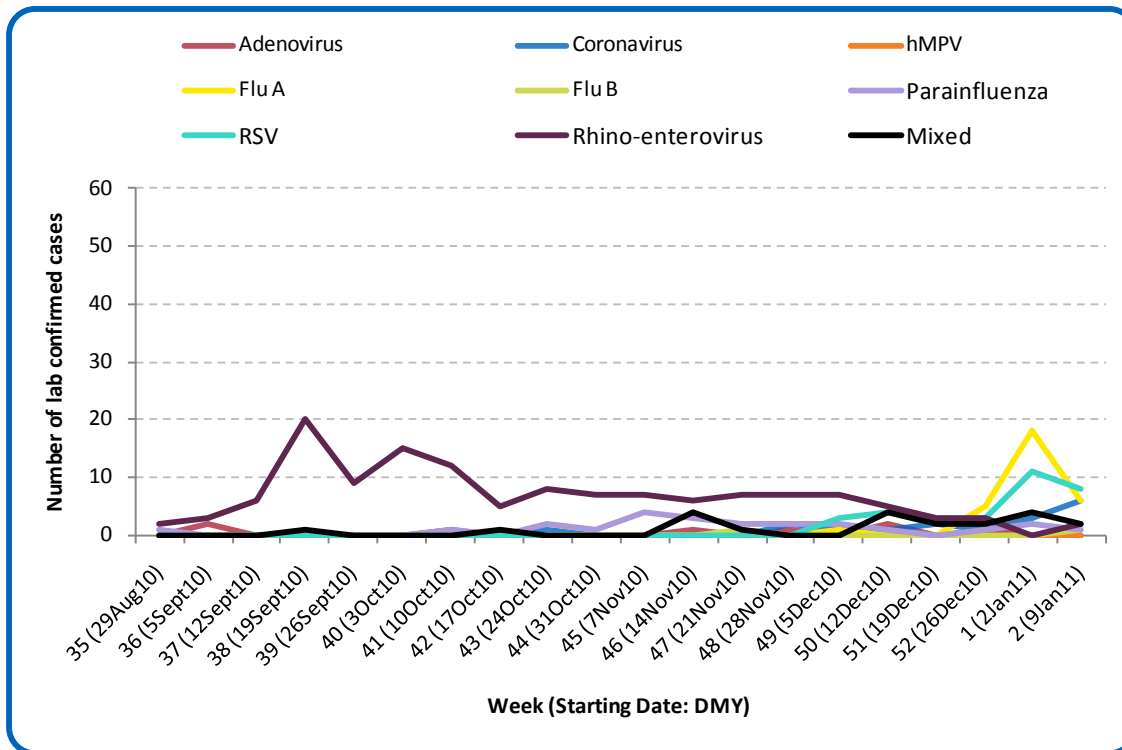
An influenza report targeted to the general public is available at: <http://www.health.alberta.ca/health-info/influenza-evidence.html>

SECTION 4: ZONE 3 - CENTRAL

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The number of cases of influenza that have been laboratory confirmed in Central Zone this season is 32, with the majority (28) sub-typed as influenza A (H3). At this point in the season, the age-specific rate for confirmed cases of influenza in those 75 years and over is currently 5.5 per 10,000, while the age-specific rate is 2.5 for infants aged 0 to less than 2 years of age. For all other age groups, it is less than 1 per 10,000. Unlike other areas of the province, calls to Health Link Alberta for cough or breathing difficulties increased last week compared to the previous week. It is also the only area of the province that has shown recent increases in Coronavirus activity. These trends, along with the outcomes of the three respiratory outbreaks pending laboratory confirmation, will be monitored.

Figure 4A: Laboratory confirmed respiratory virus cases, by virus type, by week, Central Zone (2010-2011)



Sources: DIAL – Provincial Laboratory and the Outbreak Response Toolkit (includes cases with positive respiratory specimens received on or before Jan 15, 2011). For more information on data definitions and sources see [Annex: Data Notes section at the end of this report](#)

SURVEILLANCE AND HEALTH STATUS ASSESSMENT

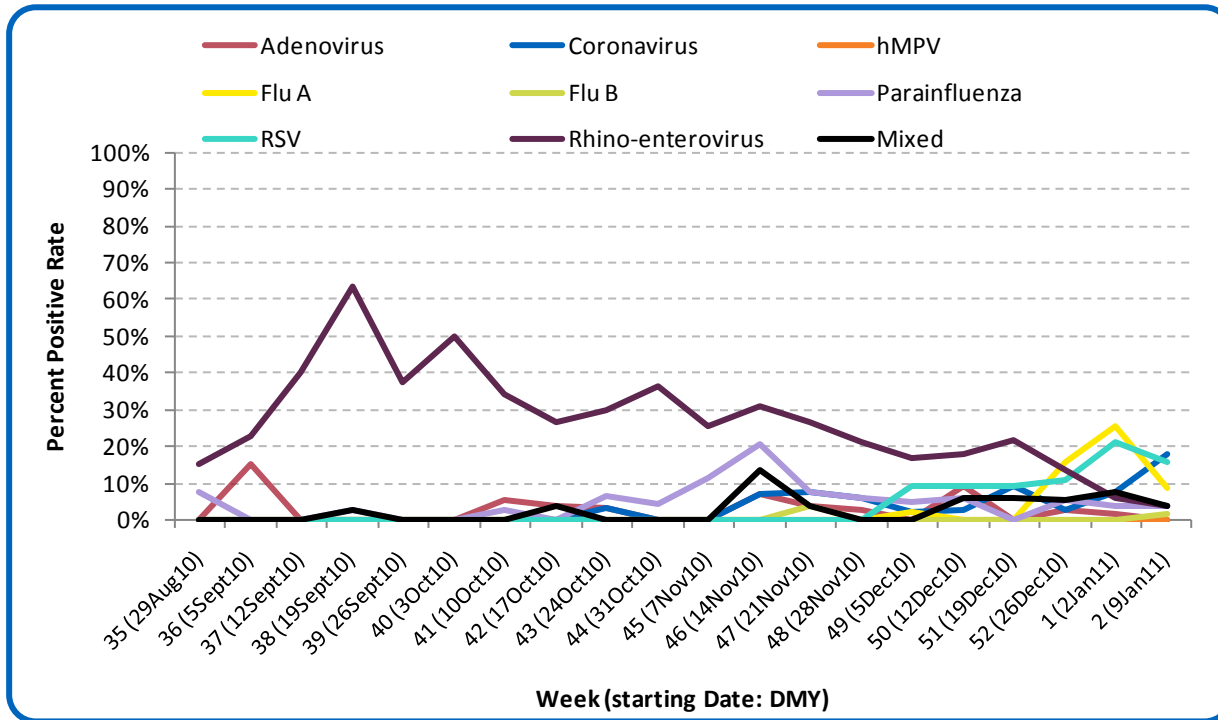
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An influenza report targeted to the general public is available at: <http://www.health.alberta.ca/health-info/influenza-evidence.html>

Figure 4B: Respiratory Specimen Percent Positive Rates, by virus type, by week, Central Zone (2010-2011)

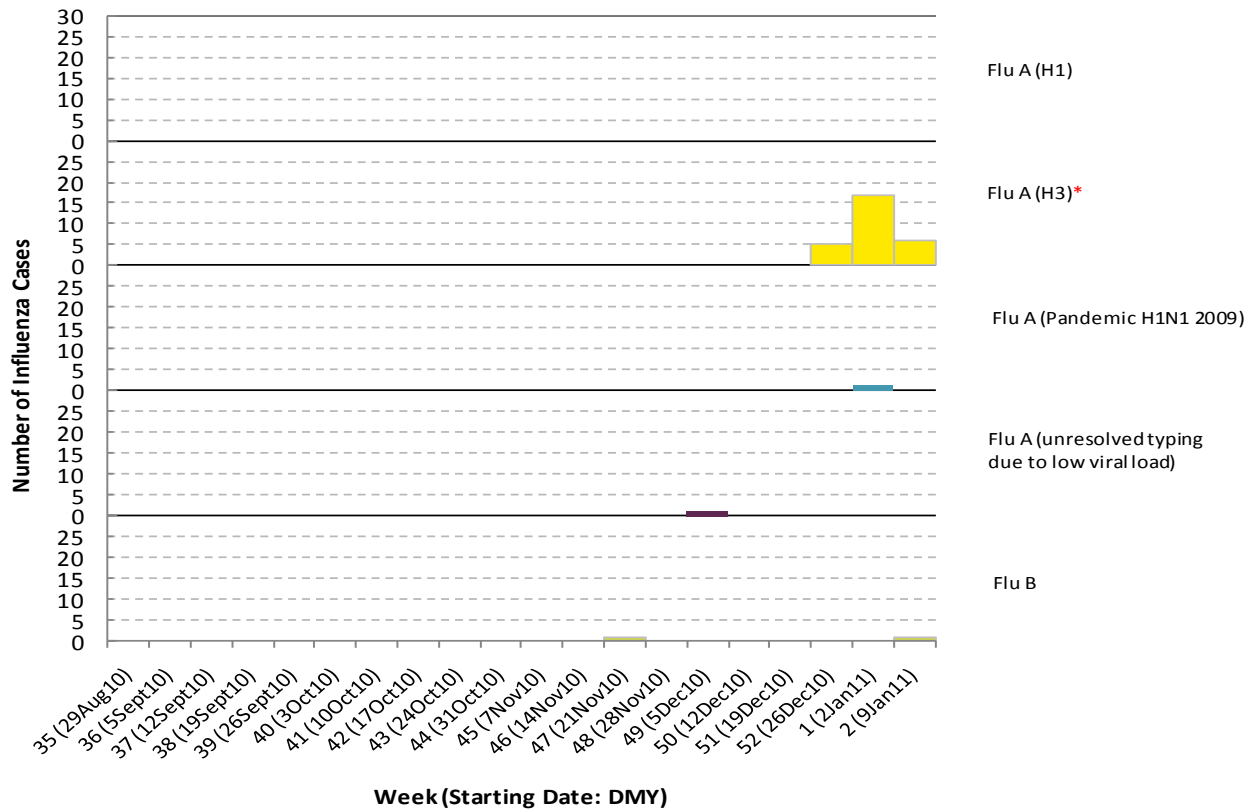
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Source: DIAL – Provincial Laboratory (includes cases with positive respiratory specimens received on or before Jan 15, 2011)
For more information on data definitions and sources see [Annex: Data Notes section at the end of this report](#)

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Figure 4C: Laboratory confirmed Influenza cases, by subtype, by week specimen received, Central Zone (2010-2011)



*Note: Two specimens were positive for both RSV and influenza A (H3).

Source: Outbreak Response Toolkit (includes cases with positive respiratory specimens received on or before Jan 15, 2011).

For more information on data definitions and sources see [Annex: Data Notes section at the end of this report](#)

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An influenza report targeted to the general public is available at: <http://www.health.alberta.ca/health-info/influenza-evidence.html>

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Table 4A: New Influenza cases (and age specific rates), by subtype, by age group, Central Zone (Week 2: Jan 9-15, 2011)

	Flu A (Seasonal-H1)		Flu A (Seasonal-H3)		Flu A (Pandemic H1N1 2009)		Flu A (unresolved typing due to low viral load)		Flu B		Total	
	#	Rate (per 10,000)	#	Rate (per 10,000)	#	Rate (per 10,000)	#	Rate (per 10,000)	#	Rate (per 10,000)	#	Rate (per 10,000)
0 to <2 years	0	0.0	2	1.6	0	0.0	0	0.0	0	0.0	2	1.6
2 to <5 years	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
5 to <9 years	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
9 to <18 years	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
18 to <65 years	0	0.0	3	0.1	0	0.0	0	0.0	1	<0.1	4	0.1
65 to <75 years	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
75+ years	0	0.0	1	0.4	0	0.0	0	0.0	0	0.0	1	0.4
Total	0	0.0	6	0.1	0	0.0	0	0.0	1	<0.1	7	0.2

Table 4B: Cumulative Influenza cases (and age specific rates), by subtype, by age group, Central Zone (Aug 29, 2010 – Jan 15, 2011)

	Flu A (Seasonal-H1)		Flu A (Seasonal-H3)		Flu A (Pandemic H1N1 2009)		Flu A (unresolved typing due to low viral load)		Flu B		Total	
	#	Rate (per 10,000)	#	Rate (per 10,000)	#	Rate (per 10,000)	#	Rate (per 10,000)	#	Rate (per 10,000)	#	Rate (per 10,000)
0 to <2 years	0	0.0	3	2.5	0	0.0	0	0.0	0	0.0	3	2.5
2 to <5 years	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
5 to <9 years	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
9 to <18 years	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
18 to <65 years	0	0.0	8	0.3	1	<0.1	1	<0.1	2	0.1	12	0.4
65 to <75 years	0	0.0	2	0.7	0	0.0	0	0.0	0	0.0	2	0.7
75+ years	0	0.0	15	5.5	0	0.0	0	0.0	0	0.0	15	5.5
Total	0	0.0	28	0.6	1	<0.1	1	<0.1	2	0.0	32	0.7

Source for Tables 4A & 4B: Outbreak Response Toolkit (includes cases with positive respiratory specimens received on or before Jan 15, 2011).

Population data values used to calculate rates are for June 30, 2009 and are estimated using actual population values from the Alberta Health Care Insurance Plan (AHCIP) Registration File as of March 31, 2009.

For more information on data definitions and sources see Annex: Data Notes section at the end of this report

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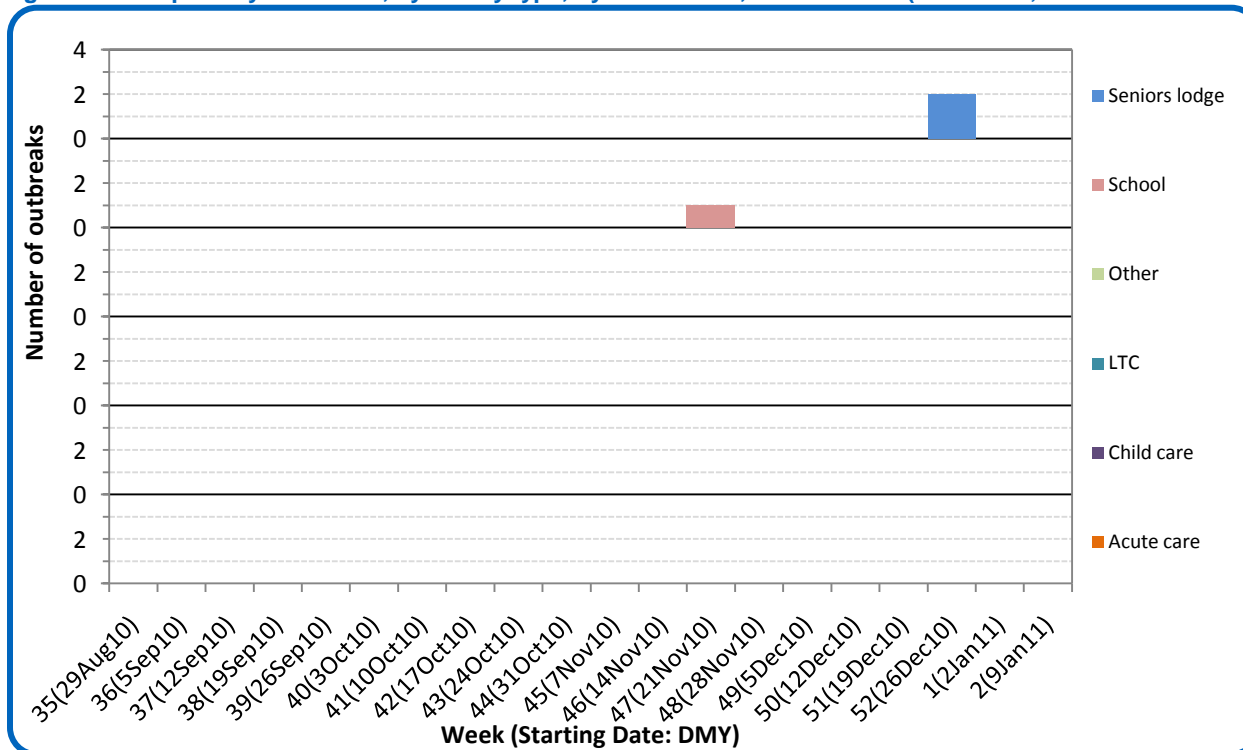
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An influenza report targeted to the general public is available at: <http://www.health.alberta.ca/health-info/influenza-evidence.html>

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The respiratory outbreak in a seniors' lodge/assisted living facility, which had a symptom onset date of Dec 30, 2010 and was described in the last report, has now been confirmed as an Influenza A (H3) outbreak. There are three more outbreaks in Central Zone currently pending laboratory confirmation; one in a seniors' lodge/assisted living facility and two in long term care facilities.

Figure 4D: Respiratory outbreaks, by facility type, by onset week, Central Zone (2010-2011; school outbreaks may not have a laboratory confirmation)



Source: Alberta Outbreak Reporting Form as of 23:59 on Jan 15, 2011.

For more information on data definitions and sources see Annex: Data Notes section at the end of this report. LTC stands for long term care facility.

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An influenza report targeted to the general public is available at: <http://www.health.alberta.ca/health-info/influenza-evidence.html>

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Attack Rates in respiratory outbreaks

The influenza A (H3) outbreak described above had an attack rate of 6%. The outbreaks pending laboratory confirmation had preliminary attack rates of 20% (seniors' lodge), 21% (long term care facility) and 40% (long term care facility), respectively.

Influenza-like illness visits and “Left Without Being seen”

There are no data available from this zone.

Respiratory related calls to Health Link Alberta

The number of calls to Health Link Alberta by residents of Central Zone for cough or breathing difficulties was 47% higher in Week 2 (Jan 9 – 15, 2011) than in Week 1 (Jan 2-8, 2011), reaching the highest level of this season.

Percentage of visits to sentinel offices with Influenza-like illness (ILI)

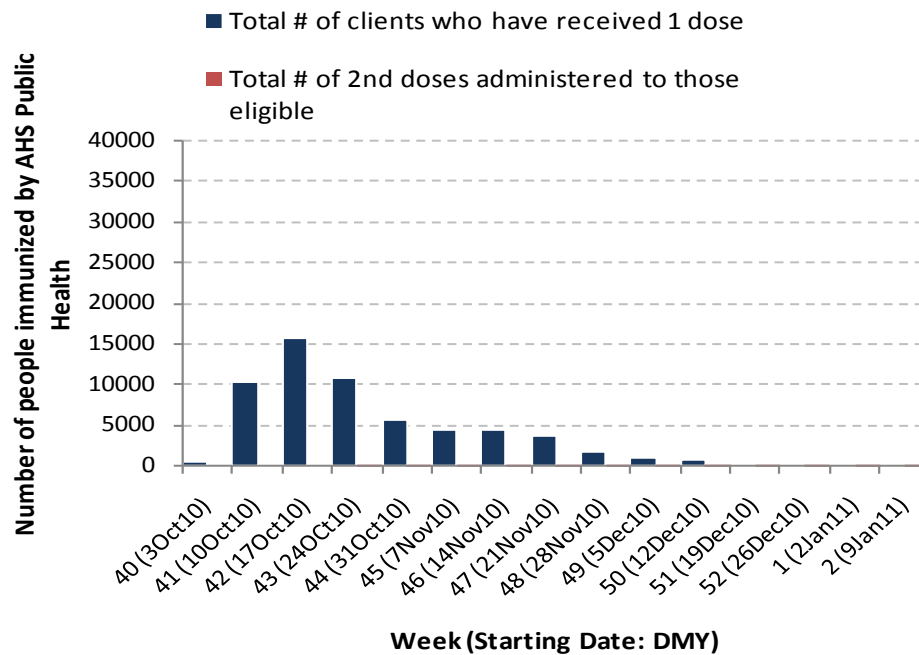
There were reports of ILI-related visits to sentinel physician offices by residents of Central Zone in the first week of January, but the percentage was very low. No ILI-related visits were reported for Week 52 (Dec 26, 2010 – Jan 1, 2011).

Percentage of visits to sentinel offices with lower respiratory tract infection (LTRI)

The percentage of LTRI-related visits to sentinel physician offices by residents of Central Zone was close to 2% in the first week of January, nearly double what it was the week prior to that.

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Figure 4E: Number Immunized by AHS (Public Health), by week, Central Zone (2010-2011)



Source: AHS Zones (doses do not include those delivered by external providers)
 Note: Immunization coverage rates will be reported at the end of the influenza season
 For more information on data definitions and sources see [Annex: Data Notes section at the end of this report](#)

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Table 4C: AHS (Public Health) Delivered Influenza Immunizations (with Cumulative totals), by priority group, Central Zone (2010-2011)

Priority Group	Number Immunized (Week 2 – Jan 9-15, 2011)	Cumulative Number Immunized (since Oct 3, 2010)
Long term care staff	5	403
Health care workers	40	2,537
Pregnant women	6	418
Residents of long term care	4	1,103
65 years of age and over	45	21,997
All children 6 months up to and including 23 months*	Dose #1	1,921
	Dose #2	628
All children 24 months up to and including 59 months*	Dose #1	2,174
	Dose #2	143
High risk: 5 years up to and including 8 years*	Dose #1	623
	Dose #2	22
High risk: 9 years up to and including 64 years	25	6,752
Healthy: 5 years up to and including 8 years*	Dose #1	1,889
	Dose #2	64
Healthy: 9 years up to and including 64 years	99	20,366
Total number of clients who have received 1 dose	354	60,183
Total number of 2nd doses administered to those eligible*	118	857

Source: AHS Zones (doses do not include those delivered by external providers)

*Children under 9 years of age who have not received at least one dose of seasonal influenza vaccine in past years require two doses, given at least four weeks apart.

Note: Immunization coverage rates will be reported at the end of the influenza season

For more information on data definitions and sources see [Annex: Data Notes section at the end of this report](#)

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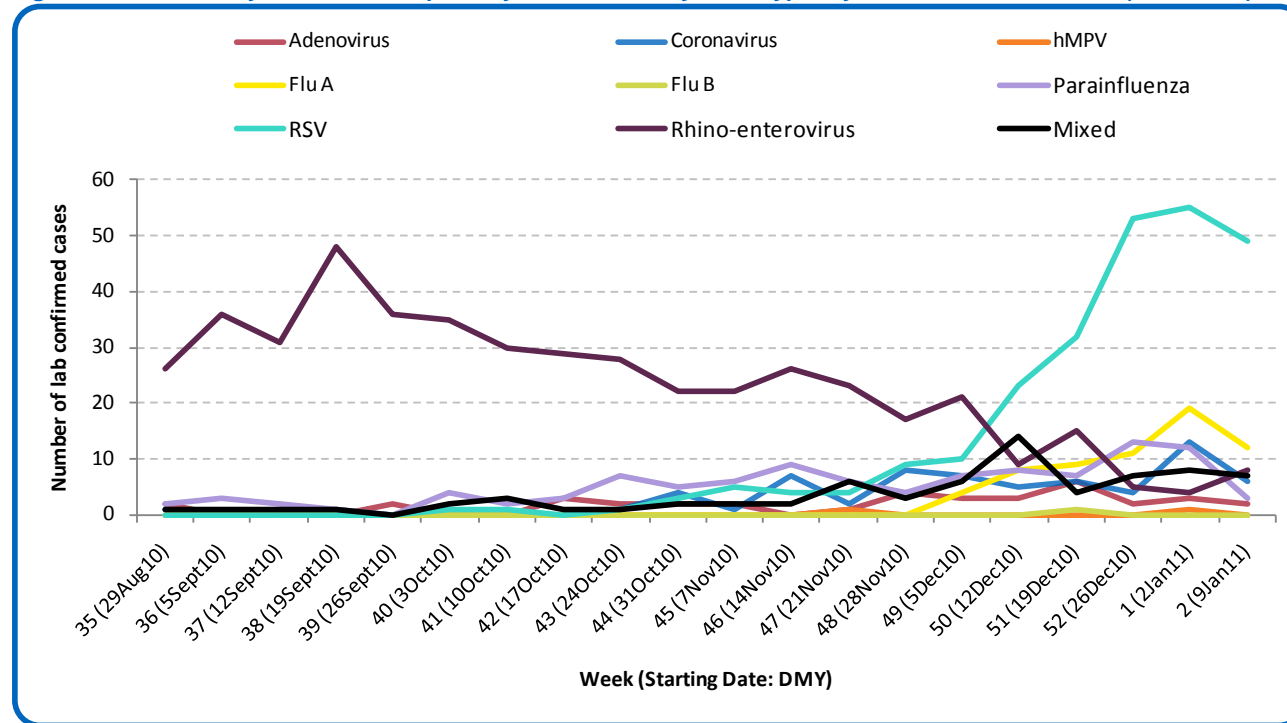
An influenza report targeted to the general public is available at: <http://www.health.alberta.ca/health-info/influenza-evidence.html>

SECTION 5: ZONE 4 – EDMONTON

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RSV continues to be the predominant respiratory virus circulating in Edmonton Zone, although the number of laboratory confirmed cases decreased last week from the previous week. In addition, there were 12 new cases of influenza A confirmed last week (eight were sub-typed as H3, four were sub-typed as H1N1 2009). The new influenza cases include four infants under the age of two years, one child aged nine to less than 18 years, five adults aged 18 to less than 65 years of age, and two adults aged 75 or over. This season, there have been a total of 64 Influenza cases confirmed in the Edmonton Zone. Of note, the province’s first outbreak of influenza A (H1N1) 2009 was confirmed in an Edmonton Zone long term care facility. One of the previously mentioned influenza A (H1N1) 2009 cases is associated with this outbreak.

Figure 5A: Laboratory confirmed respiratory virus cases, by virus type, by week, Edmonton Zone (2010-2011)



Sources: DIAL – Provincial Laboratory and the Outbreak Response Toolkit (includes cases with positive respiratory specimens received on or before Jan 15, 2011). For more information on data definitions and sources see [Annex: Data Notes section at the end of this report](#)

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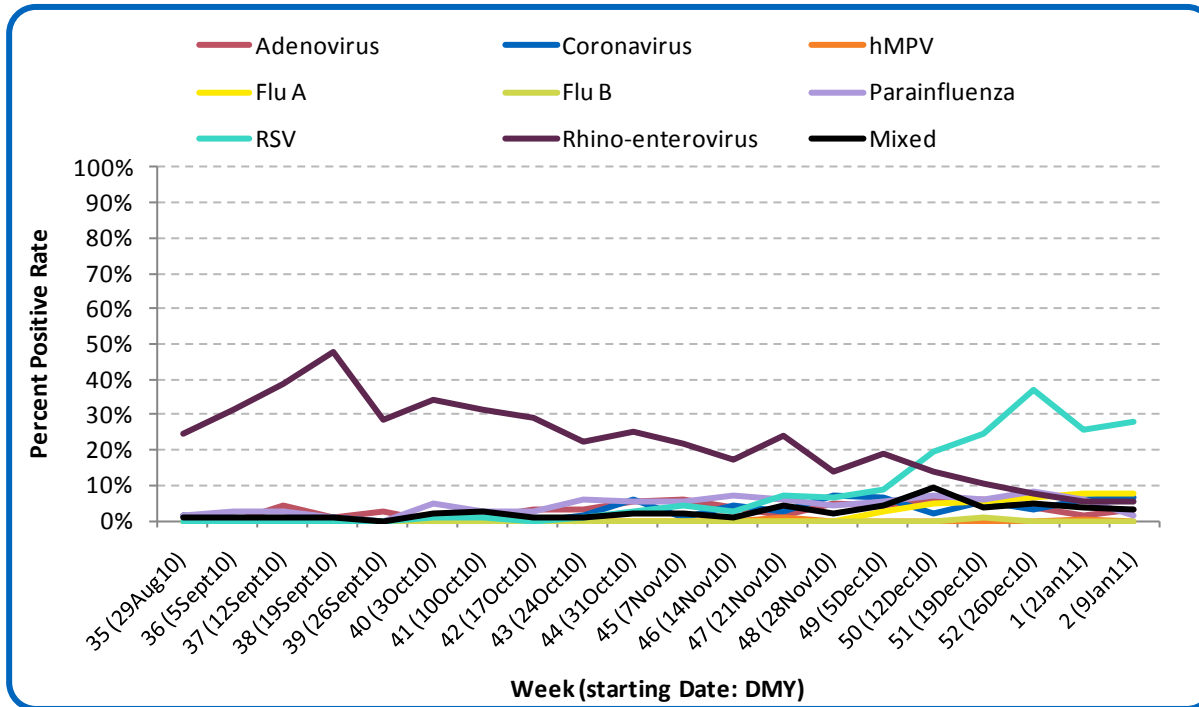
Public Health Surveillance

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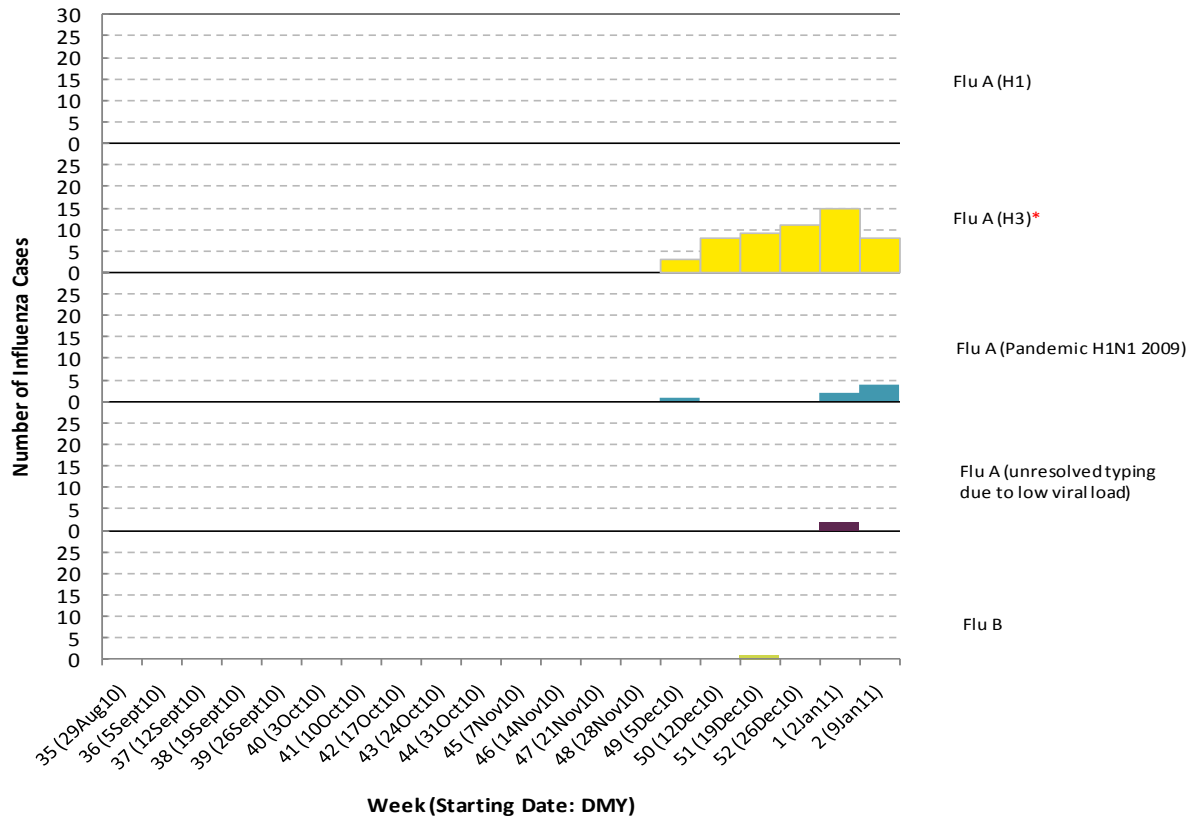
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Figure 5B: Respiratory Specimen Percent Positive Rates, by virus type, by week, Edmonton Zone (2010-2011)



Source: DIAL – Provincial Laboratory (includes cases with positive respiratory specimens received on or before Jan 15, 2011)
For more information on data definitions and sources see [Annex: Data Notes section at the end of this report](#)

Figure 5C: Laboratory confirmed Influenza cases, by subtype, by week specimen received, Edmonton Zone (2010-2011)



*Note: One specimen was positive for both RSV and influenza A (H3).

Source: Outbreak Response Toolkit (includes cases with positive respiratory specimens received on or before Jan 15, 2011).
For more information on data definitions and sources see [Annex: Data Notes section at the end of this report](#)

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Table 5A: New Influenza cases (and age specific rates), by subtype, by age group, Edmonton Zone (Week 2: Jan 9-15, 2011)

	Flu A (Seasonal-H1)		Flu A (Seasonal-H3)		Flu A (Pandemic H1N1 2009)		Flu A (unresolved typing due to low viral load)		Flu B		Total	
	#	Rate (per 10,000)	#	Rate (per 10,000)	#	Rate (per 10,000)	#	Rate (per 10,000)	#	Rate (per 10,000)	#	Rate (per 10,000)
0 to <2 years	0	0.0	3	1.0	1	0.3	0	0.0	0	0.0	4	1.3
2 to <5 years	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
5 to <9 years	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
9 to <18 years	0	0.0	1	0.1	0	0.0	0	0.0	0	0.0	1	0.1
18 to <65 years	0	0.0	2	<0.1	3	<0.1	0	0.0	0	0.0	5	0.1
65 to <75 years	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
75+ years	0	0.0	2	0.3	0	0.0	0	0.0	0	0.0	2	0.3
Total	0	0.0	8	0.1	4	<0.1	0	0.0	0	0.0	12	0.1

Table 5B: Cumulative Influenza cases (and age specific rates), by subtype, by age group, Edmonton Zone (Aug 29, 2010 – Jan 15, 2011)

	Flu A (Seasonal-H1)		Flu A (Seasonal-H3)		Flu A (Pandemic H1N1 2009)		Flu A (unresolved typing due to low viral load)		Flu B		Total	
	#	Rate (per 10,000)	#	Rate (per 10,000)	#	Rate (per 10,000)	#	Rate (per 10,000)	#	Rate (per 10,000)	#	Rate (per 10,000)
0 to <2 years	0	0.0	11	3.7	2	0.7	1	0.3	1	0.3	15	5.0
2 to <5 years	0	0.0	5	1.2	0	0.0	0	0.0	0	0.0	5	1.2
5 to <9 years	0	0.0	2	0.4	0	0.0	0	0.0	0	0.0	2	0.4
9 to <18 years	0	0.0	2	0.2	0	0.0	0	0.0	0	0.0	2	0.2
18 to <65 years	0	0.0	19	0.3	5	0.1	0	0.0	0	0.0	24	0.3
65 to <75 years	0	0.0	4	0.6	0	0.0	0	0.0	0	0.0	4	0.6
75+ years	0	0.0	11	1.9	0	0.0	1	0.2	0	0.0	12	2.0
Total	0	0.0	54	0.5	7	0.1	2	0.0	1	<0.1	64	0.6

Source for tables 5A & 5B: Outbreak Response Toolkit (includes cases with positive respiratory specimens received on or before Jan 15, 2011). Population data values used to calculate rates are for June 30, 2009 and are estimated using actual population values from the Alberta Health Care Insurance Plan (AHCIP) Registration File as of March 31, 2009. For more information on data definitions and sources see [Annex: Data Notes section at the end of this report](#)

SURVEILLANCE AND HEALTH STATUS ASSESSMENT

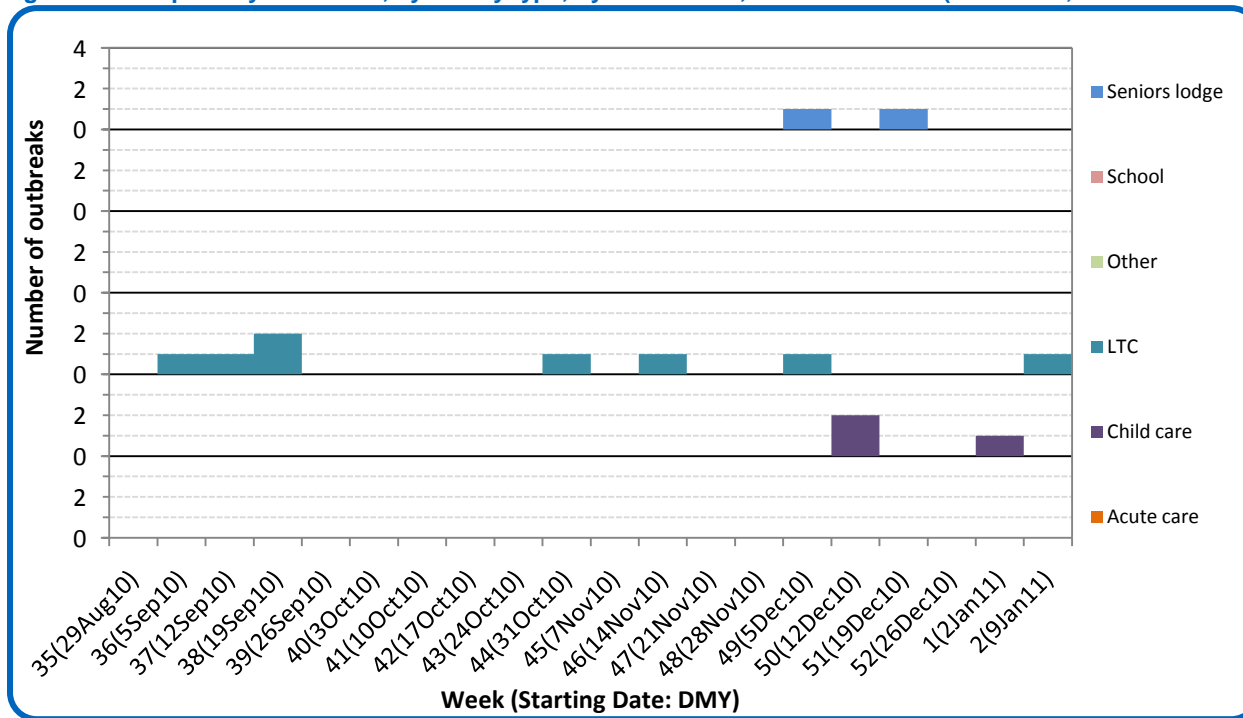
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An influenza report targeted to the general public is available at: <http://www.health.alberta.ca/health-info/influenza-evidence.html>

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An outbreak in an Edmonton Zone daycare (with an onset date of Dec 17, 2010), mentioned in last report, has now been attributed to Influenza A (H3). Another daycare outbreak occurred on Jan 2, 2011 and was confirmed as a RSV outbreak. In addition, an outbreak in a long term care facility (with an onset date of Jan 9, 2011) has been confirmed as an influenza A (H1N1) 2009 outbreak.

Figure 5D: Respiratory outbreaks, by facility type, by onset week, Edmonton Zone (2010-2011; school outbreaks may not have a laboratory confirmation)



Source: Alberta Outbreak Reporting Form as of 23:59 on Jan 15, 2011. LTC stands for long term care facility. For more information on data definitions and sources see [Annex: Data Notes section at the end of this report](#)

SURVEILLANCE AND HEALTH STATUS ASSESSMENT

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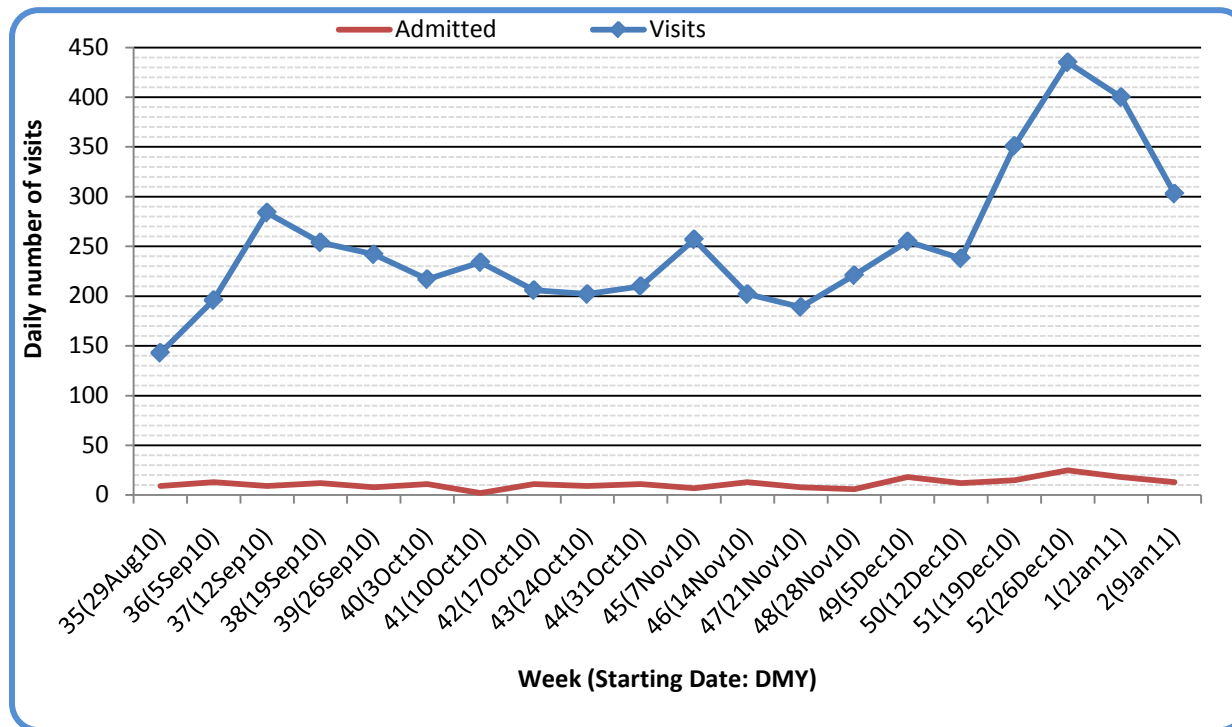
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An influenza report targeted to the general public is available at: <http://www.health.alberta.ca/health-info/influenza-evidence.html>

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At nine Edmonton Zone emergency departments/urgent care centers, the number of visits, hospital admissions, and patients with cough/congestion symptoms who left the ED's without being seen decreased by 30%, 48%, and 88%, respectively, in Week 2 (Jan 9 – 15, 2011) compared to the week before. This brings the percentage of these visits down to 4% of all visits from 5% the previous week.

Figure 5E: Visits to emergency departments/urgent care centers for cough/congestion and admissions to hospitals, Edmonton Zone, by visit week (2010-2011)



Source: Alberta Real Time Syndromic Surveillance (ARTSSN) as of 23:59 on Jan 15, 2011. For more information on data definitions and sources see [Annex: Data Notes section at the end of this report](#)

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Attack rates in respiratory outbreaks

The influenza A (H3) outbreak in the daycare (onset date of Dec 17, 2010) had an attack rate of 18%. The RSV outbreak, also in a daycare, had a preliminary attack rate of 9%. The influenza A (H1N1) 2009 outbreak in the long term care facility had a preliminary attack rate of 1%.

Influenza-like illness visits and “Left Without Being seen”

The number of visits, hospital admissions and patients with ILI symptoms who left without being seen in the nine emergency departments/urgent care centers in Edmonton Zone decreased by 23%, 17% and 27%, respectively, last week compared to the week prior to that. The percentage of ILI-related visits remained at close to 6% of all visits.

Respiratory related calls to Health Link Alberta

The number of calls to Health Link Alberta by residents of Edmonton Zone for cough or breathing difficulties was 9% higher in Week 2 (Jan 9 -15, 2011) than in Week 1 (Jan 2 -8, 2011), but remained less than the percentage in Week 52 of 2010.

Percentage of visits to sentinel offices with influenza-like illness (ILI)

The percentage of ILI-related visits to sentinel physician offices by residents of Edmonton Zone was 75% higher in Week 1 (Jan 2-8, 2011) than in Week 52 (Dec 26, 2010 – Jan 1, 2011).

Percentage of visits to sentinel offices with lower respiratory tract infection (LRTI)

The percentage of LRTI-related visits to sentinel physician offices by residents of Edmonton Zone was 53% lower in Week 1 (Jan 2-8, 2011) than in Week 52 (Dec 26, 2010 – Jan 1, 2011).

The combined percentage of ILI- and LRTI-related visits to sentinel physician offices by residents of Edmonton Zone was 32% lower in Week 1 of 2011 than in Week 52 of 2010, due primarily to fewer LRTI-related visits.

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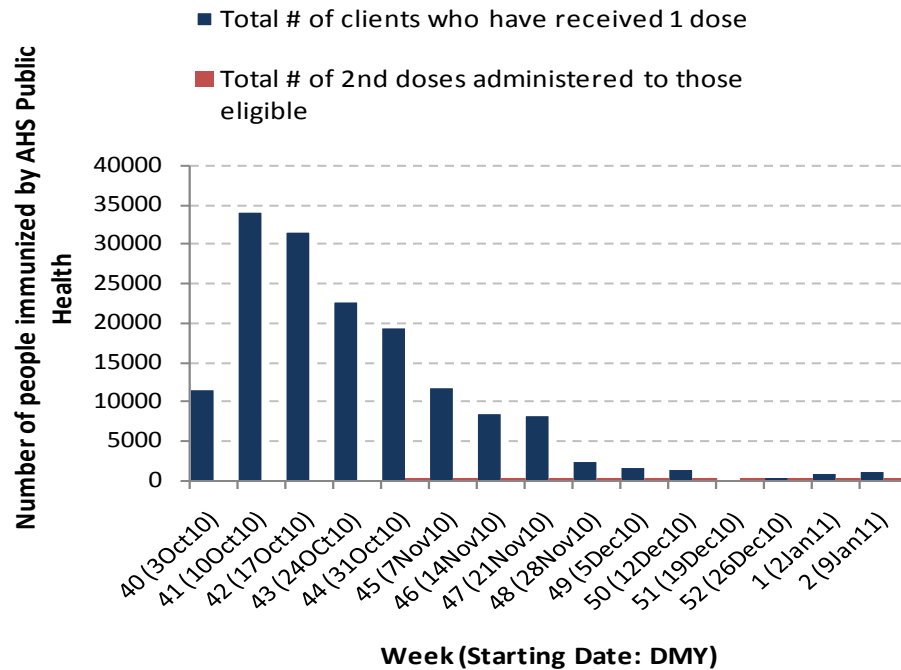
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Figure 5F: Number Immunized by AHS (Public Health), by week, Edmonton Zone (2010-2011)



Source: AHS Zones (doses do not include those delivered by external providers)
 Note: Immunization coverage rates will be reported at the end of the influenza season
 For more information on data definitions and sources see [Annex: Data Notes section at the end of this report](#)

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Table 5C: AHS (Public Health) Delivered Influenza Immunizations (with Cumulative totals), by priority group, Edmonton Zone (2010-2011)

Priority Group	Number Immunized (Week 2 – Jan 9-15, 2011)	Cumulative Number Immunized (since Oct 3, 2010)
Long term care staff	3	320
Health care workers	16	4,697
Pregnant women	17	1,351
Residents of long term care	0	1,030
65 years of age and over	115	48,082
All children 6 months up to and including 23 months*	Dose #1	5,729
	Dose #2	1,534
All children 24 months up to and including 59 months*	Dose #1	6,831
	Dose #2	307
High risk: 5 years up to and including 8 years*	Dose #1	1,282
	Dose #2	33
High risk: 9 years up to and including 64 years	109	16,824
Healthy: 5 years up to and including 8 years*	Dose #1	5,244
	Dose #2	150
Healthy: 9 years up to and including 64 years	583	65,661
Total number of clients who have received 1 dose	1,201	157,051
Total number of 2nd doses administered to those eligible*	181	2,024

Source: AHS Zones (doses do not include those delivered by external providers)

*Children under 9 years of age who have not received at least one dose of seasonal influenza vaccine in past years require two doses, given at least four weeks apart.

Note: Immunization coverage rates will be reported at the end of the influenza season

For more information on data definitions and sources see [Annex: Data Notes section at the end of this report](#)

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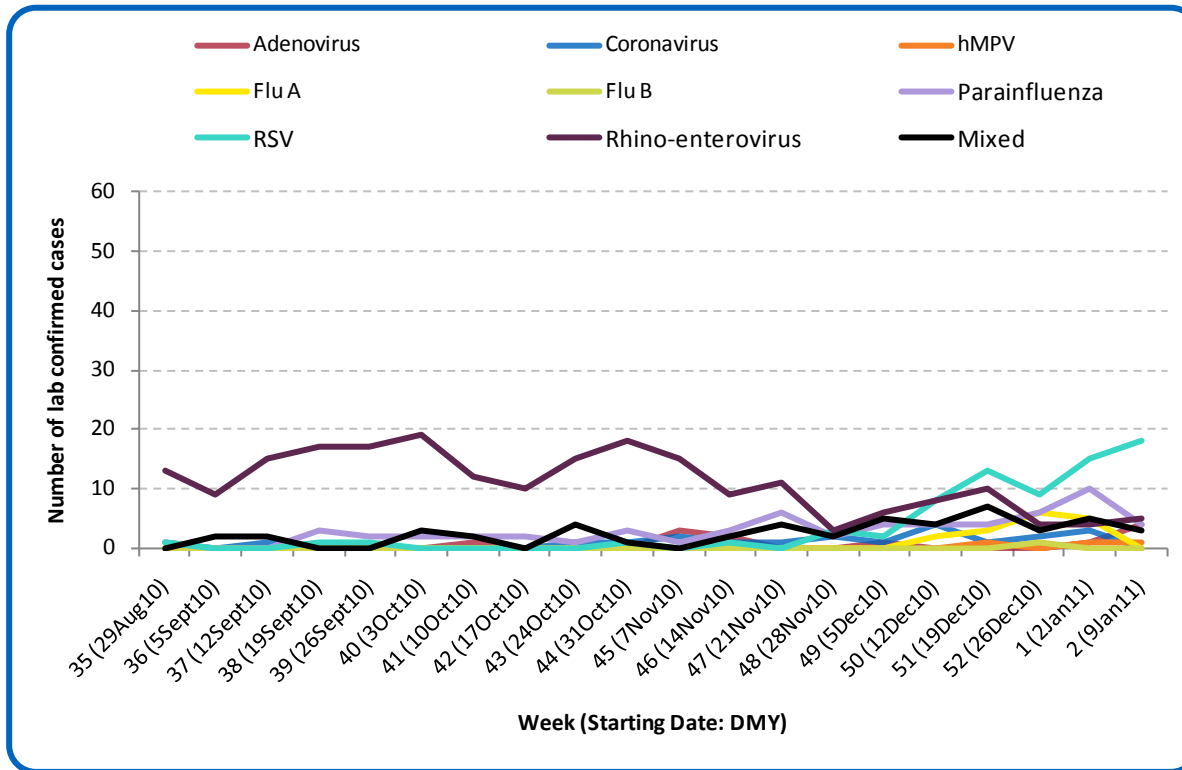
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SECTION 6: ZONE 5 – NORTH

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Unlike the decreasing trend seen last week in other areas of the province, the number of laboratory confirmed RSV cases continued to increase in North Zone. There were no new cases of influenza confirmed in North Zone last week. The total number for the season remains at 17; including 13 cases of influenza A (H3), three cases of influenza A (H1N1) 2009, and one case of influenza type B.

Figure 6A: Laboratory confirmed respiratory virus cases, by virus type, by week, North Zone (2010-2011)



Sources: DIAL – Provincial Laboratory and the Outbreak Response Toolkit (includes cases with positive respiratory specimens received on or before Jan 15, 2011). For more information on data definitions and sources see [Annex: Data Notes section at the end of this report](#)

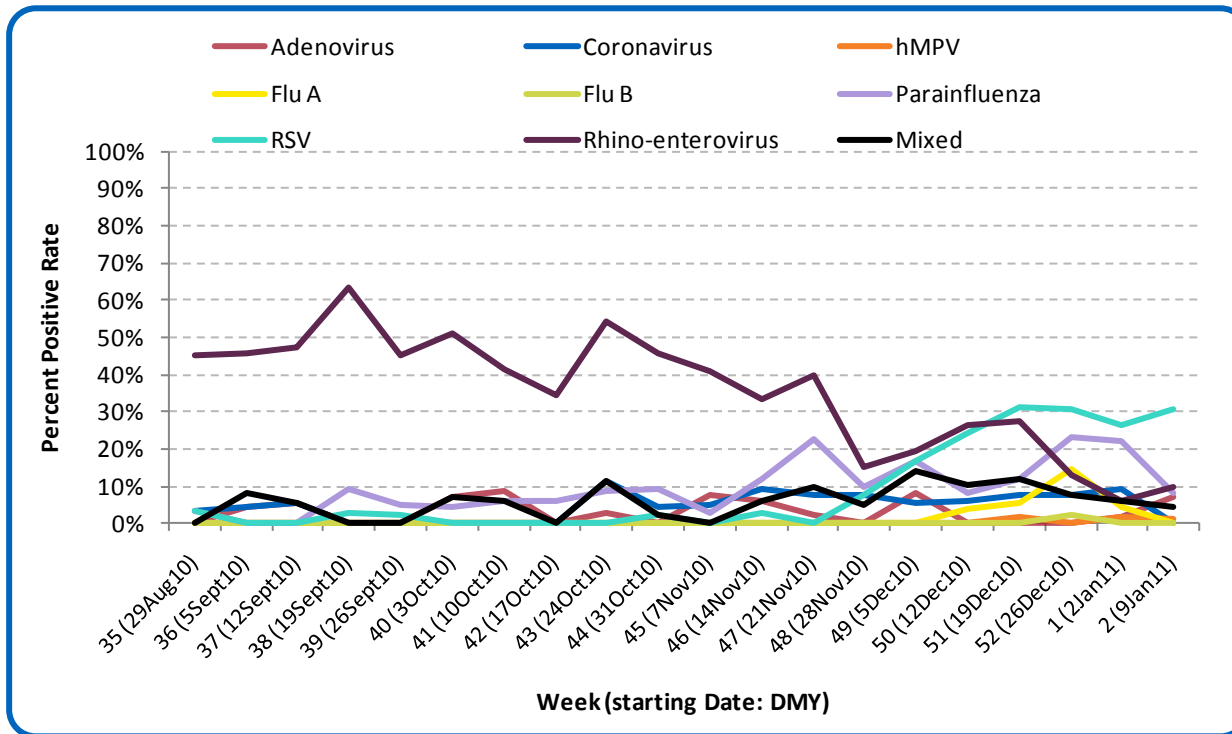
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Figure 6B: Respiratory Specimen Percent Positive Rates, by virus type, by week, North Zone (2010-2011)



Source: DIAL – Provincial Laboratory (includes cases with positive respiratory specimens received on or before Jan 15, 2011)
For more information on data definitions and sources see [Annex: Data Notes section at the end of this report](#)

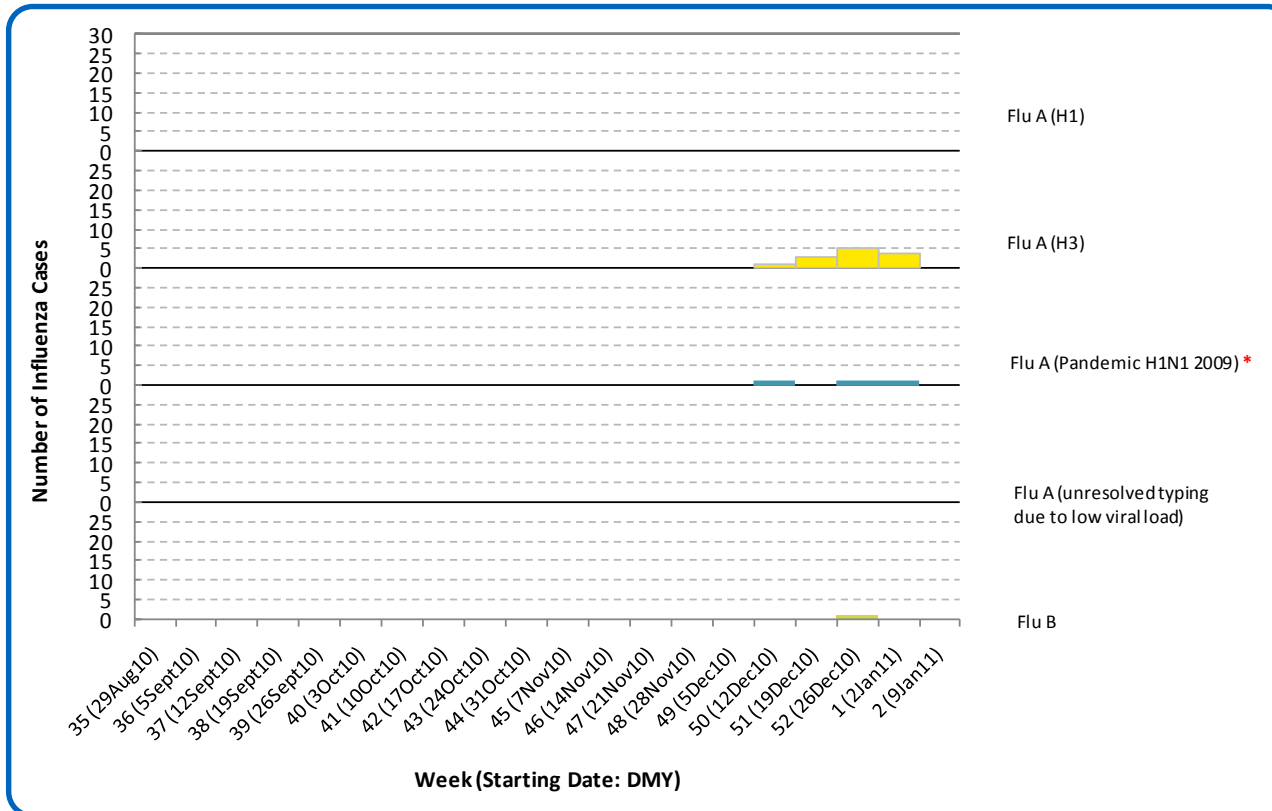
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Figure 6C: Laboratory confirmed Influenza cases, by subtype, by week specimen received, North Zone (2010-2011)



*Note: Two specimens were positive for both RSV and influenza A (H1N1) 2009.
 Source: Outbreak Response Toolkit (includes cases with positive respiratory specimens received on or before Jan 15, 2011).
 For more information on data definitions and sources see [Annex: Data Notes section at the end of this report](#)

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Table 6A: Cumulative Influenza cases (and age specific rates), by subtype, by age group, Edmonton Zone (Aug 29, 2010-Jan 15, 2011)

	Flu A (Seasonal-H1)		Flu A (Seasonal-H3)		Flu A (Pandemic H1N1 2009)		Flu A (unresolved typing due to low viral load)		Flu B		Total	
	#	Rate (per 10,000)	#	Rate (per 10,000)	#	Rate (per 10,000)	#	Rate (per 10,000)	#	Rate (per 10,000)	#	Rate (per 10,000)
0 to <2 years	0	0.0	3	2.2	2	1.4	0	0.0	0	0.0	5	3.6
2 to <5 years	0	0.0	0	0.0	0	0.0	0	0.0	1	0.5	1	0.5
5 to <9 years	0	0.0	1	0.4	0	0.0	0	0.0	0	0.0	1	0.4
9 to <18 years	0	0.0	2	0.4	0	0.0	0	0.0	0	0.0	2	0.4
18 to <65 years	0	0.0	6	0.2	1	<0.1	0	0.0	0	0.0	7	0.3
65 to <75 years	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
75+ years	0	0.0	1	0.6	0	0.0	0	0.0	0	0.0	1	0.6
Total	0	0.0	13	0.3	3	0.1	0	0.0	1	0.0	17	0.4

Source for Tables 6A & 6B: Outbreak Response Toolkit (includes cases with positive respiratory specimens received on or before *Jan 15, 2011*).

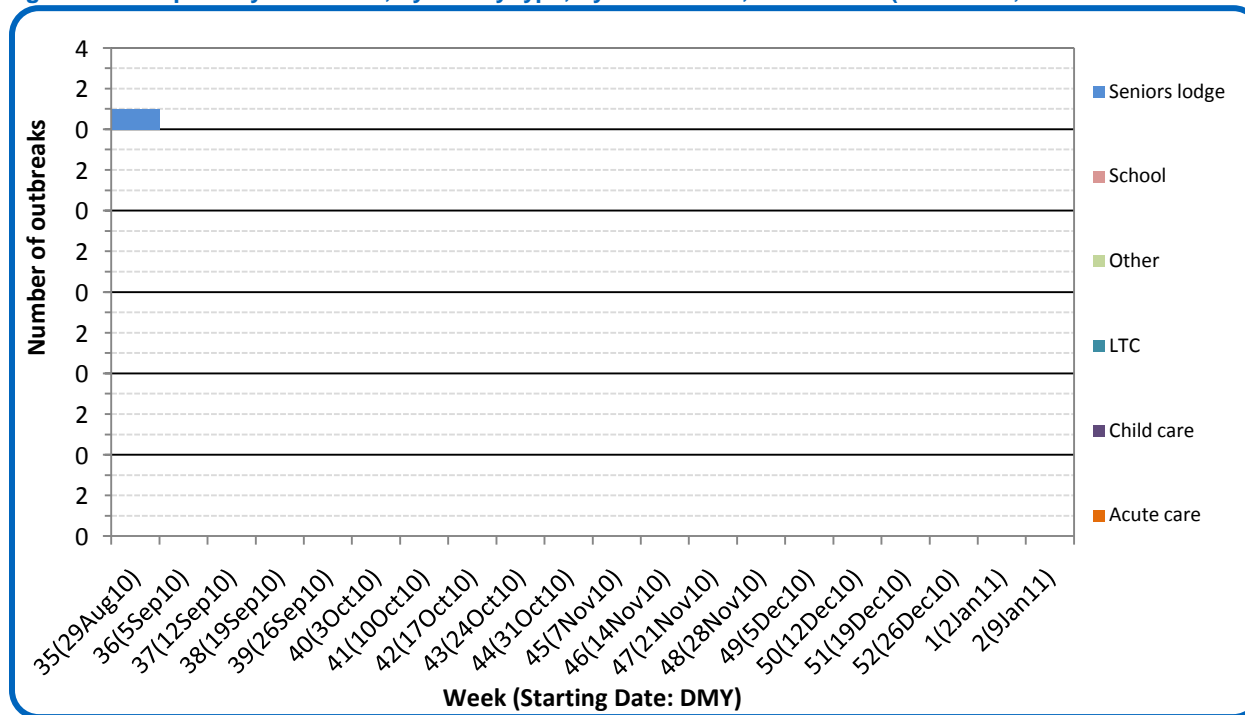
Population data values used to calculate rates are for June 30, 2009 and are estimated using actual population values from the Alberta Health Care Insurance Plan (AHCIP) Registration File as of March 31, 2009.

For more information on data definitions and sources see [Annex: Data Notes section at the end of this report](#)

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There have been no laboratory confirmed respiratory outbreaks reported in North Zone since the week of Aug 29, 2010.

Figure 6D: Respiratory outbreaks, by facility type, by onset week, North Zone (2010-2011; school outbreaks may not have a laboratory confirmation)



Source: Alberta Outbreak Reporting Form as of 23:59 on Jan 15, 2011. LTC stands for long term care facility. For more information on data definitions and sources see [Annex: Data Notes section at the end of this report](#)

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Attack rates in respiratory outbreaks

There have been no reports of respiratory outbreaks from the North Zone since the beginning of September.

Influenza-like illness visits and “Left Without Being seen”

There are no data available for the North Zone.

Respiratory related calls to Health Link

The number of calls to Health Link Alberta by residents of North Zone for cough or breathing difficulties was 1% lower last week compared to the week prior to that, holding a relatively steady pattern.

Percentage of visits to sentinel offices with Influenza-like illness

There were reports of ILI-related visits to sentinel physician offices by residents of North Zone in Week 1 (Jan 2-8, 2011), with the percentage being 1.5% of total visits. There were no reports in the previous two weeks.

Percentage of visits to sentinel offices with lower respiratory tract infection

The percentage of LRTI-related visits to sentinel physician offices by residents of North Zone was close to 3% in the first week of January. This is consistent with what was reported the week prior to that.

The combined percentage of ILI- and LRTI-related visits to sentinel physician offices by residents of North Zone in Week 1 (Jan 2-8, 2011) was 4.5% of all visits, which is 44% higher than it was in Week 52 (Dec 26 – Jan 1, 2010).

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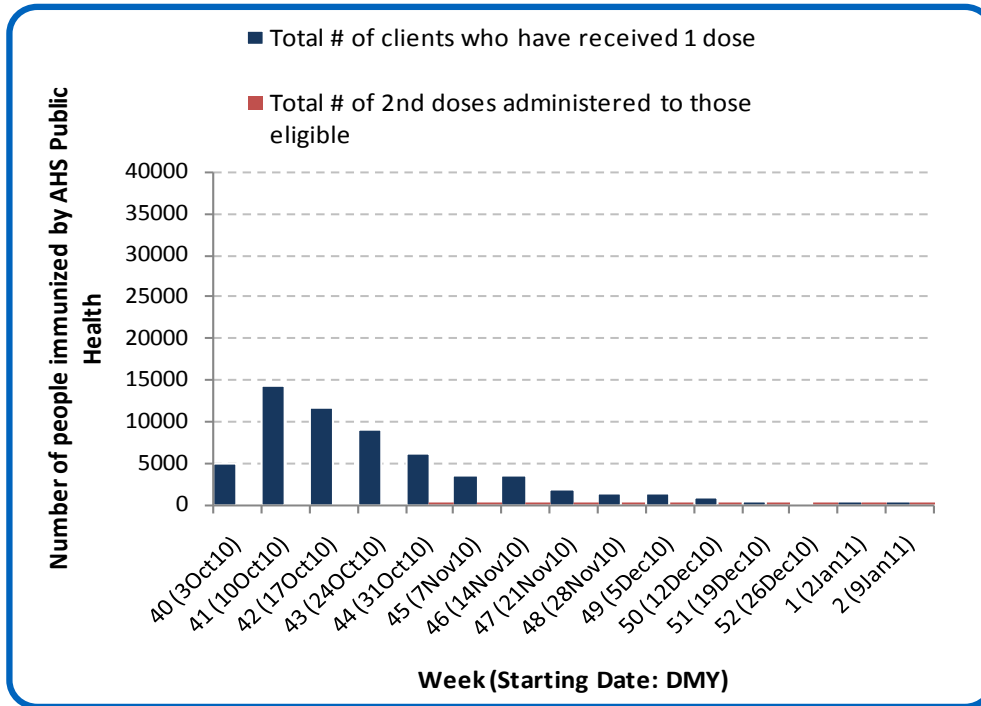
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Figure 6E: Number Immunized by AHS (Public Health), by week, North Zone (2010-2011)



Source: AHS Zones (doses do not include those delivered by external providers)
 Note: Immunization coverage rates will be reported at the end of the influenza season
 For more information on data definitions and sources see [Annex: Data Notes section at the end of this report](#)

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Table 6B: AHS (Public Health) Delivered Influenza Immunizations (with Cumulative totals), by priority group, North Zone (2010-2011)

Priority Group	Number Immunized (Week 2 – Jan 9-15, 2011)	Cumulative Number Immunized (since Oct 3, 2010)
Long term care staff	2	803
Health care workers	25	4,620
Pregnant women	7	536
Residents of long term care	0	1,245
65 years of age and over	90	15,598
All children 6 months up to and including 23 months*	Dose #1	2,076
	Dose #2	585
All children 24 months up to and including 59 months*	Dose #1	2,420
	Dose #2	97
High risk: 5 years up to and including 8 years*	Dose #1	907
	Dose #2	10
High risk: 9 years up to and including 64 years	63	7,585
Healthy: 5 years up to and including 8 years*	Dose #1	2,348
	Dose #2	50
Healthy: 9 years up to and including 64 years	210	22,483
Total number of clients who have received 1 dose	546	60,621
Total number of 2nd doses administered to those eligible*	50	742

Source: AHS Zones (doses do not include those delivered by external providers)

*Children under 9 years of age who have not received at least one dose of seasonal influenza vaccine in past years require two doses, given at least four weeks apart.

Note: Immunization coverage rates will be reported at the end of the influenza season

For more information on data definitions and sources see [Annex: Data Notes section at the end of this report](#)

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ANNEX: DATA NOTES

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LABORATORY

Information on laboratory confirmed respiratory virus activity in Alberta is based on data from 2 sources:

- 1) Non-influenza viruses: The Alberta Provincial Public Health Laboratory DIAL system (Data Integration for Alberta Laboratories) – a specimen based system. Cases are determined by rationalizing samples from the same patient with the same virus identified within a 30-day period. The information (i.e. received date) from the first sample identifying the identical virus is used in this report.
- 2) Influenza viruses: The Alberta influenza Case Management System – an influenza case based system.

Both data sources are web-based applications supported by the Canadian Network for Public Health Intelligence.

The data in this report are based on specimens obtained from residents of Alberta; according to the date the specimen was received by the laboratory.

Definition for “mixed” – a single sample where multiple viral organisms were isolated.

INFLUENZA-LIKE ILLNESS

Four data sources are used to provide information on utilization of primary and acute care services by people with Influenza-Like Illness (ILI). *Caution: Each source uses potentially different definitions of ILI.*

1. Primary care summaries are obtained from the TARRANT system. Patients seen by TARRANT physicians may not be representative of the general population. Reported ILI cases represent people seen by TARRANT physicians, according to the date seen by the physician. The percentage of ILI represents the proportion of patients with ILI of all patients seen by the physician.
2. In addition to reporting visits of patients with ILI, TARRANT physicians also report visits with lower respiratory tract infections (LRTI). Each visit is recorded only once, even if a patient has symptoms consistent with ILI and LRTI. The combined ILI- and LRTI-related visits are therefore suggestive of overall respiratory infections in the patient population.
3. Information on visits for ILI in Emergency Departments (ED) and urgent care centers are provided by the Alberta Real Time Syndromic Surveillance Net (ARTSSN) data repository. ILI designation is based on patients being screened in emergency departments with an ILI screening tool. The primary purpose of the ILI screening tool is to implement appropriate infection control measures. The original data sources fed to the ARTSSN data repository are EDIS (Emergency Department Information System) for the Edmonton Zone and REDIS for the Calgary Zone.
4. Health Link Alberta is a 24 hour a day, 7 day a week nurse telephone advice and health information service that provides the public with advice and information about health symptoms and concerns. The original data source for the daily calls to Health Link Alberta for ILI, cough, and breathing difficulties is the Health Link database called Sharp Focus.

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OUTBREAKS

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Upon notification of an outbreak, the *Alberta Health & Wellness/Alberta Health Services* Outbreak Reporting Form (Fillable PDF) is completed by Zone Public Health investigators and sent to *Alberta Health & Wellness and AHS Public Health Surveillance*. The form includes information about the type and location of the outbreak, type of facility, and the causative organism (confirmed or suspected). There may be a delay between the reporting of an outbreak and the identification of the organism. This report includes only those outbreaks that are laboratory confirmed and caused by influenza-like illness viruses; outbreaks that are caused by bacteria (i.e. pertussis, invasive pneumococcal disease) and other types of viruses (i.e. measles, rubella (German measles), chickenpox) are excluded. Also excluded are those outbreaks that have no causative agent identified by the Provincial Laboratory for Public Health or where specimens are not tested or an outbreak with only one infected (confirmed or probable) case during a 7 day period. This follows the same approach of PHAC FluWatch for defining ILI/influenza outbreak. The naming convention of outbreak facilities by FluWatch - "Hospital and residential institutions" - is also adopted. Outbreaks in schools are officially counted in tables or graphs whether there is or not a laboratory confirmation; outbreaks in hospital and residential institutions that are pending for laboratory confirmation are described for information only but not officially presented in graphs or tables in this report.

INFLUENZA IMMUNIZATIONS

Influenza immunization data are reported by AHS zones. Numbers are available to the Public Health Surveillance team at the beginning of the week for the doses administered the previous week (Sunday to Saturday). It includes those doses administered by AHS (Public Health) only. Clients can only exist in one priority group. Immunization coverage rates will be reported at the end of March, 2011.

POPULATION NUMBERS

Population data values used to calculate rates are for June 30, 2009 and are estimated using actual population values from the Alberta Health Care Insurance Plan (AHCIP) Registration File as of March 31, 2009. The following registrants are included: residents of Alberta; 'residents' of Alberta temporarily living elsewhere, such as extended visits or vacations or students attending an educational institute outside of Alberta, or Albertans temporarily (up to four years) working outside Alberta; persons during the first three months after they move from Alberta to another Canadian province; dependants of members of the RCMP and Armed Forces; persons from another country who are working or studying in Alberta on valid visas; and Natives/Aboriginals whose premiums are paid by Health Canada, First Nations and Inuit Health Branch. Not included are: members of the Armed Forces and RCMP; inmates at federal penitentiaries; persons from other provinces during their first three months in Alberta; and persons who have not registered for eligibility, or have opted out.

Slight differences between values provided at this level of aggregation and data provided at other levels of aggregation may occur because of round-off error. Population values are subject to change without notice when new source data is received.

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