

Regional Syndromic Surveillance Bi-Weekly Report

Wednesday December 4th, 2019 - Tuesday December 17th, 2019

Health Unit Coverage = KFL&A, HPECHU, LGL

Kingston, Frontenac & Lennox and
Addington Public Health Knowledge
Management Team

ACES Hospital Emergency Department (ED) Activity

Summary: Overall emergency room visit volume was stable across all regional health unit jurisdictions compared to the previous two week period of November 20th through December 3rd. (KFL&A: 5142 vs. 5284, HPE: 3895 vs. 4048, LGL: 4318 vs. 4251).

Info. items: 1) KFL&A PH still remains at two lab confirmed cases of influenza A for the 2019-2020 season. ED visit volumes for respiratory, ILLI, and pneumonia related issues remain stable and well below alert thresholds. 2) Provincially, ED visits and admissions for respiratory related complaints jumped last week and that trend is expected to continue with sharp rises over the next 2-3 weeks. This will drastically increase seasonal pressures on acute care settings (visit [ILLI mapper](#) for more updates). RSV and influenza percent positivity continues to increase as well, with rhinovirus decreasing (see page 5). 3) Nationally, influenza A is the most common influenza virus at present, with A(H3N2) accounting for 65% of all subtyped A samples. Proportions of influenza B however jumped to 44% last week. Across all ages this season, the majority of hospitalizations due to influenza have been associated with A(H3N2), but 50% of pediatric hospitalizations have been due to influenza B.

KFL&A Respiratory: There is currently one rhinovirus outbreak occurring in a local long-term care/retirement facility.

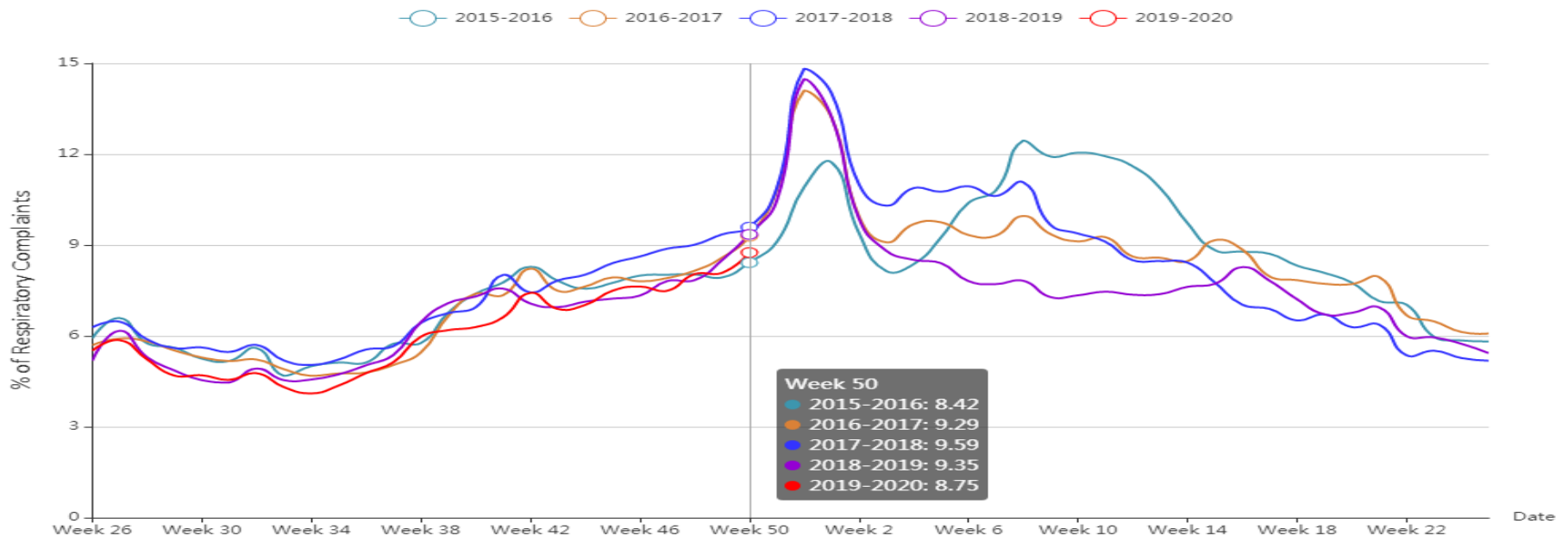
KFL&A Gastrointestinal: There are currently no enteric outbreaks occurring in any local long-term care/retirement facilities.

Local Admissions of Interest

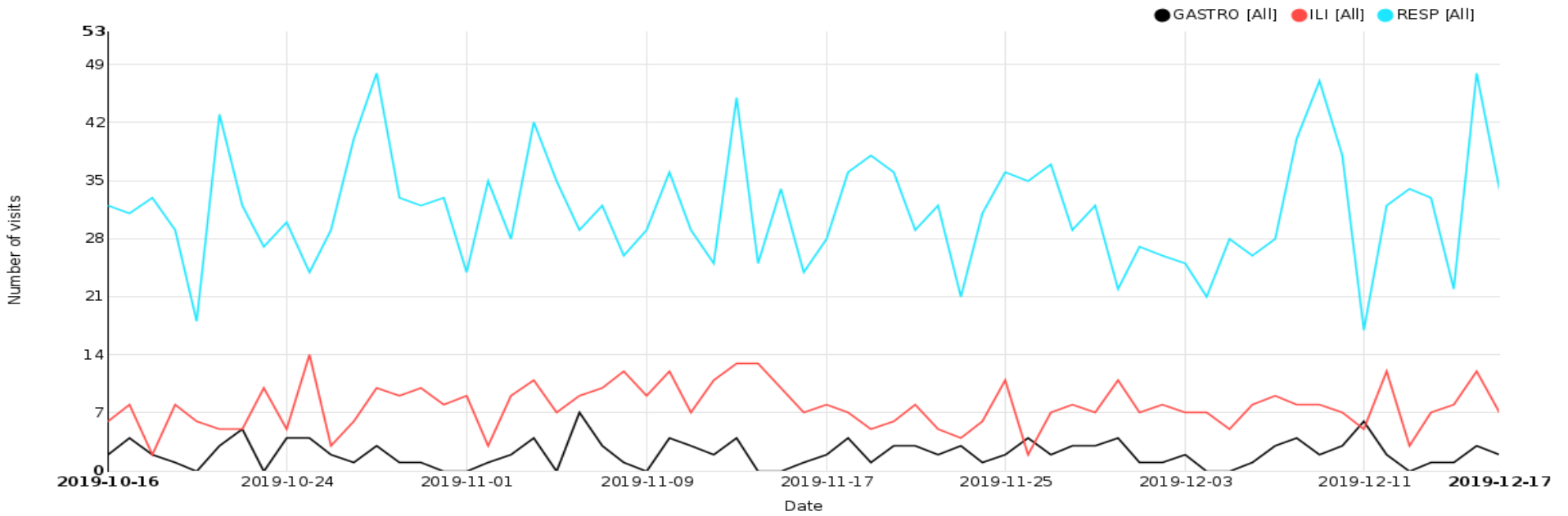
| Date | Hospital | Reason for Admission |
|------------|----------|-------------------------------------|
| 05/12/2019 | KGH | METH INTOXICATION |
| 11/12/2019 | KGH | CELLULITIS AND SUSPECTED BACTEREMIA |
| 13/12/2019 | KGH | CROUP |
| 15/12/2019 | KGH | PNEUMONIA +- MENINGITIS |
| 15/12/2019 | KGH | PRESUMED E.COLI BACTEREMIA |
| 17/12/2019 | KGH | BRONCHIOLITIS |

NOTE: Further details can be obtained by contacting KFL&A PHI staff at adam.vandijk@kflaph.ca or 613-549-1232 x1510 All feedback is welcome and appreciated.

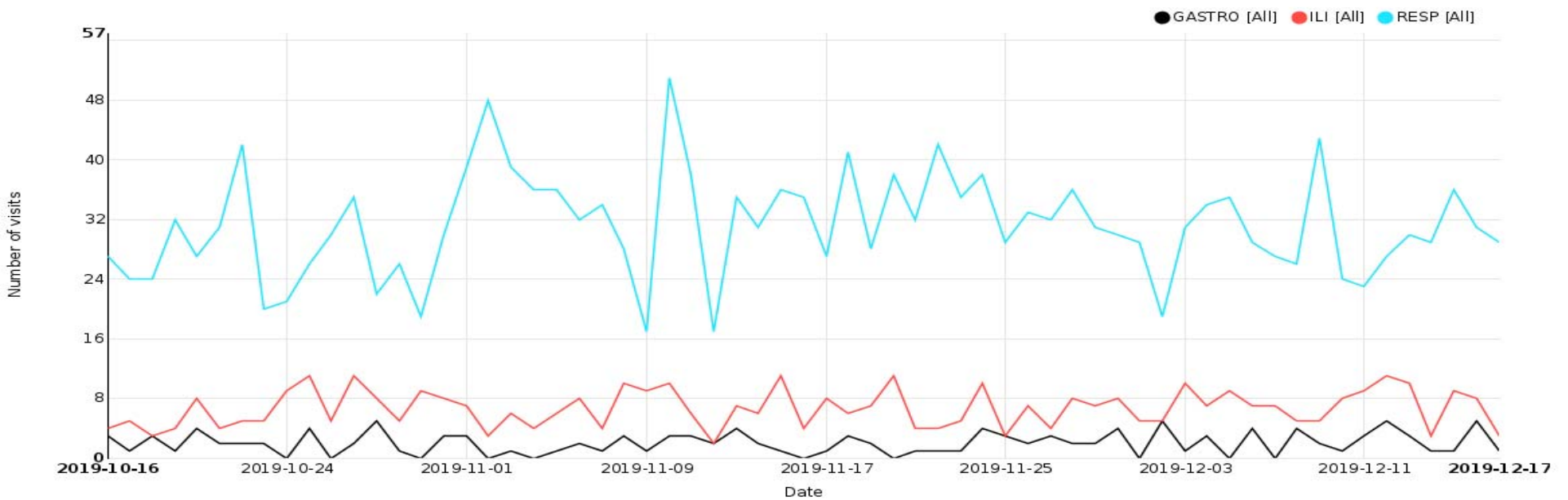
ED respiratory visits curve for Ontario hospitals providing data to the ACES system with historical yearly comparisons



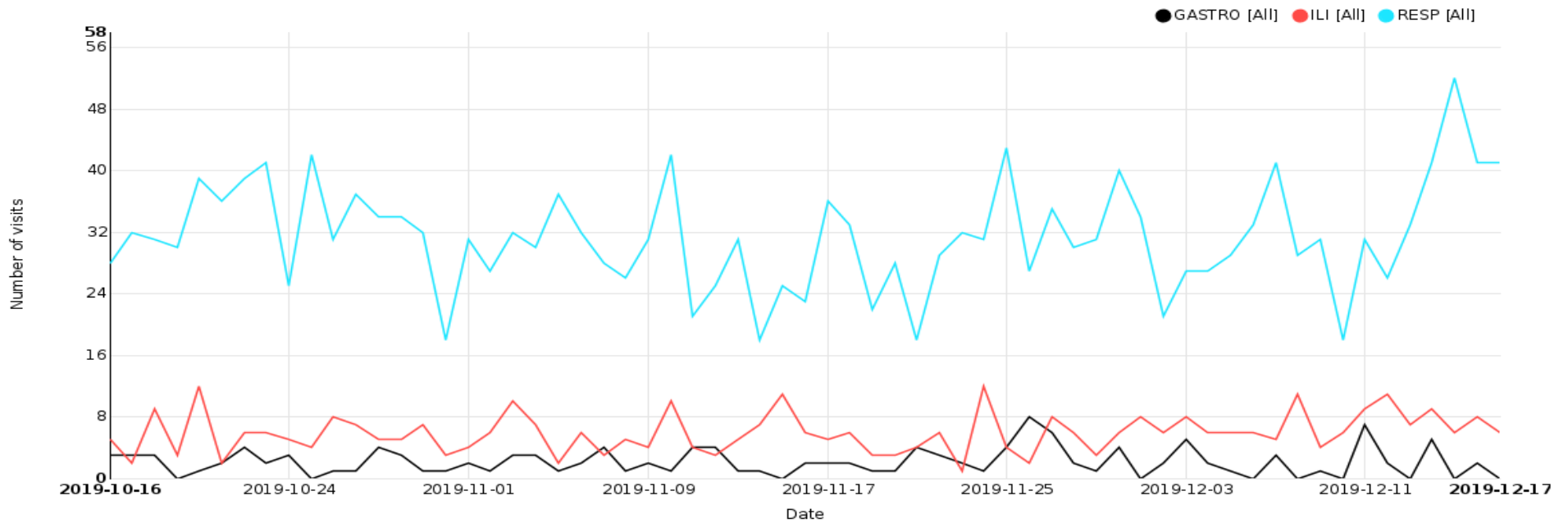
Respiratory, Gastrointestinal and Influenza-Like Illness/Fever ED Visits for KFL&A Health Unit



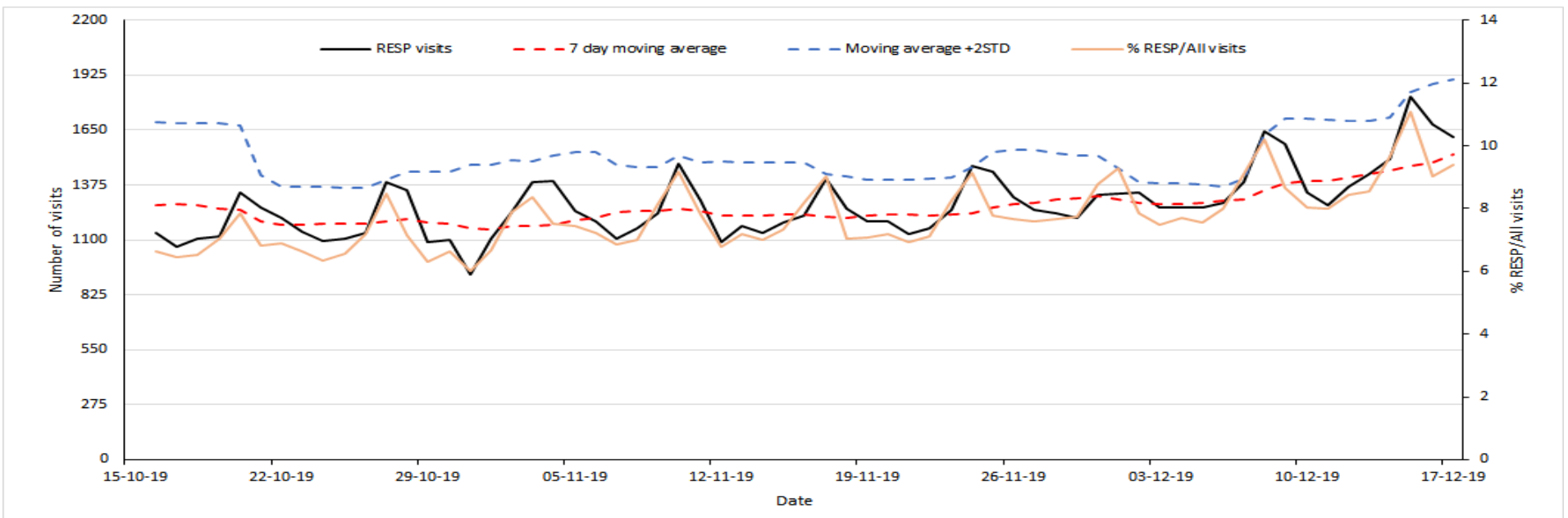
Respiratory, Gastrointestinal and Influenza-Like Illness/Fever ED Visits for HPE Health Unit



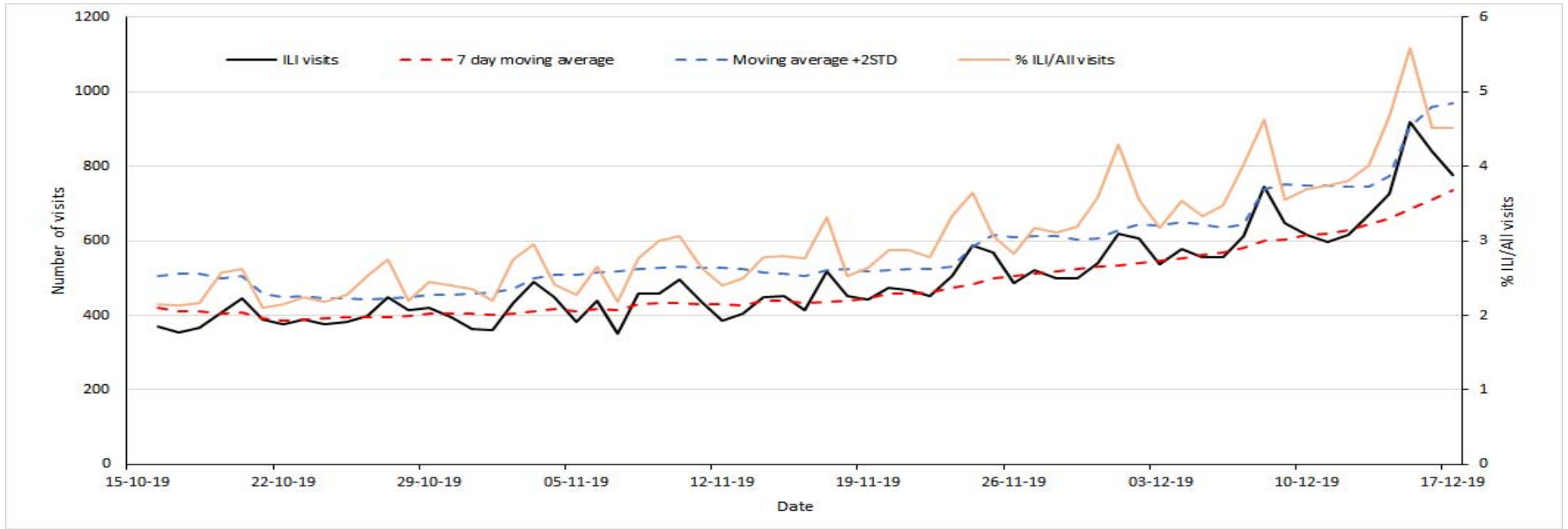
Respiratory, Gastrointestinal and Influenza-Like Illness/Fever ED Visits for LGL Health Unit



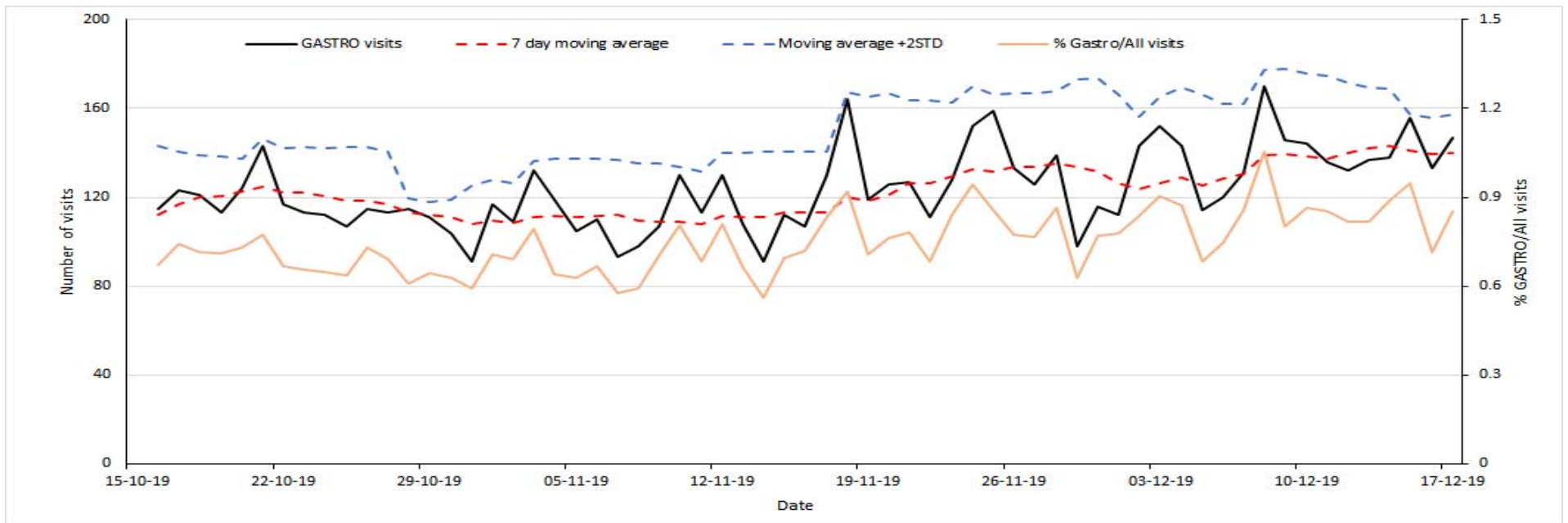
Respiratory ED Visits to Participating Ontario Hospitals



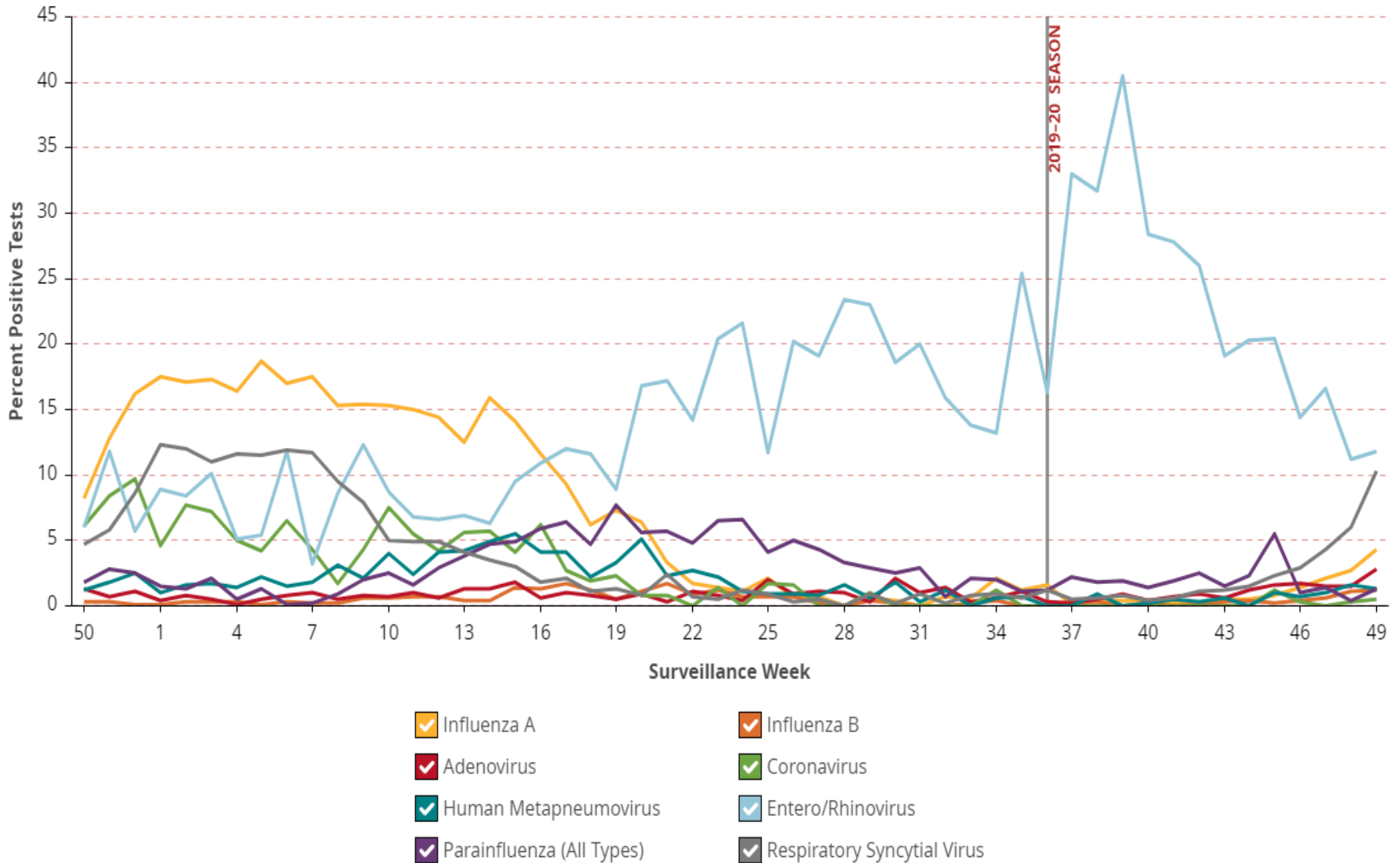
Influenza-Like Illness/Fever ED Visits to Participating Ontario Hospitals



Gastrointestinal ED Visits to Participating Ontario Hospitals



Percent of Respiratory Viral Pathogen(s) Detected Among Specimens Tested for that Pathogen by all Testing Methods by Surveillance Week



*Source: Ontario Respiratory Pathogen Bulletin, Public Health Ontario (with data obtained from the Public Health Agency of Canada's Respiratory Virus Detection tables)
Please review section 10 of the weekly pdf report for further information on the data sources used in the Ontario Respiratory Pathogen Bulletin.