

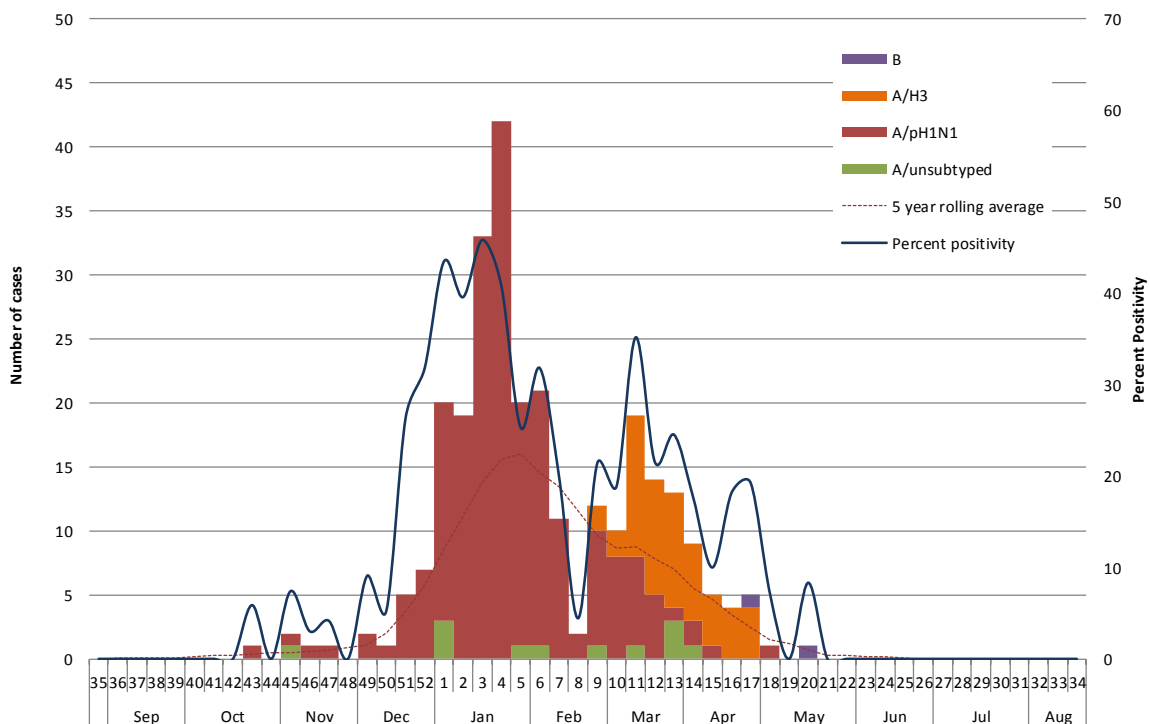
Summary

- Influenza A accounted for 99% of all lab-confirmed cases in PEI in 2018-19.
- Our seasonal total was 280 lab-confirmed cases (215 A/pH1N1, 51 A/H3, 12 A/unsubtyped, 2 B).
- The median age of cases was 48 years, with 52% being female.
- In total, there were 123 hospitalizations, including 12 ICU admissions.
- In total, approximately 63,400 doses of influenza vaccine were distributed in PEI.

Epidemiological curve of laboratory data

Sporadic influenza activity in PEI started in late-October, and activity continued throughout the season. Influenza A accounted for 99% of all lab-confirmed cases in PEI, while influenza B made up the remaining 1%. Flu activity peaked in mid-January, and overall, the 2018-19 season saw greater than average flu activity. The median age of cases was 48 years and ages ranged from <1 to 100 years. Overall, 52% of all lab-confirmed cases were diagnosed in females. Flu activity ended in May, but sporadic cases of influenza may occur at any time during the year.

Lab-Confirmed Influenza, PE 2018-19 Season



Lab-confirmed influenza tests are just an indication of greater influenza activity, as many individuals with influenza do not seek medical attention.

Positive influenza test results, cumulative 2018-19 season

Lab-confirmed cases	Cumulative 2018-19
Influenza A	278
A/pH ₁ N ₁	215
A/H ₃	51
A/unsubtyped	12
Influenza B	2
Total Influenza	280

Influenza A/H1N1 accounted for 77% of all lab-confirmed cases in PEI in 2018-19. The 2018-19 season in PEI saw more lab-confirmed Influenza A cases (99%) than Influenza B.

Influenza and influenza-like illness outbreaks, cumulative 2018-19 season

Respiratory Outbreaks	Cumulative 2018-19
Influenza A	8
A/pH ₁ N ₁	1
A/H ₃	3
A/unsubtyped	4
Influenza B	0
Influenza-like Illness	5
Total Outbreaks	13

There were 13 influenza and influenza-like illness (ILI) outbreaks reported to the Chief Public Health Office. Of the outbreaks, 8 were Influenza A—1 was A/H1N1, 3 were A/H3, 4 were Influenza A/unsubtyped—and 5 were ILI. The outbreaks occurred in January, March, and April and occurred in schools/daycares (4), hospitals (3), long-term care facilities (4), and community care facilities (2).

Outbreaks are determined based on the [FluWatch](#) definitions.

Severe outcome surveillance

Severe Outcome	Cumulative 2018-19
Hospitalizations	123
ICU	12
Deaths	9

Hospitalization data is gathered through infection prevention and control practitioners at each Island hospital. There were 123 hospitalizations, which included 12 ICU admissions during the 2018-19 influenza season. The median age of hospitalized patients was 66 years (mean: 57 years), and the range was <1 to 100 years. Hospitalized patients were more likely to be male (52%). Just over one-quarter (28%) of hospitalized cases were confirmed as vaccinated against flu

this season, while more than half (52%) were confirmed as not vaccinated. The remainder of cases had unknown vaccine status.

The average length of stay for hospitalized patients was 8 days (median: 4 days), and the range was 1 to 153 days. All of those in hospital were Influenza A cases, with 76% being A/H1N1 and the remaining 24% being A/H3.

There was chronic disease information for 116 cases. Of these, approximately 77% had at least one chronic condition, including hypertension (14%), diabetes (22%), respiratory conditions (i.e., asthma, COPD) (27%), heart disease (28%), or cancer (3%).

Deaths are only reported when there is a positive influenza laboratory test, even if influenza may not have been the major contributing cause of death.

Historical influenza seasons

The predominant strain of circulating influenza changes year-to-year. The strain of influenza can impact the severity of disease, the age group(s) affected, and the number of individuals presenting themselves to the health system for care. In addition, the request for influenza testing varies season-to-season.

Influenza Season	Predominant Strain	All Cases*	Hospitalized**	ICU	Deaths
2011-12	B	53	11	0	0
2012-13	A/H3	124	54	6	1
2013-14	A/pH1N1	119	62	13	2
2014-15	A/H3 (B)	209	98	11	9
2015-16	A/pH1N1	71	39	2	1
2016-17	A/H3	208	88	11	5
2017-18	B	319	132	13	6
2018-19	A/pH1N1	280	123	12	9

*Laboratory confirmed cases. Note that clinical diagnosis of influenza takes place frequently in the community during peak season and is not confirmed with laboratory testing.

**Hospitalized counts include those admitted to ICU.