

SURVEILLANCE REPORT

Monthly Infectious Diseases Surveillance Report (February 2018)

Reportable disease cases by month in Ontario, 2017

Table 1. Confirmed cases of reportable diseases, and probable cases of select reportable diseases, by month: Ontario, 2017

Reportable disease	2017 Case counts by month												2017 Year-to-month (December)		2012-2016 avg Year-to-month (December)	
	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Count	Rate †	Count	Rate †
Acute Flaccid Paralysis	1	1	0	1	0	0	0	0	0	0	0	0	3	0.2	n/a	n/a
AIDS	3	2	6	9	4	3	6	5	8	3	7	4	60	4.2	77.2	5.6
Amebiasis	85	58	66	67	65	71	69	61	36	45	42	27	692	49.0	812.2	59.4
Botulism	0	0	0	0	0	0	0	0	0	0	0	0	0	0.0	2.0	0.1
Brucellosis	1	0	0	0	0	0	0	0	1	0	0	0	2	0.1	5.8	0.4
Campylobacter enteritis	189	182	201	231	270	337	532	464	345	318	224	154	3447	243.9	3675.8	268.7
Chlamydial Infections	3935	3286	3823	3426	3690	3531	3684	4026	3848	4050	4141	3141	44581	3155.0	37625.8	2750.8
Cholera	0	0	0	2	0	0	2	0	0	1	0	0	5	0.4	0.4	0.0
Cryptosporidiosis	23	17	25	22	16	24	47	69	55	32	33	18	381	27.0	357.0	26.1
Cyclosporiasis	3	0	6	5	59	124	78	12	3	1	1	0	292	20.7	168.8	12.3
Encephalitis	7	0	1	3	1	1	3	3	4	0	1	2	26	1.8	28.6	2.1
Encephalitis/Meningitis	11	6	13	17	7	23	29	37	19	16	26	13	217	15.4	170.0	12.4
Food Poisoning, All Causes	15	17	9	1	8	0	0	1	3	1	6	1	62	4.4	69.0	5.0
Giardiasis	115	79	84	87	92	102	144	143	149	137	108	90	1330	94.1	1320.0	96.5
Gonorrhoea (All Types)	561	443	560	505	573	663	733	726	797	829	757	685	7832	554.3	5440.6	397.8
Group A Streptococcal Disease, Invasive	97	85	103	81	76	66	71	61	54	80	62	91	927	65.6	650.8	47.6
Group B Streptococcal Disease, Neonatal	6	3	3	5	4	5	4	7	3	4	5	2	51	3.6	51.6	3.8
Haemophilus Influenzae B Disease, Invasive	2	0	1	0	0	0	0	0	1	0	1	1	6	0.4	5.4	0.4
Hepatitis A	5	2	12	6	5	9	10	11	14	21	24	7	126	8.9	96.0	7.0

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Hepatitis B (Acute)	12	16	8	8	1	8	5	11	7	5	9	10	100	7.1	98.4	7.2
Hepatitis B (Chronic)	165	124	158	137	163	155	139	137	108	129	108	79	1602	113.4	n/a	n/a
Hepatitis C	429	351	398	335	385	376	363	374	366	367	422	272	4438	314.1	4259.8	311.4
HIV	63	59	72	70	58	86	77	78	79	74	65	48	829	58.7	771.6	56.4
Influenza	4597	2563	1573	805	295	52	19	22	47	51	240	1618	11882	840.9	10424.0	762.1
Legionellosis	8	11	3	12	9	14	37	32	23	28	13	13	203	14.4	170.0	12.4
Leprosy	0	0	0	0	0	0	0	0	0	0	0	0	0	0.0	3.6	0.3
Listeriosis	4	0	2	3	6	3	2	8	6	6	7	8	55	3.9	59.8	4.4
Lyme Disease	5	3	5	6	35	194	372	203	74	33	28	9	967	68.4	313.0	22.9
Malaria	20	8	15	12	27	19	22	28	21	17	12	10	211	14.9	199.6	14.6
Measles	0	0	6	0	0	0	0	2	0	0	0	0	8	0.6	#	#
Meningitis	11	13	5	6	17	24	29	22	16	23	23	10	199	14.1	155.8	11.4
Meningococcal Disease, Invasive	4	3	5	0	3	3	4	2	3	2	0	2	31	2.2	28.2	2.1
Mumps	9	41	65	20	17	4	4	22	35	28	10	6	261	18.5	26.4	1.9
Ophthalmia neonatorum	0	0	0	0	0	0	1	1	0	0	0	0	2	0.1	3.4	0.2
Paralytic Shellfish Poisoning	0	0	0	0	0	0	0	0	0	0	0	0	0	0.0	n/a	n/a
Paratyphoid Fever	2	2	6	5	4	0	0	3	4	1	3	0	30	2.1	36.0	2.6
Pertussis (Whooping Cough)	40	23	29	34	25	54	57	75	47	77	71	48	580	41.0	553.4	40.5
Q Fever	0	0	0	0	3	0	1	1	2	0	1	1	9	0.6	14.4	1.1
Rabies	0	0	0	0	0	0	0	0	0	0	0	0	0	0.0	0.2	0.0
Rubella	0	0	0	0	0	0	0	0	0	0	0	0	0	0.0	#	#
Rubella, Congenital Syndrome	0	0	0	0	0	0	0	0	0	0	0	0	0	0.0	#	#
Salmonellosis	190	200	244	250	237	236	299	270	253	216	169	147	2711	191.9	2918.8	213.4
Shigellosis	23	11	33	18	15	18	31	22	27	39	31	34	302	21.4	285.6	20.9
Streptococcus Pneumoniae, Invasive	128	90	121	115	105	47	47	49	66	89	117	151	1125	79.6	1099.8	80.4
Syphilis, Early Congenital	0	1	0	0	0	0	0	0	0	0	0	0	1	0.1	1.4	0.1
Syphilis, Infectious	156	117	116	101	114	115	149	147	115	130	143	77	1480	104.7	998.2	73.0
Syphilis, Other	55	55	76	60	61	77	55	49	57	61	77	38	721	51.0	654.4	47.8
Tetanus	0	0	0	0	0	0	0	3	0	0	0	0	3	0.2	2.0	0.1

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Tuberculosis	48	44	73	44	72	68	52	44	56	60	61	49	671	47.5	615.2	45.0
Tularemia	0	0	0	0	1	0	0	0	0	0	0	0	1	0.1	0.4	0.0
Typhoid Fever	9	8	14	14	7	1	5	6	13	7	4	14	102	7.2	69.6	5.1
Verotoxin Producing E. coli Including HUS	5	8	10	4	13	6	17	24	12	9	17	4	129	9.1	165.2	12.1
West Nile Virus Illness	0	0	0	0	0	2	19	91	41	5	0	0	158	11.2	86.2	6.3
Yellow Fever	0	0	0	0	0	0	0	0	0	0	0	0	0	0.0	1.2	0.1
Yersiniosis	16	16	40	30	23	27	39	23	22	10	9	20	275	19.5	195.2	14.3

‡ Rates are for cases per 1,000,000 population.

n/a Acute Flaccid Paralysis and Paralytic Shellfish Poisoning became reportable in Ontario in December 2013, and Hepatitis B (Chronic) became reportable in Ontario in December 2014; therefore, five-year historical data are not yet available for comparisons (n/a).

Historical comparison data are not provided for measles, rubella, and congenital rubella syndrome because these diseases have been eliminated in Canada. However, as these diseases remain endemic in other countries, imported and import-related cases continue to occur in Ontario.

Ontario Cases: Ontario Ministry of Health and Long-Term Care, integrated Public Health Information System (iPHIS) database, extracted by Public Health Ontario [2018/02/14].

Ontario Population: Population Projections [2016-2017] and Estimates [2012-2015], Ontario Ministry of Health and Long-Term Care, IntelliHEALTH Ontario, Date Extracted: [2016/09/02].

Data notes and caveats

- iPHIS is a dynamic reporting system which allows ongoing updates to data previously entered. As a result, data extracted from iPHIS represent a snap shot at the time of extraction and may differ from previous or subsequent reports. The data only represent cases reported to public health and recorded in iPHIS, that meet the Ontario Ministry of Health and Long-Term Care's confirmed and/or probable [surveillance case definitions](#) in place at the time that the case was reported. The potential for underreporting and unresolved duplicates exists.
- Case counts for amebiasis, Lyme disease, mumps, pertussis, and West Nile Virus illness are based on the sum of confirmed and probable cases as reported in iPHIS. All other diseases reported in the table are based on confirmed cases only.
- Chronic and acute hepatitis B case counts are not mutually exclusive and should not be added to obtain a total for hepatitis B cases in Ontario.
- A case is reported as encephalitis and/or meningitis when an agent is not specifically identified through laboratory testing or is not reportable.
- Table 1 is not an exhaustive list of all reportable diseases in Ontario. Historical annual counts and rates for most reportable diseases are available in the [Reportable Disease Trends in Ontario reports](#). The following reportable diseases/outbreaks are omitted from the table:
 - Counts of Creutzfeldt-Jakob disease, which are not updated frequently enough for monthly publication as a result of an additional data reconciliation step that is required.
 - Diseases that are extremely rare or have zero incidence in recent years: anthrax, chancroid, diphtheria, hantavirus pulmonary syndrome, hemorrhagic fevers and Lassa fever, plague, acute poliomyelitis, psittacosis/ornithosis, severe acute respiratory syndrome (SARS), smallpox, and trichinosis.
 - Diseases that are only reportable in outbreak situations or as a combination of individual and aggregate counts: chickenpox (varicella), *Clostridium difficile* infection (CDI) outbreaks in public hospitals, and institutional outbreaks of gastroenteritis and respiratory infections.
- Detailed reporting on institutional outbreaks of respiratory infections is available in the [Ontario Respiratory Pathogen Bulletin](#).
- Information on CDI outbreaks in public hospitals is available in the [Reportable Disease Trends in Ontario reports](#).
- Cases that do not reside in Ontario or for whom the Disposition Status was reported as entered in error, does not meet definition, or as a duplicate record have been excluded.
- Case counts for tuberculosis and AIDS are based on diagnosis date, HIV case counts are based on encounter date, congenital rubella syndrome cases are based on the date of birth, and case counts for all other diseases are based on episode date. The episode date is an estimate of the onset date

of disease for a case. In order to determine this date, the following hierarchy is in place in iPHIS: Onset Date > Specimen Collection Date > Lab Test Date > Reported Date. If an onset date exists ,it will be used as the episode date. If not available, then the next available date in the hierarchy will be used.