

Legionellosis

In 2016, the incidence of legionellosis dropped slightly to 0.29/100,000 as compared to 2015 but continues to show an increasing trend over the last decade. This may be related to increasing use of urine antigen testing in the last few years.¹ The BC incidence rate has remained lower than the national rate during the whole decade; the reasons for this are unclear.

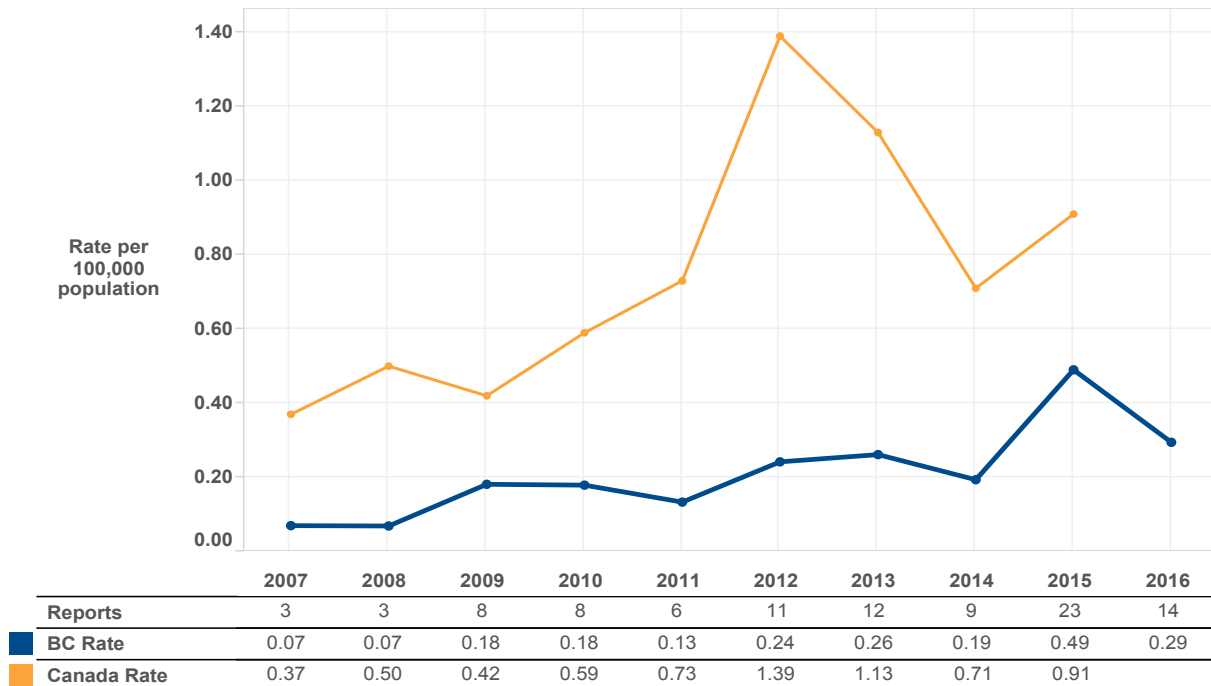
No outbreaks were identified in 2016. The majority of cases were once again reported from Fraser Health (n=8). This is likely due to the region's higher usage of urine antigen testing. All reported cases were in adults. The highest rates were observed in adults >40 years; older age and comorbidities are risk factors for

infection. Cases were reported throughout the year, although, as in previous years, a higher proportion of cases occurred in the fall and early winter. This may be due to a true seasonal pattern or increased detection due to respiratory illness testing.

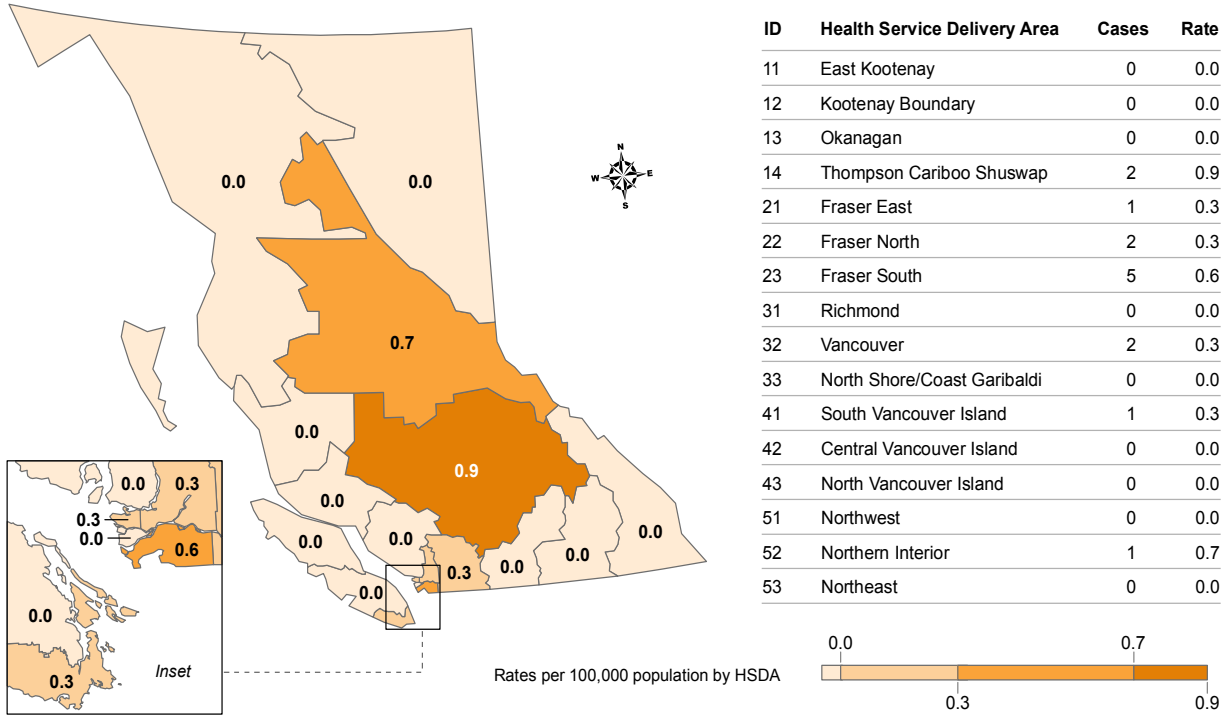


1. Morshed M, Chang Y, Hoang L. Diagnostic testing for Legionnaires' Disease: Trends in BC. BCMJ. 2016;57(10):452-3.

15.1 Legionellosis Rates by Year, 2007-2016



15.2 Legionellosis Rates by HSDA, 2016



15.3 Legionellosis Rates by Age Group, 2016

