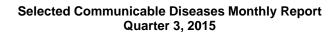
Quarterly Incidence of Selected Communicable Diseases



Coun	Avg. Count	Rate	Avg. Rate		Decrease Increase			
0	1.4	0.00	0.03	Measles]			
1	14.2	0.02		Mumps				
366	74.4	7.81	1.67	Pertussis				
0	0.1	0.00		Rubella (non-congenital)				
42	59.0	0.90	1.34	Escherichia coli Infection, shiga-toxigenic				
514	536.4	10.97	12.13	Campylobacter Infection	q			
364	255.6	7.77	5.77	Salmonella Infection	<u>⊨</u>			
46	45.5	0.98	1.03	Shigella Infection	q			
3	4.2	0.06	0.10	Typhoid Fever				
0	8.6	0.00	0.20	Hepatitis A				
2	6.1	0.04	0.14	Hepatitis B: Acute				
490	515.2	10.46	11.71	Hepatitis C	d			
9	4.8	0.19	0.11	Lyme Disease				
51	36.6	1.09	0.83	Streptococcus Group A: Invasive				
0	3.1	0.00	0.07	Meningococcal Disease: Invasive				
49	48.6	1.05	1.11	Pneumococcal Disease, Invasive	d			
8	16.2	0.17	0.37	Malaria				
3577	2855.3	76.34	64.39	Genital Chlamydia				
1032	386.3	22.02	8.70	Gonorrhea				
218	79.4	4.65	1.79	Infectious Syphilis				
74	79.1	1.58	1.80	HIV	q			
63	78.0	1.34	1.77	ТВ				
				-3	2.00 -2.50 -2.00 -1.50 -1.00 -0.50 0.00 0.50 1.00 1.50 2.00 2.50 3.00			
					Log (rate / average rate)			
Measu	re:		Th	e ratio (in natural log scale) of	the quarterly incidence rate to the average of the same quarter for the			
1.200.50				past 10 years for selected communicable diseases across British Columbia based on reportable disease				
				notifications to BCCDC from Health Authorities.				
Limita	tions:			These reports are based on passively notified case reports made to local public health authorities. There				
				may be incomplete reporting or delayed reporting. The log ratio does not offer direct interpretation for the				
				magnitude of increase or decrease in incidence rate.				
Source	Sources:			 Panorama and weekly PARIS data uploads for Vancouver Coastal Health Authority 				
				 Enhanced Invasive Meningococcal Disease database¹ 				
				 Enhanced Invasive Group A Streptococcus database¹ 				
				 STI Division for genital Chlamydia, gonorrhea, infectious syphilis and HIV (new positive tests) 				
				 TB Division for tuberculosis² 				
				I D DIVISION IOF IUDERCUIOSIS ²				

¹ For Streptococcus Group A; Invasive Meningococcal Disease, only data since 2002 were used to calculate the historical rate.

² Tuberculosis data included in this report are lagged by one quarter due to additional time needed for laboratory confirmation of cases and represent the previous quarter.

Trend:	Heightened pertussis activity continued to be observed in Q3, driven by pockets of regional activity, in particular in South Vancouver Island, Okanagan and Northern Interior HSDAs and in Fraser HA, and continuing a trend of increasing pertussis activity in BC since 2012.		
	Lyme disease rates are slightly higher than expected. This situation is being monitored. There was a large increase in gonorrhea and syphilis cases in 2015 Q1-3. Further investigations are underway as to the reasons for these trends. The data also reflect a continuing decline in new HIV cases in BC.		
Comments:	Monitoring of notifiable diseases is an important activity in BC for evaluation of the effectiveness of control programs and for detection and response to outbreaks. Note that targets are not specified as with few exceptions, these diseases are not under elimination strategies. Declines are anticipated for diseases with active prevention programs such as vaccine preventable diseases. Endemic rates of enteric and sexually transmitted diseases		

Action	Plan:
Action	

are expected.

Action Plan	Timeline	Expected Outcomes/Impact	Progress Notes
Promotion of routine	Annual and ongoing	Higher levels of vaccine	Development of tools and
and recommended	promotion of routine	uptake in all populations	materials including mass
vaccines for all British	vaccination;	and improved control of	media and social networking
Columbians.		vaccine preventable	messages to promote
		diseases.	immunization.
	Development of		
	common data		
Improved surveillance	standards by	More timely and complete	A provincial laboratory
of notifiable diseases	/		
	laboratory services in	reporting of notifiable	information system has been
through electronic	British Columbia for	disease cases from	developed and is in the
data receipt from	electronic reporting	laboratories in BC.	process of being implemented
laboratories.	of notifiable diseases.		in BC.