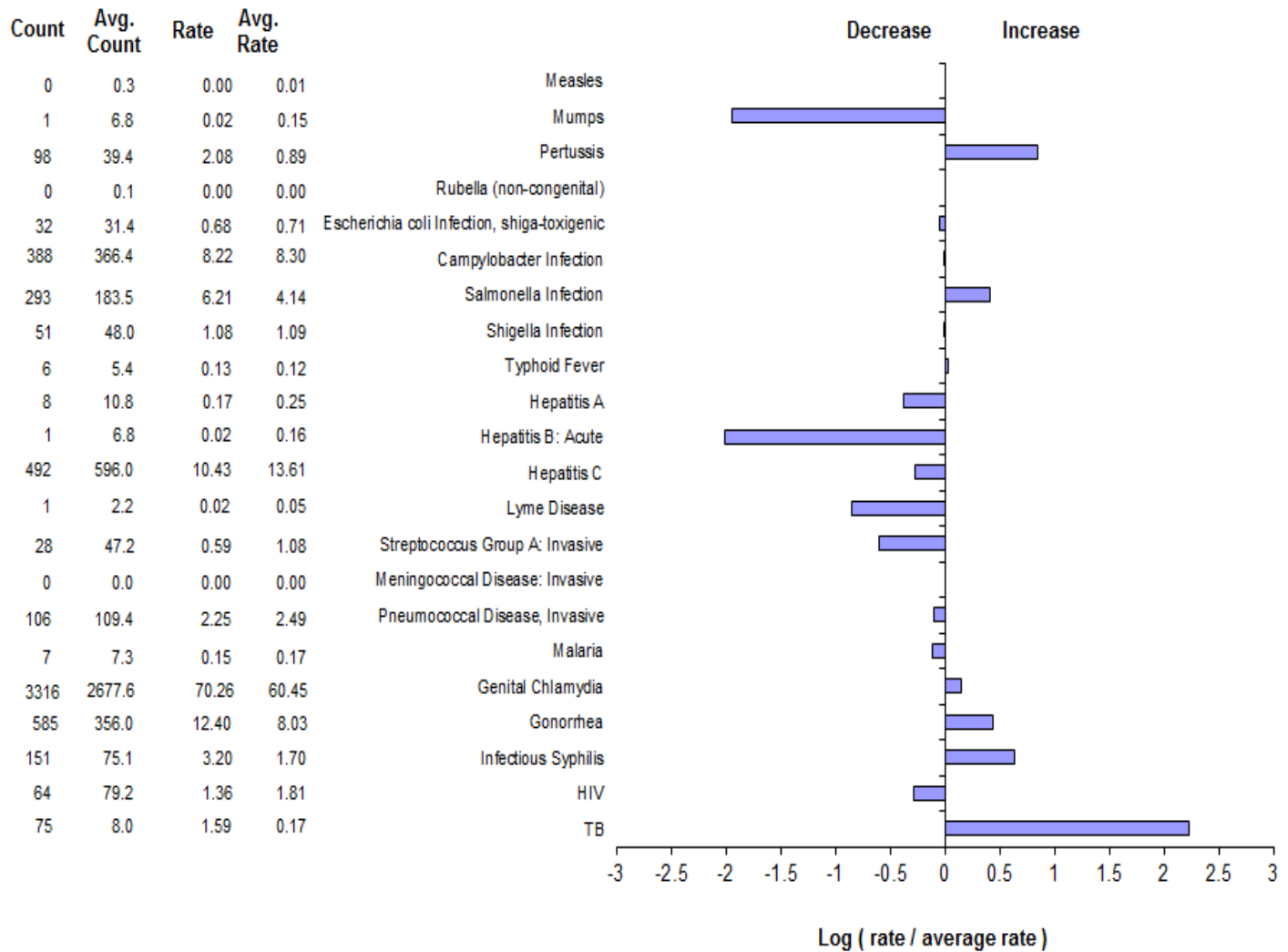


Quarterly Incidence of Selected Communicable Diseases

Selected Communicable Diseases Monthly Report Quarter 4, 2014



Measure:

The ratio (in natural log scale) of the quarterly incidence rate to the average of the same quarter for the past 10 years for selected communicable diseases across British Columbia based on reportable disease notifications to BCCDC from Health Authorities.

Limitations:

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.

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

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: The increase in measles reflects a large outbreak in a non-immunized community in Fraser Health. Multiple measures have been undertaken to try to control the outbreak and to date there has been limited spill over outside of the community. In addition there have been a number of imported cases from places such as the Philippines where there have been ongoing outbreaks. The continued increases in Chlamydia and Gonorrhea reflect longer term increasing trends in BC. Multiple interventions have been taken to reduce sexually transmitted infections, particularly among men who have sex with men. The data also reflect a continuing decline in new HIV cases in BC. Pertussis rates remained high in the Northwest HSDA in Northern Health Authority in Quarter 4, following a large-scale outbreak in the Haida Gwaii and Prince Rupert regions was declared in March 2014 and peaked in April-May. Outbreak response measures were put in place until mid-August, with ongoing monitoring continuing across the region thereafter. Heightened pertussis activity was also observed in the Northeast HSDA of Northern Health Authority and in Interior Health Authority during this period, suggesting asynchronous cyclical peaks in these regions.

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 are expected.

Action Plan:

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