

RESPIRATORY WATCH

Week 7 (February 11, 2024 to February 17, 2024)

Highlights¹

The 2023-2024 season runs from August 27, 2023 to August 24, 2024

Activity levels				
•				
• The number of influenza PCR positives has declined for the third week in a row.	ļ			
• The number of COVID-19 PCR positives remain stable since last week after a gradual decline since				
week 47. The number of PCR positives remains lower than during the same time period in	ļ			
2022/23.	ļ			
 The number of RSV PCR positives have declined the last two weeks. The number of PCR positive is lower than during the same time period in 2022/23. 	5			
Laboratory-confirmed cases				
Influenza:				
 There were 122 new cases of Influenza A, and 11 new cases of Influenza B reported during week 7; there have been 1853 cases of Influenza A and 168 cases of Influenza B reported since the start of the 2023-2024 season. 				
• COVID-19:	ļ			
 There were 104 new cases of COVID-19 reported during week 7; there have been 6947 laboratory confirmed cases of COVID-19 since the start of the 2023-2024 season. 				
• RSV:				
 There were 30 new cases of RSV reported during week 7; there have been 1225 laboratory confirmed cases of RSV since the start of the 2023-2024 season. 				
Severity				
Influenza:				
 During the 2023-2024 season there have been: 	ļ			
 343 hospitalizations (non-ICU) 	ļ			
 29 ICU admissions 	ļ			
 40 deaths 				
COVID-19:				
 During the 2023-2024 season there have been: 				
 698 hospitalizations (non-ICU) 	ļ			
 69 ICU admissions 	ļ			
	ļ			
145 deaths Outbreaks				
 There were 4 new long term care facility outbreaks declared in this reporting period: 				
• 4 influenza				
• 0 COVID-19				
o 0 RSV				
Syndromic surveillance				
 The percentage of emergency department visits for influenza like illness (ILI) was 0.7% during this 				
reporting period.				

¹ See Appendix for data notes.

INFLUENZA

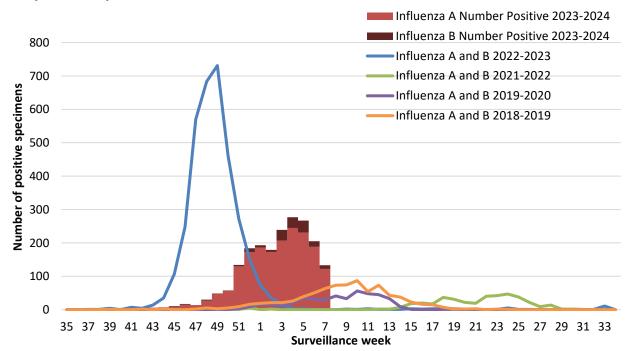


Figure 1: Laboratory-confirmed influenza cases by week (N=2021), 2023-2024 season, with comparison to previous seasons, Nova Scotia²

 Table 1: Number of laboratory-confirmed influenza cases by zone, current reporting period and cumulative 2023-2024 season, Nova Scotia³

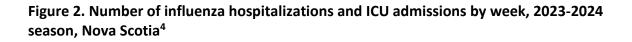
ZONE CURRENT PERIOD		CUMULATIVE 2023-2024				
ZONE	INFLUENZA A INFLUENZA B TOTAL		INFLUENZA A	INFLUENZA B	TOTAL	
Western	34	2	36	282	22	304
Northern	29	2	31	598	20	618
Eastern	17	7	24	447	116	563
Central	42	0	42	526	10	536
Nova Scotia Total	122	11	133	1853	168	2021

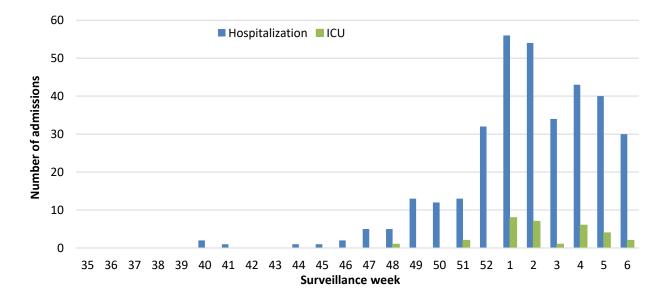
² There were no reported influenza cases during the 2020-2021 season.

³ Influenza case data are continuously entered and cleaned. Past-week data may be modified.

Table 2: Number of laboratory-confirmed influenza cases by age group, current reportingperiod and cumulative 2023-2024 season, Nova Scotia

	CURRENT PERIOD		CUMULATIVE 2023		3-2024	
AGE (YEARS)	INFLUENZA A	INFLUENZA B	TOTAL	INFLUENZA A	INFLUENZA B	TOTAL
0-4	6	0	6	211	20	231
5-19	15	2	17	224	77	301
20-44	14	5	19	346	53	399
45-64	36	3	39	428	12	440
65+	51	1	52	644	6	650
Nova Scotia Total	122	11	133	1853	168	2021



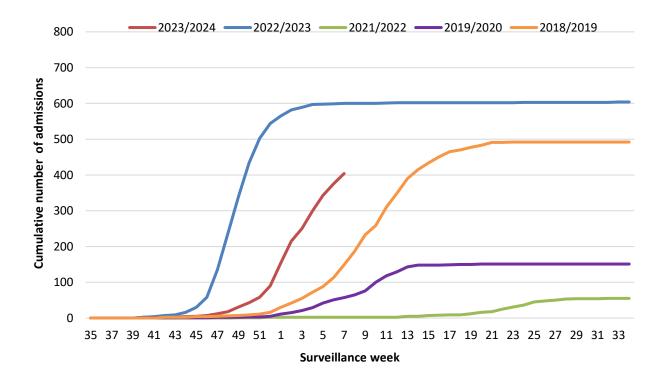


⁴ Due to influenza outcome reporting cycles, a data delay prevents reporting on the most recent surveillance week. If a case is hospitalized and moves to ICU in the same reporting week, they will appear in both the hospitalization and ICU columns for that week.

Table 3: Hospitalizations, ICU admissions, and deaths for influenza positive patients, based on most severe outcome, cumulative counts, 2023-2024 season, Nova Scotia⁵

	CUMULATIVE 2023-2024			
AGE (years)	Hospitalizations	ICU	Deaths	
0-4	26	0	0	
5-19	23	0	0	
20-44	28	5	1	
45-64	85	10	3	
65+	181	14	36	
Nova Scotia Total	343	29	40	

Figure 3: Cumulative influenza hospitalizations and ICU admissions, by week, 2023-24 season compared to prior seasons, Nova Scotia⁶



⁵ In this table, only the most severe outcome for a case is included; numbers of hospitalizations and ICU admissions could therefore decline over time, if a person counted in one of those columns moves to a more severe outcome. Influenza outcome data are continuously entered and cleaned. Past-week data may be modified.

⁶ There were no reported cases of influenza during the 2020-2021 season.

COVID-19

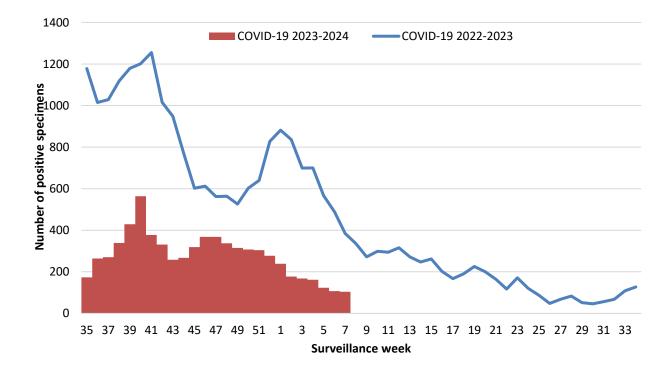


Figure 4: Laboratory-confirmed COVID-19 cases by week (N=6947), 2023-2024 season, with comparison to previous season, Nova Scotia

Table 4: Number of laboratory-confirmed COVID-19 cases by zone, current period and cumulative 2023-2024 season, Nova Scotia⁷

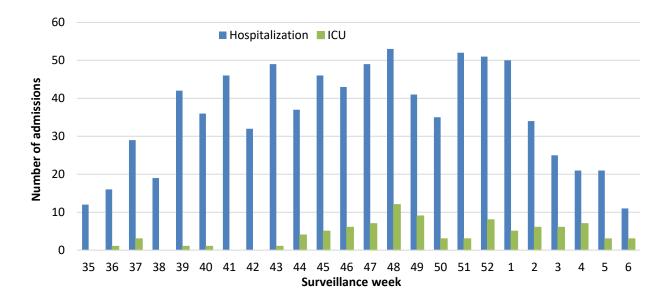
ZONE	CURRENT PERIOD	CUMULATIVE 2023-2024
Western	14	1550
Northern	23	1347
Eastern	8	1151
Central	59	2899
Nova Scotia Total	104	6947

⁷ COVID-19 case data are continuously entered and cleaned. Data from prior weeks may be modified.

Table 5. Number of laboratory-confirmed COVID-19 cases by age group, current period andcumulative 2023-2024 season, Nova Scotia

AGE (YEARS)	CURRENT PERIOD	CUMULATIVE 2023-2024
0-4	5	118
5-19	2	102
20-44	16	1064
45-64	26	1525
65+	55	4138
Nova Scotia Total	104	6947

Figure 5: Number of COVID-19 hospitalizations and ICU admissions by week, 2023-2024 season, Nova Scotia⁸

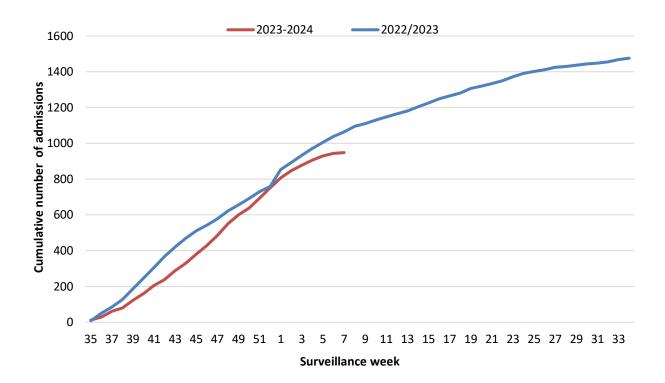


⁸ Due to COVID-19 outcome reporting cycles, a data delay prevents reporting on the most recent surveillance week. If a case is hospitalized and moves to ICU in the same reporting week, they will appear in both the hospitalization and ICU columns for that week.

Table 6: Hospitalizations, ICU admissions, and deaths for COVID-19 positive patients, cumulative counts, 2023-2024 season, Nova Scotia⁹

	CUMULATIVE 2023-2024			
AGE (years)	Hospitalizations	ICU	Deaths	
0-4	6	0	0	
5-19	7	0	0	
20-44	21	6	0	
45-64	82	18	4	
65+	582	45	141	
Nova Scotia Total	698	69	145	

Figure 6: Cumulative COVID-19 hospitalizations and ICU admissions, by week, 2023-24 season compared to prior seasons, Nova Scotia



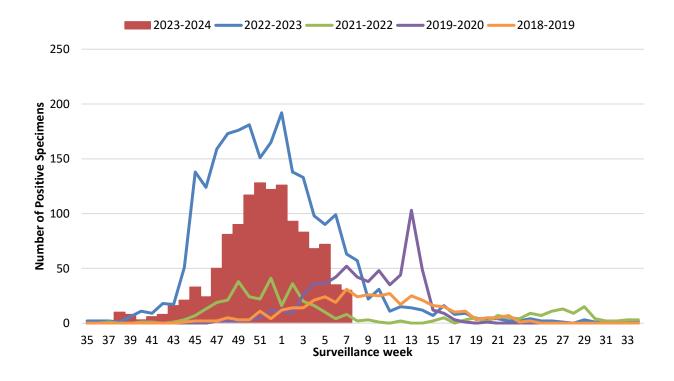
⁹ In this table, only the most severe outcome for a case is included; numbers of hospitalizations and ICU admissions could therefore decline over time, if a person counted in one of those columns moves to a more severe outcome. COVID-19 outcome data are continuously entered and cleaned. Data from prior weeks may be modified.

RSV

Table 7: Number of laboratory-confirmed RSV cases by age group, current reporting periodand cumulative 2023-2024 season, Nova Scotia

AGE (YEARS)	CURRENT PERIOD	CUMULATIVE 2023-2024
0-5 months	6	228
6-11 months	3	72
12-23 months	2	130
2-4 years	2	212
5-19 years	3	81
20-64 years	4	156
65+ years	10	346
Nova Scotia Total	30	1225

Figure 7: Laboratory-confirmed RSV cases by week (N=1225), 2023-2024 season, with comparison to previous seasons, Nova Scotia¹⁰



¹⁰ There were no reported RSV cases during the 2020-2021 season. There has been a change in testing methods with the implementation of multiplex respiratory virus PCR. This may increase the number of cases detected.

RESPIRATORY OUTBREAKS

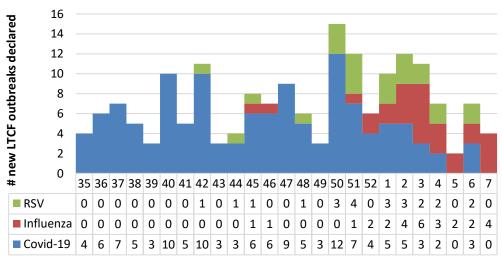
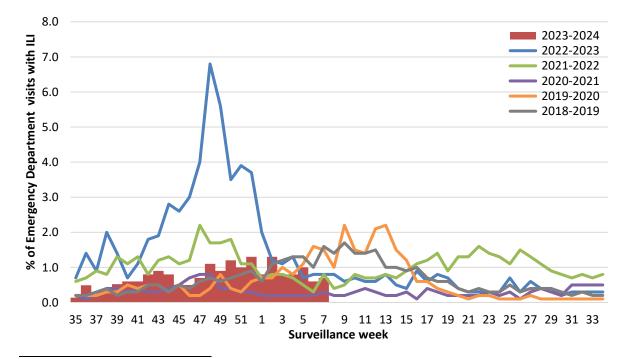


Figure 8. Number of new long term care facility respiratory outbreaks by week and respiratory virus (influenza, COVID-19 and RSV), 2023-2024 season, Nova Scotia¹¹

Surveillance week

SYNDROMIC SURVEILLANCE

Figure 9: Percentage of emergency department visits due to ILI by report week, 2023-2024 season, with comparison to previous seasons, Nova Scotia



¹¹ Outbreak definitions can be found in the Appendix.

OTHER RESPIRATORY ILLNESS

Table 8: Number of positive specimens for other respiratory viruses, current reporting periodand cumulative 2023-2024 season, Nova Scotia

PATHOGEN	CURRENT PERIOD	CUMULATIVE 2023-2024
Adenovirus	0	39
Bocavirus	0	0
Coronavirus*	1	2
Enterovirus/Rhinovirus	3	202
Metapneumovirus	0	3
Parainfluenza	1	29

*Excludes COVID-19

APPENDIX – DATA NOTES AND DEFINITIONS

DATA NOTES

- A surveillance week runs from Sunday to Saturday. Nova Scotia's 2023-2024 season is aligned with the Public Health Agency of Canada (PHAC) FluWatch surveillance weeks.
 - This year runs from August 27, 2023 (Week 35) to August 24, 2024 (Week 34).
- Notifications of hospitalizations, ICU admissions, and deaths may lag; deaths are particularly affected. Additionally, data are incomplete for the most recent week because COVID-19 and influenza outcome reporting from public health occurs on Wednesdays. The most recent surveillance week is not included in graphs showing outcomes by week because of this.
- The definition for a COVID-19 hospitalization was changed in May 2023.
- A case can have more than one outcome (e.g., be hospitalized, and later move to the ICU); multiple outcomes per case are counted in graphs showing outcomes by week, where applicable.
- RSV is not a notifiable disease in Nova Scotia.
- Testing eligibility guidelines and the use of multiplex PCR testing affect the number of cases identified and reported.
 - A multiplex PCR tests for multiple respiratory pathogens simultaneously. Routine multiplex PCR tests include influenza, RSV, and COVID-19.
 - In the 2022-2023 season, Nova Scotia saw increased accessibility to a multiplex PCR testing which likely increased detection in community of Influenza and RSV.
 - Testing is limited to specific populations and the numbers reported here underrepresent the true burden of disease in the community.

DEFINITIONS USED IN RESPIRATORY SURVEILLANCE, AND USEFUL LINKS, 2023-2024

See: Nova Scotia's Respiratory Response Plan

ACRONYM LIST

- **ICU** Intensive care unit
- ILI Influenza-like illness
- **RSV** Respiratory syncytial virus

OUTBREAK DEFINITIONS

Lab Confirmed COVID-19 Outbreak

Two or more laboratory-confirmed resident cases, AND at least one is a facility acquired case, with all cases epidemiologically linked within the LTCF in a 10-day period

Lab Confirmed Influenza Outbreak

Two or more resident cases of ILI (influenza-like illness), where at least one is a laboratory confirmed case of influenza, within the LTCF in a 7-day period

Lab Confirmed Respiratory Syncytial Virus (RSV) Outbreak Two or more symptomatic residents where at least one is a laboratory confirmed case of RSV, epidemiologically linked within the LTCF in a 7-day period

ILI CASE DEFINITION

Acute onset of respiratory illness with fever and cough and with one or more of the following – sore throat, arthralgia, myalgia or prostration which is likely due to influenza. In children under 5, gastrointestinal symptoms may also be present. In patients under 5 or 65 and older, fever may not be prominent.

OTHER CASE DEFINITIONS

See: <u>Surveillance Guidelines | novascotia.ca</u>

LINKS TO OTHER WEEKLY INFLUENZA REPORTS

Canada: Weekly influenza reports - Canada.ca

World: https://www.who.int/teams/global-influenza-programme/surveillance-and-

monitoring/influenza-updates/current-influenza-update

US: <u>www.cdc.gov/flu/weekly</u>