

In Summary...

Activity levels**
<ul style="list-style-type: none"> Localized activity was reported in the Central, Western and Northern Zone. Sporadic Activity was reported in Eastern Zone during week 50.
Laboratory-confirmed cases*
<ul style="list-style-type: none"> There were 394 new cases of Influenza A, and 0 new cases of Influenza B reported during Week 50. There have been 2,762 laboratory confirmed cases of Influenza A and 1 laboratory confirmed case of Influenza B reported during the 2022-2023 influenza season. There were also 1 Adenovirus, 3 Coronavirus****, 3 Enterovirus/Rhinovirus, 1 Parainfluenza, and 181 Respiratory Syncytial Virus cases identified during this reporting period.
Severity
<ul style="list-style-type: none"> There were 59 cases hospitalized (non-ICU), 3 ICU admissions and 3 deaths with Influenza A during this reporting period. During the 2022-2023 influenza season there have been: <ul style="list-style-type: none"> 401 hospitalizations (non-ICU) 29 ICU admissions 31 deaths*** of laboratory confirmed influenza
Novel Coronavirus (COVID-19)
<ul style="list-style-type: none"> For current epidemiology of COVID-19 please refer to: https://novascotia.ca/coronavirus/alerts-notices/#epidemiologic-summaries
Syndromic surveillance
<ul style="list-style-type: none"> The percentage of visits for influenza like illness (ILI) was 3.5% during this reporting period.

Notes: A reporting week runs from Sunday to Saturday. The 2022-2023 influenza season is defined using PHAC's influenza surveillance weeks. This year runs from August 28, 2022 (Week 35) to August 26, 2023 (Week 34);

*There has been a change in testing methods with the implementation of multiplex respiratory virus PCR for 2019-nCoV. This may increase the number of cases detected through the flu season.

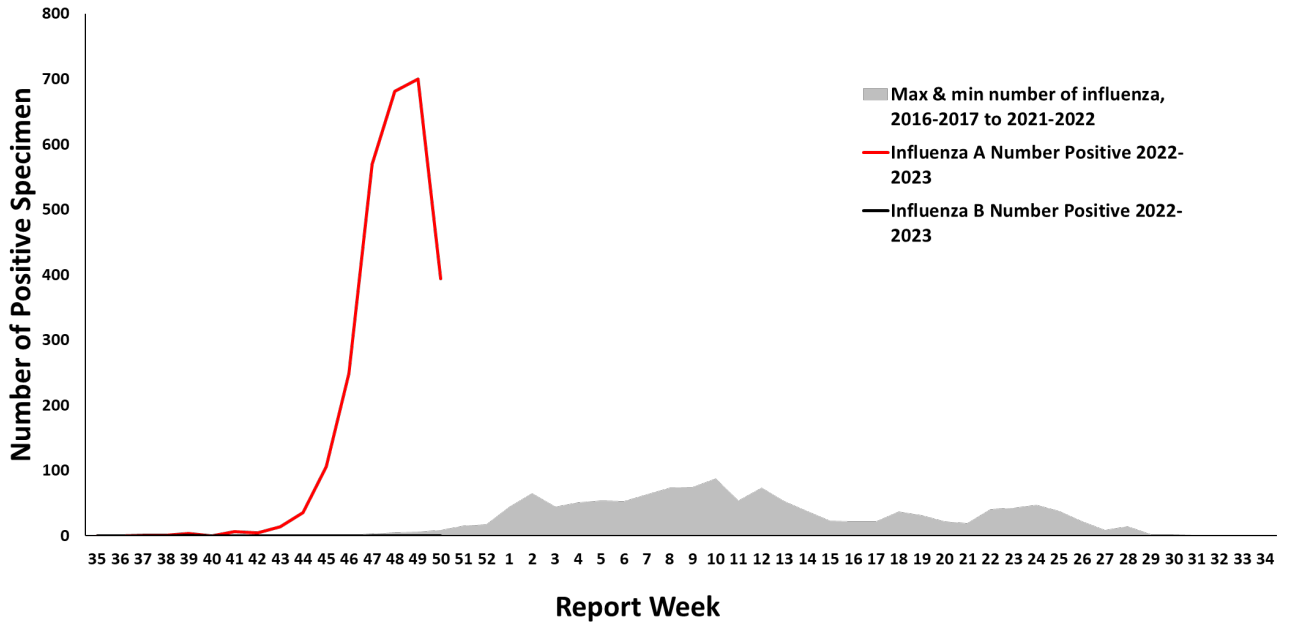
**Activity level is obtained from CNPHI, see appendix for definitions.

***Deaths include individuals with a positive influenza test result, influenza may or may not have been the major contributing cause of death or hospitalization.

****Excludes novel coronavirus (2019-nCoV)

LABORATORY-CONFIRMED INFLUENZA CASES

Figure 1: Number of laboratory confirmed influenza cases by report week, 2022-2023 season, Nova Scotia



Notes: There has been a change in testing methods with the implementation of multiplex respiratory virus PCR for 2019-nCoV. This may increase the number of cases detected through the flu season.

Table 1: Number of laboratory-confirmed influenza cases by zone, current week and cumulative 2022-2023 season in Nova Scotia

ZONE	WEEK 50			CUMULATIVE 2022-2023		
	TOTAL	INFLUENZA A	INFLUENZA B	TOTAL	INFLUENZA A	INFLUENZA B
Western	78	78	0	796	796	0
Northern	164	164	0	913	913	0
Eastern	98	98	0	462	462	0
Central	54	54	0	592	591	1
Nova Scotia Total	394	394	0	2763	2762	1

Table 2: Number of laboratory-confirmed influenza cases by age group (years), current week and cumulative 2022-2023 season in Nova Scotia

AGE (YEARS)	WEEK 50			CUMULATIVE 2022-2023		
	TOTAL	INFLUENZA A	INFLUENZA B	TOTAL	INFLUENZA A	INFLUENZA B
0-4	36	36	0	300	299	1
5-19	55	55	0	635	635	0
20-44	103	103	0	644	644	0
45-64	65	65	0	438	438	0
65+	135	135	0	746	746	0
Nova Scotia Total	394	394	0	2763	2762	1

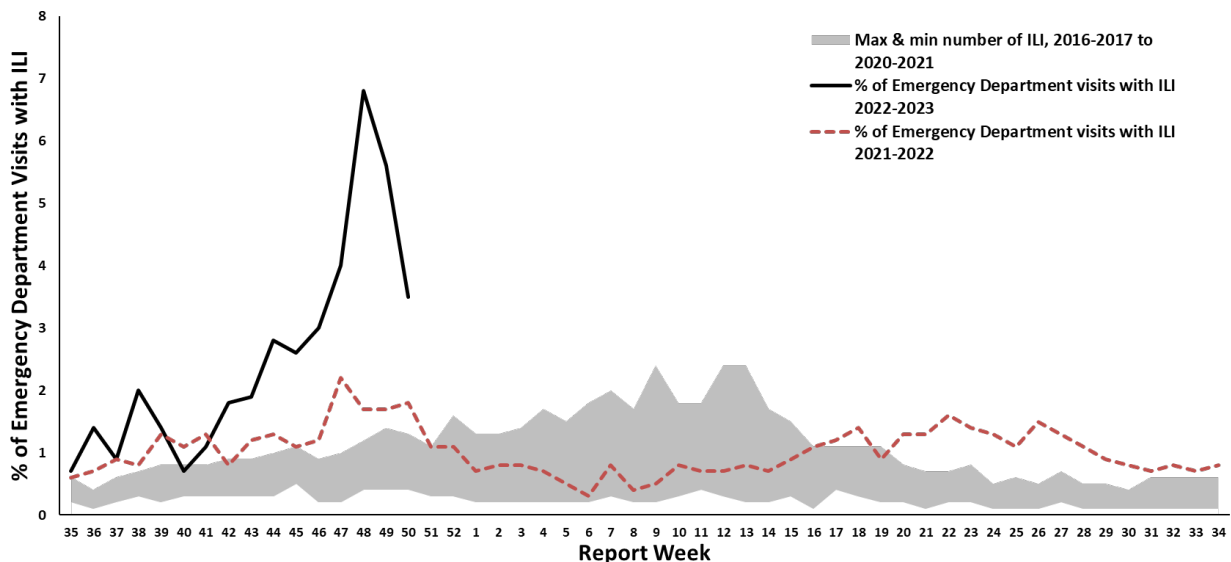
Table 3: Hospitalizations, ICU admissions and deaths for influenza positive patients, current week and cumulative, 2022-2023 season, Nova Scotia

AGE (YEARS)	WEEK 50			Cumulative		
	Hospitalized	Hospitalized - ICU	Deceased*	Hospitalized	Hospitalized - ICU	Deceased*
0-4	4	0	0	42	2	0
5-19	1	0	0	36	1	0
20-44	6	0	0	33	1	2
45-64	8	2	0	64	9	3
65+	40	1	3	226	16	26
Nova Scotia Total	59	3	3	401	29	31

*Notes: Outcome categories (hospitalized hospitalized-ICU, Deceased) are mutually exclusive; *Deaths include individuals with a positive influenza test result, influenza may or may not have been the major contributing cause of death or hospitalization.*

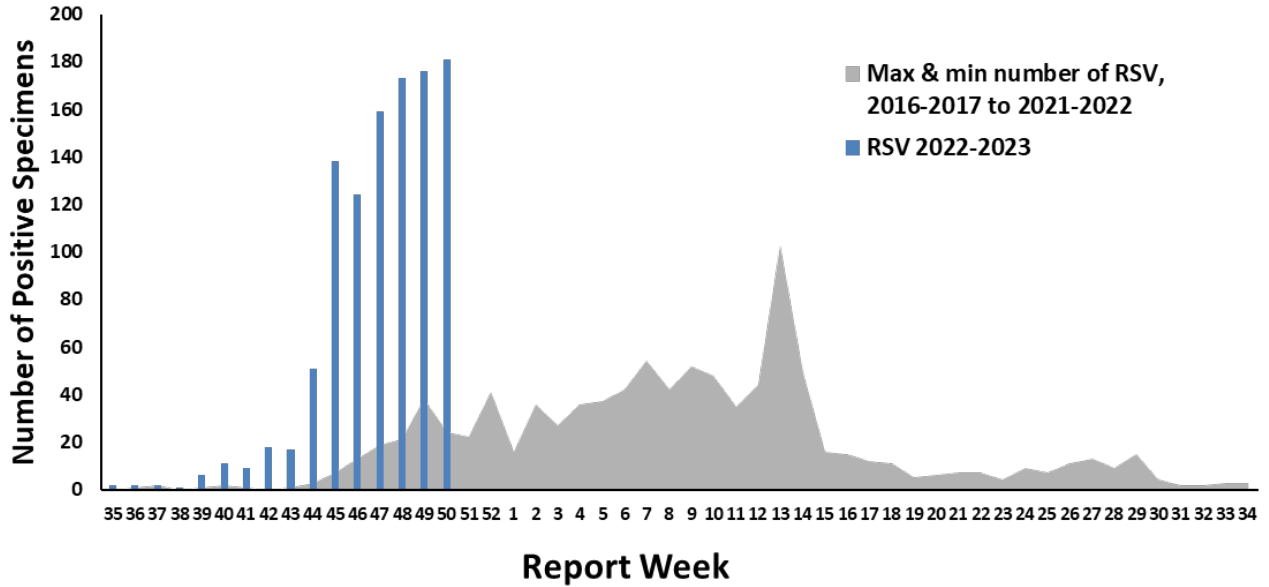
SYNDROMIC SURVEILLANCE

Figure 2: Percentage of emergency department visits due to ILI by report week, 2022-2023 season, with trend-line comparison to 2021-2022 season, Nova Scotia



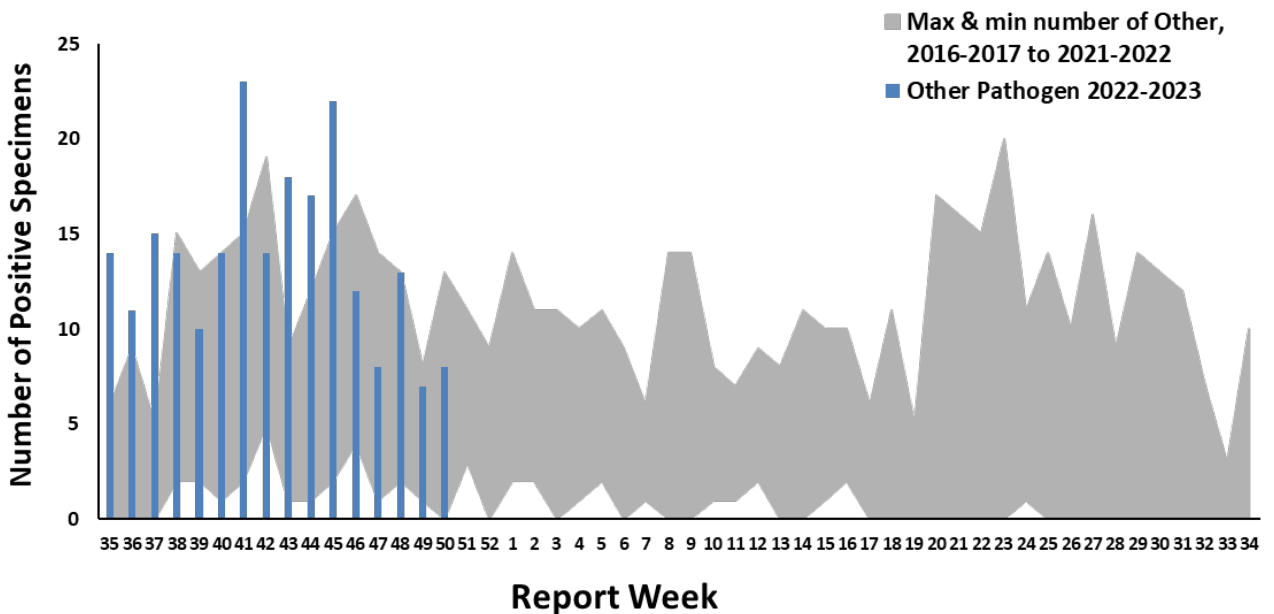
OTHER RESPIRATORY PATHOGENS

Figure 3: Number of positive specimens tested for RSV by report week, 2022-2023 season, Nova Scotia



Notes: in Nova Scotia RSV is not a notifiable disease.

Figure 4: Number of positive specimens tested for other respiratory pathogens by report week, 2022-2023 season, Nova Scotia



Notes: Other respiratory pathogen includes Adenovirus, Bocavirus, Chlamydomphila pneumonia, Coronavirus, Enterovirus, Metapneumovirus, Mycoplasma pneumoniae, Parainfluenza, Pertussis, Rhinovirus. Data for this figure is obtained from provincial laboratories.

Table 4: Number of positive RSV specimens by age group, current report week and cumulative 2022-2023 season, Nova Scotia

AGE GROUP	Week 49	Cumulative 2022-2023
0-5 months	11	148
6-11 months	6	60
12-23 months	11	148
2-5 years	16	199
6-15 years	9	71
16-64 years	38	186
65+ years	90	258
Totals (n)	181	1070

Table 5: Number of positive specimens tested for other respiratory pathogens, current report week and cumulative 2022-2023 season, Nova Scotia

Pathogen	WEEK 49	CUMULATIVE 2022-2023
Adenovirus	1	30
Bocavirus	0	0
Chlamydophila pneumoniae	0	0
Coronavirus*	3	8
Enterovirus/Rhinovirus	3	154
Metapneumovirus	0	0
Mycoplasma pneumoniae	0	0
Parainfluenza	1	28
Pertussis	0	0
Respiratory Syncytial Virus	181	1070

*Notes: EXCLUDES novel coronavirus (2019-nCoV)

APPENDIX: DEFINITIONS USED IN INFLUENZA SURVEILLANCE, AND USEFUL LINKS, 2022-2023

ACRONYM LIST

CNPHI Canadian Network for Public Health Intelligence

ICU Intensive care unit

ILI Influenza-like illness

RSV Respiratory syncytial virus

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.

NATIONAL FLUWATCH DEFINITIONS FOR INFLUENZA ACTIVITY LEVELS

No activity	No laboratory-confirmed influenza detections in the reporting week, however, sporadically occurring ILI* may be reported
Sporadic	Sporadically occurring ILI* and lab confirmed influenza detection(s) with no outbreaks detected within the influenza surveillance region
Localized	(1) Evidence of increased ILI* and (2) lab confirmed influenza detection(s) together with (3) outbreaks occurring in schools, hospitals, residential institutions and/or other types of facilities occurring in less than 50% of the influenza surveillance region
Widespread	(1) Evidence of increased ILI* and (2) lab confirmed influenza detection(s) together with (3) outbreaks occurring in schools, hospitals, residential institutions and/or other types of facilities occurring in greater than or equal to 50% of the influenza surveillance region

LINKS TO OTHER WEEKLY INFLUENZA REPORTING BODIES

Canada: <http://www.phac-aspc.gc.ca/fluwatch/>
 World: <https://www.who.int/teams/global-influenza-programme/surveillance-and-monitoring/influenza-updates/current-influenza-update>
 US: www.cdc.gov/flu/weekly