

In Summary...

Activity levels**
<ul style="list-style-type: none"> Localized activity was reported in the Central and Northern Zone. Sporadic Activity was reported in Western and Eastern Zone during week 51.
Laboratory-confirmed cases*
<ul style="list-style-type: none"> There were 235 new cases of Influenza A, and 0 new cases of Influenza B reported during Week 50. There have been 3,069 laboratory confirmed cases of Influenza A and 1 laboratory confirmed case of Influenza B reported during the 2022-2023 influenza season. There were also 3 Adenovirus, 3 Coronavirus****, 3 Enterovirus/Rhinovirus, 1 Metapneumovirus, 8 Parainfluenza, and 151 Respiratory Syncytial Virus cases identified during this reporting period.
Severity
<ul style="list-style-type: none"> There were 33 cases hospitalized (non-ICU), 4 ICU admissions and 0 deaths with Influenza A during this reporting period. During the 2022-2023 influenza season there have been: <ul style="list-style-type: none"> 444 hospitalizations (non-ICU) 34 ICU admissions 37 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 3.9% 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).

Due to lag in reporting, some influenza cases and outcomes (hospitalizations, ICU admissions and deaths) will be outside the reporting period.

*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.

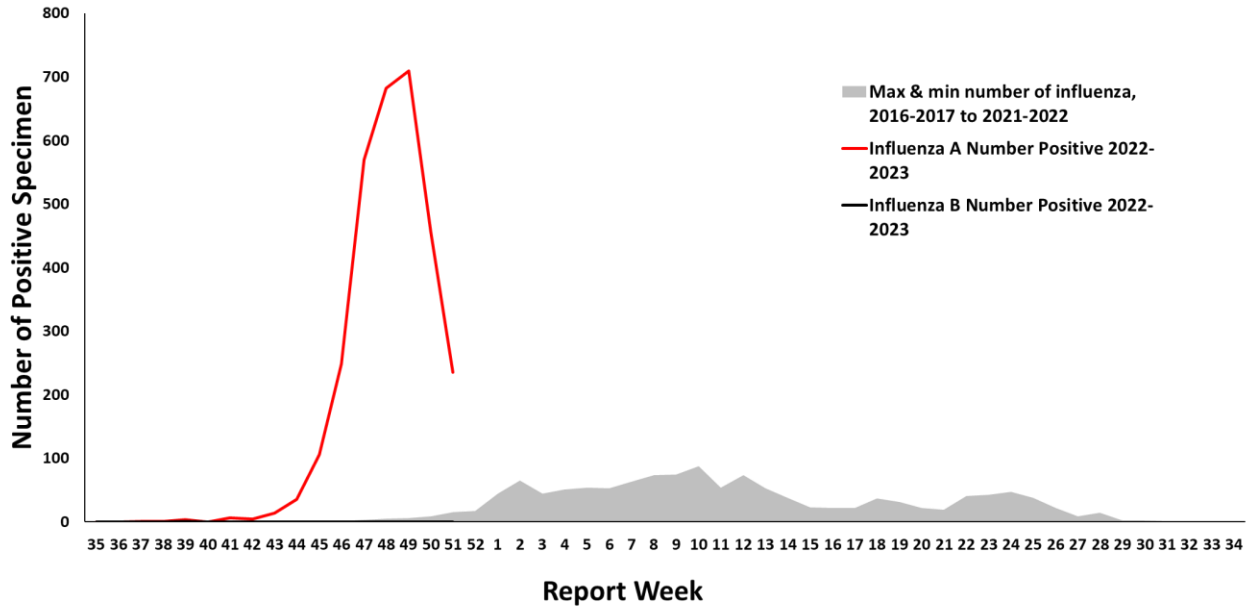
**Activity level is obtained from CNPHI, see appendix for definitions.

***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 51			CUMULATIVE 2022-2023		
	TOTAL	INFLUENZA A	INFLUENZA B	TOTAL	INFLUENZA A	INFLUENZA B
Western	38	38	0	835	835	0
Northern	76	76	0	989	989	0
Eastern	52	52	0	515	515	0
Central	69	69	0	731	730	1
Nova Scotia Total	235	235	0	3070	3069	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 51			CUMULATIVE 2022-2023		
	TOTAL	INFLUENZA A	INFLUENZA B	TOTAL	INFLUENZA A	INFLUENZA B
0-4	39	39	0	351	350	1
5-19	22	22	0	667	667	0
20-44	49	49	0	713	713	0
45-64	49	49	0	500	500	0
65+	76	76	0	839	839	0
Nova Scotia Total	235	235	0	3070	3069	1

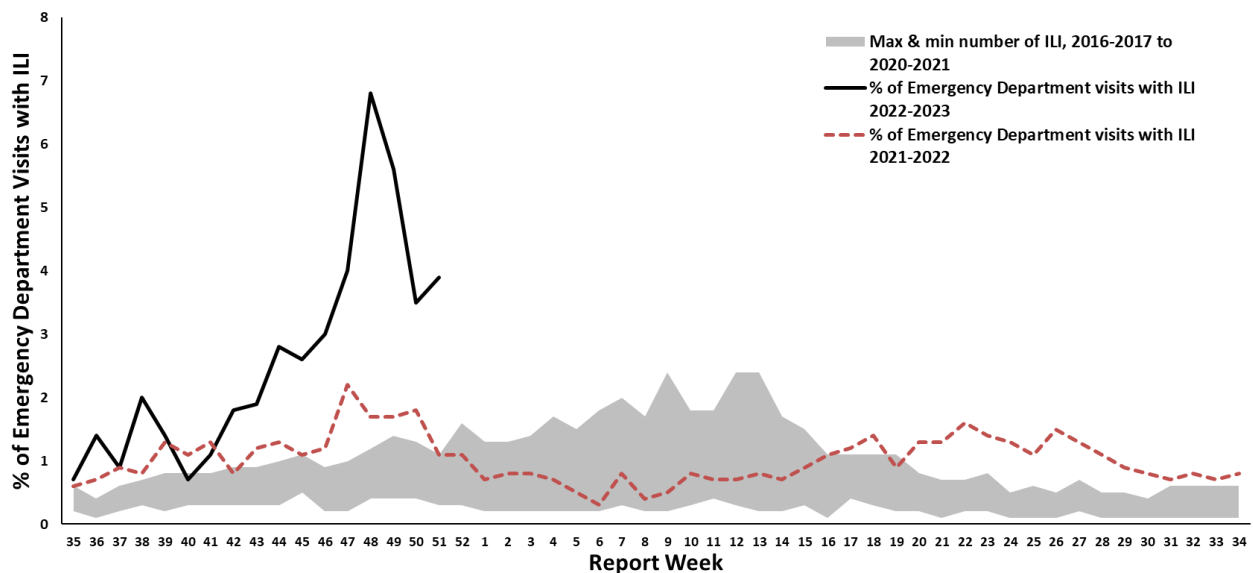
Table 3: Hospitalizations, ICU admissions and deaths for influenza positive patients, current week and cumulative, 2022-2023 season, Nova Scotia

AGE (YEARS)	WEEK 51			Cumulative		
	Hospitalized	Hospitalized - ICU	Deceased*	Hospitalized	Hospitalized - ICU	Deceased*
0-4	4	0	0	46	2	0
5-19	0	0	0	37	1	0
20-44	2	0	0	38	1	2
45-64	5	0	0	71	10	3
65+	22	4	0	252	20	32
Nova Scotia Total	33	4	0	444	34	37

*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.*

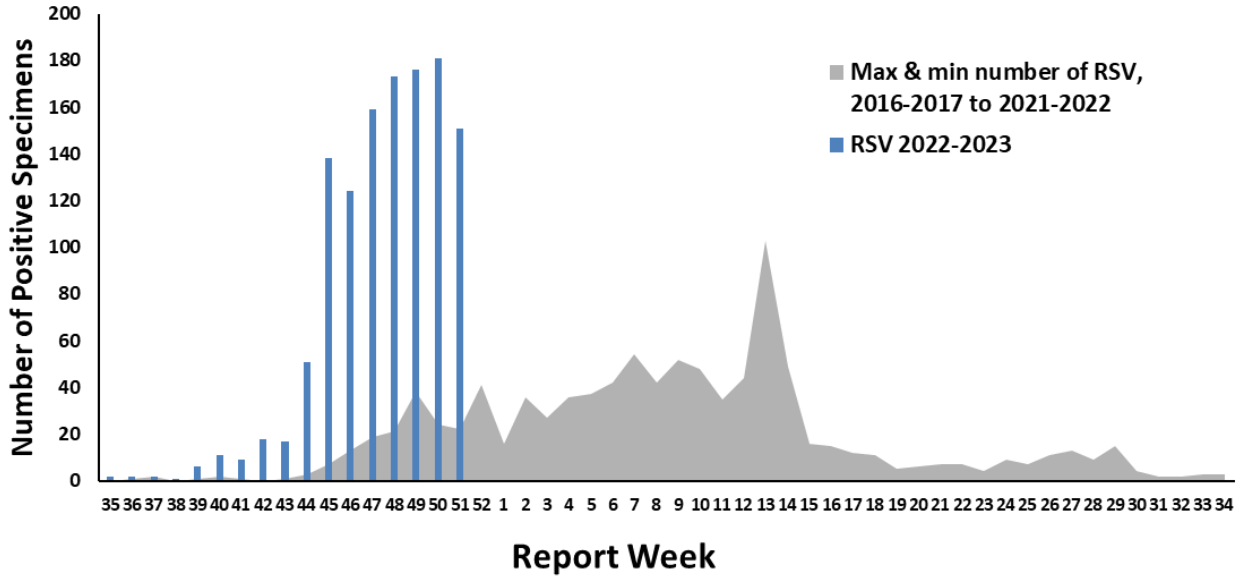
SYNDROMIC SURVEILLANCE

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



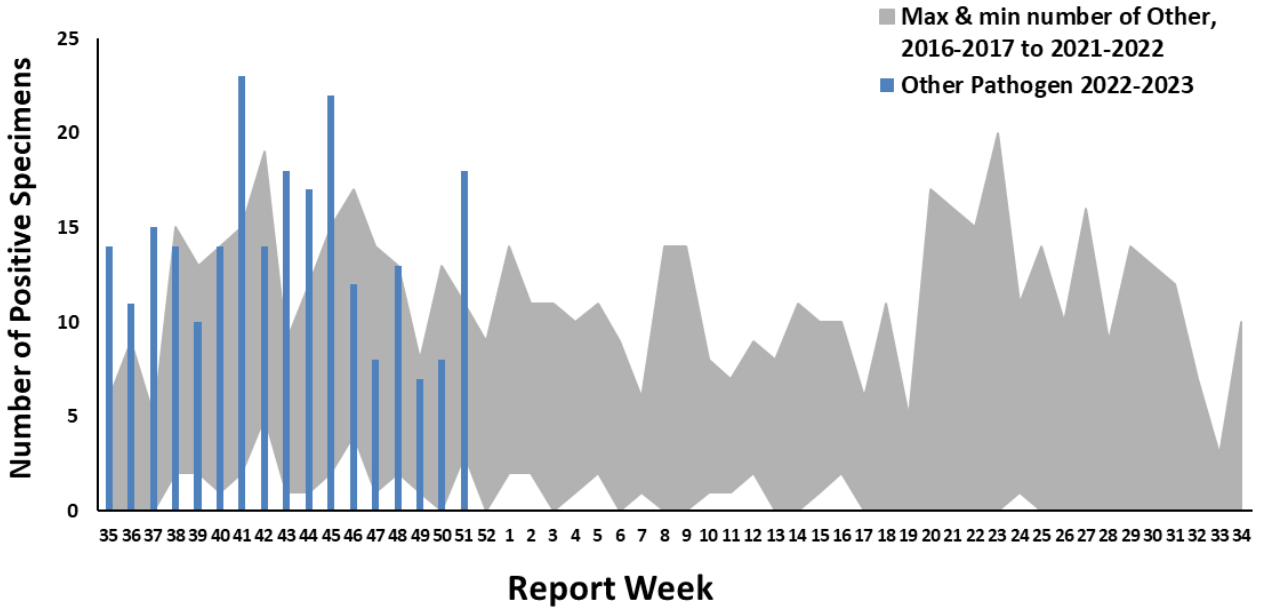
OTHER RESPIRATORY PATHOGENS

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

	Week 51	Cumulative 2022-2023
0-5 months	8	156
6-11 months	6	66
12-23 months	19	167
2-5 years	19	218
6-15 years	5	76
16-64 years	41	227
65+ years	53	311
Totals (n)	151	1221

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

Pathogen	WEEK 51	CUMULATIVE 2022-2023
Adenovirus	3	33
Bocavirus	0	0
Chlamydophila pneumoniae	0	0
Coronavirus*	3	11
Enterovirus/Rhinovirus	3	157
Metapneumovirus	1	1
Mycoplasma pneumoniae	0	0
Parainfluenza	8	36
Pertussis	0	0
Respiratory Syncytial Virus	151	1221

*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