

Nova Scotia Weekly COVID-19 Epidemiologic Summary: 21 June 2022

Public Health Branch
Nova Scotia Department of Health and Wellness

Highlights:

- An additional 1,420 PCR positive results, 37 hospitalizations and 7 deaths from COVID-19 were reported during the seven-day period ending June 20.
- The number of lab-confirmed cases reported this week were lower than last week. Cases linked to long-term care/residential facilities, and deaths have declined in recent weeks. There was an increase in hospitalizations this week.
- Of the 7 deaths reported this week, all were in people aged 70 years and older and 43% were in people who resided in long-term care facilities.
- Age continues to be associated with severe outcomes:
 - The risk of hospitalization is 11 times higher for those aged 70 years and older compared to those 18 to 49 years old.
 - The risk of death is approximately 115 times higher for those aged 70 years and older compared to those younger than 50.
- Staying up to date with vaccinations – that is, getting all the doses available for your age group and health status, including boosters – offers significant protection against severe outcomes.
 - Those who received three or more doses of COVID-19 vaccine had an 89.2% lower risk of hospitalization and a 93.1% lower risk of death than those who were unvaccinated or had only one dose.
 - When adjusted for age, those unvaccinated or with only one dose have 8.5 times the rate of death compared to those with two doses and 14.5 times the rate of death compared to those with three or more doses.
 - Unvaccinated persons between 50-69 years of age have 5.2 times more risk of hospitalization and 13.9 times more risk of death than those with three or more doses.
 - Unvaccinated persons over 70 years of age have 12.3 times more risk of hospitalization and 15.3 times more risk of death than those with three or more doses.
- The proportion of people with confirmed COVID-19 infections who experience severe outcomes (hospitalization and death) continues to be relatively low during the Omicron waves compared to earlier waves. Since March 1, 2022 (Wave 6 to date), 1.5% of cases were hospitalized and 0.3% of cases have died.
- The total number of COVID-19 cases in residents of long-term care facilities is higher in the Omicron waves than in previous waves, with three times as many cases in Wave 6 than were reported in Wave 5. The overall fatality rate remains relatively low in the Omicron waves particularly compared to Wave 1.

COVID-19 Cases and Severe Outcomes – December 8, 2021 to present

Table 1: PCR positive results, hospitalizations and deaths (Wave 5 and 6)

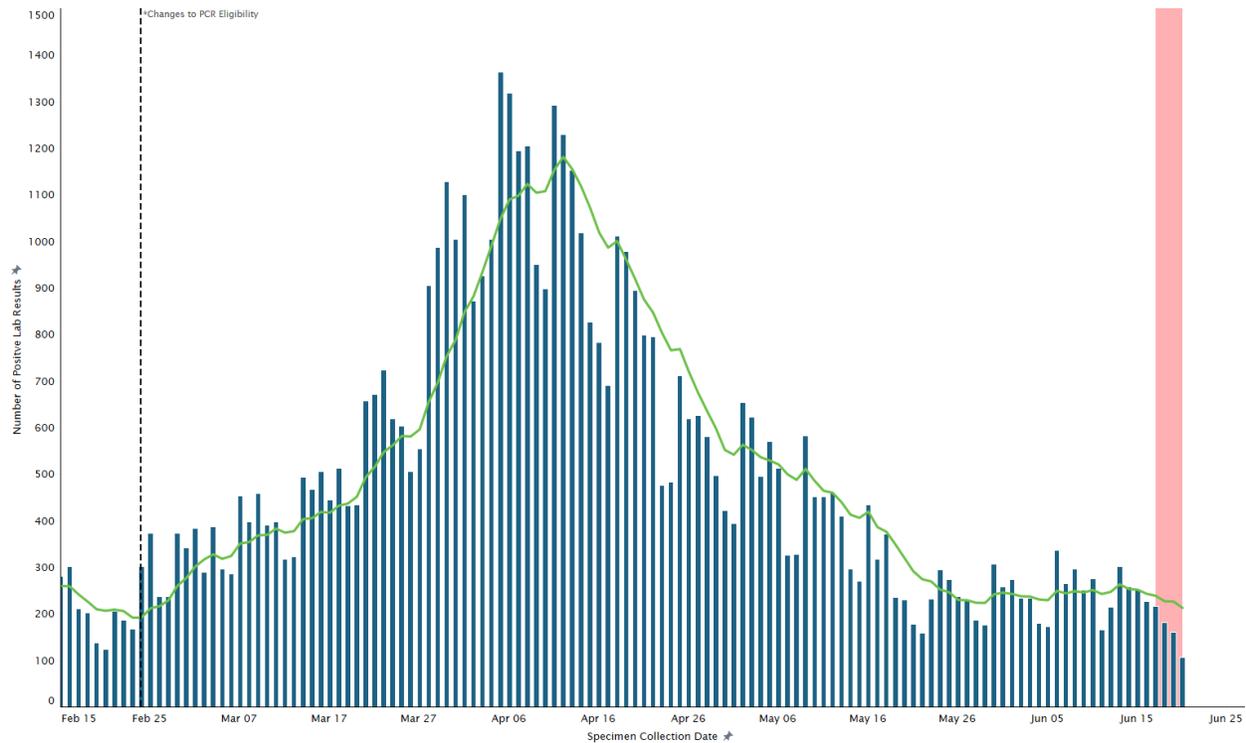
	Number in current week	Number in previous week	Change from last week	December 8, 2021-present totals	Age range (years)	Median age (years)	Median LoS (days)
PCR positives	1,420	1,950	-530	96,437	0 - 110	43	n/a
Hospitalizations	37	28	9	1,399	0 - 103	71	6.3
Deaths	7	10	-3	326	10 - 101	81	n/a

Data sources: PCR positive results – Provincial Public Health Lab Network; Hospitalizations – PPHLN, Meditech, STAR; Deaths – Panorama

Notes:

- PCR refers to polymerase chain reaction tests performed in a lab
- LoS means length of stay

Figure 1: Number and seven-day moving average of PCR positive results by collection date, February 15 to June 21, 2022 (N=62,219)

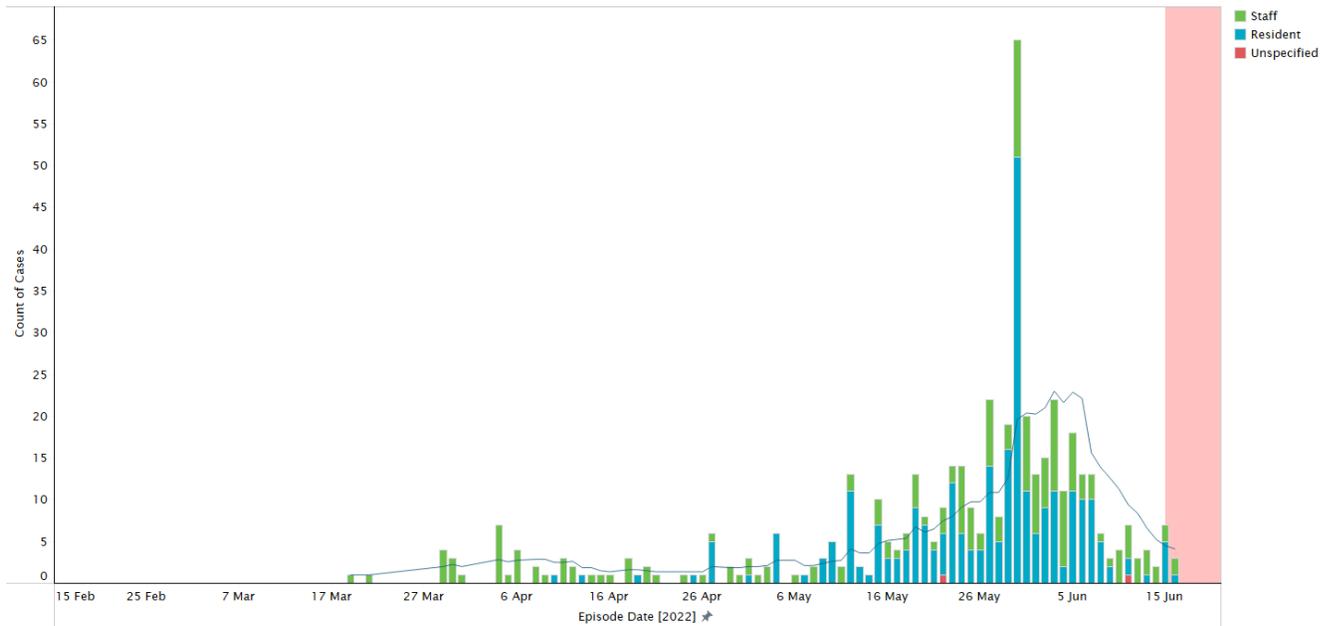


Data source: Provincial Public Health Lab Network

Notes:

- PCR refers to polymerase chain reaction tests performed in a lab
- The previous 3 days presented in the red area should be interpreted with caution. PCR positive results during this timeframe may rise as labs continue to be processed
- Only the first positive result for the same individual within a 90-day period are counted; subsequent positive results will constitute a new infection (i.e., a re-infection).
- Access to PCR tests are restricted to eligible populations as outlined in the following link: <https://www.nshealth.ca/coronavirustesting>.
- Eligibility has changed over time. Before February 24, 2022, confirmatory PCR testing for people who tested positive on a rapid test was not available.

Figure 2: Number of COVID-19 cases and seven-day moving average of cases linked to open long-term care and residential care facility outbreaks, February 15 to June 21, 2022 (N=477)

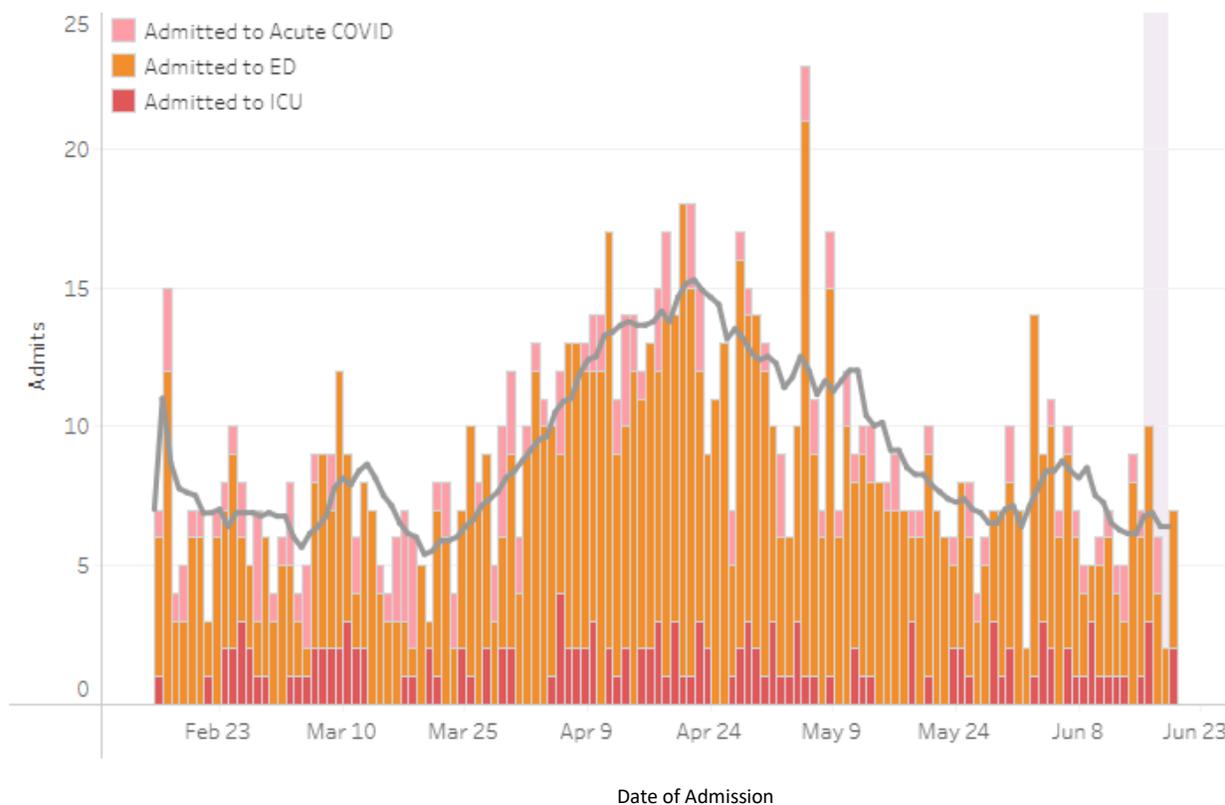


Data source: Panorama

Notes:

- Only open (ongoing) confirmed outbreaks are included
- A confirmed outbreak is defined as two or more lab-confirmed cases in residents and/or staff within a 14-day period AND an epidemiological link between cases AND at least one reported case could have acquired the infection in the facility
- Only facilities that are designated as long-term care congregate settings are included; it excludes residential care facilities and disability support program facilities with 12 or fewer residents
- Includes confirmed and probable cases entered into Panorama and linked to the outbreak
- Episode date is recorded as the date of symptom onset. If that information is unavailable, the following is used (in hierarchical order): specimen collection date, lab result date clinical diagnosis date
- The five-day period presented in the red area should be interpreted with caution. Case counts during this timeframe may rise as individuals are identified and tested; as tests are processed; as data are inputted into Panorama

Figure 3: Daily COVID-19 hospital admissions by unit type, February 15 to June 21, 2022 (N=1125)



Data sources: PPHLN, Meditech and STAR

Note:

- The five-day period presented in the grey area should be interpreted with caution. Case counts during this timeframe may rise as individuals are identified and tested and as tests are processed

Table 2: Hospitalization* and death rates by age group, December 8, 2021 to present (Waves 5 and 6)

	Number	Crude rate per 100K	Relative Risk
Hospitalizations			
<18 years	55	29.5	0.6
18-49 years**	174	46.9	1.0
50-69 years	389	135.3	2.9
70+ years	781	529.5	11.3
Deaths			
<50 years**	9	1.6	1.0
50-69 years	45	15.7	9.8
70+ years	272	184.4	115.2

Data sources: Hospitalizations - PPHLN, Meditech and STAR; Deaths – Panorama; Denominator - Statistics Canada
Notes:

- * Hospitalizations for individuals missing age are excluded from the analysis (counts, crude rates, age-adjusted rates, risk reduction)
- ** = Denotes reference category. All risks are presented in comparison to the reference category. Comparisons are made by dividing the age-specific rates in the age category of interest to the age-specific rates in the reference category

Table 3: Age-adjusted hospitalization* and death rates by vaccine status, December 8, 2021 to present (Waves 5 and 6)

Vaccination Status	Number	Crude Rate per 100k Person-Years	Age-Adjusted Rate per 100k Person-Years	Risk Reduction (Relative to Unvaccinated/1 Dose)
Hospitalizations				
Unvaccinated/1 Dose	319	192.2	1925.4	N/A
2 Dose	391	99.3	200.6	89.6%
3+ Dose	689	250.4	208.2	89.2%
Deaths				
Unvaccinated/1 Dose	66	39.8	574.7	N/A
2 Dose	114	29.0	67.3	88.3%
3+ Dose	146	53.1	39.6	93.1%

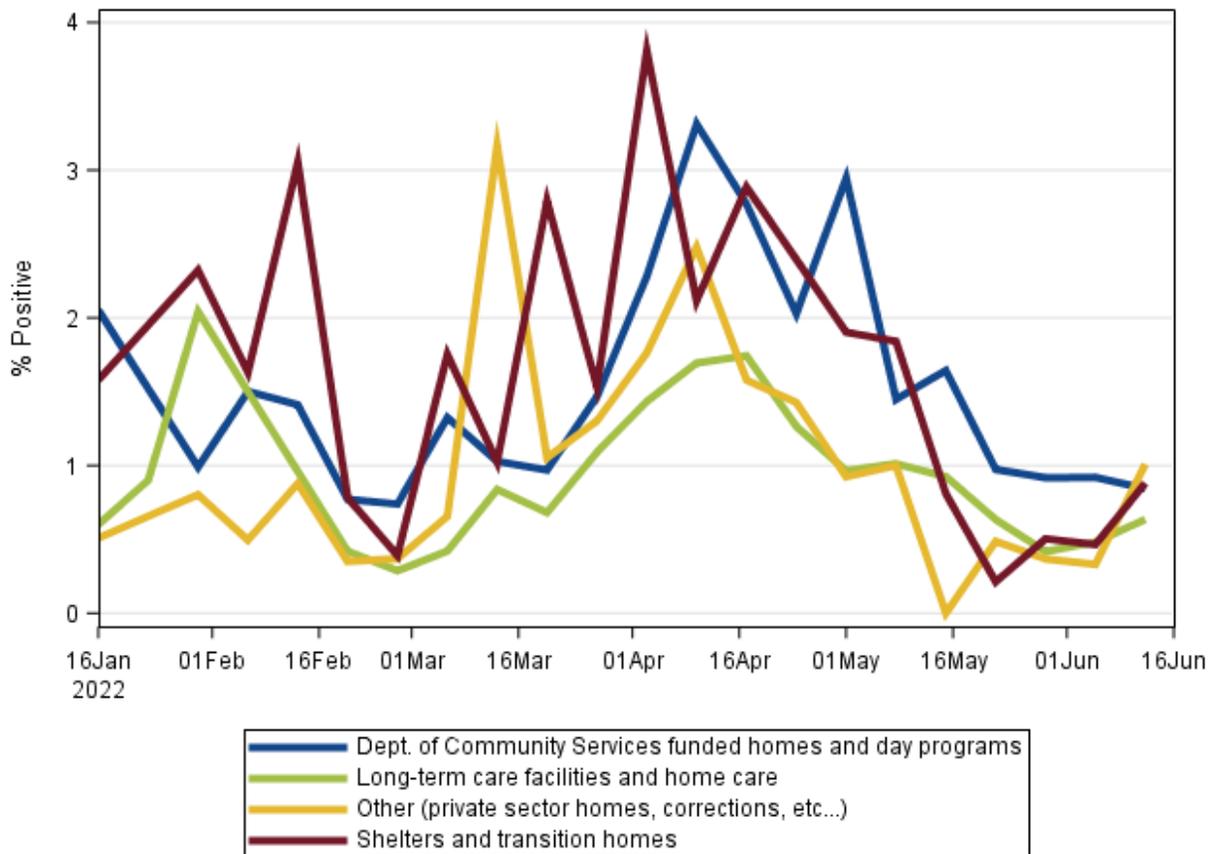
Data sources: Hospitalizations - PPHLN, Meditech and STAR; Deaths – Panorama; Denominator - Statistics Canada

Notes:

- * Hospitalizations for individuals missing age are excluded from the analysis (counts, crude rates, age-adjusted rates, risk reduction)
- A person is considered unvaccinated when they have zero doses of any COVID-19 vaccine
- A person is considered to have one dose when they have a single dose of a two-dose primary series OR are within 14 days of receiving a second dose of any COVID-19 vaccine
- A person is considered to have two doses 14 or more days after the second dose of any vaccine OR 14 or more days after one dose of Johnson & Johnson vaccine OR are within 14 days of receiving a third dose of any COVID-19 vaccine
- A person is considered to have three or more doses 14 or more days after a third dose of any COVID-19 vaccine

Community-based Rapid Testing – January 10, 2022 to present

Figure 4: Proportion of positive rapid antigen test results for some high priority populations, by week



Data source: High Priority Testing Stream

Notes:

- Includes Department of Community Services-funded homes and day programs, shelters and transition homes, long-term care facilities and home care, private group homes, and correctional facilities

Full pandemic descriptive summary – March 2020 to present

Table 4: Summary of confirmed and probable COVID-19 cases and outcomes, by wave

	Wave 1	Wave 2	Wave 3	Wave 4	Wave 5	Wave 6
Number of cases	1,100	662	4,167	3,056	37,556	58,881
% Hospitalized	5.3%	2.1%	6.3%	3.1%	1.4%	1.5%
% ICU	1.4%	0.5%	1.8%	0.8%	0.2%	0.2%
% Deceased	5.9%	0.2%	0.7%	0.6%	0.4%	0.3%

Data sources: Cases, hospitalizations and deaths in Waves 1-4 -- Panorama; PCR positive results in Waves 5-6 -- PPHLN; Hospitalizations in Waves 5-6 -- Meditech and STAR

Note:

- Wave dates are classified as follows
 - o Wave 1 – March 1, 2020 to September 30, 2020
 - o Wave 2 – October 1, 2020 to March 31, 2021
 - o Wave 3 – April 1, 2021 to July 31, 2021
 - o Wave 4 – August 1, 2021 to December 7, 2021
 - o Wave 5 – December 8, 2021 to February 28, 2022
 - o Wave 6 – March 1, 2022 to present

Table 5: Number of COVID-19 cases and deaths among residents of long-term care facilities, by wave

	Wave 1	Wave 2	Wave 3	Wave 4	Wave 5	Wave 6	Total
Number of long-term care resident COVID-19 cases	263	3	7	43	783	2,425	3,524
Number of long-term care resident COVID-19 deaths	57	0	1	4	23	74	159
Case fatality rate	21.7%	0.0%	14.3%	9.3%	2.9%	3.0%	4.5%

Data source: Panorama

Notes:

- Case counts can increase or decrease depending on confirmatory testing of probable cases
- Case counts include confirmed and probable cases that were classified as LTC residents in Panorama. This does not include individuals attached to outbreaks in other congregate settings (i.e. assisted living, group homes, etc.).
- Wave dates are classified as follows
 - o Wave 1 – March 1, 2020 to September 30, 2020
 - o Wave 2 – October 1, 2020 to March 31, 2021
 - o Wave 3 – April 1, 2021 to July 31, 2021
 - o Wave 4 – August 1, 2021 to December 7, 2021
 - o Wave 5 – December 8, 2021 to February 28, 2022
 - o Wave 6 – March 1, 2022 to present

Data Sources and Notes:

Panorama

- Data are valid to the day of the report at 07:00
- Data presented in this report contain the information available at the time of data extraction. It may be incomplete pending follow-up. As more information becomes available, it will be included in subsequent reports.

Provincial Public Health Laboratory Network

- Data are valid to the day of the report at 05:30.
- Data presented in this report contain the information available at the time of data extraction. It may be incomplete pending follow-up. As more information becomes available, it will be included in subsequent reports

Meditech and STAR (Nova Scotia Health)

- Data are valid to the day of the report at 04:00
- Data are based on positive lab results and reflect patients with a valid health card number at the time of testing or admission
- Data presented in this report contain the information available at the time of data extraction. It may be incomplete pending follow-up. As more information becomes available, it will be included in subsequent reports
- Includes patients that are assumed to be admitted for COVID-related treatment based on inpatient location

Statistics Canada - Table 17-10-0005-01 - Population estimates on July 1st (2021), by age and sex

High Priority Testing Stream

- Data are valid to the Sunday before the report at 11:59pm

COVID-19 Case Definitions

<https://www.canada.ca/en/public-health/services/diseases/2019-novel-coronavirus-infection/health-professionals/national-case-definition.html>