

## In Summary...

<b>Activity levels**</b>
<ul style="list-style-type: none"> <li>Sporadic activity was reported in the Northern and Central Zone while no activity was reported in Eastern and Western Zone during this reporting period.</li> </ul>
<b>Laboratory-confirmed cases*</b>
<ul style="list-style-type: none"> <li>There were 5 new cases of Influenza A, and 0 new cases of Influenza B reported during Weeks 40/41.</li> <li>There have been 10 laboratory confirmed cases of Influenza A and 1 laboratory confirmed cases of Influenza B reported during the 2022-2023 influenza season.</li> <li>There were also 3 Adenovirus, 1 Coronavirus****, 27 Enterovirus/Rhinovirus, 6 Parainfluenza, and 20 Respiratory Syncytial Virus cases identified during this reporting period.</li> </ul>
<b>Severity</b>
<ul style="list-style-type: none"> <li>There was 1 case hospitalized with Influenza A during this reporting period.</li> <li>During the 2022-2023 influenza season there have been:             <ul style="list-style-type: none"> <li>5 hospitalizations (non-ICU)</li> <li>0 ICU admissions</li> <li>1 deaths*** of laboratory confirmed influenza</li> </ul> </li> </ul>
<b>Novel Coronavirus (COVID-19)</b>
<ul style="list-style-type: none"> <li>For current epidemiology of COVID-19 please refer to: <a href="https://novascotia.ca/coronavirus/alerts-notices/#epidemiologic-summaries">https://novascotia.ca/coronavirus/alerts-notices/#epidemiologic-summaries</a></li> </ul>
<b>Syndromic surveillance</b>
<ul style="list-style-type: none"> <li>The percentage of visits for influenza-like illness (ILI) ranged between 0.7% - 2.0% during this reporting period.</li> </ul>

**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.

\*Reporting weeks run 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);

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

\*\*\*Deaths include individuals with a positive influenza test result, influenza 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

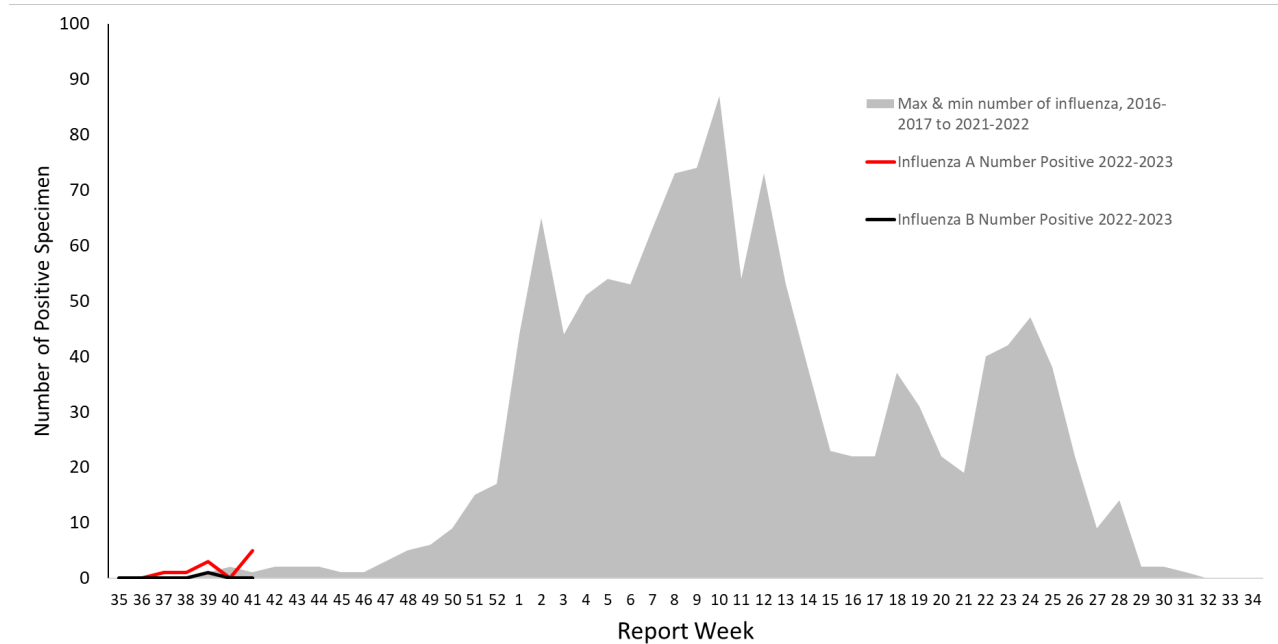


Table 1: Number of laboratory-confirmed influenza cases by zone, current week and cumulative 2022-2023 season in Nova Scotia

ZONE	WEEK 40-41			CUMULATIVE 2022-2023		
	TOTAL	INFLUENZA A	INFLUENZA B	TOTAL	INFLUENZA A	INFLUENZA B
Western	0	0	0	0	0	0
Northern	3	3	0	5	5	0
Eastern	0	0	0	0	0	0
Central	2	2	0	6	5	1
<b>Nova Scotia Total</b>	<b>5</b>	<b>5</b>	<b>0</b>	<b>11</b>	<b>10</b>	<b>1</b>

**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 40-41			CUMULATIVE 2022-2023		
	TOTAL	INFLUENZA A	INFLUENZA B	TOTAL	INFLUENZA A	INFLUENZA B
0-4	0	0	0	1	0	1
5-19	1	1	0	1	1	0
20-44	0	0	0	2	2	0
45-64	1	1	0	2	2	0
65+	3	3	0	5	5	0
<b>Nova Scotia Total</b>	<b>5</b>	<b>5</b>	<b>0</b>	<b>11</b>	<b>10</b>	<b>1</b>

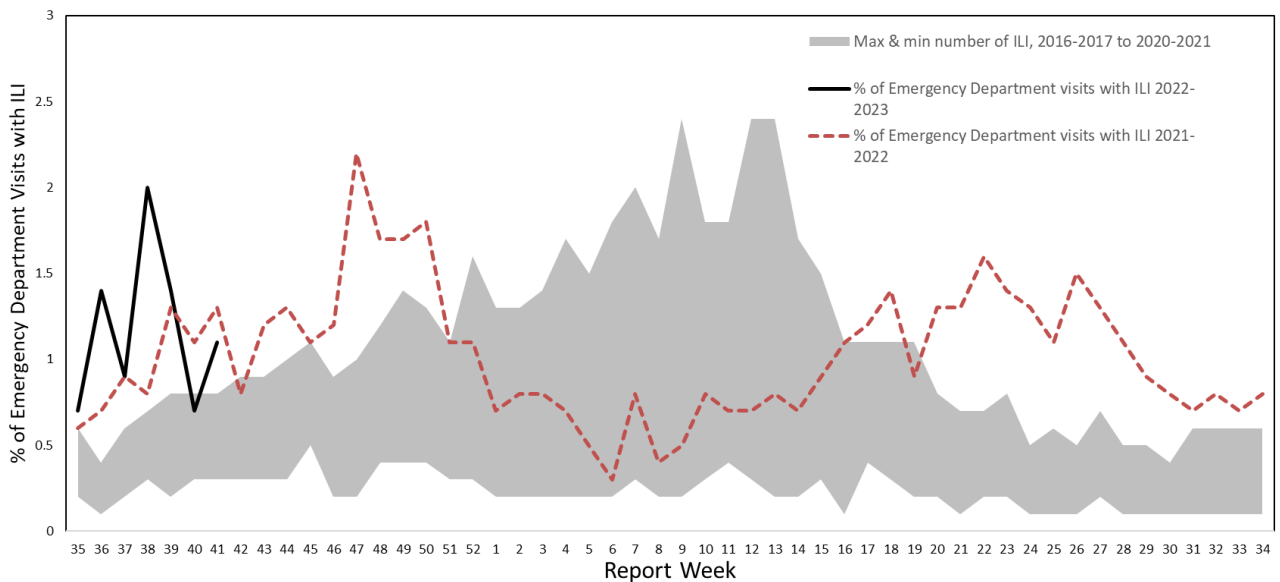
**Table 3: Hospitalizations, ICU admissions and deaths for influenza positive patients, current week and cumulative, 2022-2023 season, Nova Scotia**

	WEEK 40-41			CUMULATIVE 2022-2023		
	TOTAL	INFLUENZA A	INFLUENZA B	TOTAL	INFLUENZA A	INFLUENZA B
Hospitalized	3	3	0	5	5	0
Hospitalized - ICU	0	0	0	0	0	0
Deceased*	1	1	0	1	1	0
<b>Nova Scotia Total</b>	<b>4</b>	<b>4</b>	<b>0</b>	<b>6</b>	<b>6</b>	<b>0</b>

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

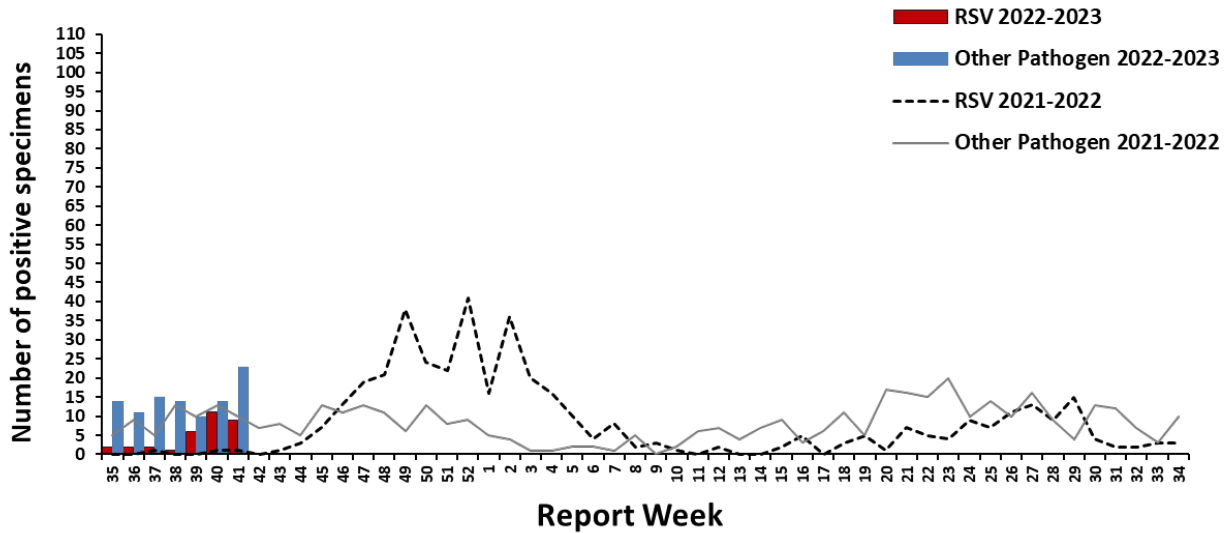
## SYNDROMIC SURVEILLANCE

**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 other respiratory pathogens\* and RSV by report week, 2022-2023 season, with trend-line comparison to 2021-2022 season, Nova Scotia**



**Notes:** Other respiratory pathogen includes Adenovirus, Bocavirus, Chlamydomphila pneumonia, Coronavirus, Enterovirus, Metapneumovirus, Mycoplasma pneumoniae, Parainfluenza, Pertussis, Rhinovirus.  
 Note that data for this figure is obtained from provincial laboratories. There is no RSV 2020-2021 trend line visible because Nova Scotia did not identify any cases of RSV. For this season, 2019-2020 data will be used for a trend comparison.

**Table 4: Number of positive RSV specimens by age group, 2022-2023 season, Nova Scotia**

AGE GROUP	2022-2023
0-5 months	10
6-11 months	2
12-23 months	11
2-5 years	4
6-15 years	2
16-65 years	3
65+ years	1
<b>Nova Scotia Total</b>	<b>33</b>

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

Pathogen	WEEK 35-39 (n positive)	CUMULATIVE 2022-2023
Adenovirus	3	11
Bocavirus	0	0
Chlamydomphila pneumoniae	0	0
Coronavirus*	1	1
Enterovirus/Rhinovirus	27	81
Metapneumovirus	0	0
Mycoplasma pneumoniae	0	0
Parainfluenza	6	8
Pertussis	0	0
Respiratory Syncytial Virus	20	33

*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**

<b>No activity</b>	No laboratory-confirmed influenza detections in the reporting week, however, sporadically occurring ILI* may be reported
<b>Sporadic</b>	Sporadically occurring ILI* and lab confirmed influenza detection(s) with <b>no outbreaks</b> detected within the influenza surveillance region
<b>Localized</b>	(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
<b>Widespread</b>	(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](http://www.cdc.gov/flu/weekly)