

RESPIRATORY WATCH

Weeks 28-29 (July 6, 2025 to July 19, 2025)

Highlights of this two week reporting period¹

The 2024-2025 season runs from August 25, 2024 to August 29, 2025

Activity levels²

- Influenza activity in this reporting period (weeks 28 and 29)(N=2) was similar to the previous reporting period (weeks 26 and 27)(N=2).
 - The total number of PCR positive cases in this reporting period (N=2) was higher than the number in the same reporting period in the 2023/24 season (N=0).
- COVID-19 activity in this reporting period (weeks 28 and 29)(N=24) was similar to the previous reporting period (weeks 26 and 27)(N=28).
 - The total number of PCR positive cases in this reporting period (N=24) was lower than the number in the same reporting period in the 2023/24 season (N=115).
- RSV activity in this reporting period (weeks 28 and 29)(N=1) was similar to the previous reporting period (weeks 26 and 27)(N=0).
 - The total number of PCR-positive cases in this reporting period (N=1) was similar to the number in the same reporting period in the 2023/24 season (N=1).

Influenza, COVID-19, and respiratory syncytial virus (RSV) activity during this two week reporting period and the 2024/25 season

	Influ	enza	cov	ID	-19	R	sv	
	This reporting period	2024/25 season	This reporting period		2024/25 season	This reporting period		2024/25 season
Laboratory testing								
New laboratory-confirmed cases	2	6171	24		4455	1		2356
Percent positivity (%) ³	0.2	-	2.1		-	0.1		-
Severe outcome ⁴								
Hospitalizations (non-ICU)	1	1182	1		717			
ICU admissions	0	121	0		73			
Deaths	0	135	0		121			
Outbreaks ⁵								
Acute-care facility	0	30	0		48	0		5
Long-term care facility	0	90	0		144	0		30

LI activity ⁶	During this reporting period, the percentages of emergency room visits for influenza like illness (ILI) were 0.3% in week 28 and 0.4% in week 29, which were similar to weeks 26 (0.4%) and 27 (0.3%).
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¹ See data notes in Appendix.

² Use of multiplex polymerase chain reaction (PCR) respiratory virus testing may affect the number of tests conducted and number of cases identified and reported.

³ Percent positivity is useful for understanding current pathogen spread in the community.

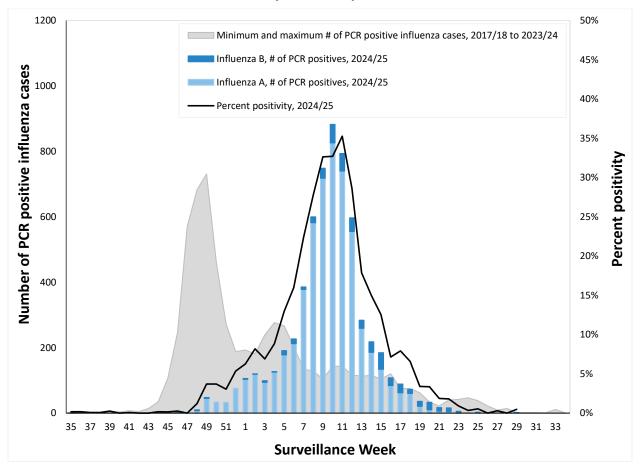
⁴ New hospitalizations, ICU admissions, and deaths in recent surveillance weeks may be undercounted because of reporting delays. Outcomes are not reported for RSV because it is not a notifiable condition in Nova Scotia.

⁵ Local public health continuously enters and updates outbreak data. Counts may differ from previous surveillance weeks.

⁶ ILI percentages may vary from previous surveillance weeks as emergency departments continuously enter and update data.

Influenza

Figure 1: Laboratory-confirmed influenza cases (N=6171) and percent positivity by surveillance week, 2024/25 season, compared with previous seasons, Nova Scotia⁷



⁷ Minimum is zero during reporting weeks with no positive specimen in seasons 2019/20 to 2023/24. There were no influenza cases reported during the 2020-2021 season. Local public health continuously enters and updates influenza case data and counts may differ from previous surveillance weeks.

Table 1: Number of laboratory-confirmed influenza cases during current reporting period and cumulative 2024/25 season, by zone, Nova Scotia⁸

7	Currer	Current reporting period			Cumulative (2024/25)		
Zone	Influenza A	Influenza B	Total	Influenza A	Influenza B	Total	
Western	0	0	0	1392	110	1502	
Northern	0	0	0	1430	241	1671	
Eastern	0	0	0	1327	31	1358	
Central	1	1	2	1525	115	1640	
Nova Scotia Total	1	1	2	5674	497	6171	

Table 2: Number of laboratory-confirmed influenza cases during current reporting period and cumulative 2024/25 season, by age groups, Nova Scotia⁸

Account (vecus)	Current reporting period			Cumulative (2024/25)			
Age group (years)	Influenza A	Influenza B	Total	Influenza A	Influenza B	Total	
0-4	0	0	0	475	42	517	
5-19	0	0	0	647	200	847	
20-44	0	0	0	987	176	1163	
45-64	0	1	1	1315	52	1367	
≥ 65	1	0	1	2250	27	2277	
Nova Scotia Total	1	1	2	5674	497	6171	

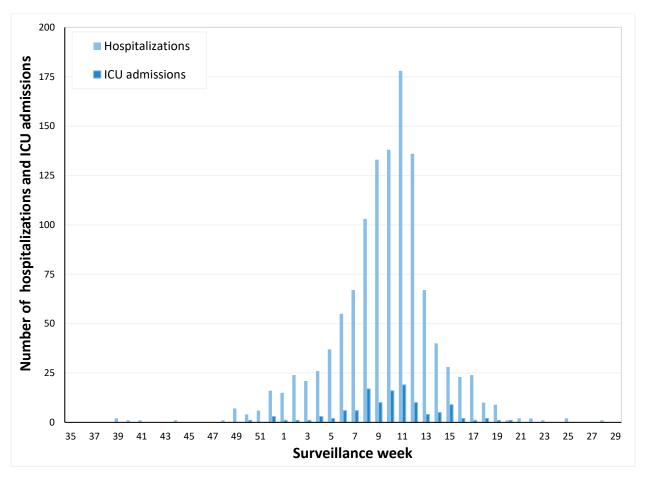
Table 3: Cumulative number of hospitalizations, ICU admissions, and deaths among lab-confirmed influenza positive patients, 2024/25 season, Nova Scotia⁹

Ago group (voors)	Cum	nulative (2024/25)			
Age group (years)	Hospitalizations	ICU	Deaths		
0-4	48	2	0		
5-19	83	3	1		
20-44	80	11	3		
45-64	234	49	27		
≥ 65	737	56	104		
Nova Scotia Total	1182	121	135		

⁸ Local public health continuously enters and updates influenza case data and counts may differ from previous surveillance weeks.

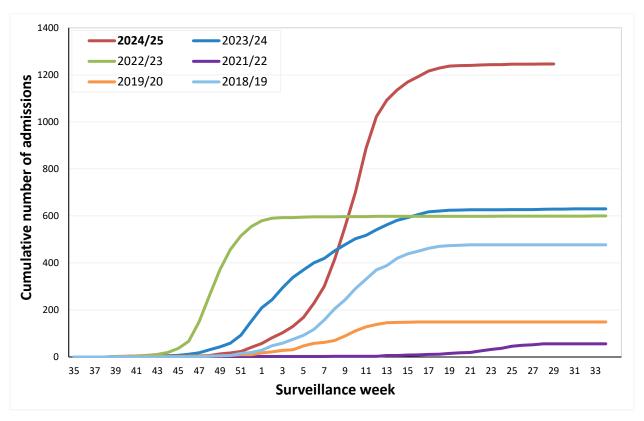
⁹ Individuals may be included in multiple columns if they have more than one severe outcome (i.e., categories are not mutually exclusive). Recent hospitalizations, ICU admissions, and deaths may be undercounted due to delays in reporting.

Figure 2: Number of influenza hospitalizations and ICU admissions by surveillance week, 2024/25 season, Nova Scotia¹⁰



¹⁰ Cases who are hospitalized and admitted to the ICU in the same surveillance week will be included in both the hospitalization and ICU counts for that surveillance week. Recent hospitalizations and ICU admissions may be undercounted due to delays in reporting.

Figure 3: Cumulative number of hospitalizations and ICU admissions for influenza by surveillance week, 2024/25 season compared with previous seasons, Nova Scotia¹¹



¹¹ Figure 3 presents the cumulative number of cases who were admitted to hospital and/or ICU during the season. Cases are counted once. There were no reported cases of influenza during the 2020-2021 season.

COVID-19

Figure 4: Number of laboratory-confirmed COVID-19 cases (N=4455) and percent positivity, 2024/25 season, compared with previous seasons, Nova Scotia¹²

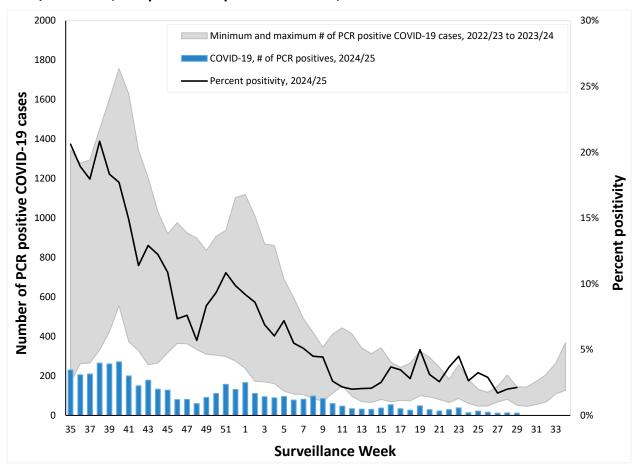


Table 4: Number of laboratory-confirmed COVID-19 cases during current reporting period and cumulative 2024/25 season, by zone, Nova Scotia¹²

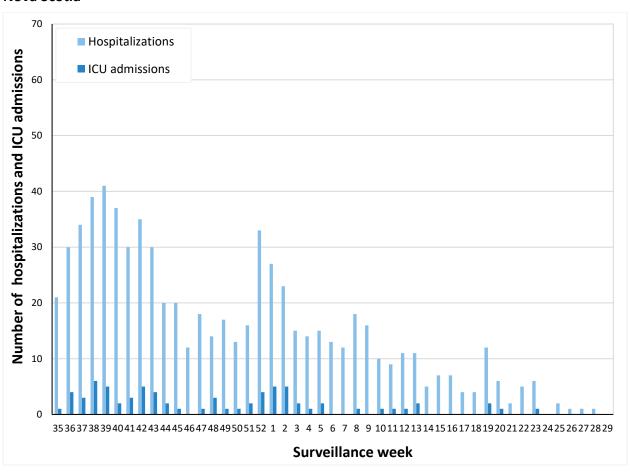
Zone	Current reporting period	Cumulative (2024/25)
Western	8	965
Northern	4	1015
Eastern	2	794
Central	10	1681
Nova Scotia Total	24	4455

¹² Local public health continuously enters and updates COVID-19 case data. Counts may differ from previous surveillance weeks.

Table 5. Number of laboratory-confirmed COVID-19 cases during current reporting period and cumulative 2024/25 season, by age group, Nova Scotia¹³

Age group (years)	Current reporting period	Cumulative (2024/25)
0-4	1	123
5-19	0	120
20-44	6	507
45-64	4	722
≥ 65	13	2983
Nova Scotia Total	24	4455

Figure 5: Number of COVID-19 hospitalizations and ICU admissions by week, 2024/25 season, Nova Scotia¹⁴

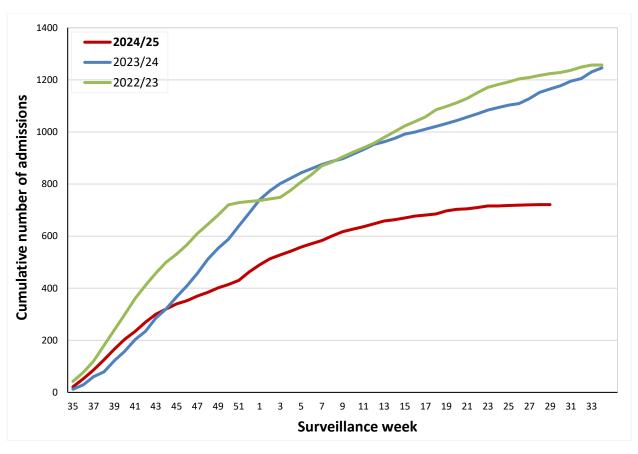


¹³ Local public health continuously enters and updates COVID-19 case data. Counts may differ from previous surveillance weeks. ¹⁴ Cases who are hospitalized and admitted to the ICU in the same surveillance week will be included in both the hospitalization and ICU counts for that surveillance week. Recent hospitalizations and ICU admissions may be undercounted due to delays in reporting.

Table 6: Cumulative number of hospitalizations, ICU admissions, and deaths among COVID-19 positive patients, 2024/25 season, Nova Scotia¹⁵

Account (vecus)	Cumulative (2024/25)					
Age group (years)	Hospitalizations	ICU admissions	Deaths			
0-4	16	2	0			
5-19	8	2	0			
20-44	16	3	3			
45-64	74	13	6			
≥ 65	603	53	112			
Nova Scotia Total	717	73	121			

Figure 6: Cumulative number of COVID-19 hospitalizations and ICU admissions, by surveillance week, 2024/25 season compared with previous seasons, Nova Scotia¹⁶



¹⁵ Cases can have more than one severe outcome (e.g., be hospitalized and then admitted to the ICU); therefore, cases may be counted multiple times if they have more than one severe outcome (i.e., categories are not mutually exclusive). Recent hospitalizations, ICU admissions, and deaths may be undercounted due to delays in reporting

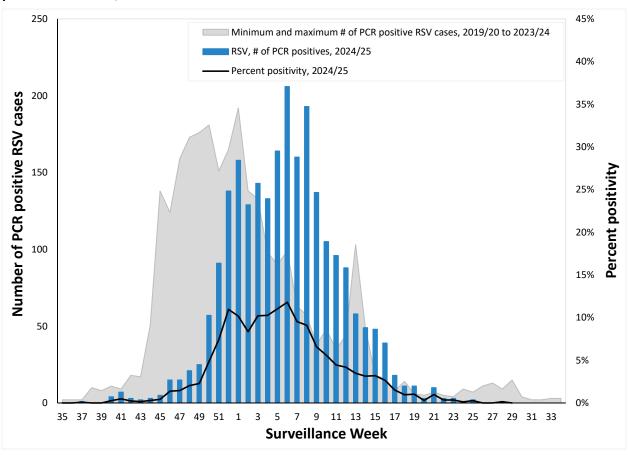
¹⁶ Figure 6 presents the cumulative number of cases who were admitted to hospital and/or ICU during the season. Cases are counted once.

Respiratory Syncytial Virus (RSV) 17

Table 7: Number of laboratory-confirmed RSV cases by age group, current reporting period and cumulative 2024/25 season, Nova Scotia¹⁸

Age group	Current reporting period	Cumulative (2024/25)
0-5 months	1	242
6-11 months	0	151
12-23 months	0	248
2-4 years	0	371
5-19 years	0	166
20-64 years	0	421
≥ 65 years	0	747
Nova Scotia Total	1	2346

Figure 7: Laboratory-confirmed RSV cases (N=2356) by week, 2024/25 season, compared with previous seasons, Nova Scotia¹⁹



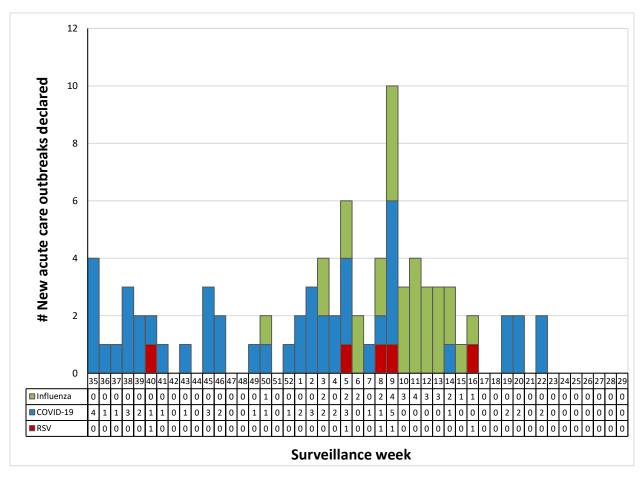
 $^{^{17}}$ RSV is not a notifiable condition in Nova Scotia. Counts may differ from previous surveillance weeks because of reporting delays.

¹⁸ The total number of cases is less than the total count in Figure 7 because age is not reported for all cases.

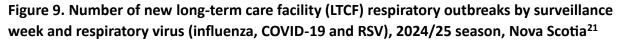
¹⁹ There were no reported RSV cases during the 2020-2021 season. The implementation of the multiplex respiratory virus PCR testing in 2022/23 may increase the number of cases detected.

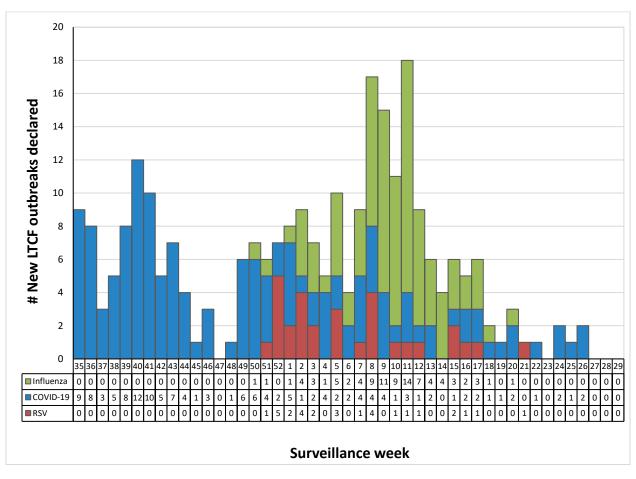
Respiratory Outbreaks

Figure 8. Number of new acute care facility respiratory outbreaks by surveillance week and respiratory virus (influenza, COVID-19 and RSV), 2024/25 season, Nova Scotia²⁰



²⁰ Acute care facility outbreak definitions are described in the Appendix. Local public health continuously enters and updates outbreak data. Counts may differ from previous surveillance weeks.

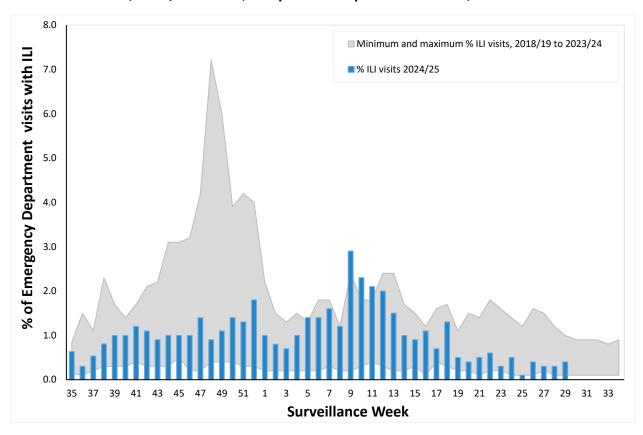




²¹ LTCF outbreak definitions are described in the Appendix. Local public health continuously enters and updates outbreak data. Counts may differ from previous surveillance weeks.

Syndromic Surveillance

Figure 10: Percentage of emergency department visits due to influenza-like illness (ILI) by surveillance week, 2024/25 season, compared with previous seasons, Nova Scotia²²



Other Respiratory Illness

Table 8: Number of positive specimens for other respiratory viruses, current reporting period and cumulative 2024/25 season, Nova Scotia

PATHOGEN	Current reporting period	Cumulative (2024/25)
Adenovirus	1	42
Bocavirus	0	4
Coronavirus*	0	68
Enterovirus/Rhinovirus	12	406
Metapneumovirus	3	44
Parainfluenza	3	78

^{*}Excludes COVID-19

²² ILI percentages may vary from previous surveillance weeks as emergency departments continuously enter and update data.

Appendix – data notes and definitions

Data Notes

- A surveillance week runs from Sunday to Saturday. Nova Scotia's 2024/25 season aligns with the <u>Public</u> Health Agency of Canada (PHAC) FluWatch surveillance weeks.
 - This year runs from August 25, 2024 (Week 35) to August 29, 2025 (Week 34).
- Notifications of hospitalizations, ICU admissions, and deaths may lag by several weeks, and deaths are
 particularly affected. Additionally, data are incomplete for the most recent reporting period because of
 lags in local public health reporting of COVID-19 and influenza outcomes. Figures presenting outcomes by
 week do not include data for the most recent surveillance week.
- Definitions for hospitalizations and deaths related to each of COVID-19 and influenza were changed in August 2024. These case definitions are found in the <u>Surveillance guidelines</u>.
- 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, but is not limited to, influenza, RSV, and COVID-19. See <u>Nova Scotia's Respiratory Surveillance Plan</u> for a full list of what is tested.
 - In the 2022-2023 season, access to multiplex PCR testing in Nova Scotia increased testing accessibility which likely increased detection in community influenza and RSV.
 - Testing is limited to <u>specific populations</u> and the counts reported in this report under-represent the actual number of cases in the community.

Definitions used in respiratory surveillance, and useful links, 2024/25

See: <u>Nova Scotia's Respiratory Response Plan</u> and <u>Nova Scotia's Respiratory Surveillance Plan for Public</u> Health

Acronyms

ICU Intensive care unit
 ILI Influenza-like illness
 RSV Respiratory syncytial virus
 PCR Polymerase chain reaction
 LTCF Long term care facilities

Outbreak Definitions

Pathogen	Acute care facility	Long-term care facility (LCTF)
	≥ 2 symptomatic residents where at	≥ 2 resident cases of ILI (influenza-like
Influenza	least one is a laboratory confirmed case of influenza, epidemiologically linked within the patient care unit in a 7-day period	illness), where at least one is a laboratory confirmed case of influenza, within the LTCF in a 7-day period
COVID-19	≥ 2 symptomatic residents where at least one is a laboratory confirmed case of COVID-19, epidemiologically linked within the patient care unit in a 10-day period	≥ 2 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

Weeks 28-29 (July 6, 2025 to July 19, 2025)

≥ 2 symptomatic residents where at	≥ 2 symptomatic residents where at least
least one is a laboratory confirmed	one is a laboratory confirmed case of
case of RSV, epidemiologically linked	RSV, epidemiologically linked within the
within the patient care unit in a 7-day	LTCF in a 7-day period
period	
	least one is a laboratory confirmed case of RSV, epidemiologically linked within the patient care unit in a 7-day

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 < 5 or ≥ 65 years, fever may not be prominent.

Other case definitions

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

Links to other weekly influenza reports

Canada: <u>Weekly influenza reports - Canada.ca</u> World: <u>Global Influenza Programme (who.int)</u>

US: FluView | FluView | CDC