

Highlights of this reporting period¹

The 2025-2026 season runs from August 24, 2025 to August 29, 2026

Activity levels²

- Influenza activity in this reporting period (week 41; N=7) was similar to the previous week (week 40; N=5).
 - The number of PCR positive cases in this reporting period (N=7) was similar to the same reporting period in the 2024/25 season (N=7).
- COVID-19 activity decreased during this reporting period (week 41; N=127) compared with the previous week (week 40; N=139).
 - The number of PCR positive cases in this reporting period (N=127) was lower than the number in the same reporting period in the 2024/25 season (N=200).
- Weekly RSV activity during week 41 (N=1) was similar to the previous week (week 40; N=0).
 - The number of PCR-positive cases in this reporting period (N=1) was lower than the number in the same week in the 2024/25 season (N=7).

Influenza, COVID-19, and respiratory syncytial virus (RSV) activity during this reporting period and the 2025/26 season

	Influenza		COVID-19		RSV	
	This reporting period	2025/26 season	This reporting period	2025/26 season	This reporting period	2025/26 season
Laboratory testing						
New laboratory-confirmed cases	7	21	127	623	1	5
Percent positivity (%) ³	0.7	-	14.1	-	0.1	-
Severe outcome⁴						
Hospitalizations (non-ICU)	1	1	1	70	0	1
ICU admissions	0	0	0	9	0	0
Deaths	0	0	0	4	0	0
Outbreaks⁵						
Acute-care facility	0	0	4	8	0	0
Long-term care facility	0	0	5	22	0	0

ILI activity⁶	During this reporting period (week 41), the percentage of emergency room visits for influenza like illness (ILI) was 0.6%, which was higher than 0.2% in the previous week (week 40).
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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. Percent positivity calculated for the six week period; weekly percent positivity for influenza, COVID-19, and RSV are presented in figures below.

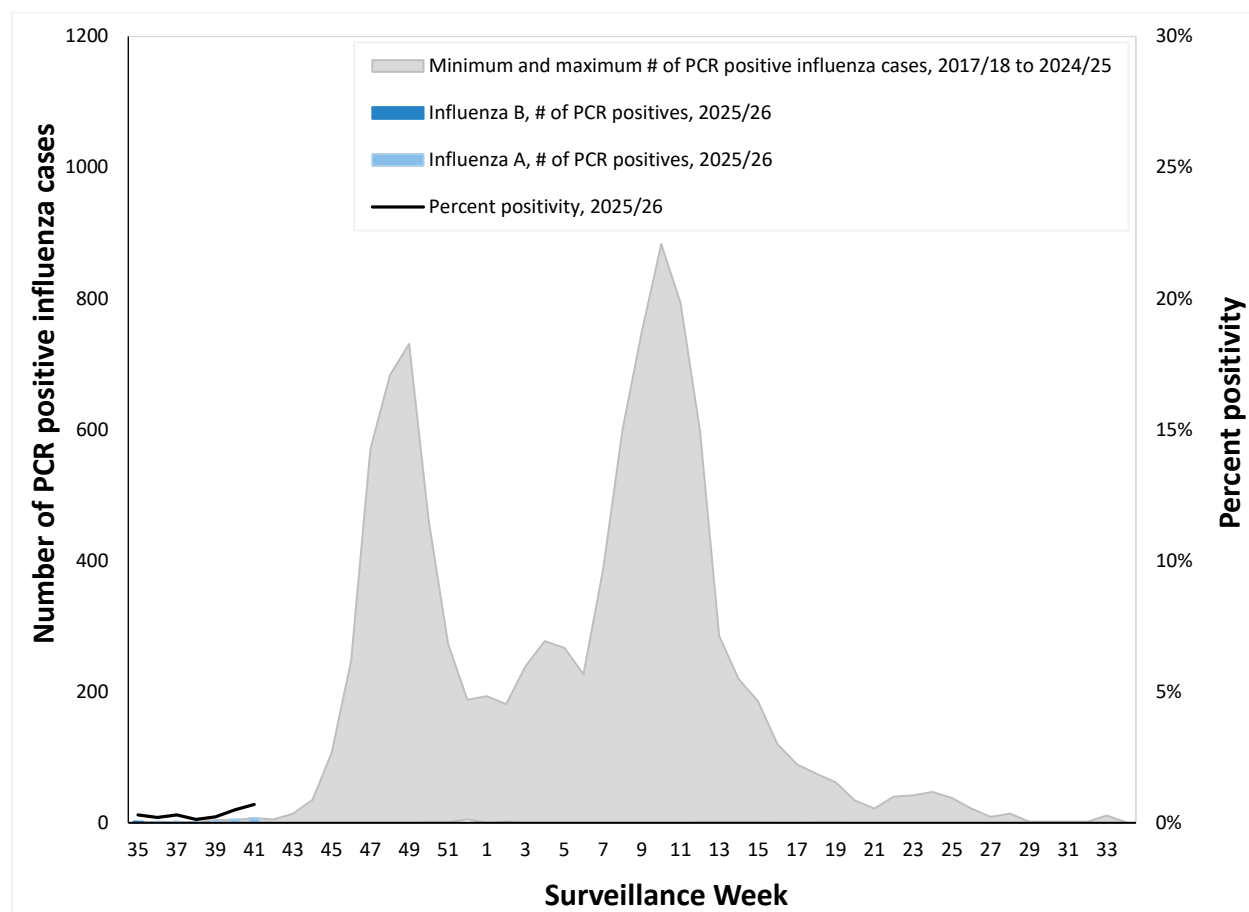
⁴ Recent hospitalization, ICU admission, and death counts in recent surveillance weeks may not be up to date because of reporting delays.

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=21) and percent positivity by surveillance week, 2025/26 season, compared with previous seasons, Nova Scotia⁷



⁷ Minimum is zero during reporting weeks where there were no positive specimens. There were no influenza cases reported during the 2020/21 season. Local public health continuously enters and updates influenza case data and counts may differ from previous surveillance weeks.

Week 41 (October 5, 2025 to October 11, 2025)

Table 1: Number of laboratory-confirmed influenza cases during current reporting period and cumulative 2025/26 season, by zone, Nova Scotia⁸

Zone	Current reporting period			Cumulative (2025/26)		
	Influenza A	Influenza B	Total	Influenza A	Influenza B	Total
Western	1	0	1	2	1	3
Northern	3	0	3	6	0	6
Eastern	2	0	2	5	0	5
Central	1	0	1	7	0	7
Nova Scotia Total	7	0	7	20	1	21

Table 2: Number of laboratory-confirmed influenza cases during current reporting period and cumulative 2025/26 season, by age groups, Nova Scotia⁸

Age group (years)	Current reporting period			Cumulative (2025/26)		
	Influenza A	Influenza B	Total	Influenza A	Influenza B	Total
0-4	1	0	1	1	1	2
5-19	0	0	0	1	0	1
20-44	0	0	0	2	0	2
45-64	3	0	3	6	0	6
≥ 65	3	0	3	10	0	10
Nova Scotia Total	7	0	7	20	1	21

Table 3: Cumulative number of hospitalizations, ICU admissions, and deaths among lab-confirmed influenza positive patients, 2025/26 season, Nova Scotia⁹

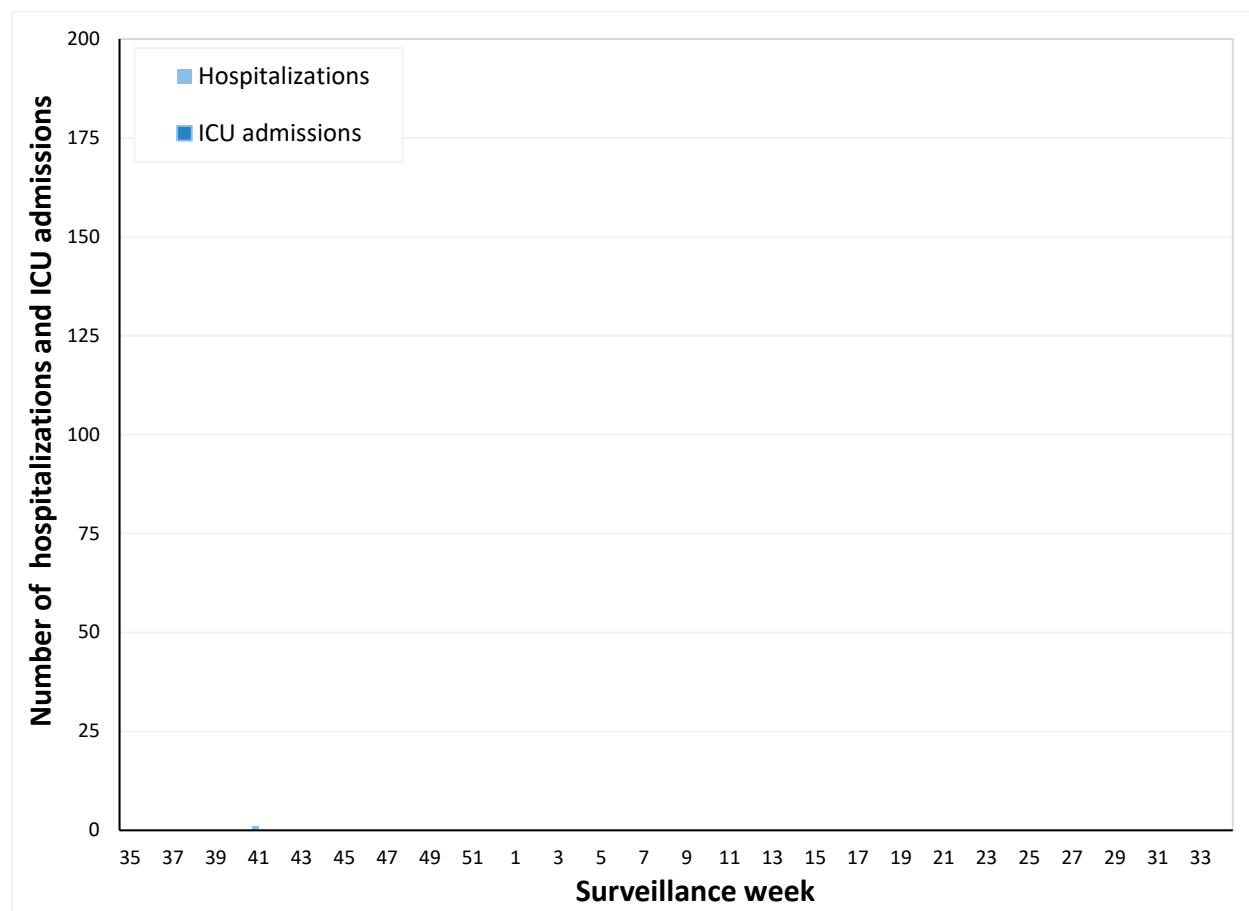
Age group (years)	Cumulative (2025/26)		
	Hospitalizations	ICU	Deaths
0-4	0	0	0
5-19	0	0	0
20-44	0	0	0
45-64	0	0	0
≥ 65	1	0	0
Nova Scotia Total	1	0	0

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 death counts may not be up to date because of reporting delays.

Week 41 (October 5, 2025 to October 11, 2025)

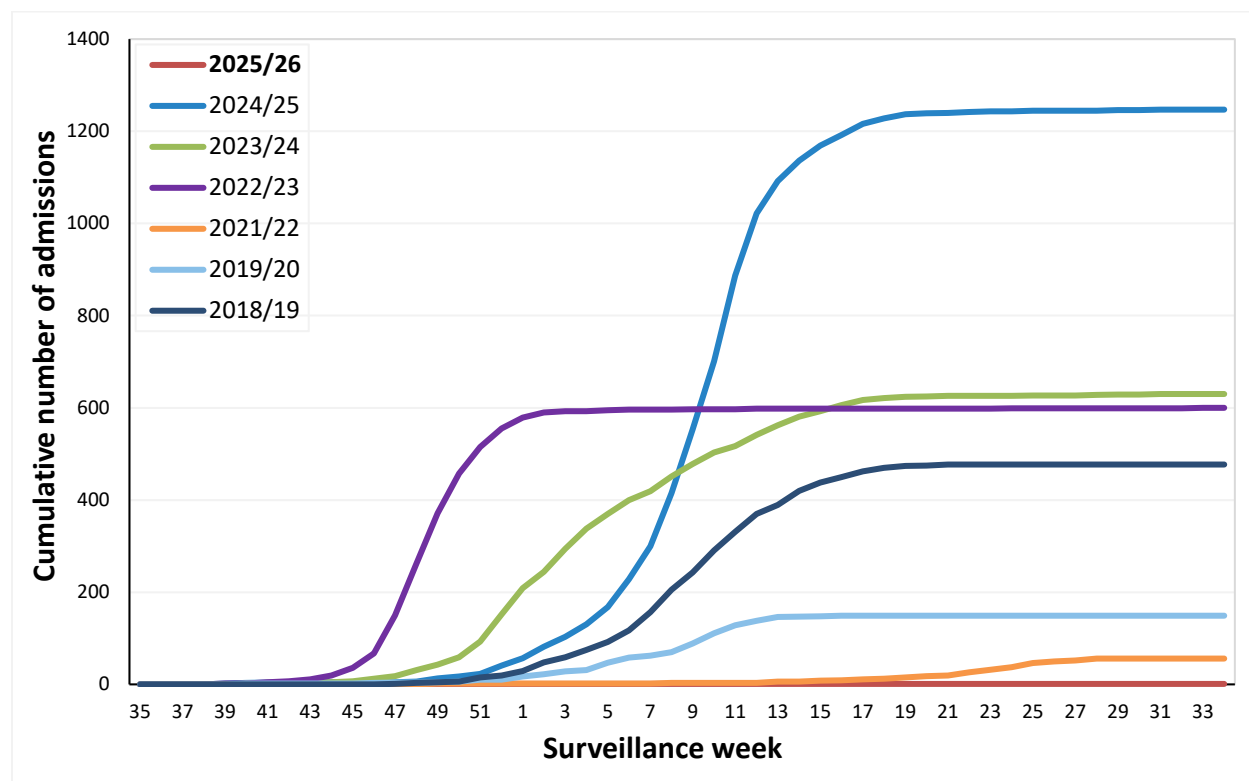
Figure 2: Number of influenza associated hospitalizations and ICU admissions by surveillance week, 2025/26 season, Nova Scotia¹⁰



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 hospitalization and ICU admission counts may not be up to date because of reporting delays.

Week 41 (October 5, 2025 to October 11, 2025)

Figure 3: Cumulative number of influenza associated hospitalizations and ICU admissions by surveillance week, 2025/26 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=623) and percent positivity, 2025/26 season, compared with previous seasons, Nova Scotia¹²

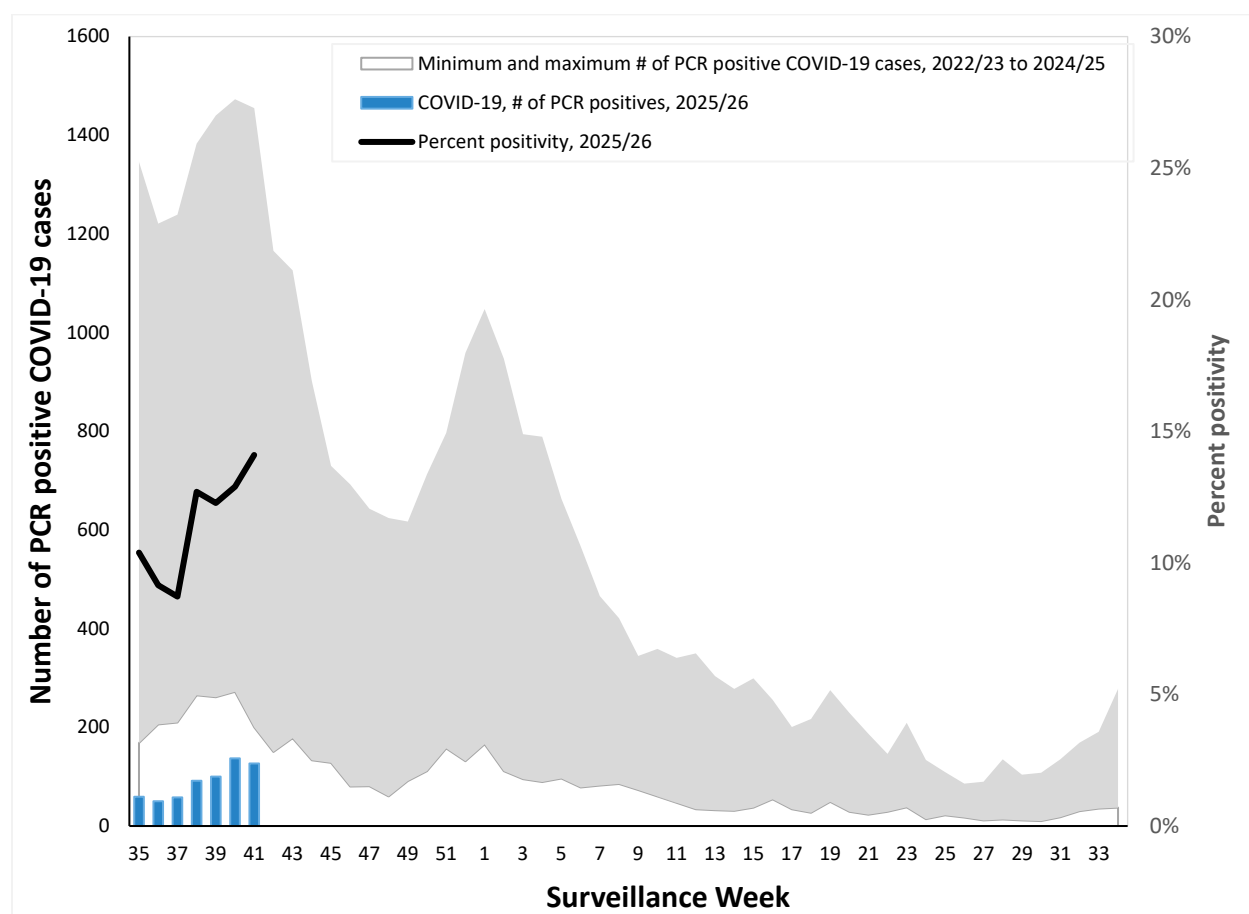


Table 4: Number of laboratory-confirmed COVID-19 cases during current reporting period and cumulative 2025/26 season, by zone, Nova Scotia¹²

Zone	Current reporting period	Cumulative (2025/26)
Western	23	113
Northern	28	147
Eastern	23	117
Central	53	246
Nova Scotia Total	127	623

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

Week 41 (October 5, 2025 to October 11, 2025)

Table 5. Number of laboratory-confirmed COVID-19 cases during current reporting period and cumulative 2025/26 season, by age group, Nova Scotia¹³

Age group (years)	Current reporting period	Cumulative (2025/26)
0-4	5	18
5-19	2	16
20-44	6	66
45-64	18	98
≥ 65	96	425
Nova Scotia Total	127	623

Table 6: Cumulative number of hospitalizations, ICU admissions, and deaths among COVID-19 positive patients, 2025/26 season, Nova Scotia¹⁴

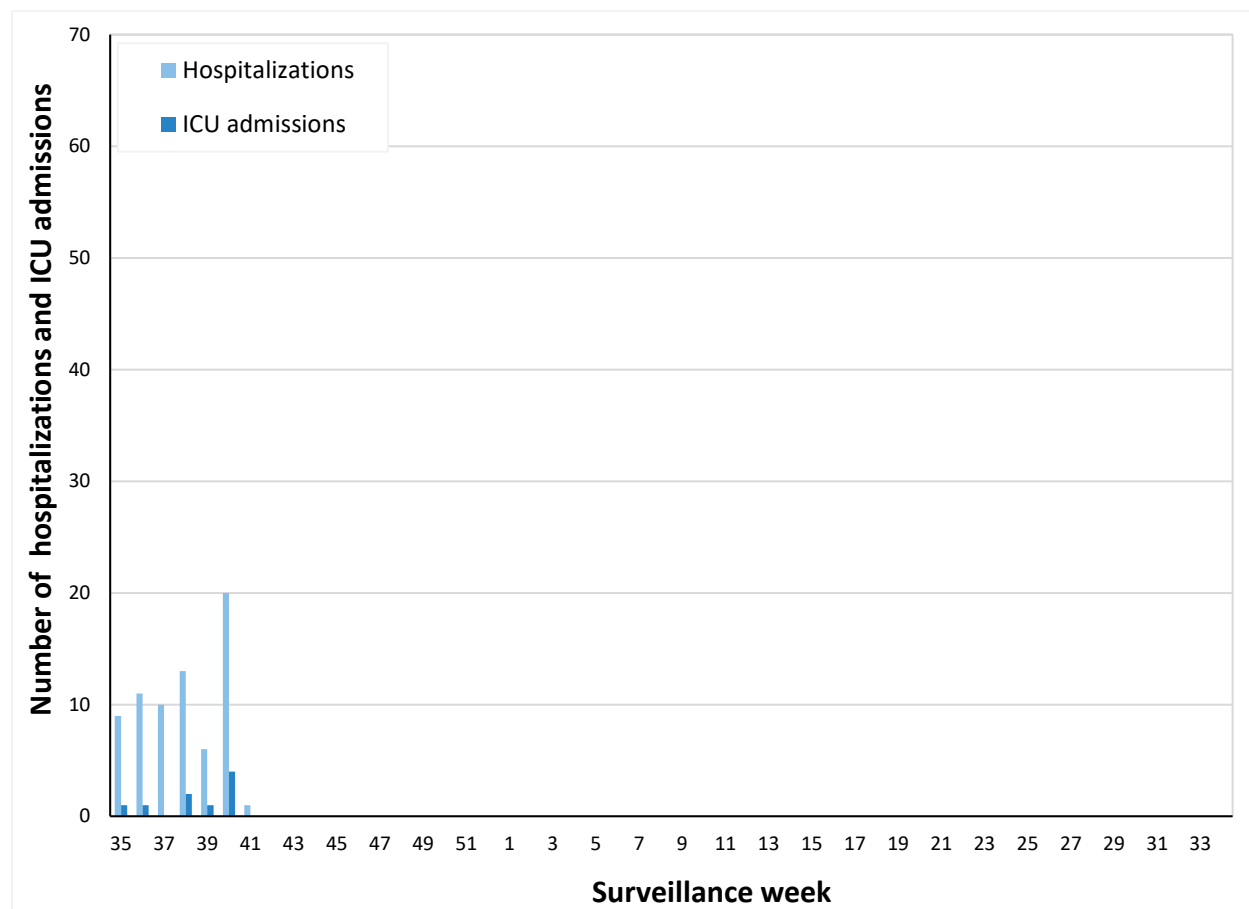
Age group (years)	Cumulative (2025/26)		
	Hospitalizations	ICU admissions	Deaths
0-4	1	0	0
5-19	0	0	0
20-44	4	2	0
45-64	5	1	0
≥ 65	60	6	4
Nova Scotia Total	70	9	4

¹³ Local public health continuously enters and updates COVID-19 case data. Counts may differ from previous surveillance weeks.

¹⁴ 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 hospitalization, ICU admission, and death counts may not be up to date because of reporting delays.

Week 41 (October 5, 2025 to October 11, 2025)

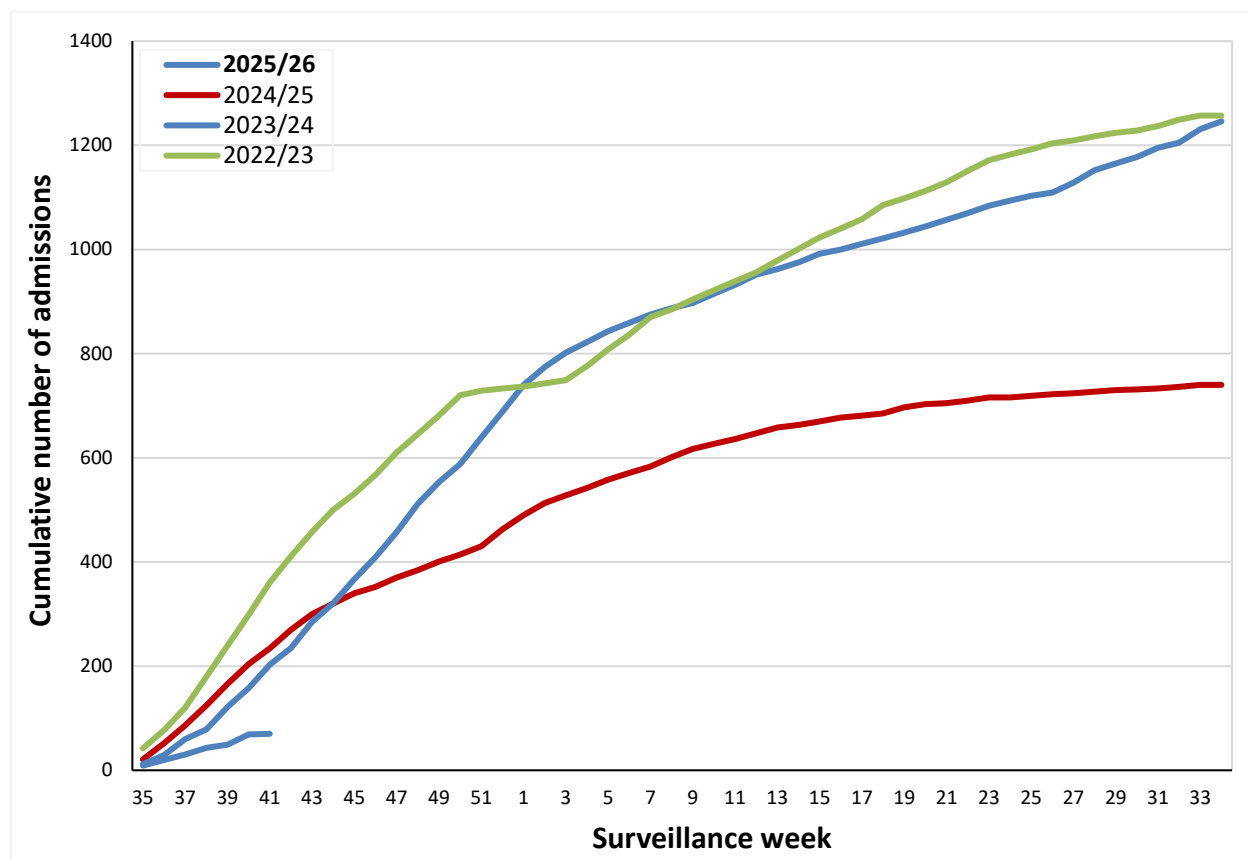
Figure 5: Number of COVID-19 associated hospitalizations and ICU admissions by week, 2025/26 season, Nova Scotia¹⁵



¹⁵ 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 hospitalization and ICU admission counts may not be up to date because of reporting delays.

Week 41 (October 5, 2025 to October 11, 2025)

Figure 6: Cumulative number of COVID-19 associated hospitalizations and ICU admissions, by surveillance week, 2025/26 season compared with previous seasons, Nova Scotia¹⁶



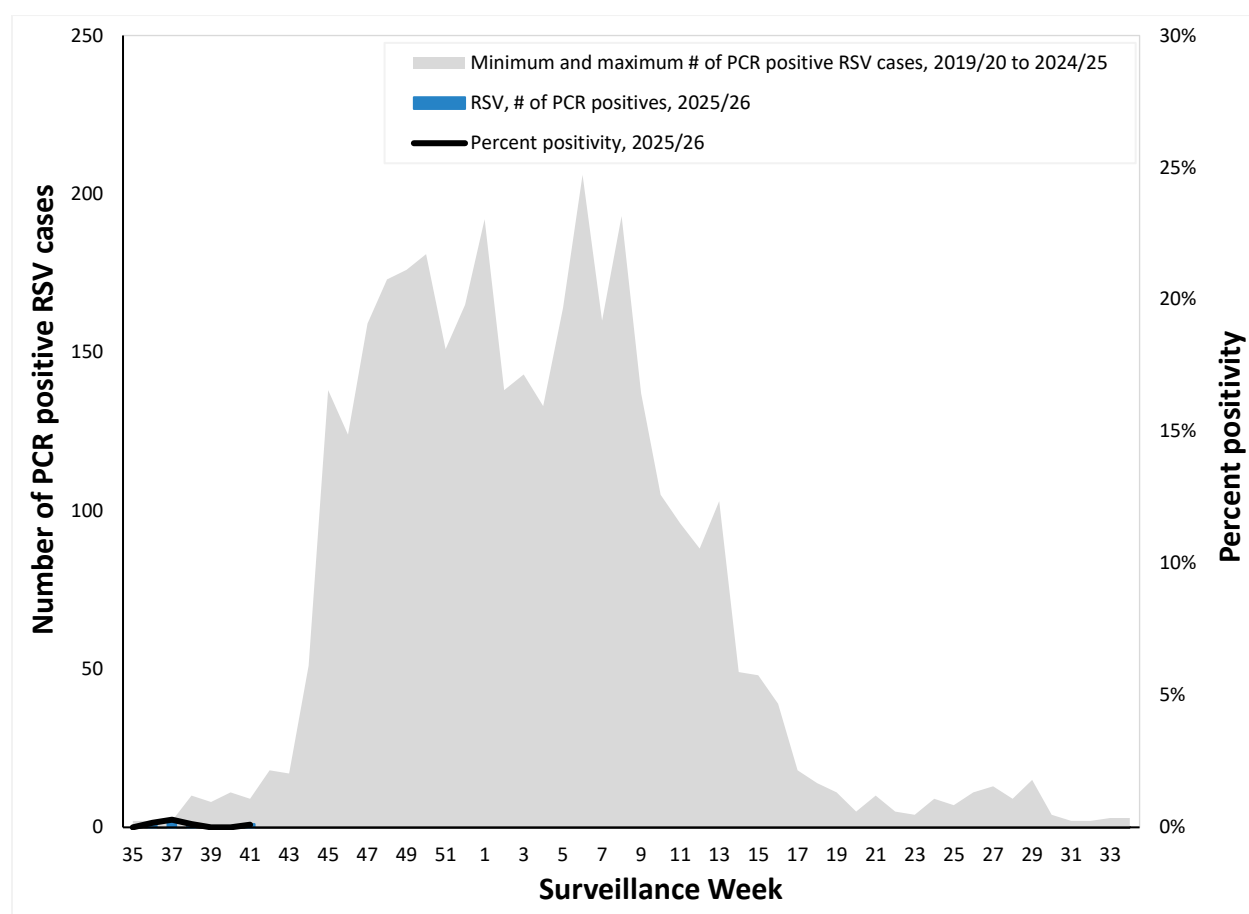
¹⁶ Figure 6 presents the cumulative number of cases who were admitted to hospital and/or ICU during the season. Cases are counted once.

Respiratory Syncytial Virus (RSV)

Table 7: Number of laboratory-confirmed RSV cases by age group, current reporting period and cumulative 2025/26 season, Nova Scotia

Age group	Current reporting period	Cumulative (2025/26)
0-5 months	0	2
6-11 months	1	1
12-23 months	0	0
2-4 years	0	0
5-19 years	0	0
20-64 years	0	0
65-74 years	0	1
≥ 75 years	0	1
Nova Scotia Total	1	5

Figure 7: Laboratory-confirmed RSV cases (N=5) by week, 2025/26 season, compared with previous seasons, Nova Scotia¹⁷



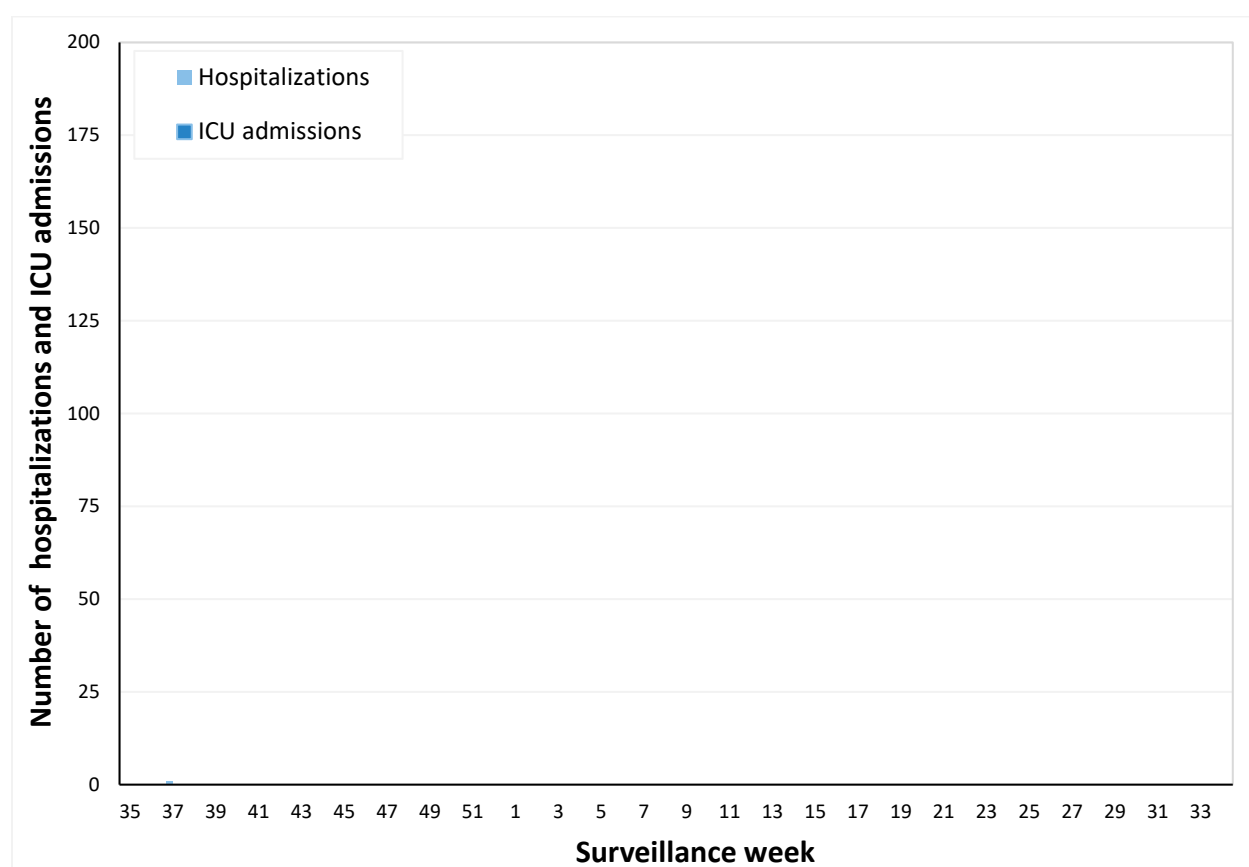
¹⁷ There were no reported RSV cases during the 2020-2021 season. RSV became notifiable on September 6, 2025. The implementation of the multiplex respiratory virus PCR testing in 2022/23 may have increased the number of cases detected.

Week 41 (October 5, 2025 to October 11, 2025)

Table 8: Cumulative number of RSV associated hospitalizations, ICU admissions, and deaths, 2025/26 season, Nova Scotia¹⁸

Age group	Cumulative		
	Hospitalizations	ICU admissions	Deaths
0-5 months	0	0	0
6-11 months	0	0	0
12-23 months	0	0	0
2-4 years	0	0	0
5-19 years	0	0	0
20-64 years	0	0	0
65-74 years	0	0	0
≥ 75 years	1	0	0
Nova Scotia Total	1	0	0

Figure 8: Number of RSV associated hospitalizations and ICU admissions by surveillance week, 2025/26 season, Nova Scotia¹⁹

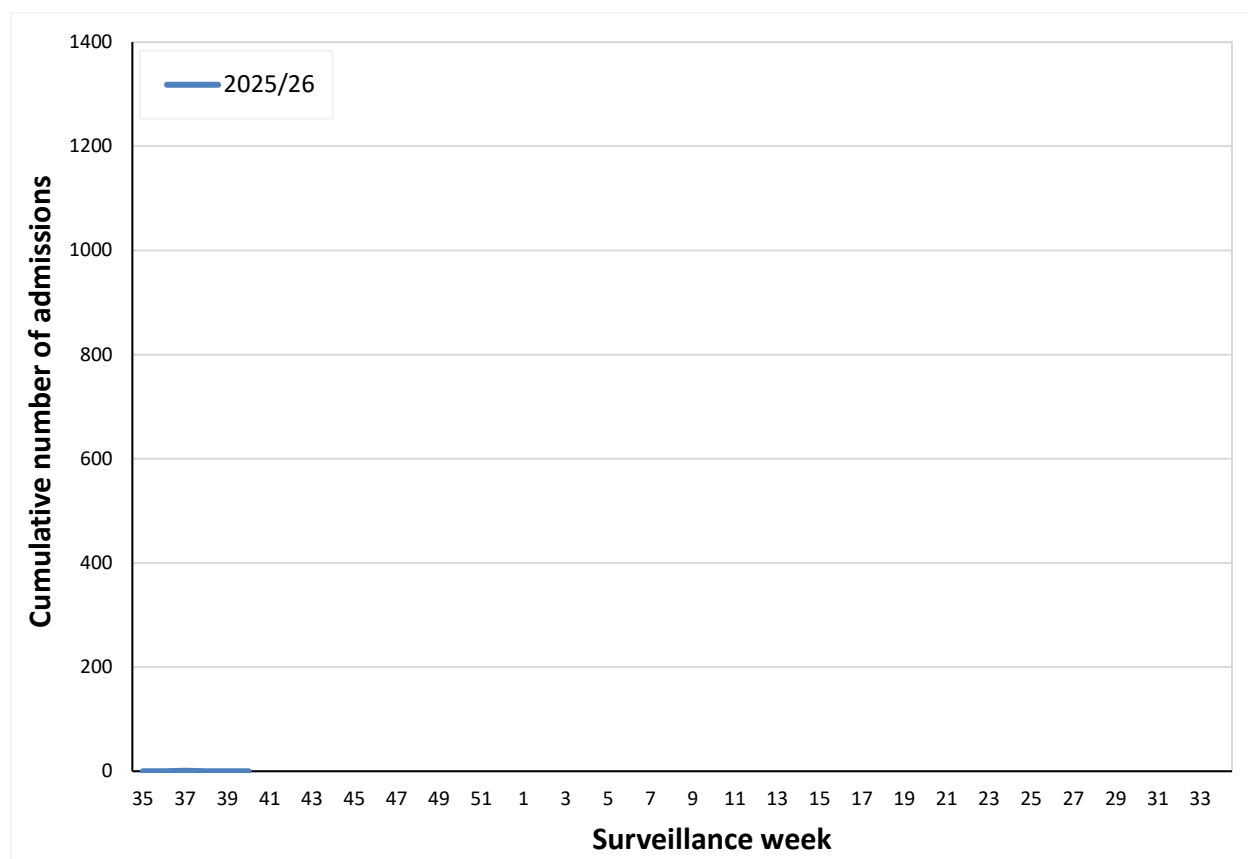


¹⁸ RSV became notifiable on September 6, 2025

¹⁹ 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 hospitalization and ICU admission counts may not be up to date because of reporting delays.

Week 41 (October 5, 2025 to October 11, 2025)

Figure 9: Cumulative number of RSV associated hospitalizations and ICU admissions, by surveillance week, 2025/26 season, Nova Scotia^{20,21}

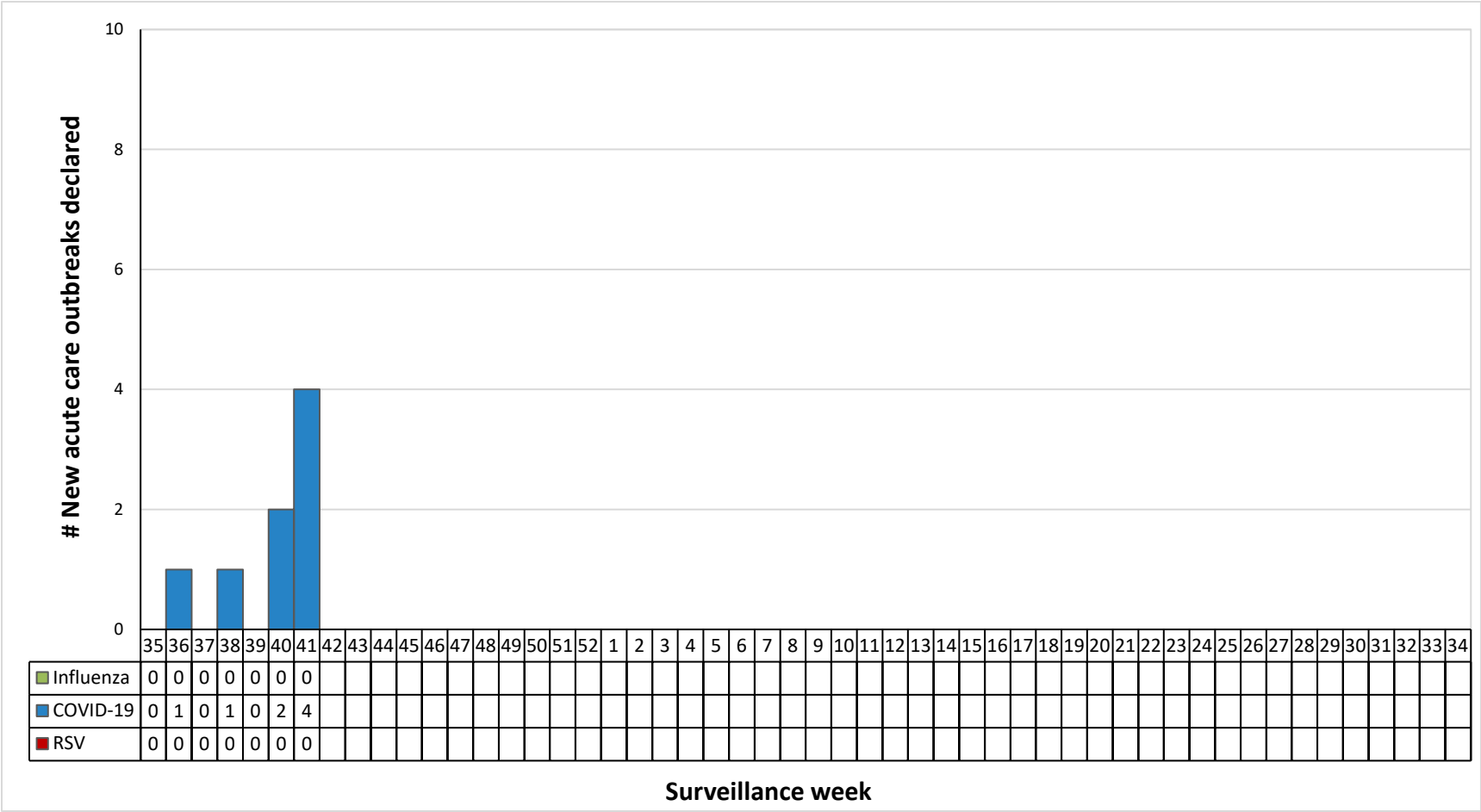


²⁰ Figure 6 presents the cumulative number of cases who were admitted to hospital and/or ICU during the season. Cases are counted once.

²¹ RSV became notifiable on September 6, 2025

Respiratory Outbreaks

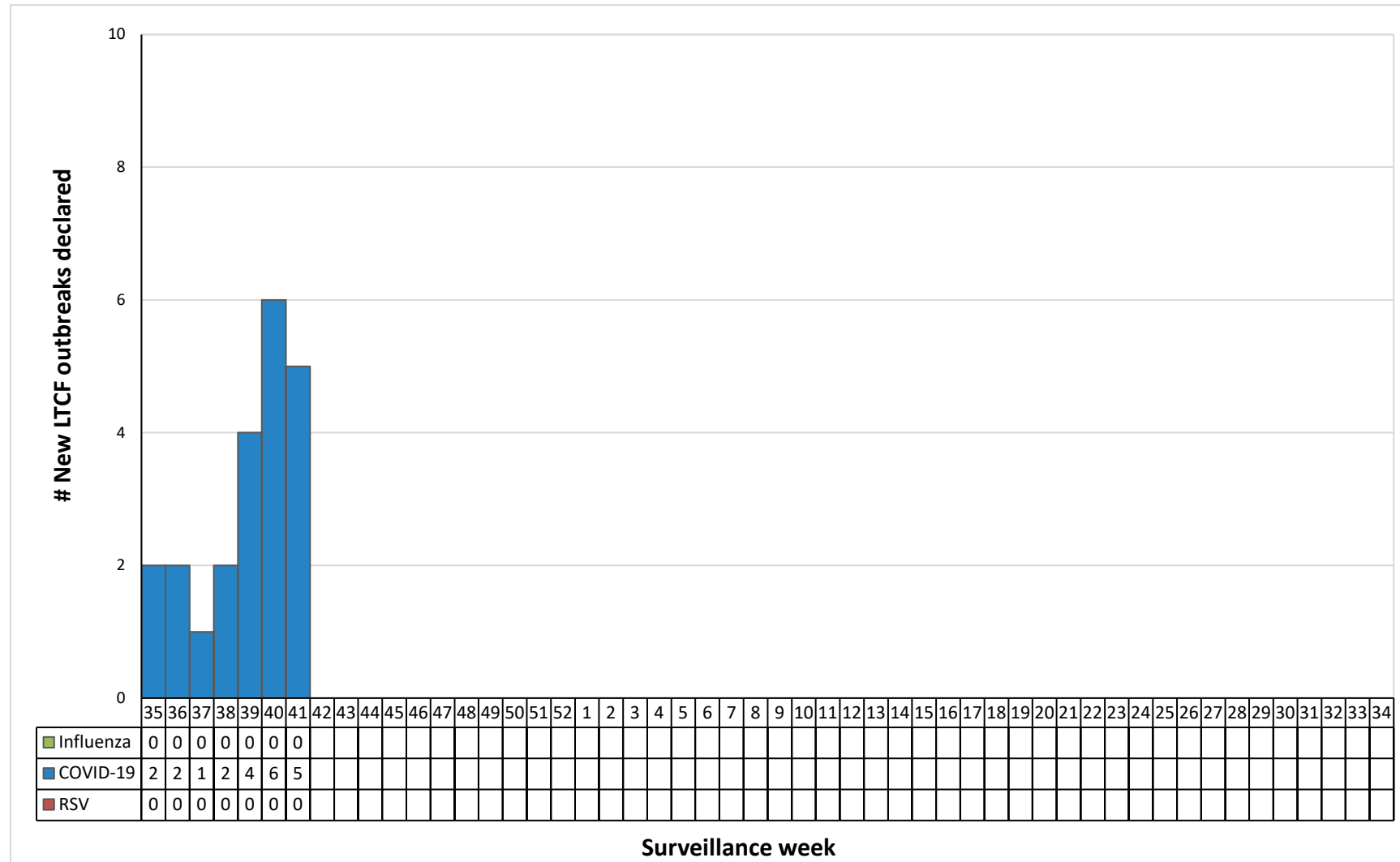
Figure 10. Number of new acute care facility respiratory outbreaks by surveillance week and respiratory virus (influenza, COVID-19 and RSV), 2025/26 season, Nova Scotia²²



²² Acute care facility outbreak definitions are in the Appendix. Local public health continuously enters and updates outbreak data. Counts may differ from previous surveillance weeks.

Week 41 (October 5, 2025 to October 11, 2025)

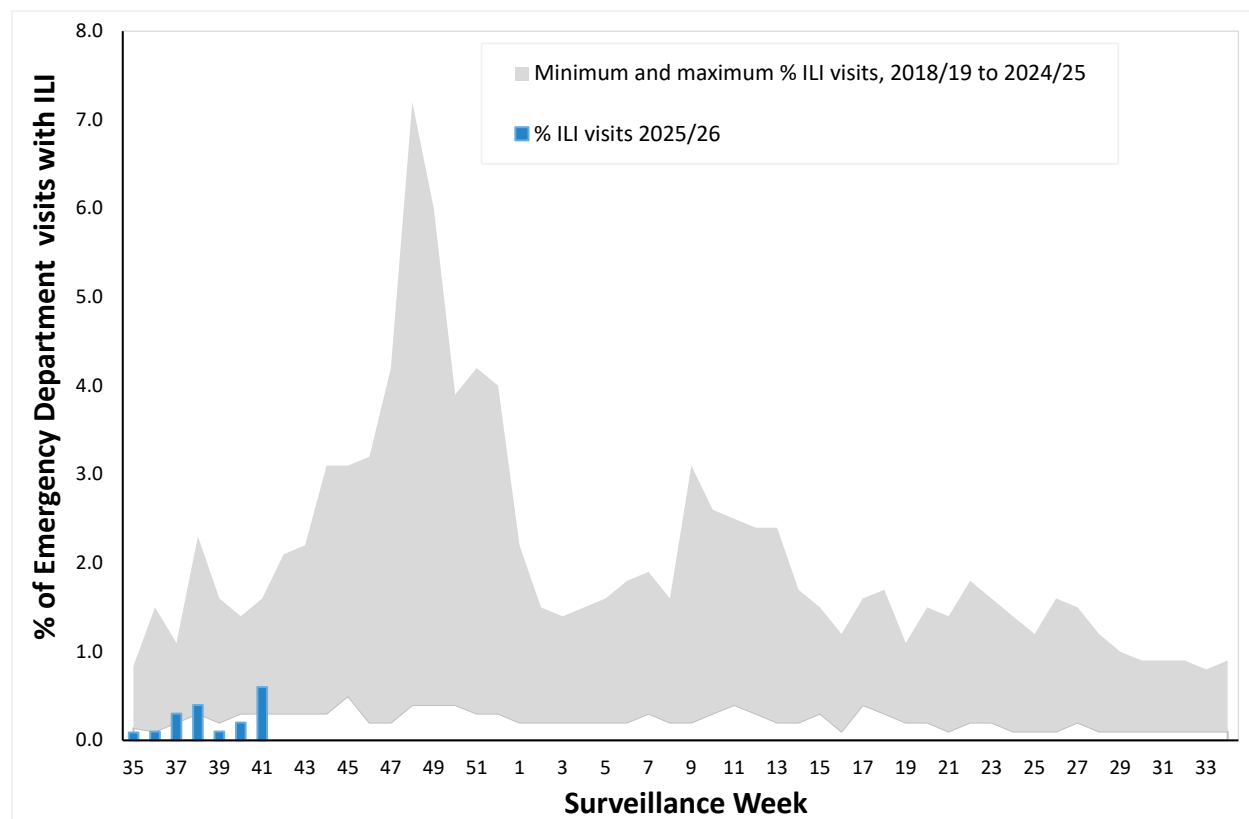
Figure 11. Number of new long-term care facility (LTCF) respiratory outbreaks by surveillance week and respiratory virus (influenza, COVID-19 and RSV), 2025/26 season, Nova Scotia²³



²³ LTCF outbreak definitions are 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, 2025/26 season, compared with previous seasons, Nova Scotia²⁴



Other Respiratory Illness

Table 8: Number of positive specimens for other respiratory viruses, current reporting period and cumulative 2025/26 season, Nova Scotia

PATHOGEN	Current reporting period	Cumulative (2025/26)
Adenovirus	2	4
Bocavirus	0	1
Coronavirus*	0	0
Enterovirus/Rhinovirus	10	50
Metapneumovirus	0	0
Parainfluenza	0	4

*Excludes COVID-19

²⁴ 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 2025/26 season aligns with the [Public Health Agency of Canada \(PHAC\) FluWatch surveillance weeks](#).
 - The 2025/26 respiratory season runs from August 24, 2025 (Week 35) to August 29, 2026 (Week 34).
- Reporting of hospitalizations, ICU admissions, and deaths may lag by several weeks, and deaths are particularly affected. Additionally, COVID-19, influenza, and RSV outcomes and outbreaks data may be incomplete for recent reporting periods because of lags in local public health reporting. Figures presenting outcomes by week may not include data for the most recent surveillance week.
- Hospitalization and death definitions for COVID-19 and influenza have changed across respiratory seasons. For example, the definition of COVID-19 associated hospitalizations changed in August 2025. These definitions are available in the [surveillance guidelines](#).
- 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 are not limited to, influenza, RSV, and COVID-19. See [Nova Scotia's Respiratory Surveillance Plan](#) for Public Health for a full list of what is tested.
 - In the 2022/23 season, access to multiplex PCR testing in Nova Scotia increased which likely increased detection in community influenza and RSV.
 - Testing is limited to [specific populations](#) and the number of cases in the community is undercounted.

Definitions used in respiratory surveillance, and useful links, 2025/26

See: [Nova Scotia's Respiratory Response Plan for Public Health](#) and [Nova Scotia's Respiratory Surveillance Plan for Public Health](#)

Acronyms

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

Outbreak Definitions

Pathogen	Acute care facility	Long-term care facility
COVID, influenza, and RSV	Two or more confirmed cases of influenza that are epidemiologically linked to a specific setting and/or location.	Outbreak definitions in LTCFs are in Guide to Respiratory Virus Infection and Outbreak Management in Long-Term Care Facilities .

Week 41 (October 5, 2025 to October 11, 2025)

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 years, gastrointestinal symptoms may also be present. In patients under 5 or 65 years and older, fever may not be prominent.

Other case definitions

See: [Surveillance Guidelines](#) | [novascotia.ca](#)

Links to other weekly influenza reports

Canada: [Weekly influenza reports - Canada.ca](#)

World: [Global Influenza Programme \(who.int\)](#)

US: [FluView](#) | [FluView](#) | [CDC](#)