

## In Summary...

<b>Activity levels**</b>
<ul style="list-style-type: none"> <li>Localized activity was reported in the Central, Western and Northern Zone. Sporadic Activity was reported in Eastern Zone during week 49.</li> </ul>
<b>Laboratory-confirmed cases*</b>
<ul style="list-style-type: none"> <li>There were 686 new cases of Influenza A, and 0 new cases of Influenza B reported during Week 49.</li> <li>There have been 2,354 laboratory confirmed cases of Influenza A and 1 laboratory confirmed case of Influenza B reported during the 2022-2023 influenza season.</li> <li>There were also 3 Adenovirus, 3 Enterovirus/Rhinovirus, 1 Parainfluenza, and 176 Respiratory Syncytial Virus cases identified during this reporting period.</li> </ul>
<b>Severity</b>
<ul style="list-style-type: none"> <li>There were 100 cases hospitalized (non-ICU), 8 ICU admissions and 5 deaths 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>340 hospitalizations (non-ICU)</li> <li>25 ICU admissions</li> <li>25 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) was 5.6% 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.

\*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);

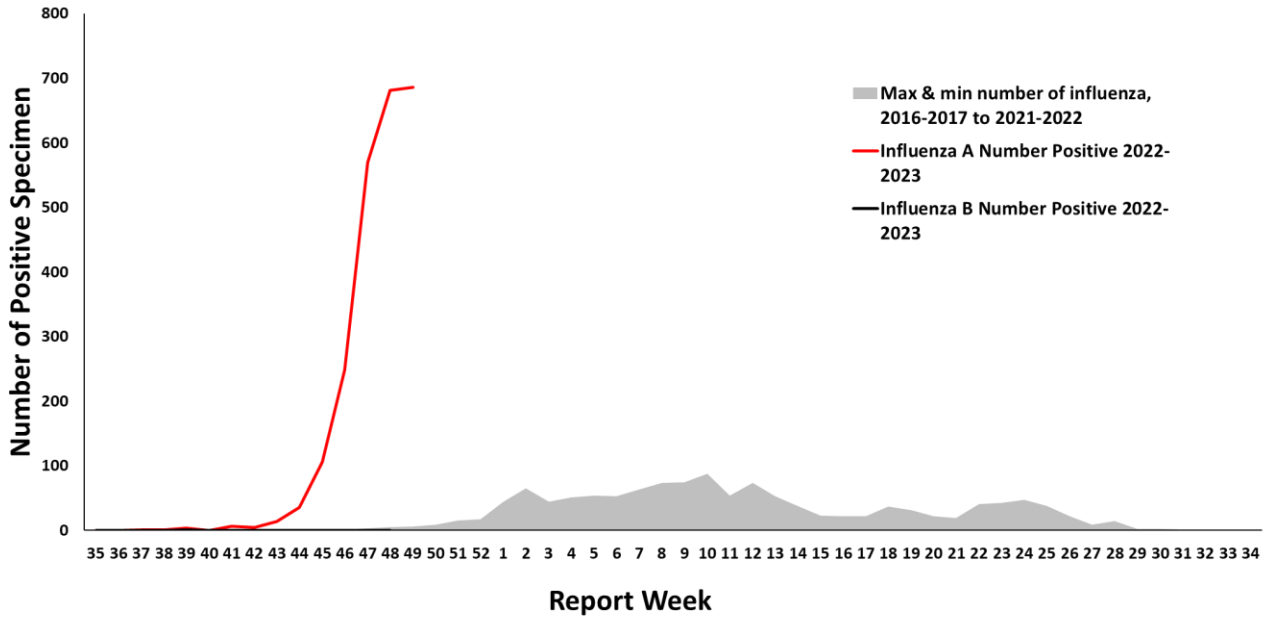
\*\*Activity level is obtained from CNPHI, see appendix for definitions.

\*\*\*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 49			CUMULATIVE 2022-2023		
	TOTAL	INFLUENZA A	INFLUENZA B	TOTAL	INFLUENZA A	INFLUENZA B
Western	168	168	0	717	717	0
Northern	239	239	0	748	748	0
Eastern	128	128	0	363	363	0
Central	151	151	0	527	526	1
<b>Nova Scotia Total</b>	<b>686</b>	<b>686</b>	<b>0</b>	<b>2355</b>	<b>2354</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 49			CUMULATIVE 2022-2023		
	TOTAL	INFLUENZA A	INFLUENZA B	TOTAL	INFLUENZA A	INFLUENZA B
0-4	65	65	0	260	259	1
5-19	98	98	0	576	576	0
20-44	163	163	0	538	538	0
45-64	126	126	0	371	371	0
65+	234	234	0	610	610	0
<b>Nova Scotia Total</b>	<b>686</b>	<b>686</b>	<b>0</b>	<b>2355</b>	<b>2354</b>	<b>1</b>

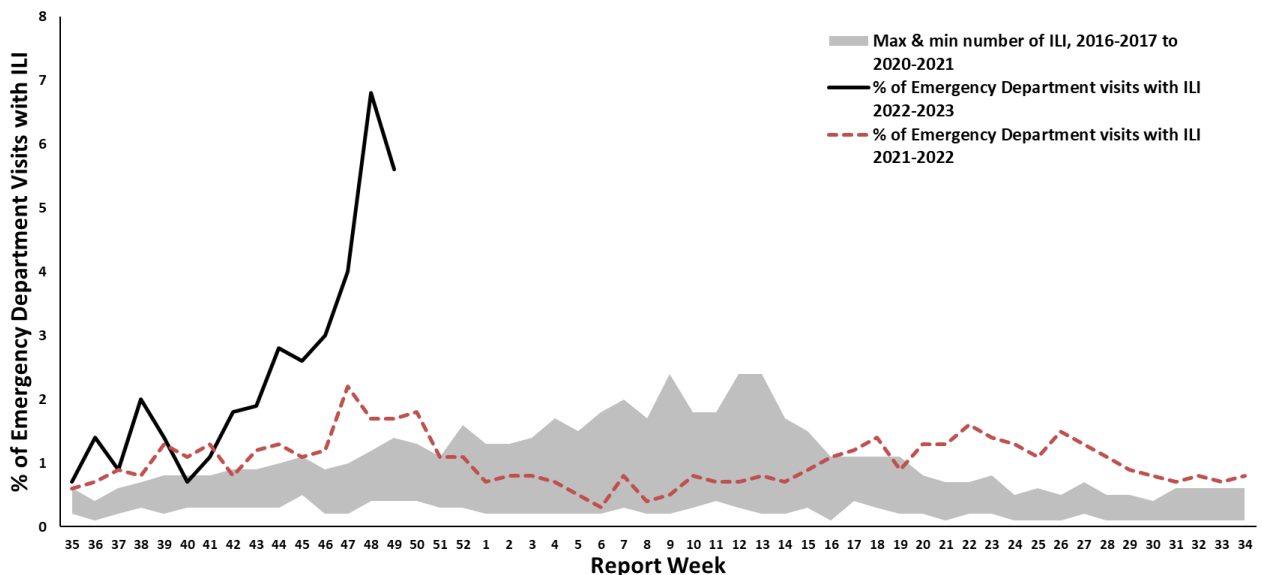
**Table 3: Hospitalizations, ICU admissions and deaths for influenza positive patients, current week and cumulative, 2022-2023 season, Nova Scotia**

	WEEK 49		CUMULATIVE 2022-2023	
	INFLUENZA A	INFLUENZA B	INFLUENZA A	INFLUENZA B
<b>Hospitalized</b>	100	0	340	0
<b>Hospitalized - ICU</b>	8	0	25	0
<b>Deceased*</b>	5	0	25	0
<b>Nova Scotia Total</b>	<b>113</b>	<b>0</b>	<b>390</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 or may not have been the major contributing cause of death or hospitalization.*

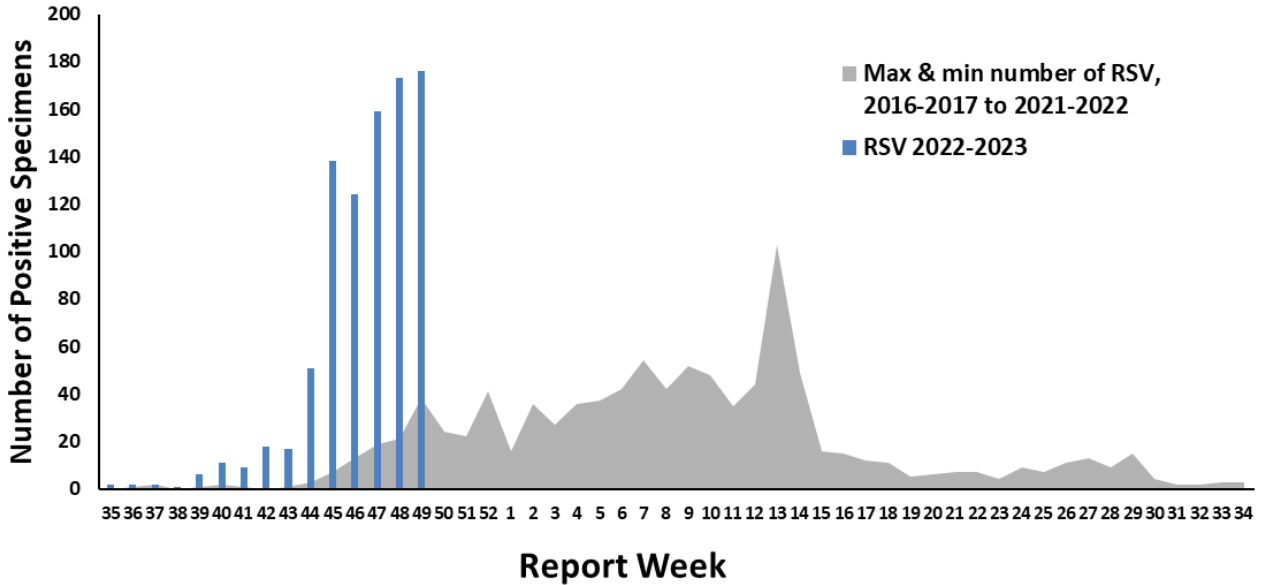
**SYNDROMIC SURVEILLANCE**

**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**



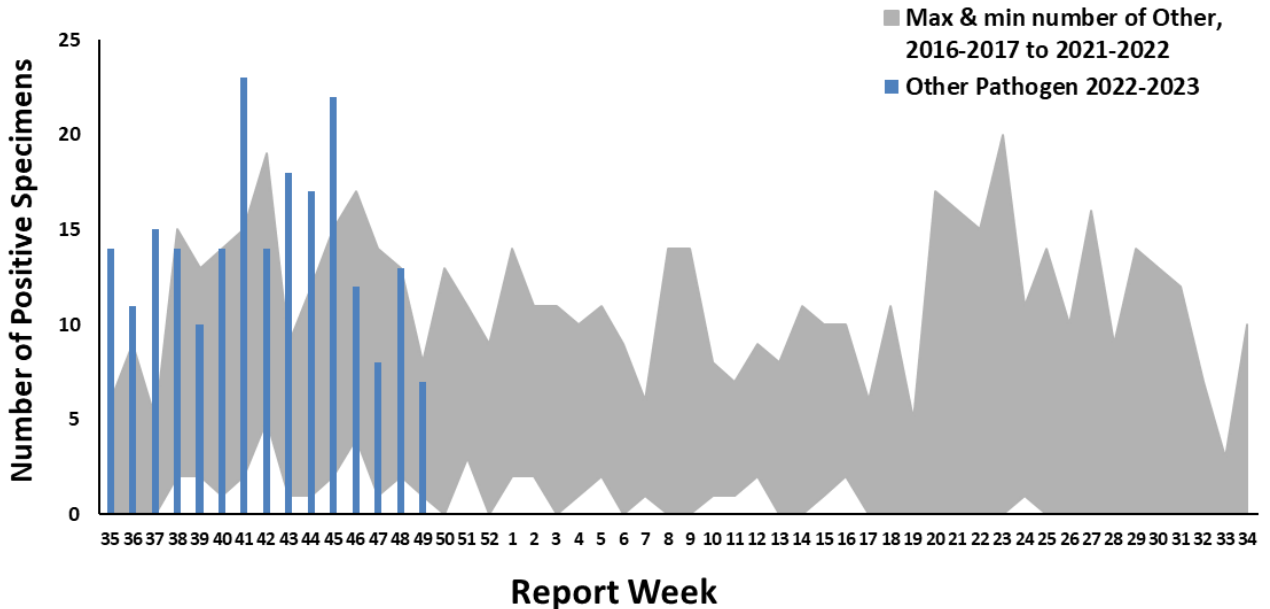
OTHER RESPIRATORY PATHOGENS

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**

AGE GROUP	Week 49	Cumulative 2022-2023
0-5 months	16	137
6-11 months	10	54
12-23 months	13	137
2-5 years	26	183
6-15 years	14	62
16-64 years	34	148
65+ years	63	168
<b>Totals (n)</b>	<b>176</b>	<b>889</b>

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

Pathogen	WEEK 49	CUMULATIVE 2022-2023
Adenovirus	3	29
Bocavirus	0	0
Chlamydomphila pneumoniae	0	0
Coronavirus*	0	5
Enterovirus/Rhinovirus	3	151
Metapneumovirus	0	0
Mycoplasma pneumoniae	0	0
Parainfluenza	1	27
Pertussis	0	0
<b>Respiratory Syncytial Virus</b>	<b>176</b>	<b>889</b>

\*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)