Biweekly respiratory surveillance report for week ending September 9, 2023

- For respiratory surveillance in Canada, visit: Respiratory Virus Detection Surveillance System and COVID-19 Data Trends
- For surveillance of COVID-19 variants of concern, visit World Health Organization: Tracking SARS-CoV-2 Variants
- For COVID-19 vaccination coverage in Canada, visit: COVID-19 vaccination in Canada

Overall Summary

Respiratory virus activity has increased in recent weeks in the Yukon. The table below describes the intensity, geographical spread, and local trends.

	Level	Rationale
Intensity	Medium	Activity appears to be at levels typical for the season
Geographical spread	Regional	Some sporadic activity in different regions of Yukon
Trend	Increasing	COVID-19 percent positivity increasing, in addition to respiratory- related visits to health centres in a couple regions

The intensity is based on the overall level of clinical activity in the Yukon, measured through syndromic, sentinel, active and lab surveillance indicators. Low means no activity or activity below baseline, medium means expected or average levels of activity, high means levels of activity that are higher than historical baseline, and very high means exceptionally high levels of activity*.

*Baseline is the level at which activity remains throughout summer and most of the winter, or based on historical data for the same time period in previous years, where available.

The geographical spread is rated as either no activity (no evidence of increased or unusual respiratory disease activity), regional (activity occurring in some but not all regions of Yukon), or widespread (activity generally occurring across all of the Yukon).

The trend is a comparison of surveillance indicators to the previous two weeks. Increasing means there is evidence that the level of respiratory disease activity is increasing, stable means respiratory disease activity is relatively unchanged, and decreasing means there is evidence that the level of respiratory disease activity is decreasing.

Disease summaries

The table below provides general trends from the different surveillance indicators for each disease that is included in this report.

	COVID-19	Influenza	RSV
Case rates	Stable	Stable	Stable
Percent positivity	Increasing	Stable	Stable
Syndromic indicators		Increasing	
Severity	Increasing	Stable	Stable
Wastewater	Stable	N/A	N/A
Vaccination uptake	N/A	N/A	N/A

Laboratory indicators

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 COVID-19 test positivity increased compared to the previous two weeks, and was highest in the Whitehorse area

- Influenza A test positivity increased compared to the previous two weeks, and was highest in the rural Yukon
- Influenza B test positivity stayed the same compared to the previous two weeks, and was the same in rural Yukon and the Whitehorse area.
- RSV test positivity remained the same compared to the previous two weeks, and was the same in rural Yukon and the Whitehorse area.
- COVID-19 was the organism with the highest rolling average test positivity over the last two weeks
- Testing volume was highest among Whitehorse residents over the last two weeks
- COVID-19 wastewater viral load in Haines Junction remained the same

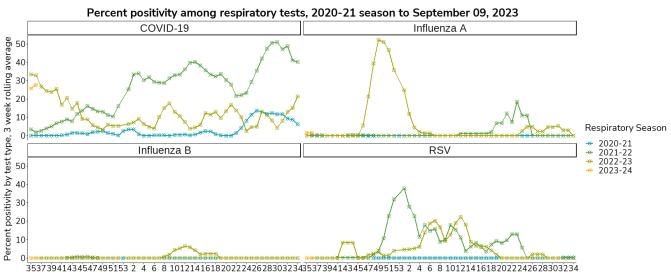


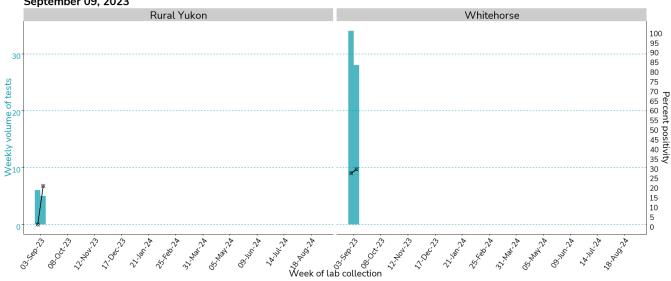
Figure 1: Percent positivity by respiratory virus

434547495153 2 4 6 8 1012141618202224262830323435373941434547495153 2 4 6 8 10121416182022242628303234. Week of lab collection Based on number of specimens collected each epiweek. Includes PCR specimens and some point of care tests.

Does not include rapid antigen tests or tests #collected in private labs.

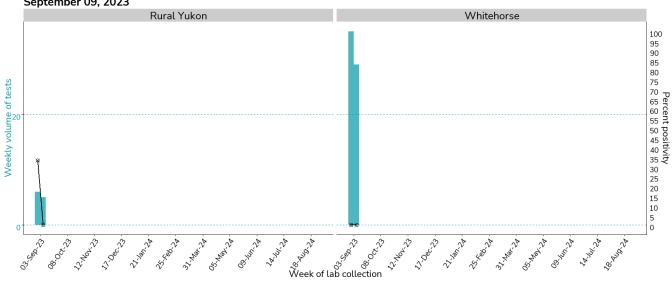


Figure 2: Number of COVID-19 tests and percent positivity by pathogen and region



Volume of COVID-19 tests (blue bars) and percent positivity (black line) by week of collection, 2023-24 season to September 09, 2023

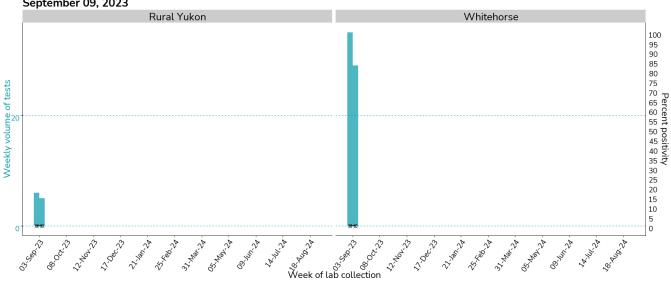
Figure 3: Number of Influenza A tests and percent positivity by region



Volume of Influenza A tests (blue bars) and percent positivity (black line) by week of collection, 2023-24 season to September 09, 2023



Figure 4: Number of Influenza B tests and percent positivity by region



Volume of Influenza B tests (blue bars) and percent positivity (black line) by week of collection, 2023-24 season to September 09, 2023

Figure 5: Number of RSV tests and percent positivity by region

Rural Yukon Whitehorse 100 95 90 85 80 75 76 56 60 55 50 40 35 30 22 15 10 Weekly volume of tests 5 0 S.M. 22,281.1 A MAN SO 00 A 0.00 100 100 100 100 the character of the second 25. 15. 14. 19. 19. 09 1111 14 A J.Dec. 2.3 to the second Week of lab collection 21,21,21 AL AND SOLUTION

Volume of RSV tests (blue bars) and percent positivity (black line) by week of collection, 2023-24 season to September 09, 2023



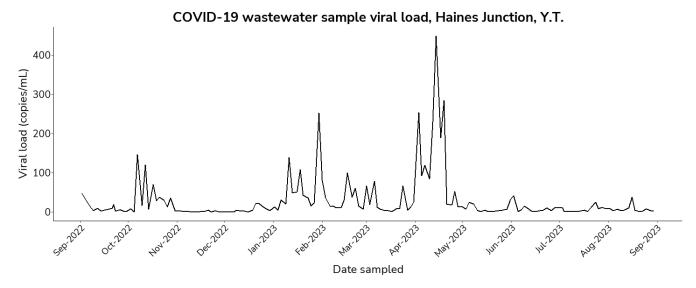


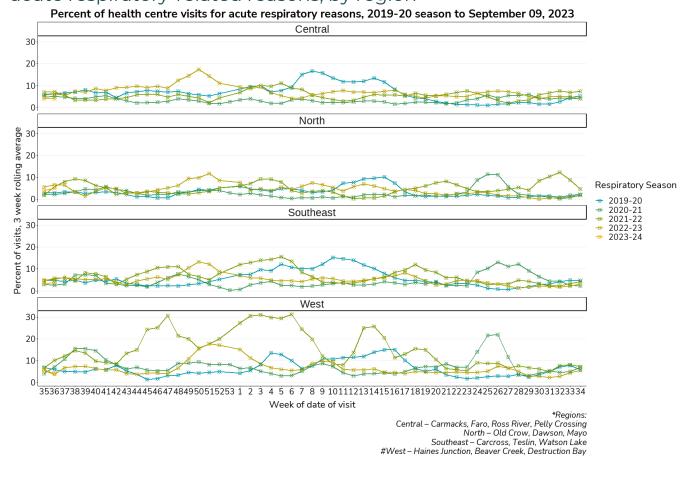
Figure 6: COVID-19 wastewater surveillance – Haines Junction

Syndromic surveillance indicators

- Visits to community health centres for respiratory-related symptoms were similar compared to previous years. Respiratory visits were highest in the north region
- Visits to community health centres for respiratory-related symptoms are increasing in north and southeast regions, decreasing in the west region, and stable in central region



Figure 7: Percentage of weekly Community Health Centre* visits for acute respiratory-related reasons, by region

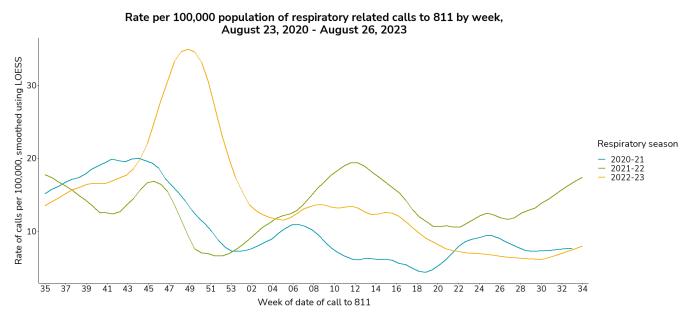


Sentinel surveillance indicators

• The rate of calls for respiratory-related reasons to 811 increased compared to the previous two weeks



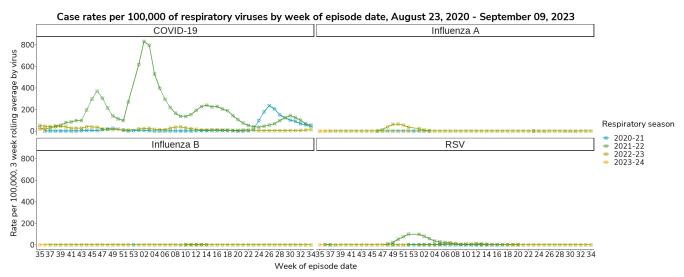




Active surveillance indicators

- The rate of confirmed cases of COVID-19 in the Yukon is stable, and similar to previous years. Hospitalization rates are stable, and similar to previous years.
- The rate of confirmed cases of Influenza A in the Yukon is stable, and similar to previous years. Hospitalization rates are stable, and similar to previous years.
- The rate of confirmed cases of Influenza B in the Yukon is stable, and similar to previous years. Hospitalization rates are stable, and similar to previous years.
- The rate of confirmed cases of RSV in Yukon is stable, and similar to previous years. Hospitalization rates are stable, and similar to previous years.
- For COVID-19, influenza and RSV combined, case rates in rural Yukon are stable, and lower than previous years. Hospitalization rates are stable, and lower than previous years.
- For COVID-19, influenza and RSV combined, case rates in the Whitehorse area are decreasing, and are similar to previous years. Hospitalization rates are decreasing, and similar to previous years.

Figure 9: Case rates per 100,000 by respiratory virus





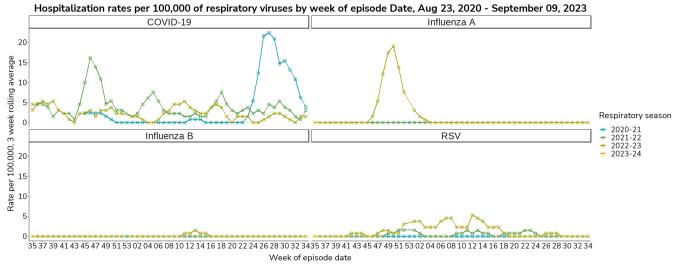


Table 1: Respiratory illness death rates per 100,000 by virus

Respiratory season	COVID-19 rate	Influenza A rate	Influenza B rate	RSV rate
2020-21	19.0	0	0	0.0
2021-22	51.0	0	0	0.0
2022-23	11.4	0	0	2.3

Respiratory season	COVID-19 rate	Influenza A rate	Influenza B rate	RSV rate
2023-24	2.3	0	0	0.0

Figure 11: Respiratory illness case rates per 100,000 by residence

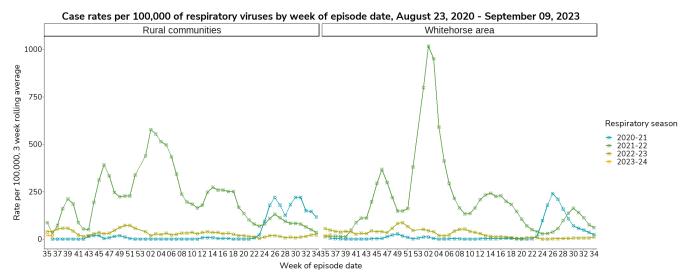


Figure 12: Respiratory illness hospitalization rates per 100,000 by residence

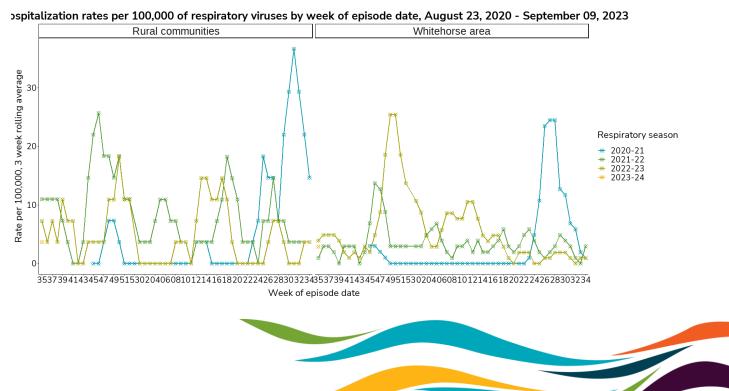
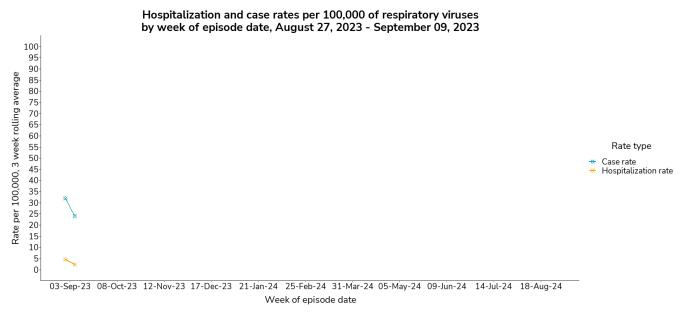


Figure 13: Respiratory virus case and hospitalization rates per 100,000, current season



Immunization Indicators

Book your COVID-19 and flu vaccine appointment here

- Influenza vaccination coverage is at 29% for the Yukon population this season. The highest coverage rate is in the 70+ age group and among residents of Old Crow.
- Overall, 9% of the Yukon population is up to date with their COVID-19 vaccinations. The highest up-to-date coverage is in the 70+ age group.
- Influenza vaccination uptake is plateauing, and COVID-19 vaccination uptake is plateauing for dose 4 and dose 5.





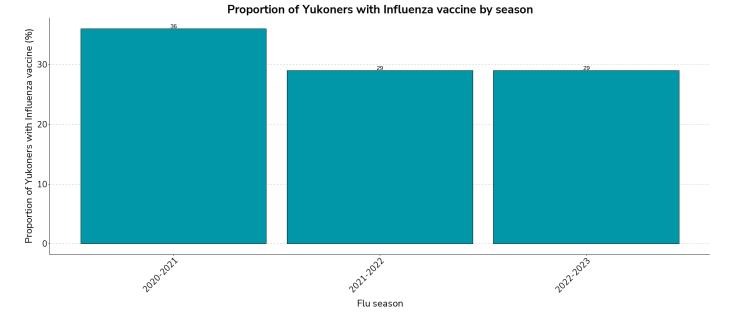


Figure 17: Influenza vaccine uptake (%), current season, by age group

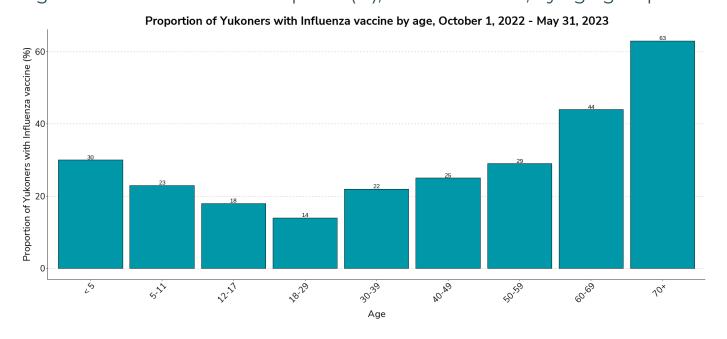




Figure 18: Influenza vaccine uptake (%), current season, by client health region

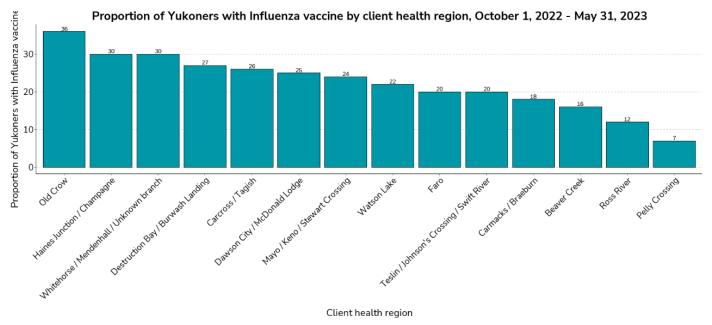


Figure 19: Percent of population up to date on COVID-19 vaccination, by age group

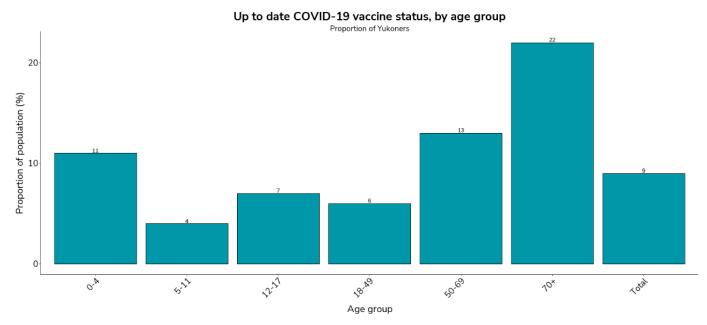
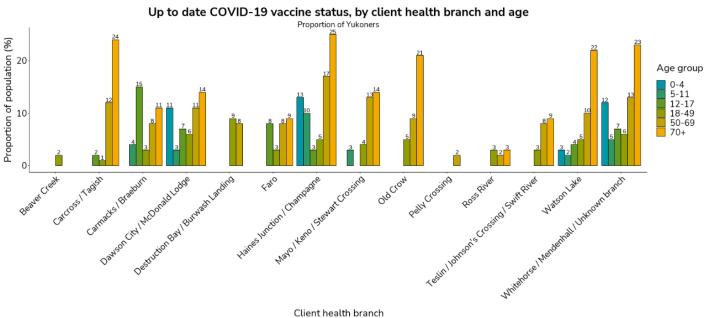


Figure 20: Percent of population up to date on COVID-19 vaccination, by client health region and age group



Client health branch



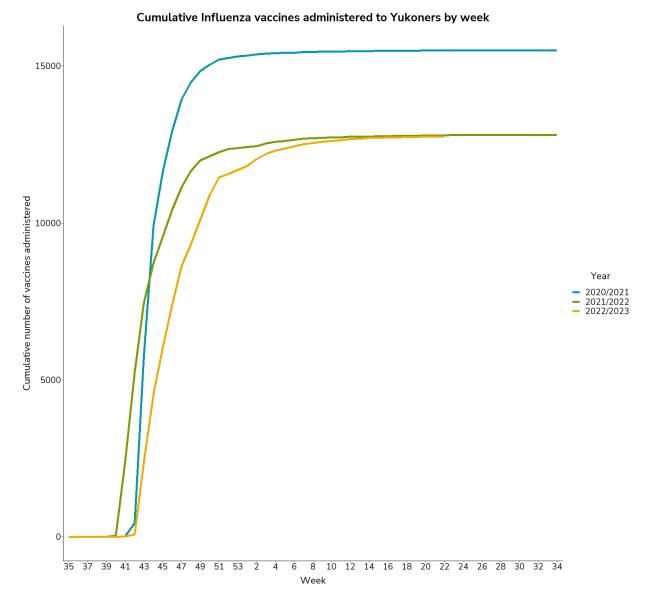


Figure 21: Cumulative uptake of influenza vaccine, by season



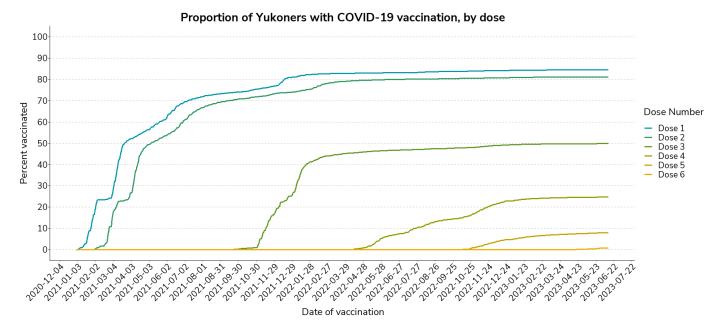


Figure 22: Cumulative uptake of COVID-19 vaccine, by dose number

Data Notes

All information is subject to change as reconciliation occurs and data becomes more complete.

Epidemiological weeks are standardized ways to count events on weekly basis year after year. The epidemiological weeks used in this report run from Sunday to Saturday. A full calendar can be found on <u>the Public Health Agency of Canada FluWatch website</u>

This report is updated at the following frequency during respiratory season (late August to early June): laboratory, syndromic, sentinel, and active surveillance indicators updated biweekly; immunization indicators updated monthly.

This report is updated at the following frequency outside of respiratory season (early June to late August): laboratory, syndromic, sentinel, and active surveillance indicators updated monthly; immunization indicators not updated.

Lab Indicators

- Based on lab-based PCR tests and rapid point-of-care tests from Whitehorse General Hospital. This does not include at-home rapid tests or tests completed in private labs.
- Percent positivity is based on the volume of specimens. As such, one individual can appear in the data more than once.

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- Data will be impacted by clinical testing criteria, availability of testing, and healthcare seeking behaviour.
- Indicators stratified by rural and Whitehorse area residence reflect the information on where the person who was tested resides, and does not necessarily indicate where that person was tested or was located at the time of infection.
- Wastewater surveillance data is extracted from <u>the Public Health Agency of Canada</u> <u>COVID-19 wastewater surveillance dashboard</u>

Syndromic Surveillance Indicators

- Visits are classified by syndromes, which include clinician assessment and groupings of clinical signs and symptoms. As such, these are not considered diagnoses of communicable disease, and visits that are not related to respiratory viral illness may be included.
- Data is presented at the visit level, as such one individual can appear in the data more than once if they have several visits.
- Data may be impacted by factors such as healthcare seeking behaviour, and availability of health services.
- Community health centre visits reflect the regional location of the health centre, and not necessarily the residence of people visiting the health centre.

Sentinel Surveillance Indicators

- Includes calls to 811 from Yukon residents for respiratory-related reasons.
- Data may be impacted by factors such as the public's relative concern for symptoms or illness, and availability of health services.

Active Surveillance Indicators

- Includes all Yukon resident cases reported to Yukon Communicable Disease Control. Does not include non-resident cases that were diagnosed in the Yukon.
- Data will be impacted by clinical testing criteria and availability of testing.

- Episode dates are based on either date of symptom onset, laboratory collection date, or date of report to public health, depending on availability of data.
- Geographical region (rural, Whitehorse, etc.) is based on patient residence, not service delivery location.
- Death rates are estimated from Yukon Communicable Disease Control investigations, and do not reflect finalized Vital Statistics Database data. As such, these rates may be subject to some variation.

Immunization Indicators

- Up-to-date for eligible COVID-19 doses: People are classified as up-to-date for eligible COVID-19 doses based on age group:
 - 0-4 primary series received
 - 5-11 primary series + all eligible booster vaccines and not greater than 183 days since last booster dose, or primary series and not yet eligible for booster vaccine (i.e. less than 183 days since primary series)
 - 12+ primary series + all eligible booster vaccines and not greater than 183 days since last booster dose, or primary series and not yet eligible for booster vaccine (i.e. less than 183 days since primary series)

Client health region/branch indicates the most recently available information on where a person resides and does not necessarily indicate where that person received the vaccine

