

## **WEEKLY EPIDEMIOLOGY UPDATE (1-7 JULY 2020)**

Published: 10 July 2020

1 963 (-289)

**NEW CASES REPORTED<sup>a</sup>** 

120 (-17)
NEW DEATHS REPORTED<sup>a</sup>

25% (-2b)

PERCENT OF ACTIVE CASES a

67% (+1 b)
RECOVERED CASES a

37 647 (-1 270)

AVERAGE PEOPLE TESTED PÉR DAYC

0.8% (0 b)
PERCENT POSITIVE®

#### KEY UPDATES

- From 1 to 7 July 2020, 1 963 cases and 120 deaths were reported in Canada.
  - Quebec and Ontario continue to drive the epidemic in Canada accounting for 1 531 (78%) total cases and 106 (88%) total deaths this week.
  - Nunavut reported its first probable case of COVID-19 and investigation is ongoing.
  - Alberta has the highest age-standardized incidence rate at 12.6 cases per 100 000 population.
  - Alberta, Nova Scotia, Prince Edward Island and Nunavut reported increases in the number of new cases.
  - o Prince Edward Island reported five new cases after reporting no new cases since April 28.
- The number of new cases within Canada continues to decrease (-13%) despite persistent community transmission observed within high-density areas.
- Since 24 May 2020, a decreasing rate of cases has been observed among all age groups, particularly among those over 80 years of age (males and females).
  - This week, the highest incidence rate among males in younger age groups is within cases aged 20-29 years (8.5 per 100 000 population) and among females is within the older age groups, specifically those over the age of 80 (10 per 100 000 population).
- The median time from symptom onset to lab specimen collection over the course of the pandemic has improved over time and is currently at 3.5 days.
- The average number of people tested daily over the last week has remained high at 37 647 people per day. The percent positivity remains low and stable at 0.8%.
- Forecasting shows 106 015 to 111 260 cumulative reported cases and 8 560 to 8 900 cumulative number of deaths are predicted by 17 July 2020.

<sup>&</sup>lt;sup>a</sup> Source: Provincial and Territorial MOH websites as of 7 July. <sup>b</sup> Difference in percentage points. <sup>c</sup> Data for laboratory analyses are as of 5 July.



#### NATIONAL TRENDS IN CASES AND DEATHS

As of 7 July 2020, a decrease in the weekly number of new cases was observed nationally (Table 1).

- Decreases in the weekly number of new cases per day were seen in British Columbia, Saskatchewan, Manitoba, Ontario, and Quebec.
- Increases in the weekly number of new cases per day were seen in Alberta, Nova Scotia,
   Prince Edward Island and Nunavut.
  - Prince Edward Island reported five new cases after reporting no new cases since April 28.
  - o Nunavut reported its first probable case of COVID-19 and investigation is ongoing.
- New Brunswick, Newfoundland, Yukon, and Northwest Territories have not reported any new cases in over two weeks.

Table 1. Trends of new cases in Canada and by province or territory, as of 7 July 2020

Province/Territory	Number of	Number of ca	Number of cases reported		Crude rate per
	cases	24 to 30	1 to 7 July	change	100 000
	(as of 7 July) <sup>a</sup>	June		(%) <sup>b</sup>	(as of 7 July)
British Columbia	2 990	81	74	-9%	59
Alberta	8 436	327	328	+0.3%	193
Saskatchewan	806	32	21	-34%	69
Manitoba	325	11	0	-100%	24
Ontario	36 060	1 215	992	-18%	248
Quebec	55 997	574	539	-6%	660
Newfoundland	261	0	0	-	50
New Brunswick	165	0	0	-	21
Nova Scotia	1 065	1	3	+200%	110
Prince Edward Island	32	0	5	+500%	20
Yukon	11	0	0	-	27
Northwest Territories	5	0	0	-	11
Nunavut	1	0	1	+100%	3
Canada <sup>d</sup>	106 167	2 252	1 963	-13%	282

<sup>&</sup>lt;sup>a</sup>The number of cases includes the total confirmed and probable cases.

<sup>&</sup>lt;sup>b</sup> The percentage is calculated on the difference in the total number of cases in the past 7 days over the past 7 days prior. Note that for provinces/territories with low case counts, an increase or decrease of only a few cases leads to a large percentage change.

<sup>&</sup>lt;sup>c</sup> Information as of 3 July 2020 and the case has been identified as probable.

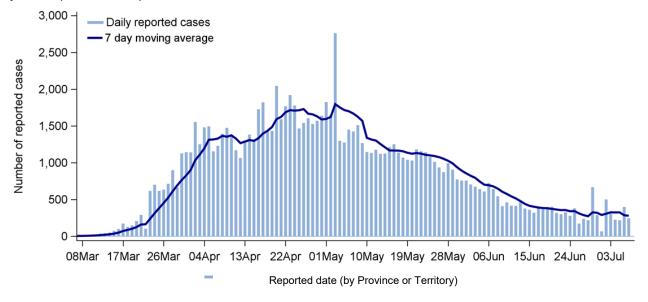
<sup>&</sup>lt;sup>d</sup> Includes 13 cases identified in repatriated travellers (Grand Princess Cruise ship travellers) who were under quarantine in Trenton in March 2020.



From 1 to 7 July 2020, 1 963 cases of COVID-19 were reported in Canada.

• The number of cases represents a **13% decrease** compared to the previous week, with an observed downward trend since mid-late April (Figure 1).

**Figure 1.** Daily number of reported COVID-19 cases in Canada (and 7-day moving average<sup>a</sup>), as of 7 July 2020 (N= 106 167)



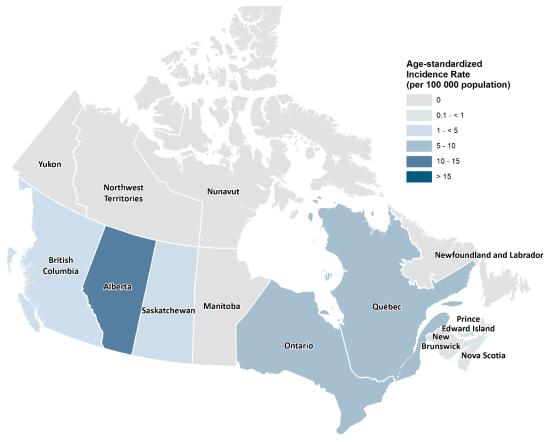
<sup>&</sup>lt;sup>a</sup> The 7-day moving average is a trend indicator that captures the arithmetic mean of the daily reported deaths over the previous seven days. The moving average helps smooth out day-to-day variability in reporting, filtering out the "noise" of short-term fluctuations. The hatched blue bars correspond to cases that were originally detected at an earlier date (excluded from moving average calculation).

Figure 2 and Table 2 present the age-standardized rate by province or territory for the week of 1 to 7 July 2020.

- All provinces, with the exception of Alberta, Nova Scotia, and Prince Edward Island had a decrease
  or no change in the age-standardized incidence rate (see table A2 in annex).
- Alberta has the highest cumulative age-standardized incidence rate in Canada, with 12.6 cases per 100 000 population.

Age-standardized rates take into account the differences in age structure within Canada to allow for a representative picture of the outbreak.

**Figure 2.** COVID-19 age-standardized incidence rate per 100 000 population<sup>a</sup> by province or territory for week 1 to 7 July 2020



Data source: Case report forms submitted to PHAC by provinces and territories. Map from National Microbiology Laboratory (NML) Geomatics <sup>a</sup> Standardized to the July 1 2019 postcensal population estimate

Table 2. Age-standardized incidence rates by province or territory for week 1 to 7 July 2020

Province/Territory	Age-standardized incidence per 100 000 (1 to 7 July)	Rate difference from previous week (24 to 30 June)
British Columbia	1.0	-0.5
Alberta	12.6	+8.2
Saskatchewan	1.4	-1.0
Manitoba	0.0	-0.8
Ontario	5.2	-2.9
Quebec	6.4	-0.8
New Brunswick	0.0	0
Newfoundland	0.0	0
Nova Scotia	0.3	+0.2
Prince Edward Island	3.3	+3.3
Yukon	0.0	0
Northwest Territories	0.0	0
Nunavut	0.0	0



Table 3 summarizes the total cases, recoveries and deaths for 1 to 7 July 2020:

- This week more recoveries than cases were reported.
  - Saskatchewan, Manitoba, Ontario, Quebec, and Newfoundland have reported more recoveries than new cases.
  - British Columbia, Alberta, Nova Scotia, Prince Edward Island and Nunavut reported more cases than recoveries.

**Table 3.** Summary of COVID-19 cases, recoveries, and deaths reported by province or territory, for week 1 to 7 July 2020

Province/Territory	New cases	New recoveries	New deaths
British Columbia	74	52	9
Alberta	328	273	3
Saskatchewan	21	53	2
Manitoba	0	4	0
Ontario	992	1 230	19
Quebec	539	776	87
New Brunswick	0	0	0
Newfoundland	0	4	0
Nova Scotia	3	0	0
Prince Edward Island	5	0	0
Yukon	0	0	0
Northwest Territories	0	0	0
Nunavut	1 <sup>a</sup>	0	0
Canada	1 963	2 392	120

<sup>&</sup>lt;sup>a</sup> Nunavut reported its first probable case

### DEMOGRAPHIC DISTRIBUTION<sup>a</sup>

- From 1 to 7 July 2020, cases newly reported to PHAC based on PHAC report date (n=2 070) ranged in age from less than one year to 100 years old, with a median age of 37 years.
- The age distribution of cases by sex reported to PHAC for the period 1 to 7 July 2020 continues to be younger than the cumulative age distribution by sex (**Table A3** in the Annex):
  - Those less than 20 years comprise 17% of cases reported in the past week, but only 7% of total cases in the Canadian outbreak. This age group is still under-represented in the overall outbreak, as they represent 22% of the Canadian population.
  - Both sexes aged 20-29 years comprise 21% of the cases reported in the past week, but only 14% of the total cases overall. This age group is now over-represented in recently reported cases, as they comprise just 14% of the Canadian population.
- Possible explanations for the increase in proportion of cases in younger age groups, include:
  - Several jurisdictions have recently expanded testing strategies that were previously restricted to those with severe illness, at high risk, or vulnerable populations. The

<sup>&</sup>lt;sup>a</sup> Detailed case information received by PHAC from P/Ts



- expansion of testing strategies may be detecting cases in individuals who would not have been tested earlier in the outbreak.
- Younger individuals may be having increased in-person physical connections, either as a result of return to workplaces and associated activities (i.e., commuting) or due to reduced adherence to physical distancing measures.
- Compared to the week of 24 to 30 June, cases are younger among those reported 1 to 7 July.
  - The highest incidence rate in age and sex is among female cases over the age of 80, followed by females ages 20-29 years (10 and 8.3 cases per 100 000 population respectively).
  - Among male cases, those ages 20 to 29 years present the highest incidence rate, followed by male over the age of 80 (8.5 and 7.1 cases per 100 000 population respectively).

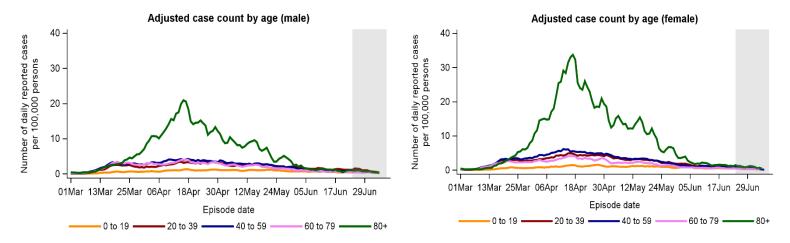
**Table 4.** Age distribution and incidence rate per 100 000 population of COVID-19 cases reported to PHAC, by sex, from 1 to 7 July 2020.

	Female			Male			
Age groups	n	%	Rate	n	%	Rate	
≤ 19	168	16	4.2	182	18	4.4	
20-29	203	20	8.3	224	22	8.5	
30-39	157	15	6.1	171	17	6.6	
40-49	146	14	6.0	142	14	5.9	
50-59	134	13	5.1	126	12	4.8	
60-69	82	8	3.5	79	8	3.5	
70-79	48	5	3.2	57	6	4.2	
80+	97	9	10.0	46	4	7.1	
Total	1 035	100	5.5	1 027	100	5.5	

Figure 3 and Figure 4 present cases by episode date, stratified by sex and adjusted for population at the national level.

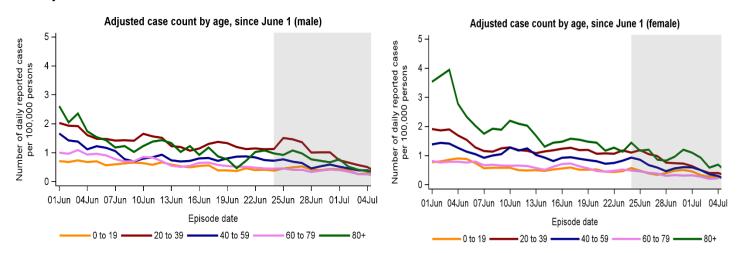
- The steepest decline is seen in Canadians over 80 years of age, those most at risk for severe outcomes.
- Since 1 June, a decreasing trend was observed among all age groups, with the exception of those in the youngest age group (0 to 19 years). Cases reported in this age group have not declined as quickly as others.
  - Female cases over the age of 80 have notably declined, while a slower decline is observed in males and females ages 20-39.

Figure 3. Daily cases (3-day moving average) by age and sex, population adjusted as of 4 July 2020



**Note:** The shaded area represents a period of time (lag time) where it is expected that cases have occurred but have not yet been reported nationally.

**Figure 4**. Daily cases (3-day moving average) by age and sex, population adjusted from 1 June to 4 July 2020



**Note:** The shaded area represents a period of time (lag time) where it is expected that cases have occurred but have not yet been reported nationally.

<sup>&</sup>lt;sup>a</sup>If date of illness onset was not available, the earliest of the following dates was used as an estimate in the following order: Specimen Collection Date and Laboratory Testing Date.

<sup>&</sup>lt;sup>a</sup>If date of illness onset was not available, the earliest of the following dates was used as an estimate in the following order: Specimen Collection Date and Laboratory Testing Date.



#### **OUTCOMES AND SEVERITY**

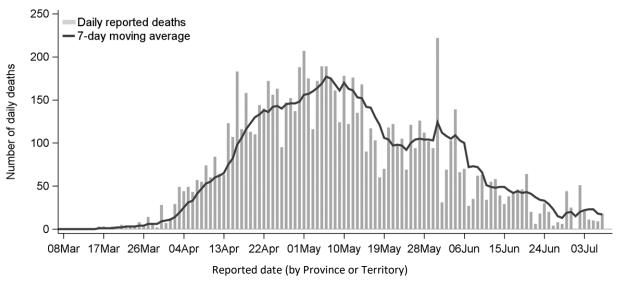
From 1 to 7 July 2020, 120 deaths were reported in Canada.

• This represents a **12% decrease** compared to the previous week (24 to 30 June), and a continuation of a downward trend since early May (Figure 5).

During the same period, 28 deaths were reported to PHAC (Table 5). Among those:

- 68% (n=19) cases were aged 80 years or over;
- 64% (n=18) were male cases.

**Figure 5.** Daily number of COVID-19 related deaths in Canada (and 7-day moving average), as of 7 July 2020 (N=8 711)



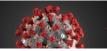
**Note:** The 7-day moving average is a trend indicator that captures the arithmetic mean of the daily reported deaths over the previous seven days. The moving average helps smooth out day-to-day variability in reporting, filtering out the "noise" of short-term fluctuations. The hatched grey bars correspond to deaths that were originally detected at an earlier date (excluded from moving average calculation).

From 1 to 7 July 2020, detailed case information on hospitalization status was reported to PHAC for 2 077 cases among those:

- 89 cases (4%) were hospitalized, of whom:
  - 13 (15%) were admitted to ICU, and
  - 1 (1%) required mechanical ventilation.

This compares with the 70 555 cases with detailed case information on hospitalization status reported to PHAC since the start of the outbreak, where:

- 10 518 cases (15%) were hospitalized, of whom:
  - o 2 150 (20%) were admitted to ICU, and
  - 452 (4%) required mechanical ventilation.



**Table 5.** Number of COVID-19 cases hospitalized, admitted to ICU, and reported as deceased, by sex and age group, for week 1 to 7 July 2020<sup>a</sup>

Age groups	Hospital	lizations	Admitte	d to ICU	Deceased		
Age groups	Female Male		Female Male		Female	Male	
≤ 19	1	2	0	0	0	0	
20-39	6	5	0	0	0	0	
40-59	5	13	2	3	0	3	
60-79	16	18	3	3	1	5	
80+	13	10	1	1	9	10	

<sup>&</sup>lt;sup>a</sup> The information presented is based on cases reported to PHAC from 1 to 7 July. These values may change weekly due to updates in disease progression and disposition.

The number of overall hospitalizations, ICU admissions and deaths have decreased among cases reported during week 1 to 7 July compared to week 24 to 30 June (Table A4 to A6 in Annex).

 An increase was observed among male cases hospitalized, within the ICU and deceased within the 40 to 79 age groups compared to females.

#### TEMPORAL DISTRIBUTION BY EXPOSURE CATEGORY

Information on exposure is available for 461 cases with illness onset in the week of 1 to 7 July. Of these:

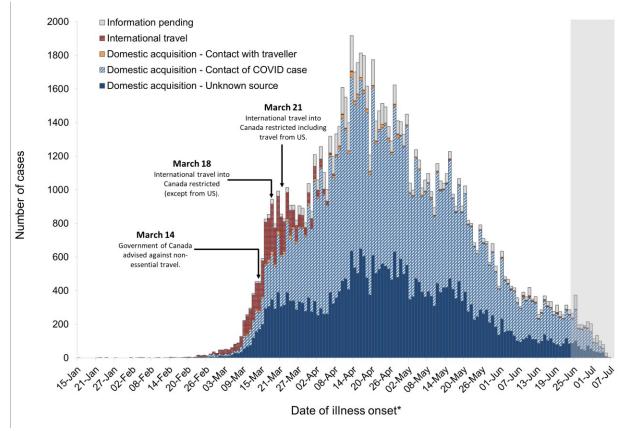
- 9 cases (2%) reported having travelled outside of Canada during the exposure period;
- 310 cases (67%) were due to exposure in Canada to either a known COVID-19 case, an unknown source or to someone who had travelled; and
- 142 cases (41%) have information on exposure pending.

Jurisdictions update exposure status on an ongoing basis as case investigations are completed, which may result in information currently pending changing exposure category in the future. Conversely, some cases which have information pending from early in the outbreak may be lost to follow-up, and exposure category may not have information pending from early in the outbreak may be lost to follow-up, and exposure category may not be identified (Figure 6).

Of the 104 104 cases with information on exposure provided:

- 4 368 cases (4%) reported having travelled outside of Canada during the exposure period;
- 56 646 cases (54%) reported exposure in Canada to either a known COVID-19 case or to someone who had travelled; and
- 6 310 (6%) have information on exposure pending.

**Figure 6.** Number of reported COVID-19 cases in Canada, by date of illness onset and exposure category as of 7 July 2020 (n=100 137)



<sup>\*</sup>If date of illness onset was not available the earliest of the following dates was used as an estimate in the following order: Specimen Collection Date and Laboratory Testing Date.

**Note:** The shaded area represents a period of time (lag time) where it is expected that cases have occurred but have not yet been reported nationally.



### INTERNATIONAL TRAVEL

Of the cases reported to PHAC, 4 386 cases have been associated with international travel. On March 14, the Government of Canada published a global Travel Health Notice advising Canadians against non-essential travel and advised Canadians abroad to return to Canada. By March 21, the Government of Canada prohibited all non-essential travel into Canada by foreign nationals. Since that time, COVID-19 cases associated with international travel have decreased substantially, from 21% (n=3 679) of all cases in March to 2% in June (n=153) (Table 6).

• Since 1 April, the most commonly reported countries of travel included the United States, Mexico, Portugal, Pakistan and the Dominican Republic.

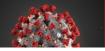
**Table 6.** The number and percentage of COVID-19 cases associated with international travel by month, as of 7 July 2020

Month	Number of COVID-19 cases associated with international travel	Percentage of COVID-19 cases associated with international travel*
January	6	85.7%
February	71	38.4%
March	3679	21.0%
April	313	0.7%
May	104	0.4%
June	153	1.5%
July	9	2.0%

<sup>\*</sup>Only includes cases that have an onset, specimen collection, or lab test date, as well as information on exposure.

From 1 to 7 July, nine cases of COVID-19 in Canada associated with international travel were reported to PHAC.

- Of the nine cases, travel was reported to Pakistan, India, Mexico, Costa Rica, Guatemala, Sweden and Serbia/Montenegro
- Canada's public health measures, including border closure to the United States, continue to aid in the control of imported cases.



#### **OUTBREAKS**

- Outbreaks have been important contributors to the spread of COVID-19 in Canada and point to vulnerabilities in closed and crowded settings. Table 7 identifies common locations of outbreaks identified, as well as the number of cases and deaths associated with each.
- Outbreaks in congregate living, workplace, and agricultural work settings have been detected, namely among long-term care settings, meat processing plants, hospitals, and among farm workers.
- With the gradual reopening of society and activities resuming, outbreaks are becoming linked to social gatherings, particularly in closed settings with close contacts (e.g., retail and food settings)

**Table 7**. Total number of COVID-19 clusters, cases, and deaths by outbreak setting in Canada as of 7 July 2020

Outbreak setting	Reported number of outbreaks (difference since last report)	Reported number of cases (difference since last report)	Reported number of deaths (difference since last report)
Long-term care and seniors homes	1029 (+22)	20 827 (+208)	6 415 (+91)
Hospital	129 (+3)	1 798 (+131)	191 (+3)
Agricultural work setting (including			
those with congregate living for			
workers)	24 (+3)	1 243 (+92)	4 (+1)
Shelter	35 (+4)	607 (+25)	3 (+0)
Correctional facility	26 (+0)	818 (+0)	5 (+0)
Other congregate living settings	53	566	69
Meat and poultry processing plant	14 (+1)	3 031 (+6)	6 (+0)
Mass gathering <sup>a</sup>	13 (+8)	397 (+218)	2 (+1)
Other industrial settings <sup>b</sup>	30	505	1
Retail businesses	28	147	1
Food/drink establishments	10	57	0
Rehabilitation facility	7	102	8

<sup>&</sup>lt;sup>a</sup> Mass gatherings are defined as an event which brings together a large number of people; examples of mass gatherings include conferences, funerals, family gatherings, and sporting events.

**Note:** Workplace has been reclassified into more specific outbreak settings such as retail businesses, industrial settings, and food/drink establishments. Group homes, residential care, and supported housing has been reclassified. As a result, some of these outbreaks have been reclassified into different categories such as LTC and retirement residence. The remaining categories have been labelled as other congregate living settings.

<sup>&</sup>lt;sup>b</sup> Other industrial settings include: automotive manufacturing, distribution/processing facilities, worker camps, waste management/recycling, Warehouse, etc.



#### **FLUWATCHERS**

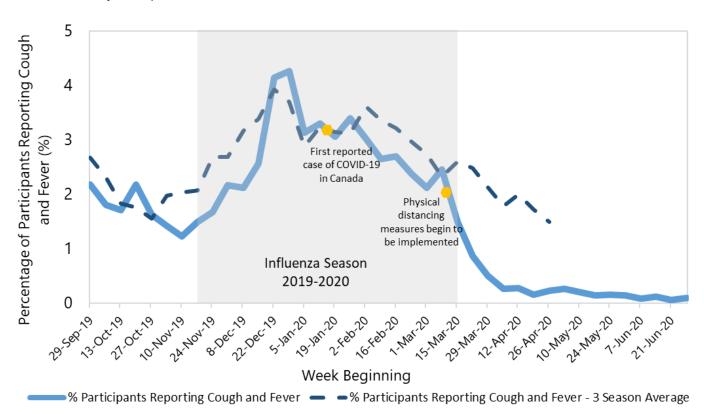
<u>FluWatchers</u> is an online health surveillance system that relies on volunteer reports to track spread of flu-like illness (ILI) across Canada. Mild COVID-19 illness presents with symptoms similar to ILI; therefore, FluWatchers is shifting focus to track COVID-19 symptoms over the spring and summer months.

In the week of 28 June to 4 July 2020, 10 398 participants reported into the FluWatchers program. A total of 10 participants (0.1%) reported cough and fever (Figure 7). The participants reporting cough and fever were not restricted to a single jurisdiction. As FluWatchers does not normally collect data during the summer months, this cannot be compared to historical Canadian data. Similar participatory ILI surveillance programs in other countries are also reporting historically low levels. These low levels may be due to a combination of factors, including physical distancing.

Among the 10 participants reporting cough and fever:

- 3 (30%) sought medical attention;
- 3 (30%) were tested no tests were positive for COVID-19

**Figure 7.** Percentage of FluWatchers Participants Reporting Cough and Fever (N=10 398 the week of 28 June to 4 July 2020)





## LABORATORY TESTING

Overall, **2 940 925** people have been tested for COVID-19 in Canada as of 5 July 2020, and the cumulative percent positive to date is **3.3%** (Table 8).

From 29 June to 5 July 2020, **263 720** persons were tested for COVID-19 and the weekly average percent positivity was **0.8%** (Figure A1 within Annex). The percent positivity is the lowest recorded since the peak of the epidemic in late April. Nationally, Canada's rate of testing had a mild decrease (-3.3%) from the week. The observed decrease may be due to increased testing, lower incidence of disease, or a combination of the two.

• Quebec saw a 12% increase in the number of persons tested, while also observing a decrease in the weekly percent positivity from 1.6% to 1.2%.

The median time from symptom onset to lab specimen collection over the course of the pandemic has been **3.5 days**\*. As the pandemic progresses, Canadians are seeking and being tested quicker. This shorter duration of COVID-19 patients being in an 'unknown disease status' has likely resulted in fewer transmission opportunities.

**Table 8.** Summary of COVID-19 testing reported in Canada, by province or territory, between 29 June to 5 July 2020 (N=2 940 925)

Province/Territory	Total number of people	Difference since last report	Average # people tested daily	People tested per 1 000 000 pop'n	Weekly Percent positivity
	testeda				
British Columbia	172 759	9 883	1 597	0.3	0.6%
Alberta	412 841	28 821	5 404	1.2	0.9%
Saskatchewan	60 784	3 492	504	0.4	0.7%
Manitoba	63 715	2 271	364	0.3	0%
Ontario	1 477 177	165 094	23 585	1.6	0.7%
Quebec	622 087	48 609	5 340	0.6	1.2%
Newfoundland	18 724	1 318	188	0.4	0%
New Brunswick	39 237	1 318	188	0.2	0%
Nova Scotia	56 032	1 857	265	0.3	0.2%
Prince Edward Island	12 674	1 403	216	1.4	0.3%
Yukon	1 295	23	3	0.1	0%
Northwest Territories	2 412	71	10	0.2	0%
Nunavut	1 112	60	10	0.3	0%
Total <sup>b</sup>	2 940 925	264 220	37 674	1.0	0.8%

<sup>&</sup>lt;sup>a</sup> For provinces and territories which report the number of tests completed, a formula is used to estimate the number of unique people tested. <sup>b</sup> Includes 76 repatriated travellers tested.

**Note:** Laboratory testing numbers may be underestimated due to reporting delays and may not include additional sentinel surveillance or other testing conducted in the province or territory.

<sup>\*</sup>This estimate is based off 49,831 case report forms across 11 PTs (excludes Nunavut & BC - insufficient data).



### **MODELLING**

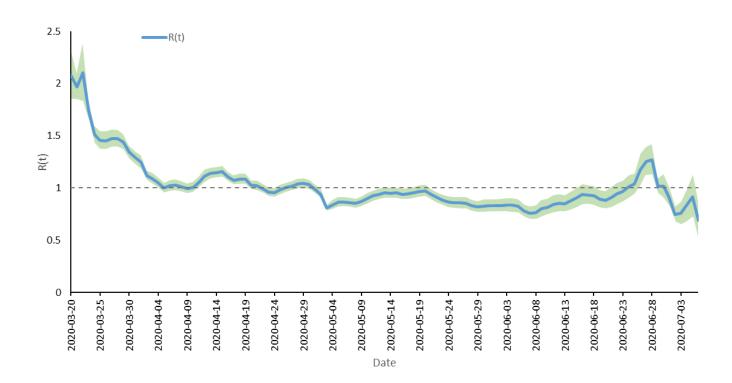
## Estimates of transmission rates in Canada: Effective reproductive rate (Rt)

 $R_t$  is the time variable reproduction rate, representing the average number of new infected people for each infected person. If  $R_t$  is less than 1 at a particular time (t), then the average number of people infected by one infected person is less than one, so the epidemic is being brought under control. If  $R_t$  is greater than 1, the average number of people infected by one infected person is greater than one, and the epidemic is growing.

#### Figure 8 shows the $R_t$ over time:

- The graph shows how the reproductive rate in Canada has remained mostly below 1 for nearly 10 weeks, in recent weeks, the Rt has fluctuated above and below 1.
- Community transmission remains low in most of the country and recent fluctuations in Canada's Rt reflect a small number of localised outbreaks.

Figure 8. Reproductive rate in Canada, 6 July 2020





#### **FORECASTING**

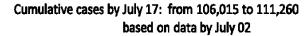
#### Canada's approach to modelling:

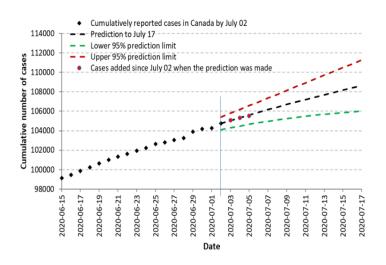
Models cannot predict the course of the COVID-19 pandemic, but can help us understand all possible scenarios, support decisions on public health measures and help the health care sector plan for these scenarios.

**Forecasting models** use data to estimate how many new cases can be expected in the coming week. Figure 9 below shows the projected number of cases and deaths in Canada, with a 95% prediction interval.

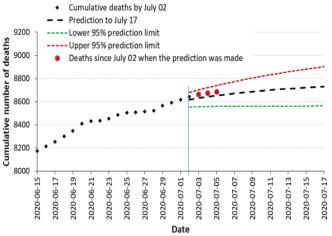
- Forecasting shows 106 015 to 111 260 cumulative reported cases and 8 560 to 8 900 cumulative number of deaths are predicted by 17 July.
- The dashed lines show the predicted trajectory with the blue line representing the number of cases anticipated. Since modelling is a prediction or an educated guess, the red and green lines represent the upper and lower limits and are projections of possible cases based on July 2 data. This is why the numbers in the lower limit, or green line, do not match the current case count or deaths cases are expected to be above the green line.
- Cases observed should fall between the red and green lines.

**Figure 9**. Projected numbers to 17 July 2020 and 95% prediction intervals based on data as reported by 2 July 2020





# Cumulative deaths by July 17: from 8,560 to 8,900 based on data by July 02



For more information, please visit:

https://www.canada.ca/en/public-health/services/publications/diseases-conditions/covid-19-using-data-modelling-inform-public-health-action.html

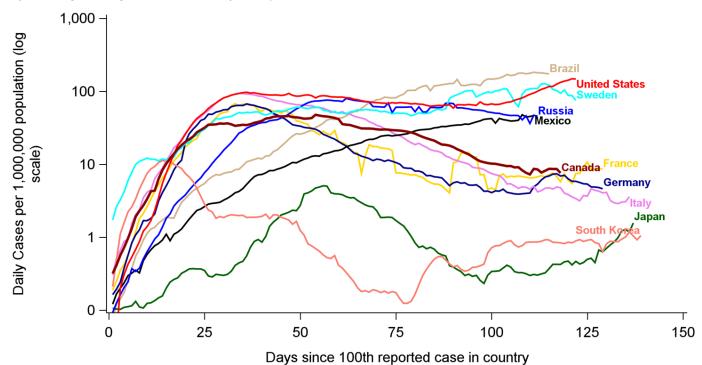


### INTERNATIONAL

- As of 7 July, globally, there are over 11.5 million cases of COVID-19 with over 533 000 reported deaths. Since 7 June, there has been over 100 000 cases reported globally each day.
- The region of the Americas followed by Europe and the Eastern Mediterranean region; are reporting the highest number of COVID-19 cases with over 1 million cases.
  - The United States continues to report the highest daily number of cases and accounts for a quarter (25%) of reported cases.
- As countries reduce public health measures, the resurgence of cases is being observed
- Canada has bent and flattened the curve sooners than a number of countries such as Italy and the United States
- Currently, Canada's daily cases (population adjusted) is lower than countries such as Brazil, Sweden, the United States, Russia, and Mexico, but is higher than countries such as Germany, Italy, South Korea, and Japan

The 7-day moving average of new daily COVID-19 cases in Canada compared to other countries can be seen in **Figure 10**.

**Figure 10**. Daily new cases of COVID-19 in Canada compared to other countries as of 7 July 2020 (7-day moving average, population adjusted)



Up-to-date country-specific risk levels may be found on <u>travel health notices</u>. For more information on COVID-19 internationally, please refer to the <u>World Health Organizations'</u> COVID-19 Situation Report.



## **ANNEX**

**Table A1.** Number of COVID-19 cases, recoveries, and deaths reported in Canada by province or territory, as of 7 July 2020

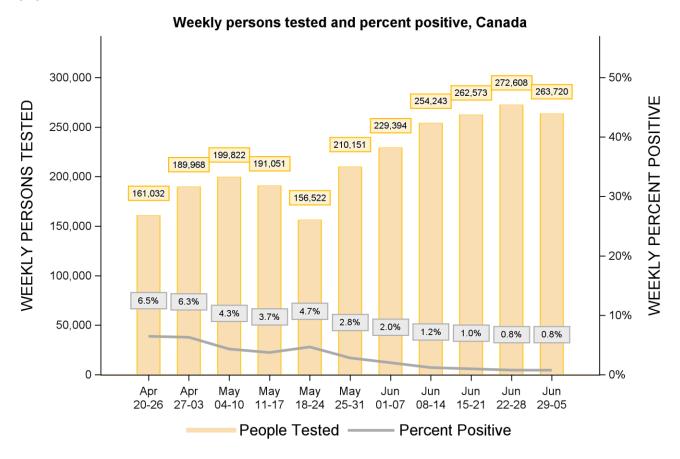
Province/Territory	Total cases	Recovered	Total deaths
British Columbia	2 990	2 645	183
Alberta	8 436	7 659	157
Saskatchewan	806	737	15
Manitoba	325	307	7
Ontario	36 060	31 603	2 691
Quebec	55 997	25 458	5 590
Newfoundland and Labrador	261	258	3
New Brunswick	165	162	2
Nova Scotia	1 065	998	63
Prince Edward Island	32	27	0
Yukon	11	11	0
Northwest Territories	5	5	0
Nunavut	1	0	0
Canada <sup>a</sup>	106 167	69 883	8 711

<sup>&</sup>lt;sup>a</sup> Includes 13 cases identified in repatriated travellers (Grand Princess Cruise ship travellers) who were under quarantine in Trenton in March 2020. Update on their status is not available.

**Table A2.** Age-standardized incidence rates of COVID-19 cases, by province or territory, as of 7 July 2020

Province/Territory	Cumulative (per 100 000)	Week 1-7 July (per 100 000)
British Columbia	56.7	1.0
Alberta	178.4	12.6
Saskatchewan	69.0	1.4
Manitoba	24.5	0.0
Ontario	244.1	5.2
Quebec	647.3	6.4
Newfoundland and Labrador	46.4	0.0
New Brunswick	21.4	0.0
Nova Scotia	109.2	0.3
Prince Edward Island	17.3	3.3
Yukon	21.4	0.0
Northwest Territories	10.0	0.0
Nunavut	0.0	1.0

**Figure A1.** Number of persons tested for COVID-19 and percent positivity by week, as of as of 5 July 2020



Data source: Provided by the NML, who receives lab testing data from provincial labs.

Table A3. Age and sex distribution of COVID-19 cases reported to PHAC, as of 7 July 2020

	Cumulative				Week 1-7 July							
Age groups	ı	emal	е		Male		ı	emale	)		Male	
	n	%	Rate	n	%	Rate	n	%	Rate	n	%	Rate
≤ 19	3 910	7	98.4	3 807	8	91.6	168	16	4.2	182	18	4.4
20-29	7 931	13	323.1	6 763	15	255.5	203	20	8.3	224	22	8.5
30-39	7 915	13	307.2	6 829	15	261.9	157	15	6.1	171	17	6.6
40-49	8 953	15	368.6	7 134	15	298.7	146	14	6.0	142	14	5.9
50-59	8 839	15	334.9	7 231	16	276.7	134	13	5.1	126	12	4.8
60-69	5 127	9	217.6	5 260	11	233.5	82	8	3.5	79	8	3.5
70-79	3 949	7	261.4	3 844	8	282.5	48	5	3.2	57	6	4.2
80+	12 433	21	1 278.4	5 589	12	856.6	97	9	10.0	46	4	7.1
Total	59 057	100	312.3	46 457	100	248.7	1 035	100	5.5	1 027	100	5.5



**Table A4.** Age and sex distribution of hospitalized COVID-19 cases reported to PHAC as of 7 July 2020

Ago group	Cumu	ılative	Week 24	-30 June	Week 1-7 July		
Age group	Female Male		Female Male		Female	Male	
≤ 19	52	44	3	2	1	2	
20-39	301	274	9	3	6	5	
40-59	680	875	10	11	3	10	
60-79	1 311	1 569	23	24	13	15	
80+	1 927	1 303	22	16	12	9	
Total	4 271	4 065	67	56	35	41	

**Table A5.** Age and sex distribution of COVID-19 cases admitted to ICU, reported to PHAC as of 7 July 2020

Age group	Cumulative		Week 24-30 June		Week 1-7 July	
	Female	Male	Female	Male	Female	Male
≤ 19	12	11	1	0	0	0
20-39	84	97	3	2	0	0
40-59	242	419	2	2	2	3
60-79	351	671	1	5	3	3
80+	128	119	4	0	1	1
Total	817	1 317	11	9	6	7

Table A6. Age and sex distribution of deceased COVID-19 cases reported to PHAC as of 7 July 2020

Age group	Cumulative		Week 24-30 June		Week 1-7 July	
	Female	Male	Female	Male	Female	Male
≤ 19	1	0	0	0	0	0
20-39	7	15	0	0	0	0
40-59	94	149	2	0	0	3
60-79	884	1 292	2	3	1	5
80+	3 707	2 504	13	9	9	10
Total	4 693	3 960	17	12	10	18



#### TECHNICAL NOTES

The data in the report are based on information from various sources described below. The information presented for case-based analyses is that available as of **7 July at 8 p.m. EDT**. The information presented for trend analyses is that available as of **7 July at 8 p.m. EDT**. The information presented for laboratory analyses is that available as of **5 July at 8 p.m. EDT**.

#### DATA SOURCES AND DATA CAVEATS

#### Provincial and territorial case counts

Provincial and territorial (P/T) information on case counts, recoveries, and deaths associated with COVID-19 are collected from publicly available P/T websites.

• Only cases and deaths meeting P/T's definition for case classification are reported. For details on case definitions, please consult each P/T ministry of health website.

#### Laboratory information

Laboratory data on number of people tested per P/T are received from the National Microbiology Laboratory.

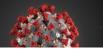
- Laboratory testing numbers may be an underestimate due to reporting delays and may not
  include additional sentinel surveillance or other testing performed. They are subject to changes
  as updates are received.
- Some provinces may report the number of tests conducted, and not the number of people tested. In this case, a formula is used to estimate the number of unique people tested.

#### **Epidemiological data**

Epidemiological data for this report are based on detailed case information received by PHAC from P/Ts. This information is housed in the PHAC COVID-19 database. Case counts and level of detail in case information submitted to PHAC varies by P/T due to:

- Possible reporting delay between time of case notification to the P/T public health authority and when detailed information is sent/received by PHAC.
- Preliminary data may be limited and data are not complete for all variables.
- Data on cases are updated on an ongoing basic after received by PHAC and are subject to change.
- Variation in approaches to testing and testing criteria over time within and between P/Ts.
- The lag time from illness onset to PHAC report date is approximately two weeks and data within this period is subject to change.

Data on case severity are likely under-estimated due to underreporting of these variables, as well as events that may have occurred after the completion of public health reporting, therefore not captured in the case report forms.



#### **Outbreak data**

Reporting delays and gaps in information that is available at the federal level present difficulties in reporting on local outbreaks. To ensure timely information is available, PHAC utilizes web-scraping techniques to gather outbreak data from media and provincial/territorial public health agency websites. There are several important limitations to these data:

- A national standardized outbreak definition does not exist. Clusters are defined and vary according to P/T.
- The data do not represent all outbreaks that have occurred in Canada over the course of the pandemic, but they do provide a summary of clusters reported via non-traditional data sources. Data collection on outbreaks began March 12 2020.
- Case-level data are generally not available for outbreaks detected via non-traditional data sources. Information presented is at the aggregate level only.
- The methods for defining an outbreak are currently in development and may change over time

#### Population data

 Canadian population data from Statistics Canada Population estimates on 1 July 2019 are used for age-standardized rate calculations.

#### International data

International data are retrieved from various reputable data sources, mainly the European Centre for Disease Prevention and Control (ECDC) Situation update, Johns Hopkins Resource Center and various country's ministry of health website.

- Given that the pandemic is rapidly evolving and the reporting cycles from government sources
  are different, the case numbers may not necessarily match what is being reported publicly.
  Rather, this reflects what is publicly available from the sources listed above.
- International comparisons should be interpreted with caution. Number of tests conducted, indications for testing, and diagnostic capacity by country have a large influence on total number of reported cases. Therefore, the data displayed may not represent the true incidence of disease within each country.