




Annual PEI Communicable Diseases Report, 2024

This report presents the data for provincially notifiable diseases and conditions. Where data permits, a six-year trend graph is presented for each disease or condition following the table for each notifiable disease category. The graphs also indicate significant changes between the most recent year and the most recent five years prior. Rates with a case count of less than 10 are suppressed due to the statistical unreliability of rates based on small numbers.

Legend for all graphs (change in rate for 2024 compared to average rate from 2019 to 2023):

-  No change in disease rate
-  Significant increase in disease rate
-  Significant decrease in disease rate

Highlights

- The rate of campylobacteriosis in PEI has been declining and the rate in 2024 (5-year average rate of 21.2 cases per 100,000 population) was significantly lower than the most recent five years prior. Rates of other enteric illnesses were stable.
- Similar to other jurisdictions in Canada, reported cases of invasive Group A streptococcal (iGAS) disease are increasing in PEI. In 2024, there were 29 cases (5-year average rate of 11.6 cases per 100,000 population) reported which is the highest annual count since at least 2000, the last available year with official reporting.
- The rate of influenza has been increasing. In 2024, the 5-year average rate 239.5 cases per 100,000 and this rate was significantly higher than the most recent five years prior. Influenza case counts are just an indication of greater influenza illness activity as many individuals with respiratory illness do not seek medical attention.
- While the incidence rates of the majority of vaccine preventable diseases were low, highlighting the effectiveness of immunization at disease prevention, a few concerning trends were observed in 2024:
 - The rate of invasive pneumococcal disease in 2024 was 10.8 cases per 100,000 population and this rate was significantly higher than in the most recent five years prior. Pneumococcal immunization is part of the PEI Childhood Immunization Schedule and is recommended for adults aged 65 years and older as well as adults under 65 years of age and at higher risk.
 - While low, the incidence of varicella (chicken pox) was increasing and the rate in 2024 (2.7 cases per 100,000 population) was significantly higher than in the most recent five years prior. The vaccine against varicella (which also protects against measles, mumps and rubella) is part of the PEI Childhood Immunization Schedule and is offered at 12 and 18 months of age.
 - A province-wide outbreak of pertussis (whooping cough) was declared in July 2024 and lasted until March 2025. The median age of cases related to the outbreak was 14 years. In PEI, the combination vaccine for whooping cough (Tdap) is part of the routine immunization program in PEI and infants are immunized by Public Health Nursing at two, four, six and 18 months. Booster doses are administered at age four or five and again at school in Grade 9. Immunization is also recommended to pregnant individuals with every pregnancy and all other adults can receive it every 10 years.
- Chlamydia was the most commonly reported sexually transmitted infection in PEI. In 2024, the incidence of chlamydia infection remained stable with a 5-year average rate of 225 cases per 100,000 population.

- The rate of infectious syphilis in 2024 (5-year average rate of 3.7 cases per 100,000 population) was significantly higher than in the most recent five years prior. An increasing trend has been observed nationally as well and with much higher incidence. In 2021, the rate was 30.2 cases per 100,000 population and this rate was five times higher than the rate in 2012 (5.9 cases per 100,000 population). While the incidence remains comparatively low in PEI, ongoing and regular monitoring is important to detect further increases.
- It is important to note that the COVID-19 pandemic impacted communicable disease rates. While public health measures, such as physical distancing and restrictions on gatherings, likely decreased the transmission of communicable diseases, there were also impacts on individuals' care seeking behaviours, access to care and on testing capacity at the Provincial Public Health Laboratory. Rates in 2020 and 2021 must be interpreted with caution.

Communicable Diseases - Enteric, Food and Waterborne Diseases

Number of Diagnosed Cases and 5-year Moving Average Rate per 100,000 Population, PEI 2019-2024

	Number of Cases per Year						5-year Moving Average Rate					
	2019	2020	2021	2022	2023	2024	2019	2020	2021	2022	2023	2024
Amoebiasis	0	0	0	0	0	0	–	–	–	–	–	–
Botulism	0	0	0	0	0	0	–	–	–	–	–	–
Campylobacteriosis	35	47	49	31	36	43	24.9	25.1	24.2	24.5	23.3	21.2
Cholera	0	0	0	0	0	0	–	–	–	–	–	–
Cryptosporidiosis	13	10	7	12	7	4	7.6	7.2	6.0	4.8	4.4	4.4
Cyclosporiasis	0	0	0	0	0	0	–	–	–	–	–	–
Giardiasis	3	4	4	5	7	4	3.1	2.9	2.8	2.9	2.9	3.1
Hepatitis A	0	2	0	0	1	4	–	–	–	–	–	–
Listeriosis	0	1	1	1	1	1	–	–	–	–	–	–
Norovirus*	58	15	14	26	32	32	24.4	21.5	17.7	14.2	15.3	17.3
Paralytic shellfish Poisoning	0	0	0	0	0	0	–	–	–	–	–	–
Salmonellosis	16	11	12	7	24	15	12.8	10.0	8.6	8.2	8.5	8.9
Shigellosis	1	0	1	0	2	1	–	–	–	–	–	–
Typhoid	0	0	0	0	0	0	–	–	–	–	–	–
Verotoxic <i>Escherichia coli</i>	6	1	1	5	11	0	2.2	1.9	2.9	2.1	2.5	3.1
<i>Vibrio parahaemolyticus</i>	0	4	3	3	0	2	–	–	–	–	–	–
Yersiniosis	0	0	1	0	0	0	–	–	–	–	–	–

*Outbreaks of Norovirus –5 in 2019, 3 in 2020, 0 in 2021, 3 in 2022, 1 in 2023, 4 in 2024

Rates were not calculated for 5-year rolling case counts less than 10

Graphs include:

Campylobacteriosis

Cryptosporidiosis

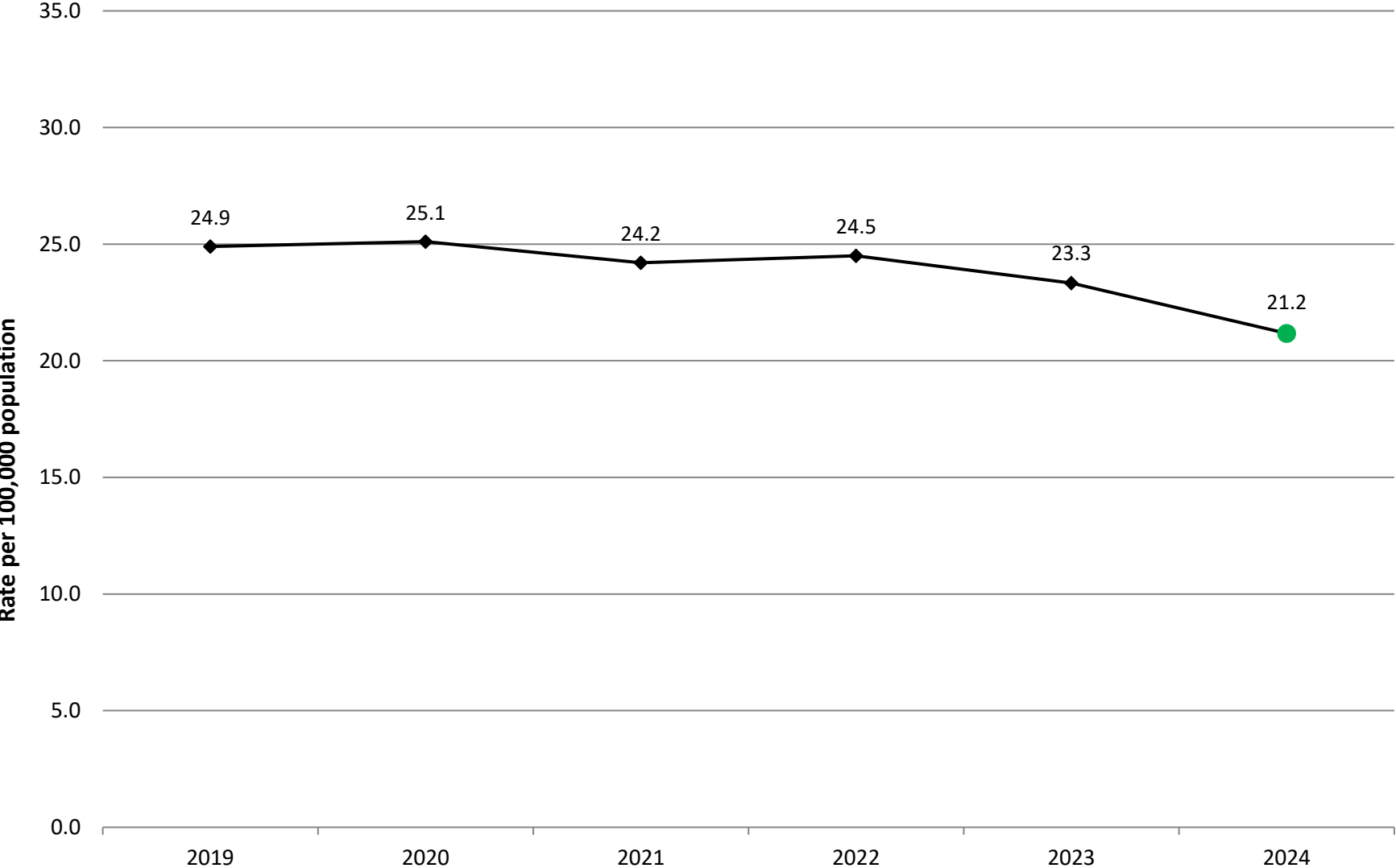
Giardiasis

Norovirus

Salmonellosis

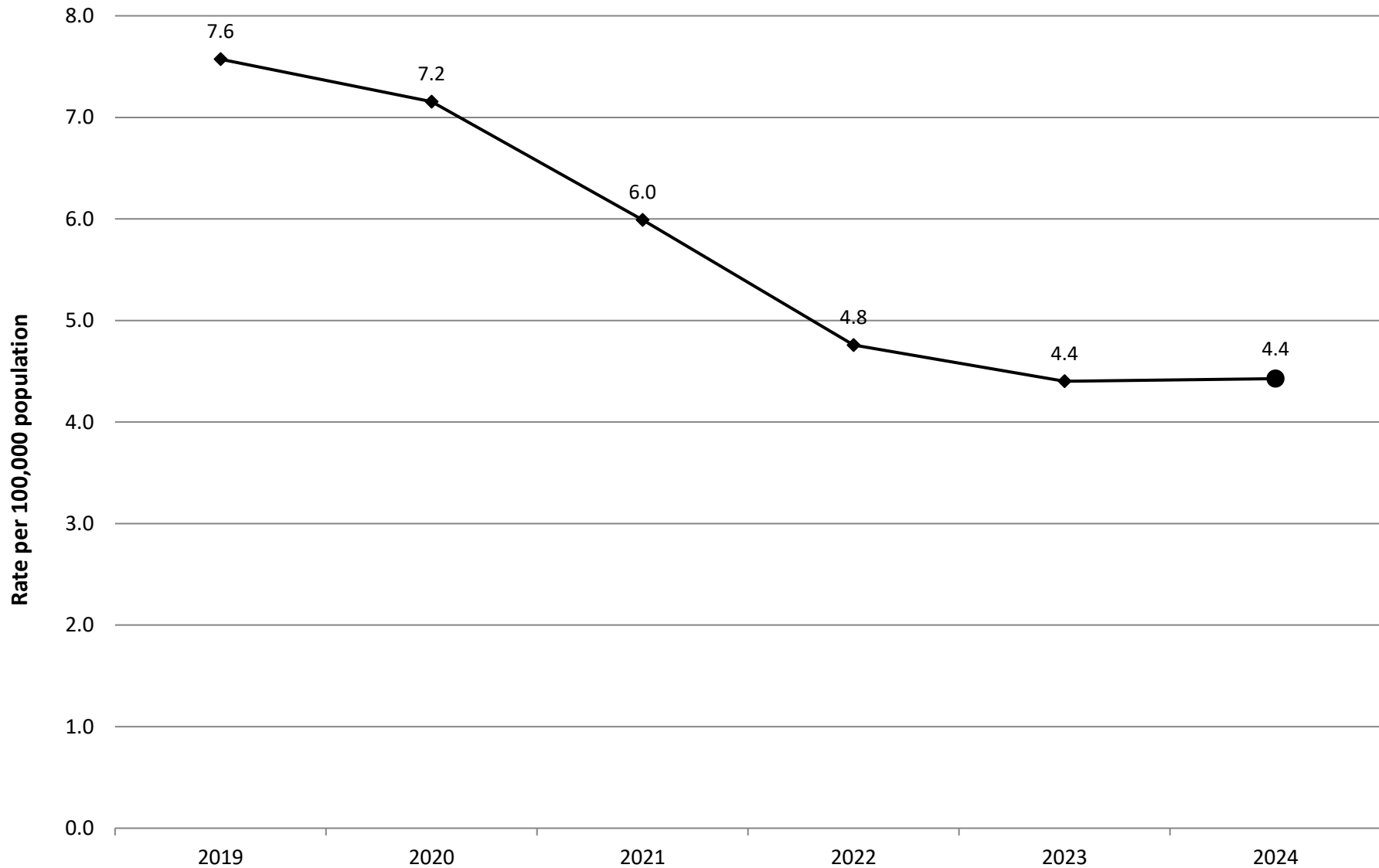
Verotoxigenic *Escherichia coli* (VTEC)

Campylobacteriosis, PEI
Five-year moving average rate per 100,000 population, 2019-2024

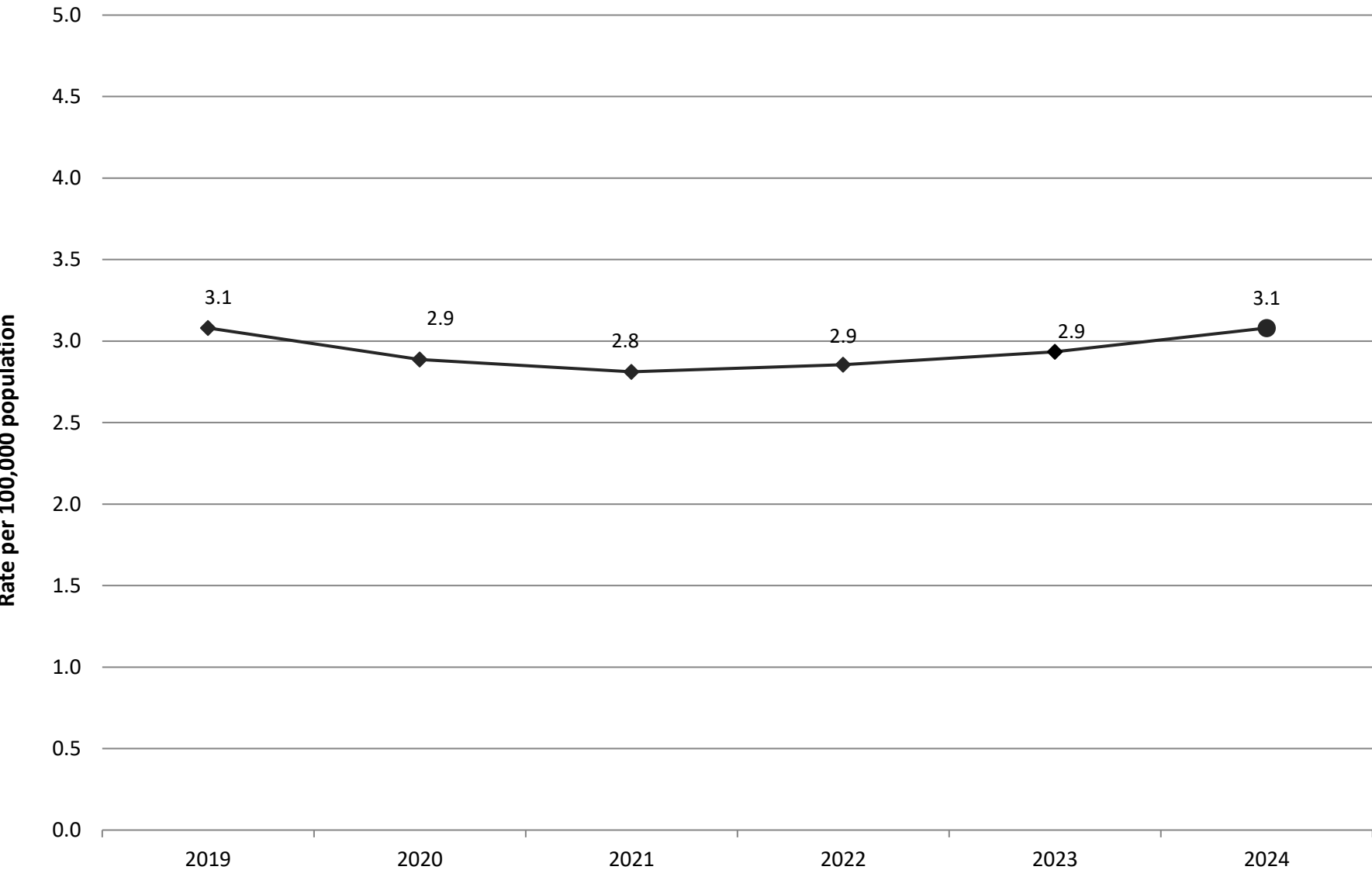


Cryptosporidiosis, PEI

Five-year moving average rate per 100,000 population, 2019-2024

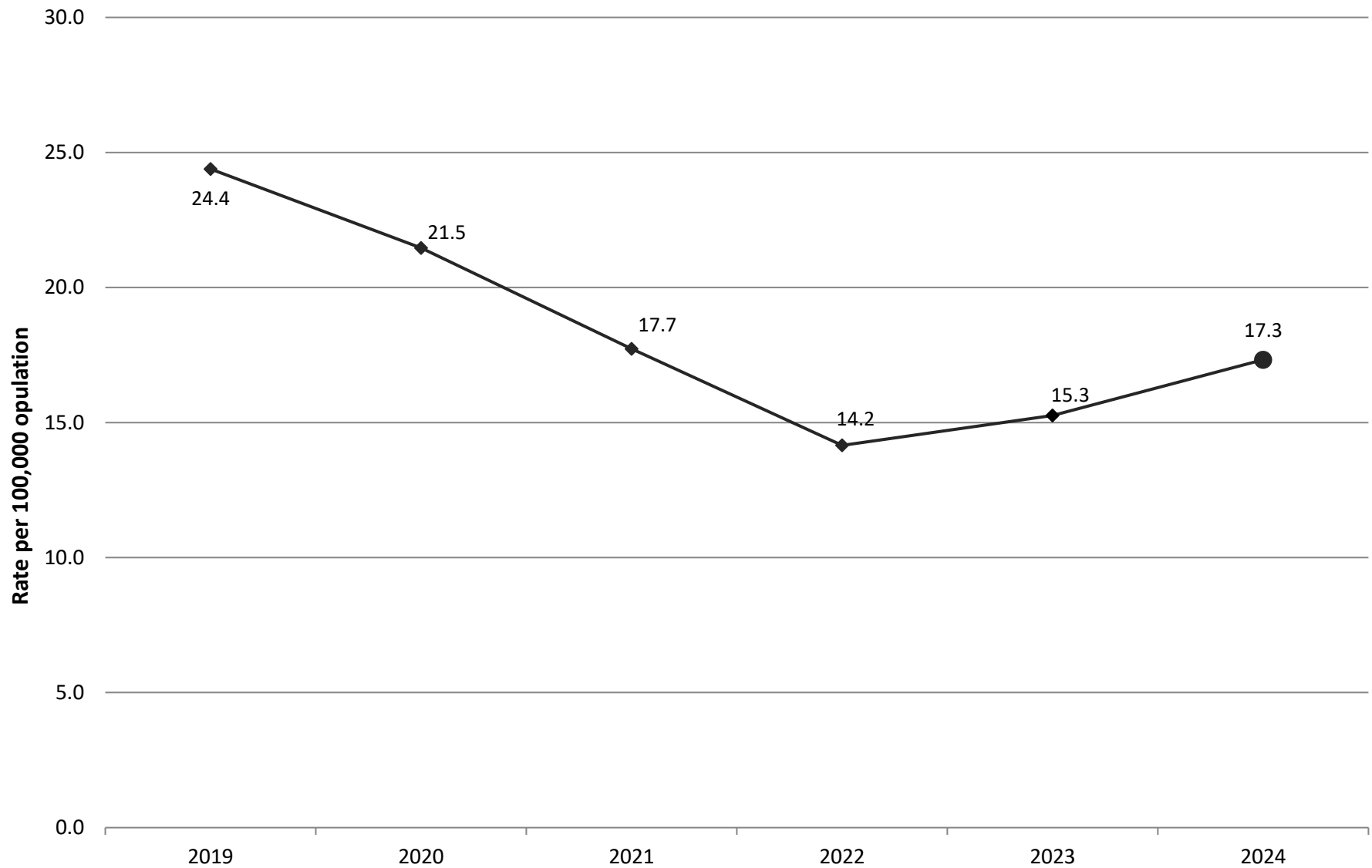


Giardiasis, PEI
Five-year moving average rate per 100,000 population, 2019-2024



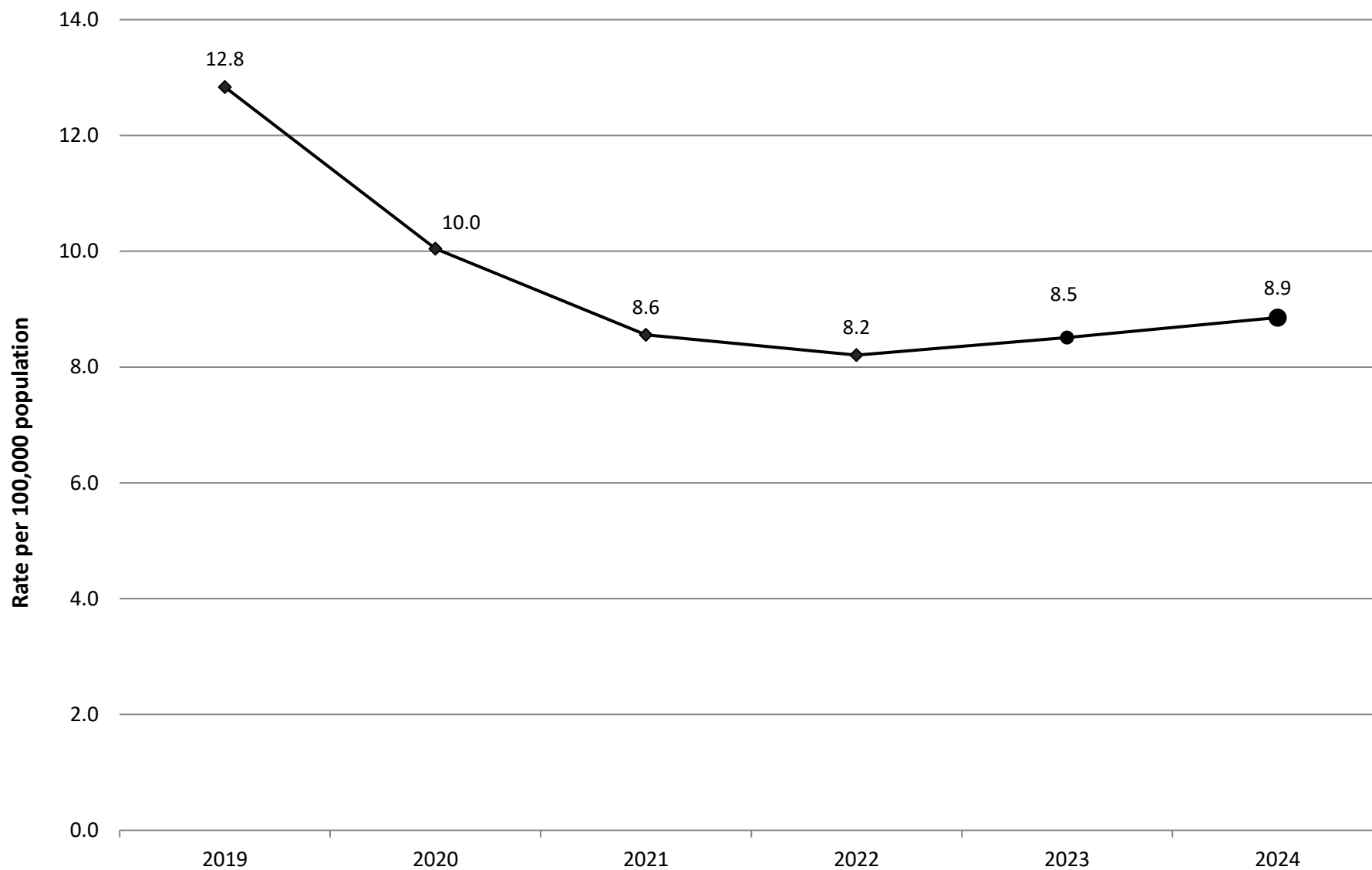
Norovirus, PEI

Five-year moving average rate per 100,000 population, 2019-2024



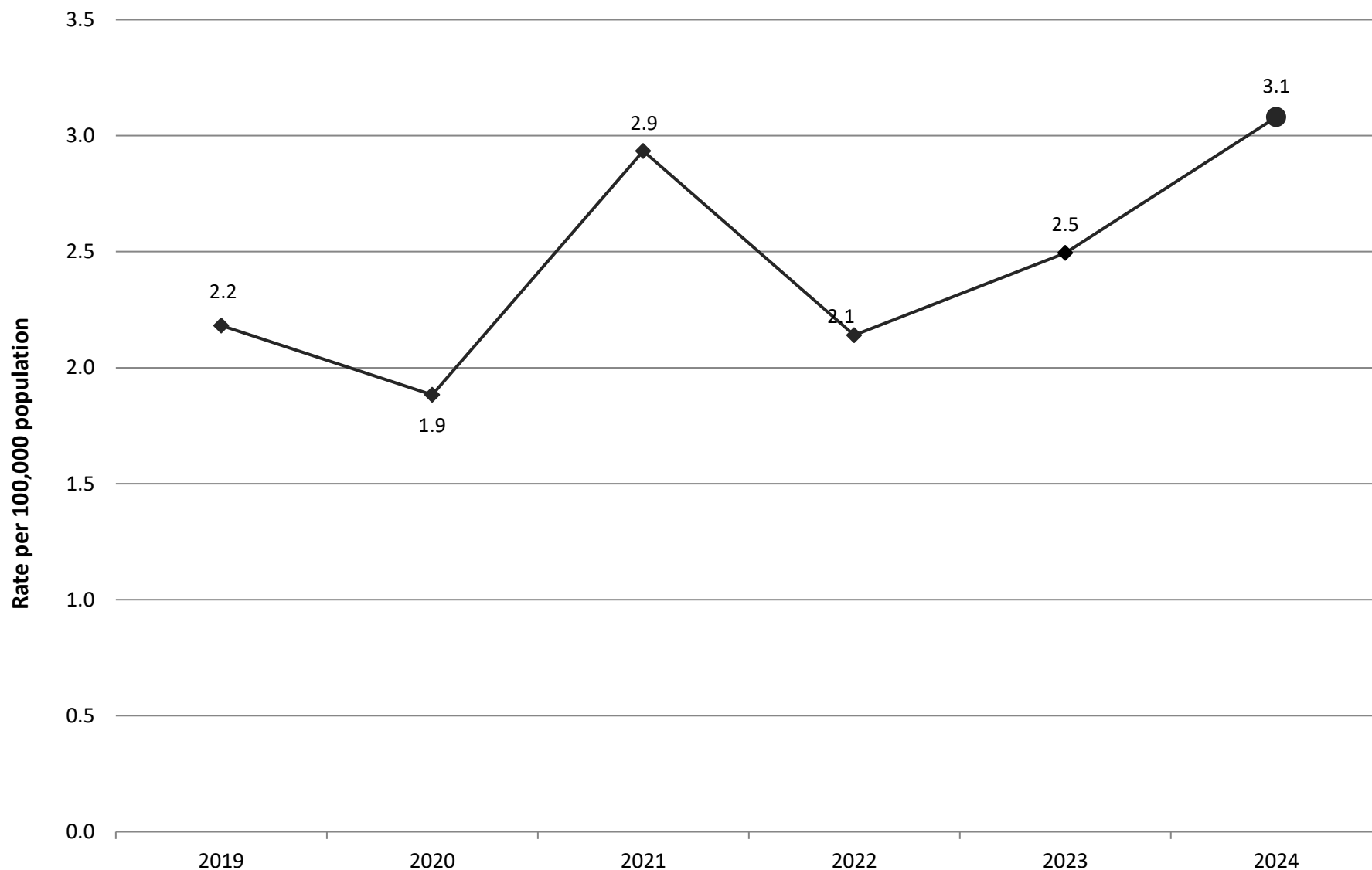
Salmonellosis, PEI

Five-year moving average rate per 100,000 population, 2019-2024



Verotoxigenic Escherichia coli (VTEC), PEI

Five-year moving average rate per 100,000 population, 2019-2024



Communicable Diseases - Diseases Transmitted by Respiratory Routes

Number of Diagnosed Cases and 5-year Moving Average Rate per 100,000 Population, PEI 2019-2024

	Number of Cases per Year						5-year Moving Average Rate					
	2019	2020	2021	2022	2023	2024	2019	2020	2021	2022	2023	2024
COVID-19*	N/A	96	1410	54182	2546	1049	N/A	N/A	N/A	N/A	N/A	N/A
Hantavirus	0	0	0	0	0	0	–	–	–	–	–	–
Invasive Group A Streptococcal Disease	7	10	1	4	27	29	4.2	3.3	6.0	8.4	8.9	11.6
Invasive Meningococcal Disease	0	0	0	0	0	0	–	–	–	–	–	–
Invasive Pneumococcal Disease	11	10	3	10	18	28	8.2	6.9	6.4	8.2	8.7	10.8
Influenza [†]	265	210	0	376	176	692	131.0	145.6	125.5	172.9	182.5	239.5
Legionellosis	3	1	0	0	0	0	–	–	–	–	–	–
Leprosy	0	0	0	0	0	0	–	–	–	–	–	–
RSV [‡]	N/A	N/A	N/A	N/A	74	493	N/A	N/A	N/A	N/A	N/A	N/A
Tuberculosis	4	3	2	3	5	2	1.3	1.6	2.1	1.8	1.8	1.9

*COVID-19 reportable since March 2020

†Influenza is reported here based on calendar year, but data is collected based on flu season (begins in August at week 35)

‡RSV reportable since May 2023

Rates were not calculated for 5-year rolling case counts less than 10

N/A: not available

Graphs include:

Invasive Group A Streptococcal Disease

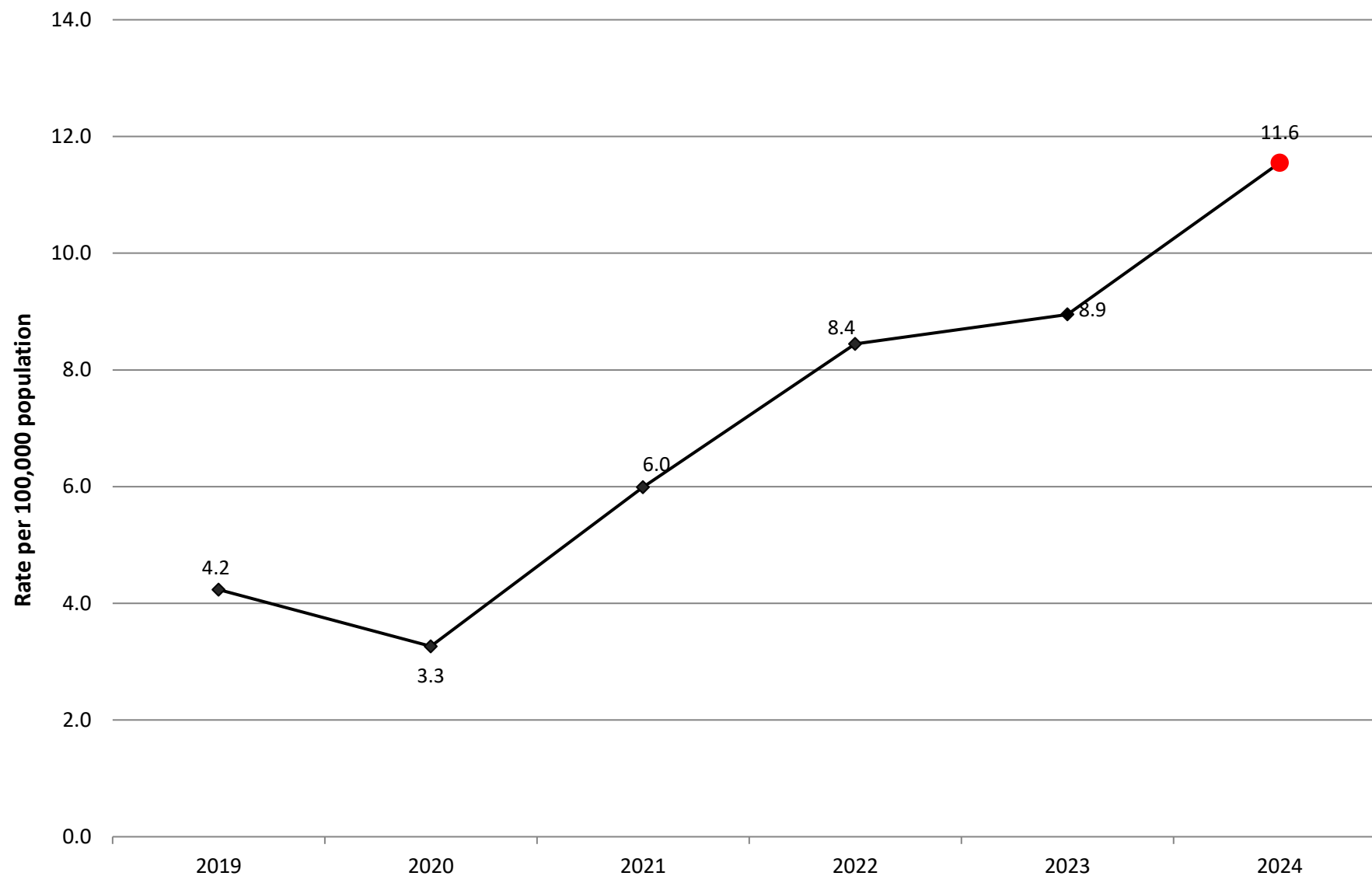
Invasive Pneumococcal Disease

Influenza

Tuberculosis

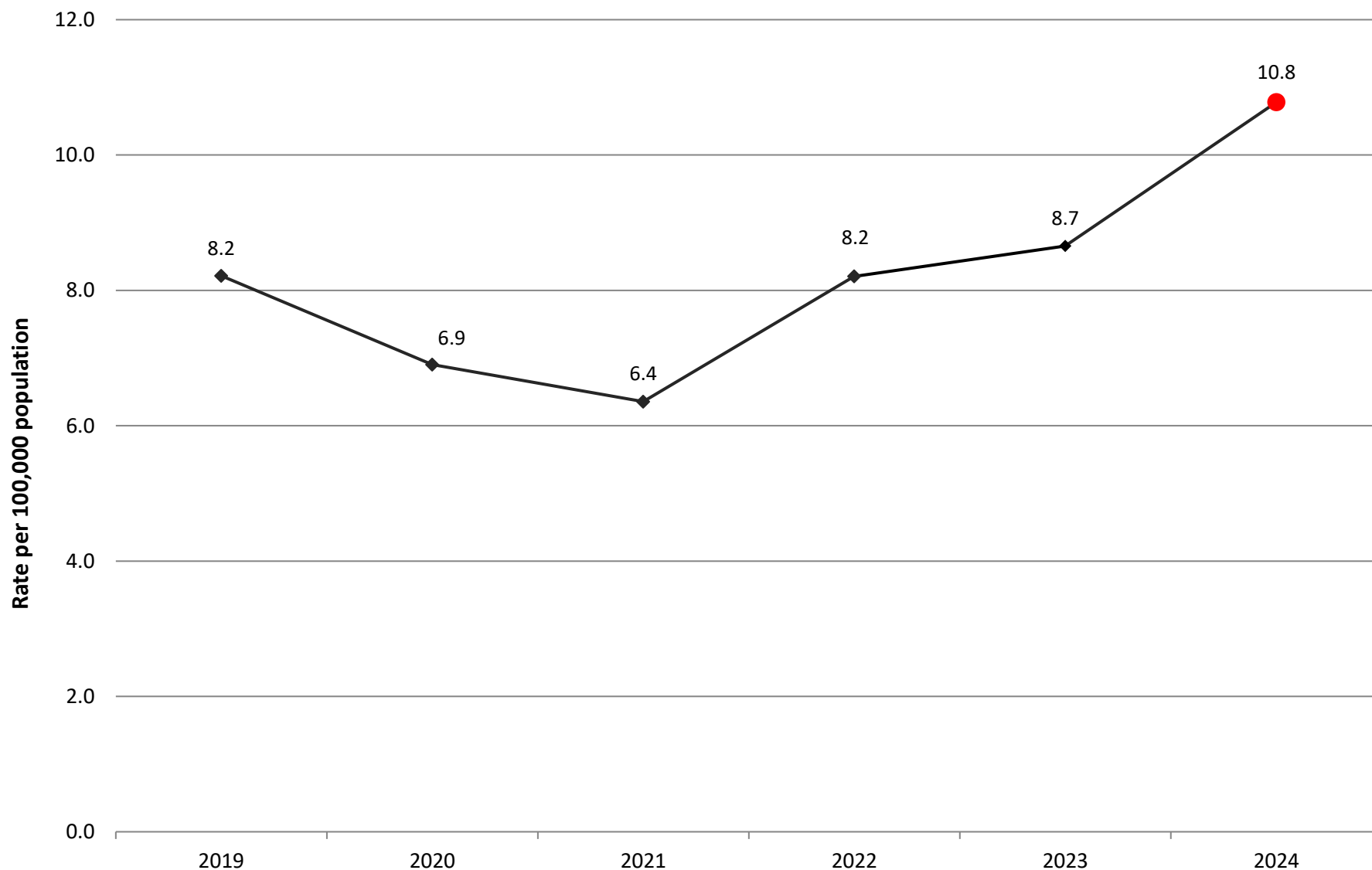
Invasive Group A Streptococcal Disease (IGAS), PEI

Five-year moving average rate per 100,000 population, 2019-2024



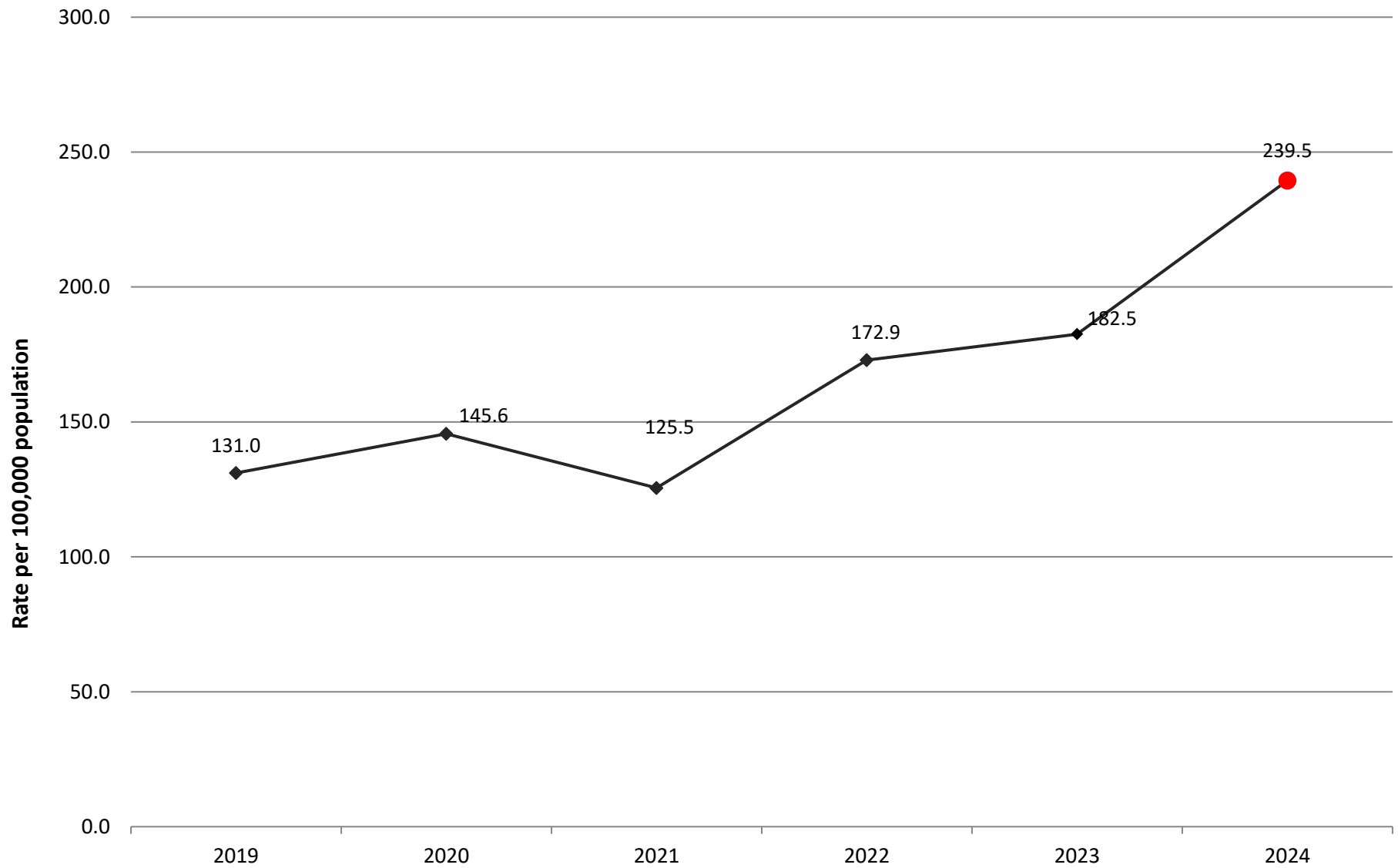
Invasive Pneumococcal Disease (IPD), PEI

Five-year moving average rate per 100,000 population, 2019-2024



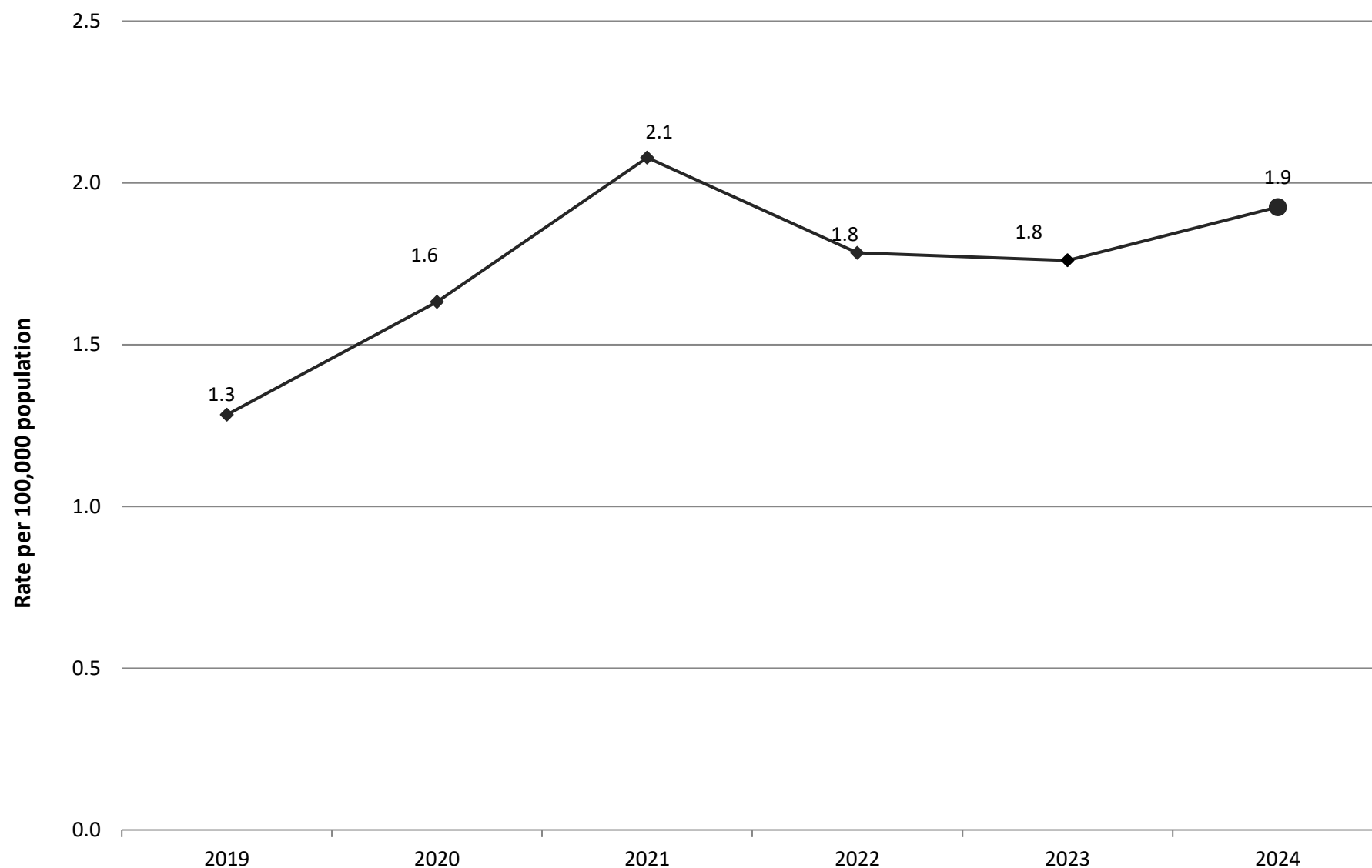
Influenza, PEI

Five-year moving average rate per 100,000 population, 2019-2024



Tuberculosis (TB), PEI

Five-year moving average rate per 100,000 population, 2019-2024



Communicable Diseases - Diseases Spread by Direct Contact or Through the Provision of Health Care

Number of Diagnosed Cases and 5-year Moving Average Rate per 100,000 Population, PEI 2019-2024

	Number of Cases per Year						5-year Moving Average Rate					
	2019	2020	2021	2022	2023	2024	2019	2020	2021	2022	2023	2024
Clostridium difficile	102	82	75	79	85	97	66.7	57.5	51.7	49.7	49.3	50.2
Creutzfeld Jacob Disease, Classic	0	1	1	0	0	2	–	–	–	–	–	–
Creutzfeld Jacob Disease, Variant	0	0	0	0	0	0	–	–	–	–	–	–
Group B Streptococcal Disease of the Newborn	1	0	1	0	0	1	–	–	–	–	–	–
Herpes (Neonatal)	1	0	0	0	0	1	–	–	–	–	–	–
Methicillin-resistant Staphylococcus aureus	122	106	62	73	115	134	67.8	59.4	58.4	58.3	56.3	62.0
Vancomycin Resistant Enterococci	4	6	2	2	8	11	1.8	2.0	2.7	3.4	3.4	4.0

Rates were not calculated for 5-year rolling case counts less than 10

Graphs include:

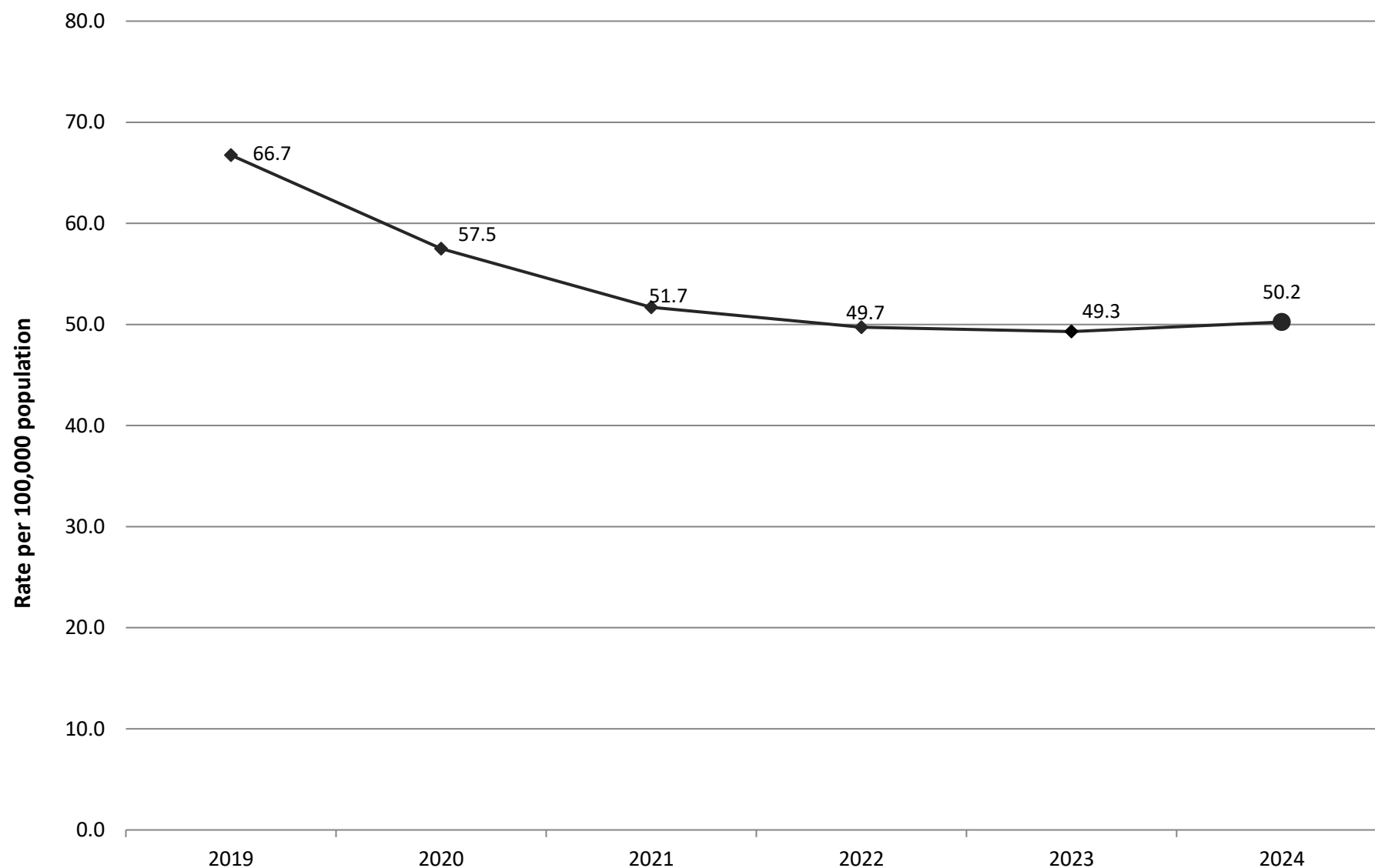
Clostridium *difficile*

Methicillin-resistant Staphylococcus aureus

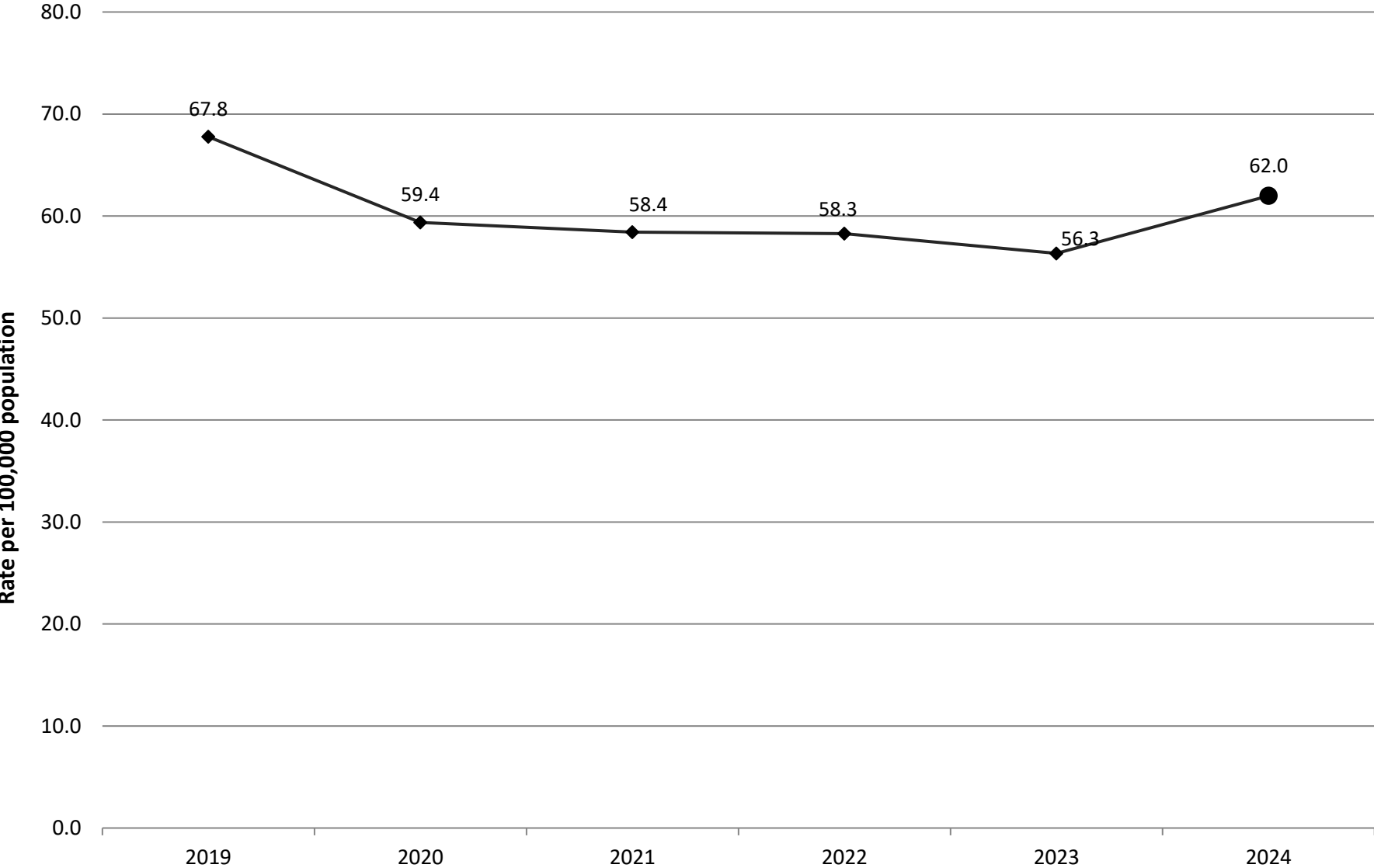
Vancomycin Resistant Enterococci

Clostridium difficile (CDI), PEI

Five-year moving average rate per 100,000 population, 2019-2024

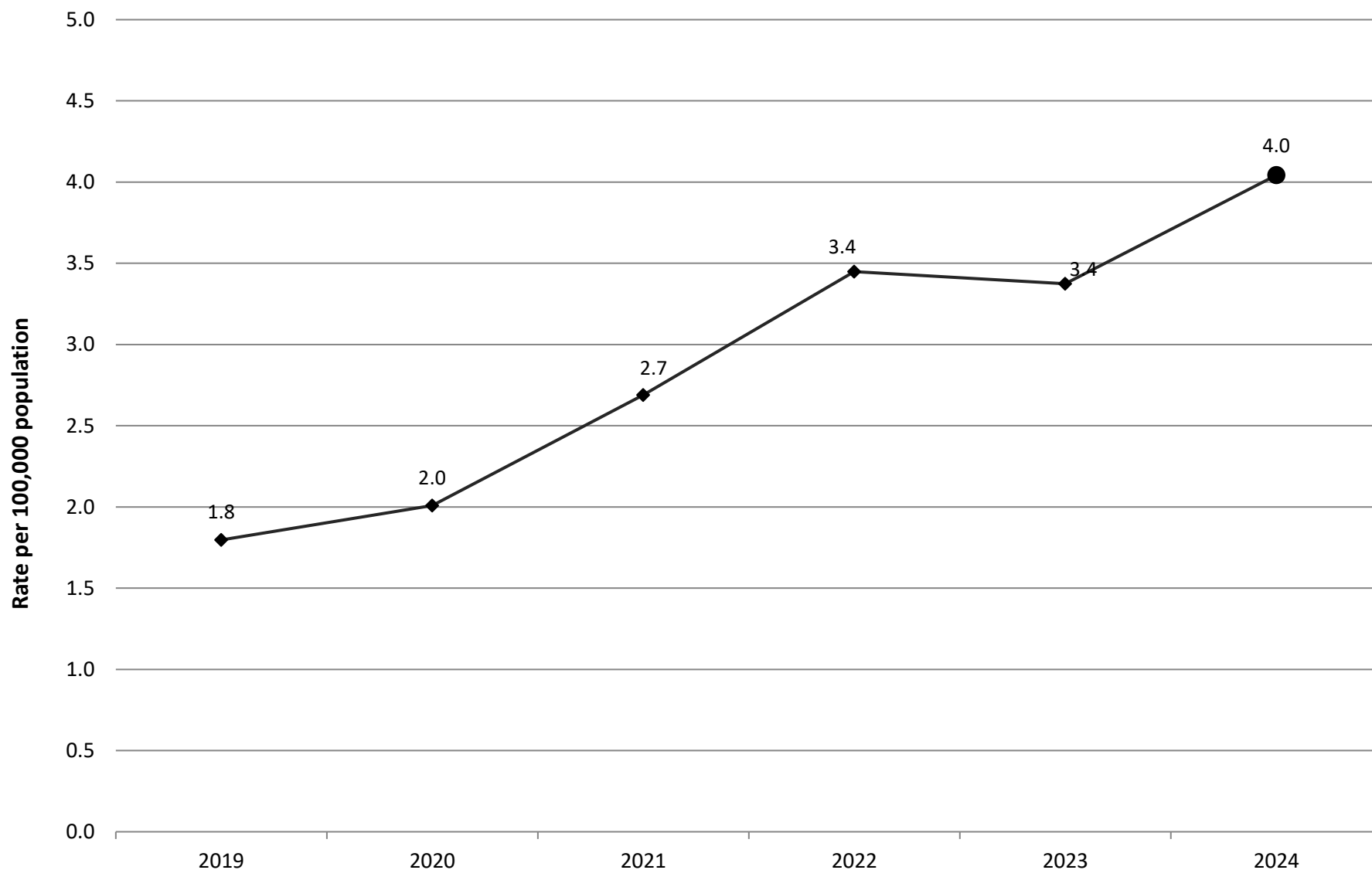


Methicillin Resistant *Staphylococcus aureus* (MRSA), PEI
Five-year moving average rate per 100,000 population, 2019-2024



Vancomycin Resistant Enterococci (VRE), PEI

Five-year moving average rate per 100,000 population, 2019-2024



Communicable Diseases - Diseases Preventable by Routine Vaccination

Number of Diagnosed Cases and 5-year Moving Average Rate per 100,000 Population, PEI 2019-2024

	Number of Cases per Year						5-year Moving Average Rate					
	2019	2020	2021	2022	2023	2024	2019	2020	2021	2022	2023	2024
Congenital Rubella Syndrome	0	0	0	0	0	0	—	—	—	—	—	—
Diphtheria	0	0	0	0	0	0	—	—	—	—	—	—
Invasive Haemophilus influenzae, Non B (non-vaccine preventable)	1	1	1	1	2	3	—	—	—	—	—	—
Invasive Haemophilus influenzae, Serotype B	0	0	0	0	1	0	—	—	—	—	—	—
Measles	0	0	0	0	0	0	—	—	—	—	—	—
Mumps	0	0	0	0	0	0	—	—	—	—	—	—
Pertussis	2	2	0	0	1	202*	—	—	—	—	—	—
Poliomyelitis	0	0	0	0	0	0	—	—	—	—	—	—
Rotavirus	15	2	3	4	19	2	7.1	6.5	5.3	3.6	4.1	4.8
Rubella	0	0	0	0	0	0	—	—	—	—	—	—
Tetanus	0	0	0	0	0	0	—	—	—	—	—	—
Varicella (Chicken Pox)	2	1	1	4	4	6	1.5	1.3	1.5	1.9	2.2	2.7

*A provincial pertussis outbreak was declared in July 2024 and was declared over in March 2025

Rates were not calculated for 5-year rolling case counts less than 10

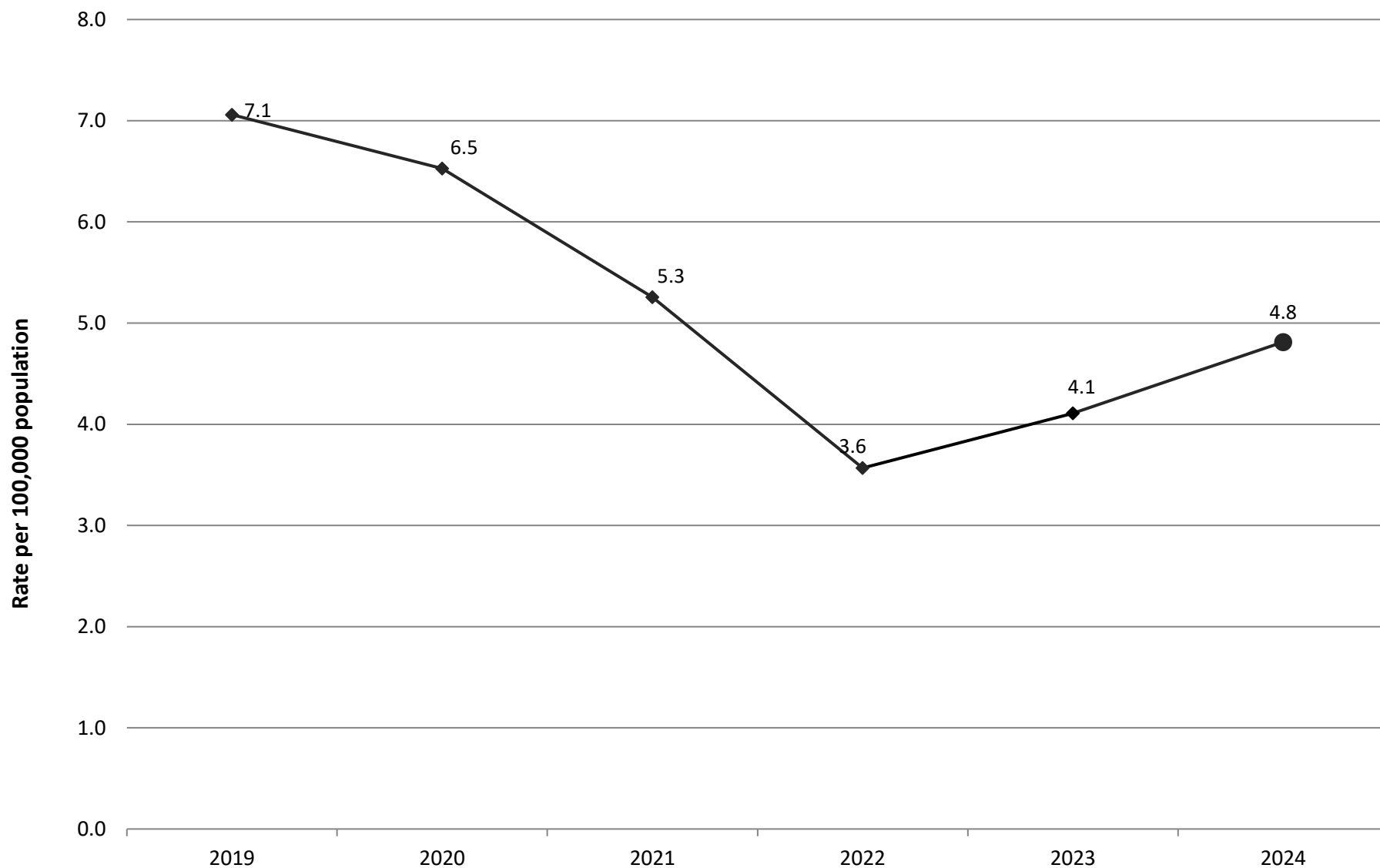
Graphs include:

Rotavirus

Varicella (Chicken Pox)

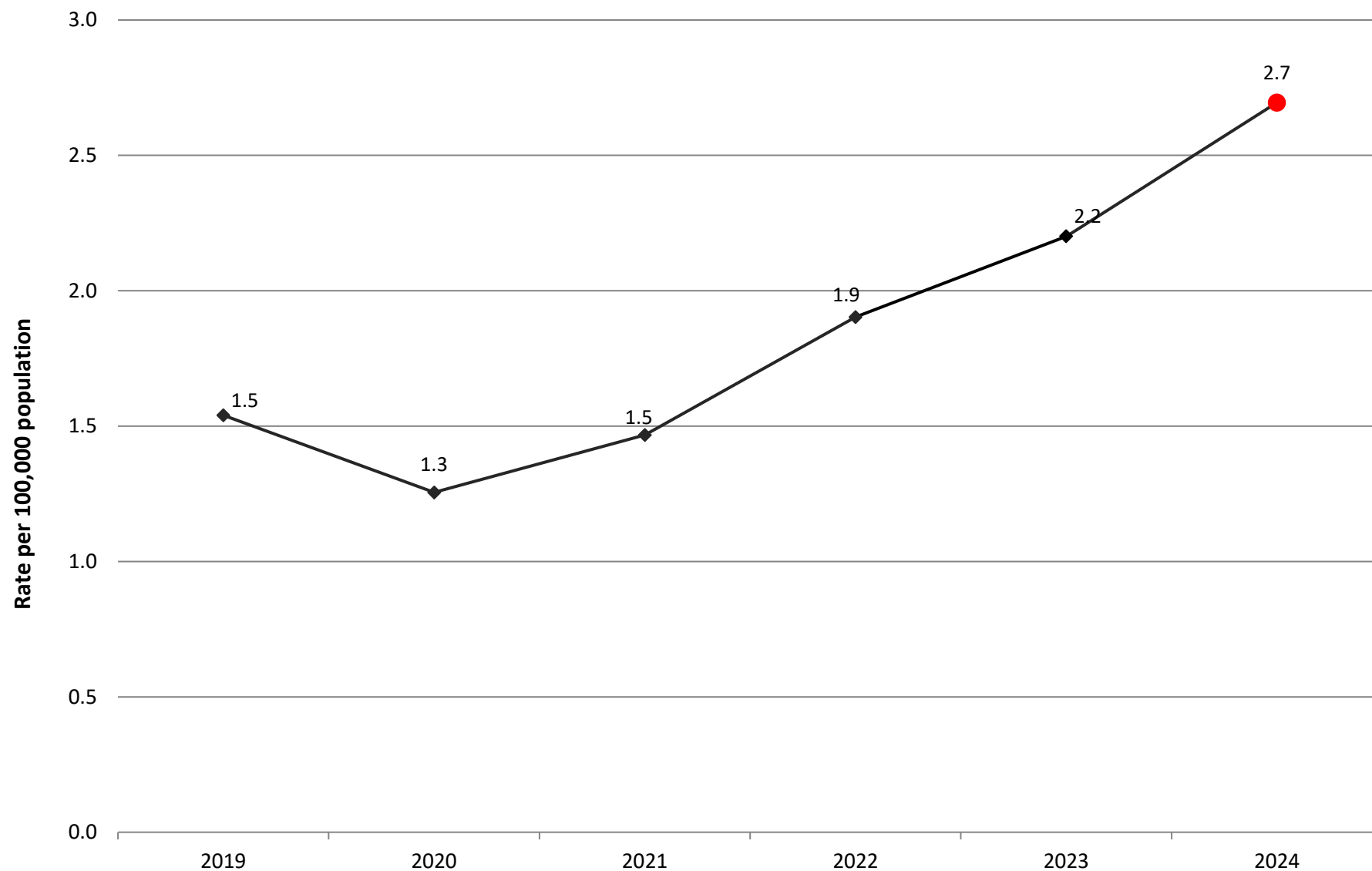
Rotavirus, PEI

Five-year moving average rate per 100,000 population, 2019-2024



Varicella (Chicken Pox), PEI

Five-year moving average rate per 100,000 population, 2019-2024



Communicable Diseases - Bloodborne Pathogens and Sexually Transmitted Infections

Number of Diagnosed Cases and 5-year Moving Average Rate per 100,000 Population, PEI 2019-2024

	Number of Cases per Year						5-year Moving Average Rate					
	2019	2020	2021	2022	2023	2024	2019	2020	2021	2022	2023	2024
Chlamydia	404	331	332	335	415	419	232.4	228.1	222.1	217.9	220.2	225.0
Gonorrhea	18	14	18	21	28	23	10.4	10.5	12.1	12.4	13.2	13.9
Hepatitis B	24	17	16	13	22	16	14.0	11.9	11.2	10.0	9.8	9.8
Hepatitis C	52	34	28	36	24	33	25.2	24.5	21.3	18.4	17.8	17.9
HIV	9	4	4	5	2	5	3.2	3.6	2.9	2.4	2.3	2.3
LGV	0	0	0	0	0	0	–	–	–	–	–	–
Syphilis, infectious	2	1	1	5	5	9	1.5	1.6	1.7	2.5	2.9	3.7

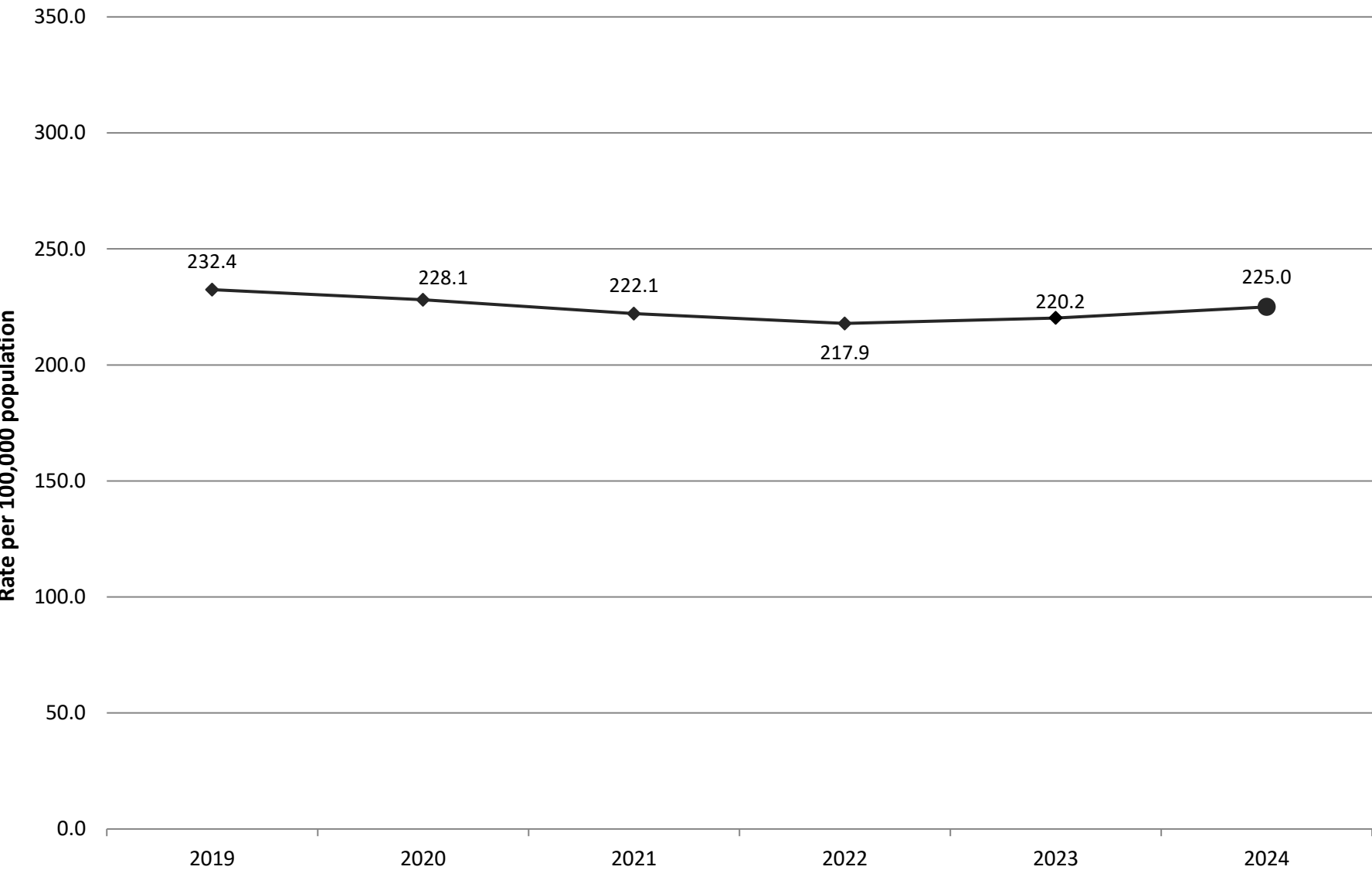
Rates were not calculated for 5-year rolling case counts less than 10

Graphs include:

Chlamydia
Gonorrhea
Hepatitis B
Hepatitis C
HIV
Syphilis, infectious

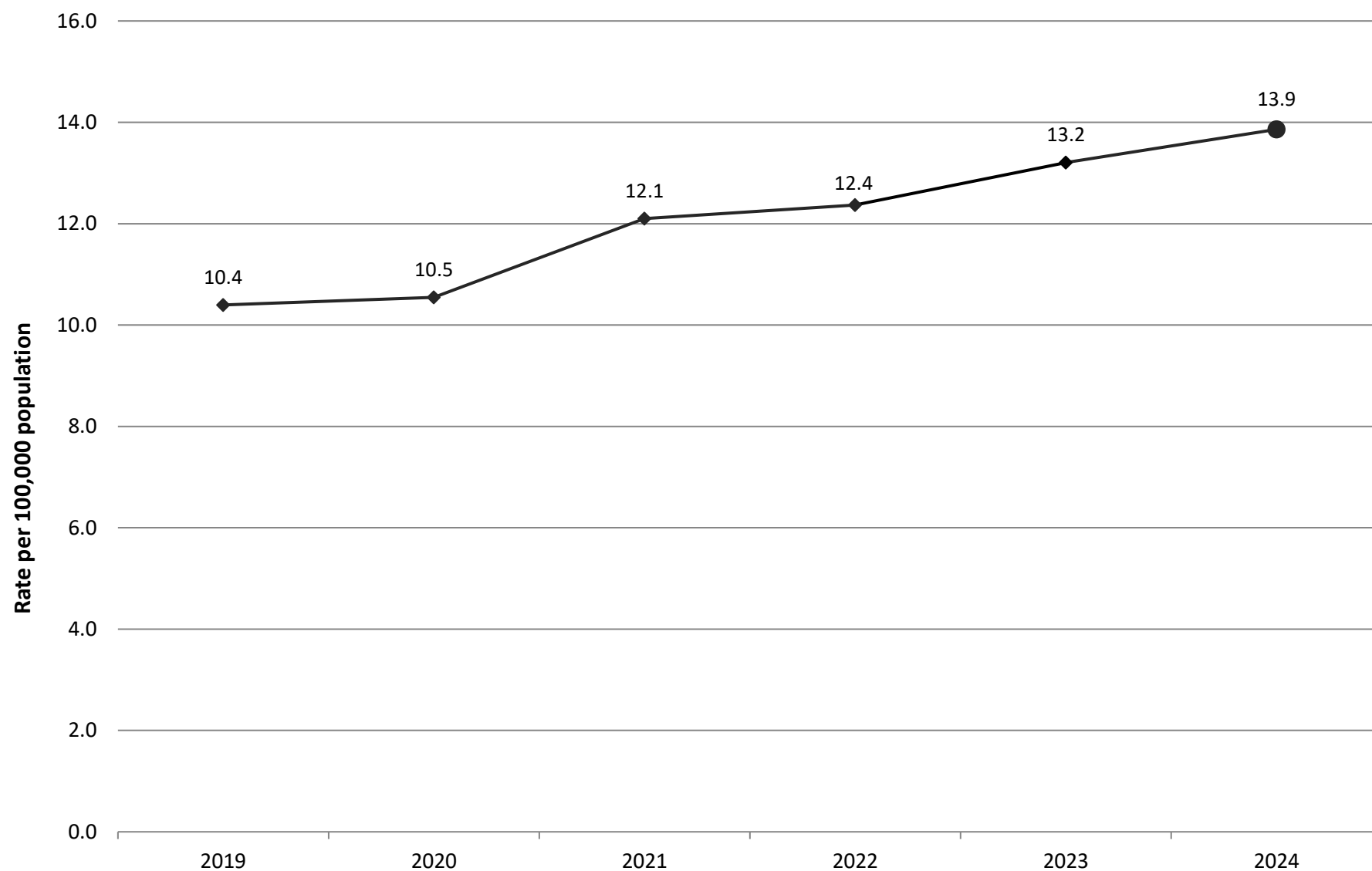
Chlamydia, PEI

Five-year moving average rate per 100,000 population, 2019-2024



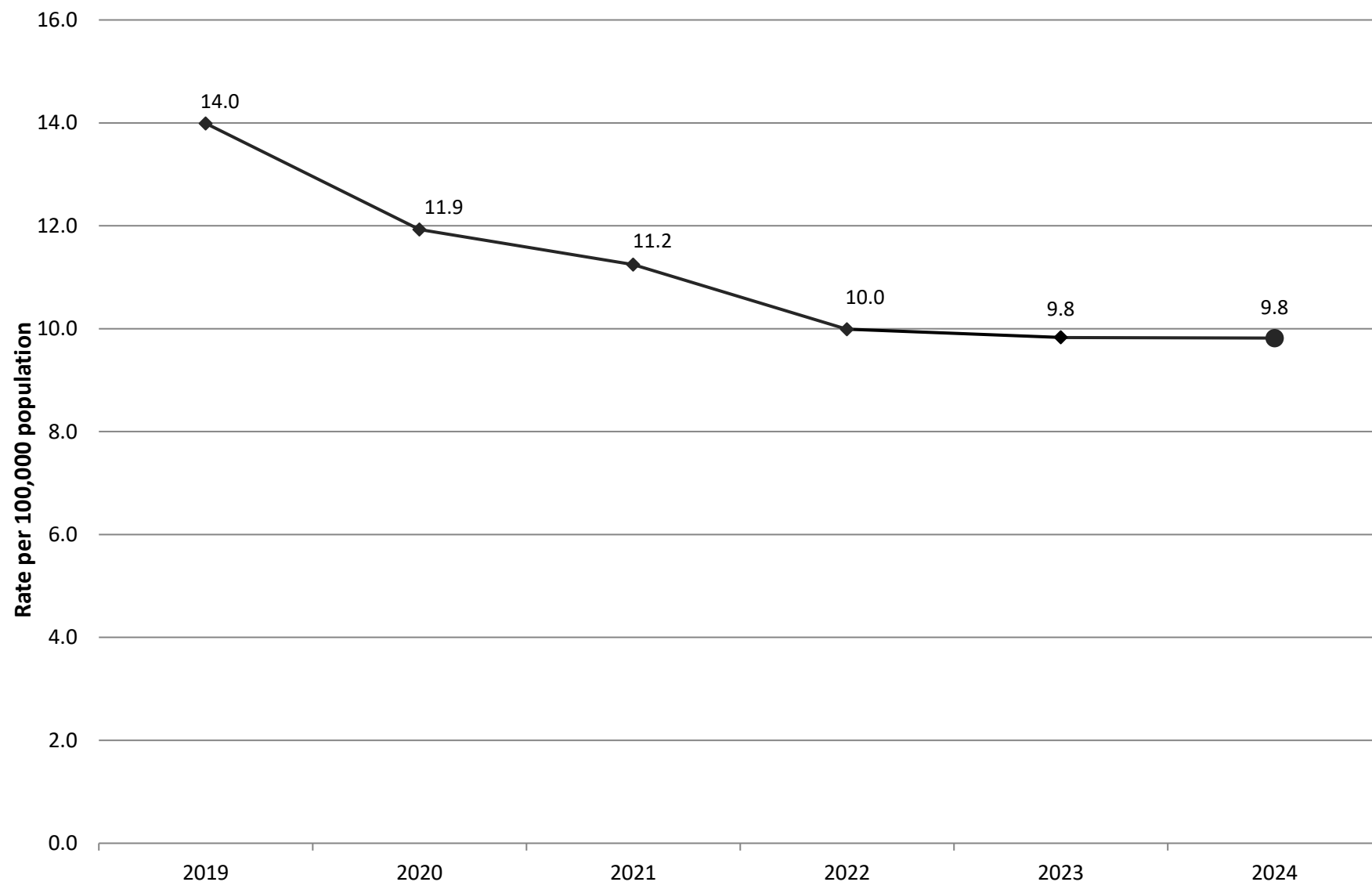
Gonorrhea, PEI

Five-year moving average rate per 100,000 population, 2019-2024



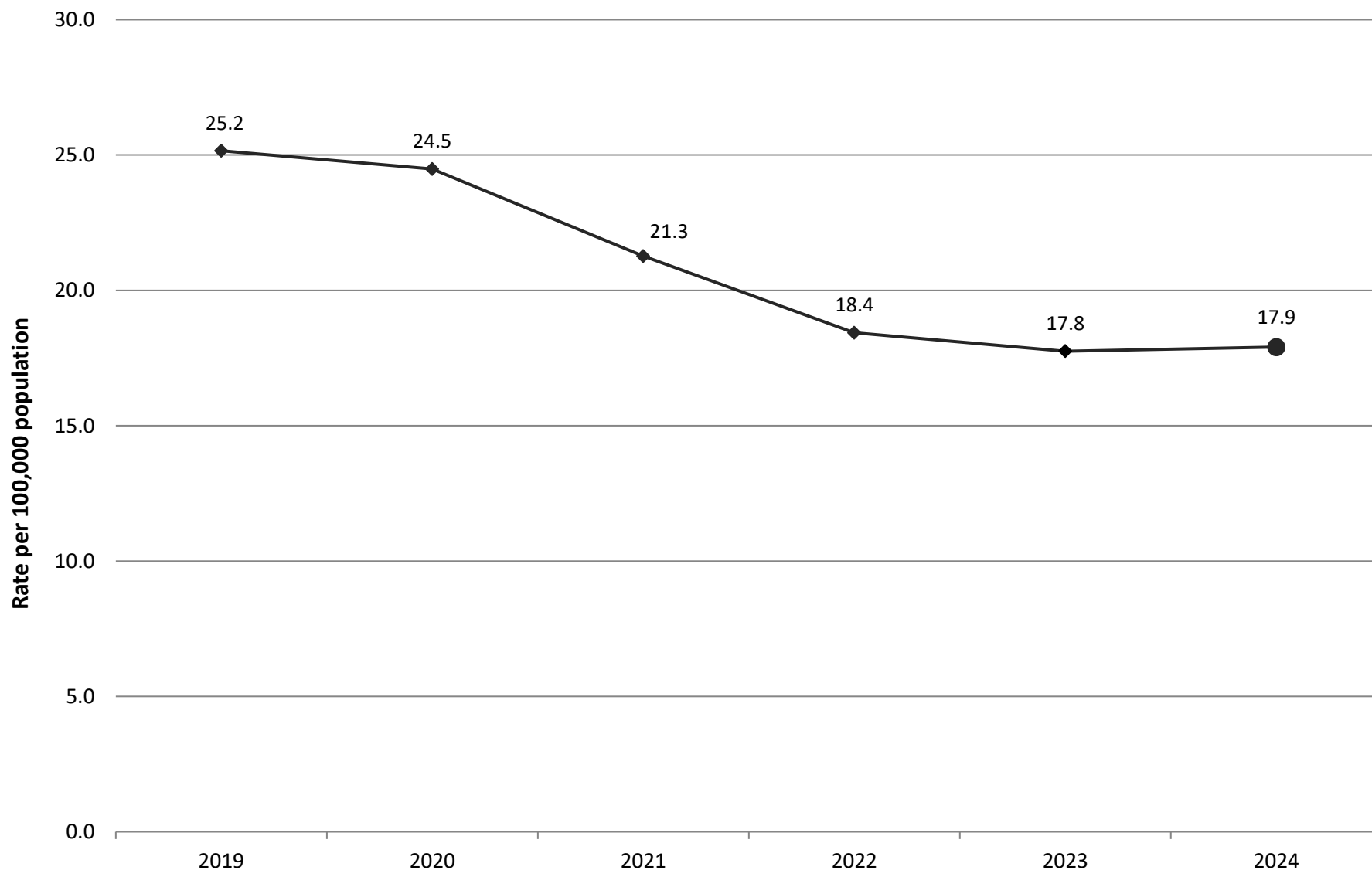
Hepatitis B Virus (HBV), PEI

Five-year moving average rate per 100,000 population, 2019-2024



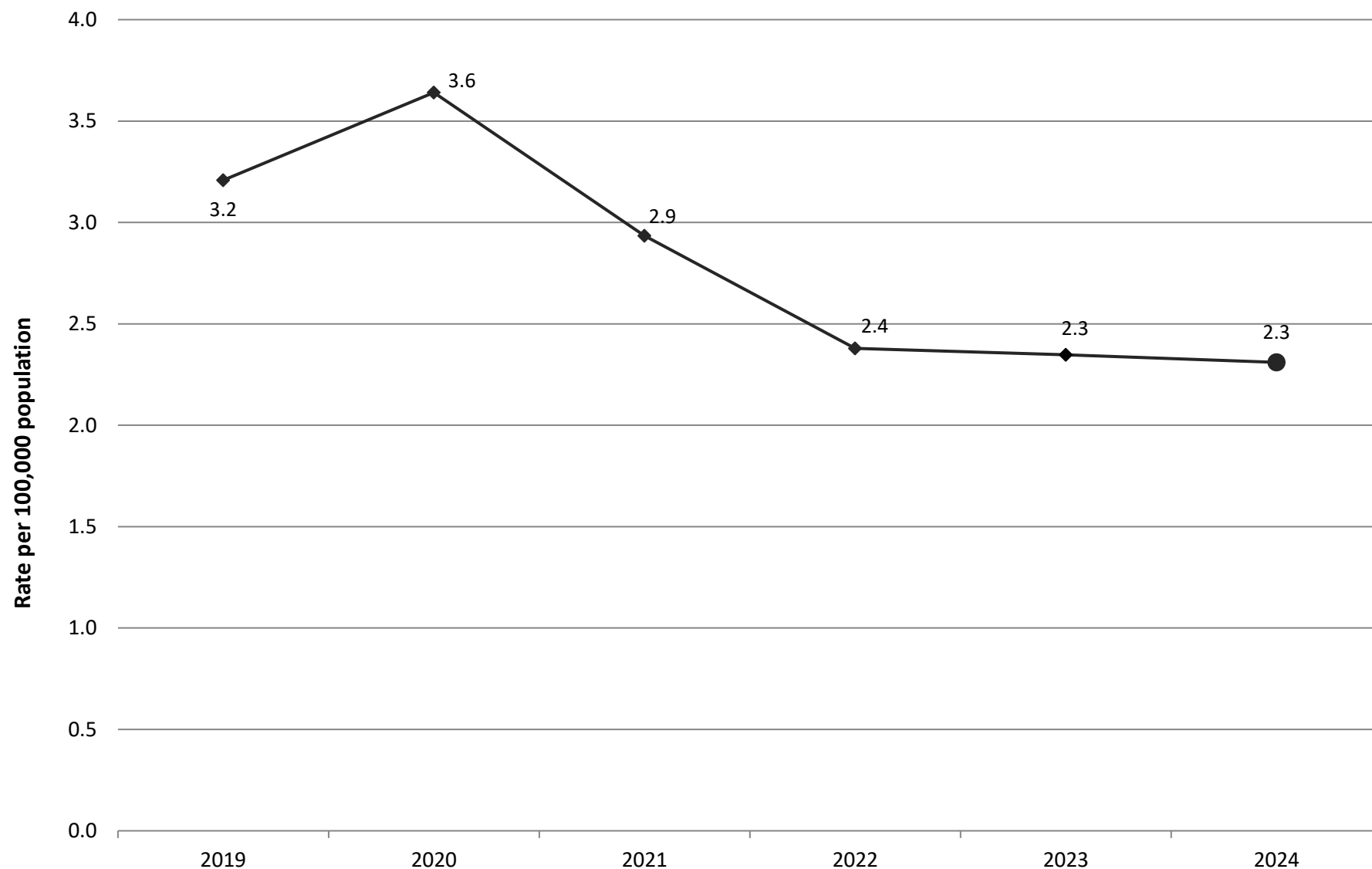
Hepatitis C Virus (HCV), PEI

Five-year moving average rate per 100,000 population, 2019-2024



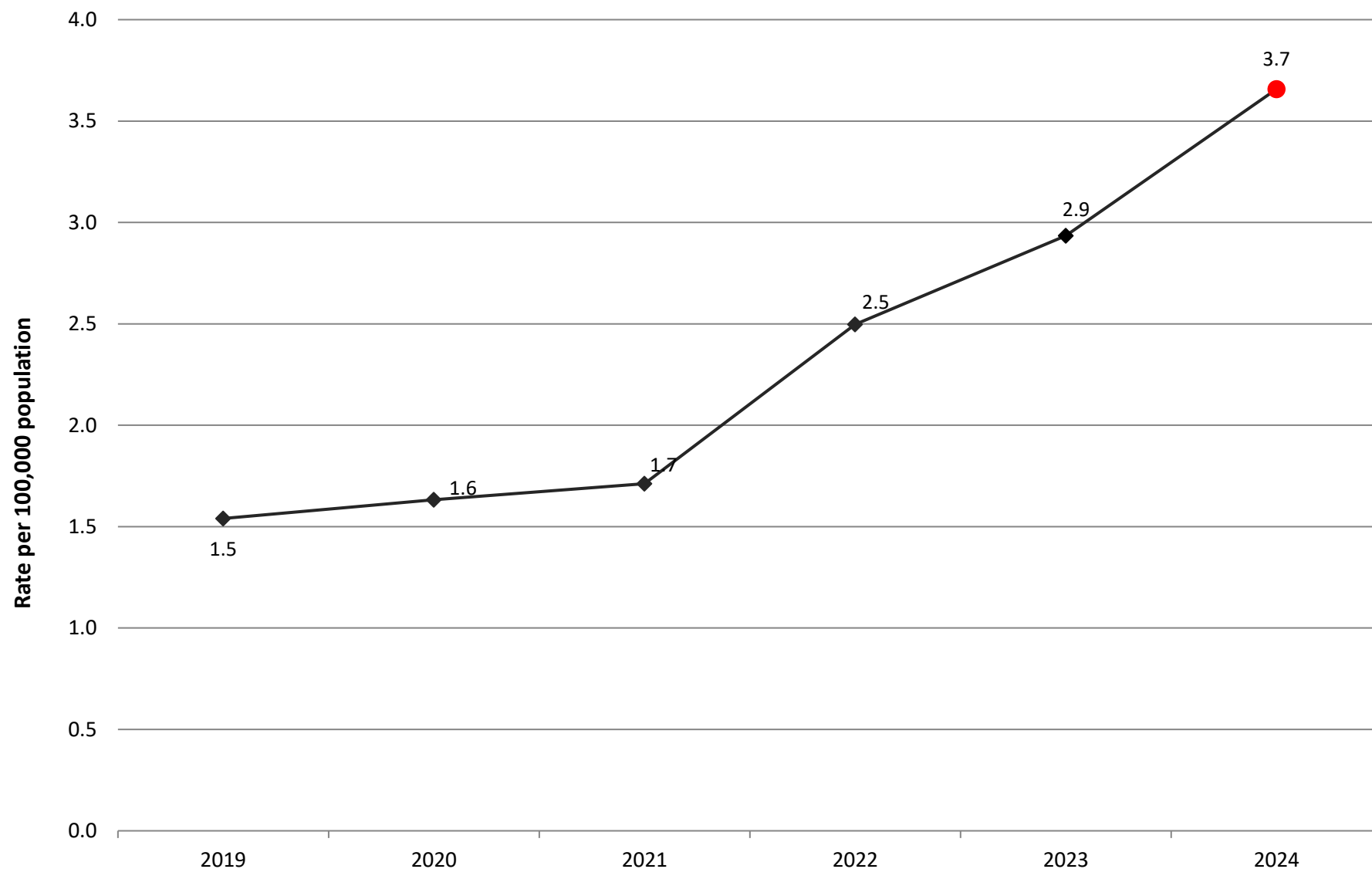
Human Immunodeficiency Virus (HIV), PEI

Five-year moving average rate per 100,000 population, 2019-2024



Infectious syphilis, PEI

Five-year moving average rate per 100,000 population, 2019-2024



Communicable Diseases - Vectorborne and Other Zoonotic Diseases

Number of Diagnosed Cases and 5-year Moving Average Rate per 100,000 Population, PEI 2019-2024

	Number of Cases per Year						5-year Moving Average Rate					
	2019	2020	2021	2022	2023	2024	2019	2020	2021	2022	2023	2024
Anaplasmosis [*]	N/A	N/A	N/A	N/A	0	0	N/A	N/A	N/A	N/A	N/A	N/A
Anthrax	0	0	0	0	0	0	–	–	–	–	–	–
Babesiosis [*]	N/A	N/A	N/A	N/A	0	0	N/A	N/A	N/A	N/A	N/A	N/A
Brucellosis	0	0	0	0	0	0	–	–	–	–	–	–
Dengue Fever [†]	N/A	1	1	0	1	2	N/A	N/A	N/A	N/A	N/A	N/A
Malaria	0	0	1	1	1	2	–	–	–	–	–	–
Mpox [*]	N/A	N/A	N/A	N/A	0	0	N/A	N/A	N/A	N/A	N/A	N/A
Plague	0	0	0	0	0	0	–	–	–	–	–	–
Q-Fever [‡]	N/A	N/A	1	1	0	0	N/A	N/A	N/A	N/A	N/A	N/A
Rabies	0	0	0	0	0	0	–	–	–	–	–	–
Tularemia	0	0	0	0	0	0	–	–	–	–	–	–
West Nile Virus	0	0	0	0	0	0	–	–	–	–	–	–
Yellow Fever	0	0	0	0	0	0	–	–	–	–	–	–
Lyme Disease ^{§¶}	6	1	7	7	5	4	2.3	2.8	3.2	2.9	3.4	3.1

^{*}Reportable since May 2023

[†]Reportable since 2020

[‡]Reportable since 2021

[§]Lab-confirmed cases: 2 in 2019, 1 in 2020, 7 in 2021, 3 in 2022, 4 in 2023, 1 in 2024

[¶]Probable cases: 4 in 2019, 0 in 2020, 0 in 2021, 4 in 2022, 1 in 2023, 3 in 2024

Rates were not calculated for 5-year rolling case counts less than 10

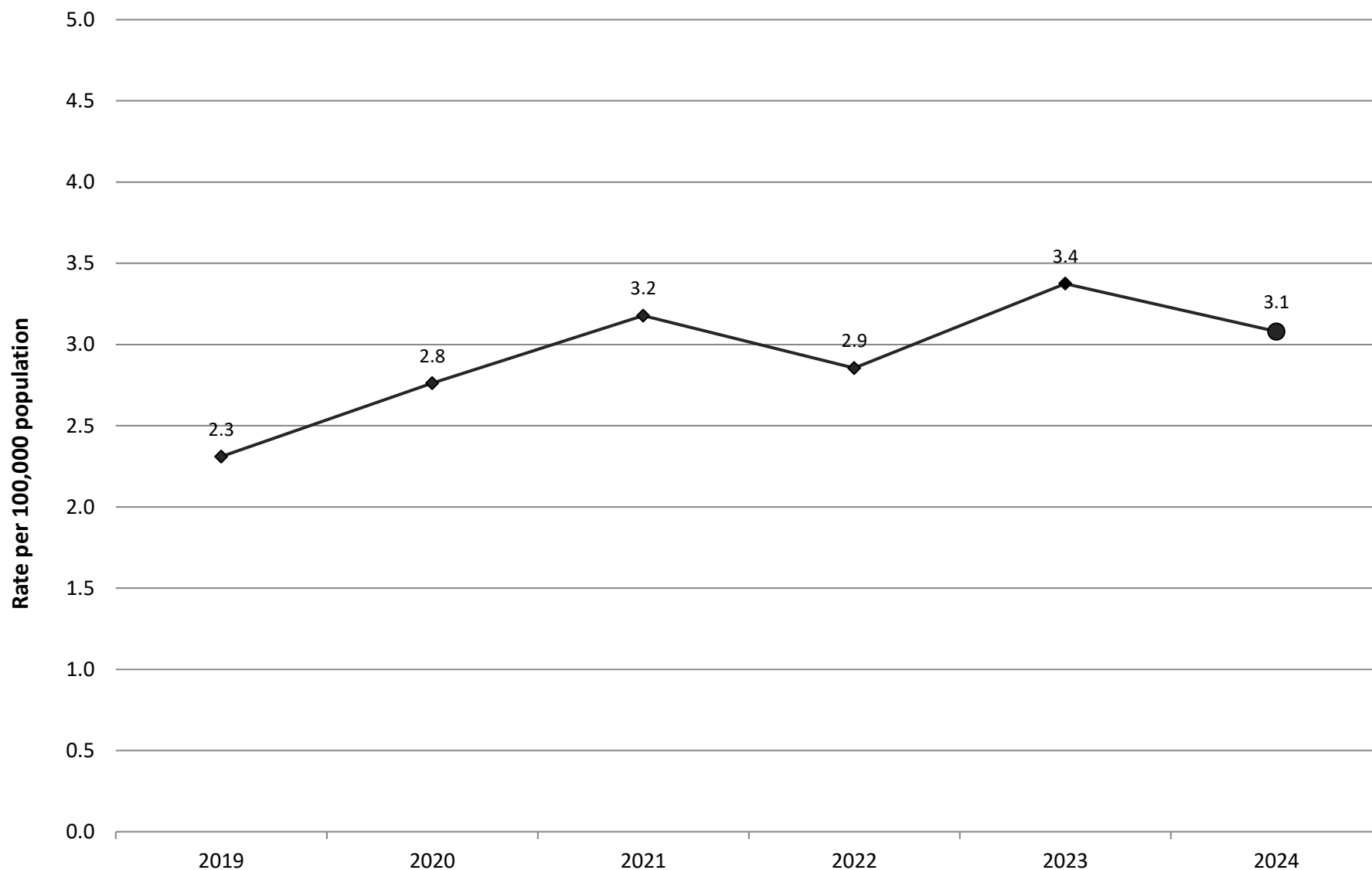
N/A: not available

Graphs include:

Lyme disease

Lyme Disease (LD), PEI

Five-year moving average rate per 100,000 population, 2019-2024



Methodology notes:

- Reported rates are five-year centred moving averages. A five-year centred moving average for a specific year is the average of the data from the two years prior to that year, the specific year, and two years after that year. Moving averages are used to smooth the fluctuations in rates in order to make trends more apparent and to aggregate data with small cell counts. As a result of the methodology, the rates for the last two years of the study period (i.e. 2023 and 2024) are based on less than five years of data and are more heavily influenced by the historical data.
- A change in rate between the most recent year and the most recent five years prior was considered significant if there was a difference of two standard deviations or more.