



**Current level of influenza activity: Baseline**

**Influenza activity trend: Stable**

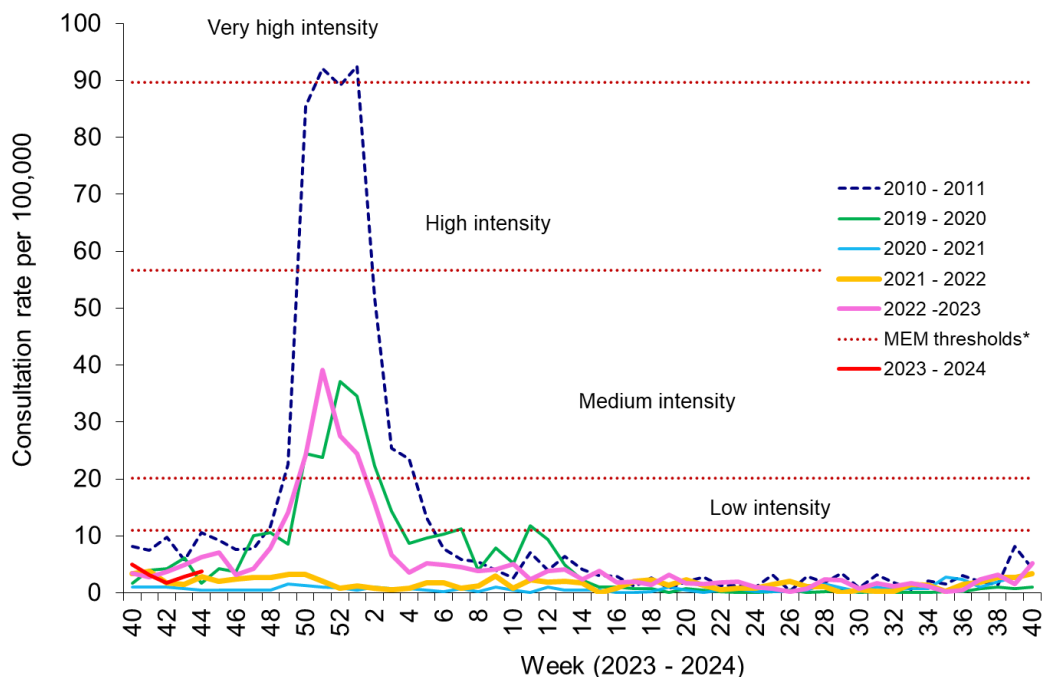
**Confirmed influenza cases since 2023 Week 40: 42** (8 influenza A(H3N2), 7 influenza A(H1N1)pdm09, 11 influenza A untyped and 16 influenza B)

**During Week 44 (ending 06/11/2023) there were eleven cases of influenza. Overall influenza activity remains at baseline levels, but small numbers of cases continue to be detected. COVID-19 cases continue to be detected in patients in hospitals. RSV activity in children under 5 years increased and remains at 'very high' intensity levels. RSV, rhinovirus, adenovirus, enterovirus, and SARS-CoV-2 are the most commonly detected causes of Acute Respiratory Infection (ARI).**

- The **Sentinel GP consultation rate for influenza-like illness (ILI)** in Wales during Week 44, was 3.8 consultations per 100,000 practice population (Table 1). This is an increase compared to the previous week (2.9 consultations per 100,000. Figure 1).
- The **Sentinel GP consultation rate for Acute Respiratory Infections (ARI)** was 218.8 per 100,000 practice population during Week 44 (Table 2 and Figure 3). This is an increase compared to the previous week (201.3 per 100,000). During week 44 Lower Respiratory Tract Infections increased to 83.9 per 100,000 and Upper Respiratory Tract Infections increased to 136.4 per 100,000 compared to the previous week.
- The percentage of calls to **NHS Direct Wales** which were 'influenza-related' (cold/flu, cough, fever, headache, and sore throat) during Week 44 decreased to 19.1% (Figure 13).
- During Week 44, 743 specimens received multiplex respiratory panel testing from patients attending hospitals. **Seven tested positive for influenza (three for influenza A(H1N1), two for influenza A(H3N2), one for influenza A(not subtyped) and one for influenza B).** Overall influenza test-positivity remained stable at 0.9%. In addition, there were: 204 RSV, 201 rhinovirus, 49 adenovirus, 48 enterovirus, 39 SARS-CoV-2, 22 mycoplasma, 16 parainfluenza, 13 hMPV and one seasonal coronavirus positive samples (Figure 5). Additionally, 852 samples from patients were tested for influenza, RSV and SARS-CoV-2 only. Many of these tests may be associated with screening activities rather than diagnostic testing. Of the 852 samples, 145 were positive for SARS-CoV-2, 88 RSV, **three** influenza and **one** influenza B (Figure 7). Furthermore, during week 44, 61 respiratory specimens were tested from patients in intensive care units (ICU) of which none were positive for influenza (Figure 8).
- There were 84 surveillance samples from patients with ILI symptoms collected by **sentinel GPs and community pharmacies** during Week 44. Of the 84 samples, 19 tested positive for rhinovirus, 12 for RSV, nine for enterovirus, six for parainfluenza, five for mycoplasma, three for SARS-CoV-2, one for adenovirus, one for hMPV, and one for bocavirus (as at 08/11/2023) (Figure 4).
- From all samples where influenza subtyping information was available during week 44 (specimens receiving multiplex respiratory panel testing, from patients attending hospitals, and surveillance samples collected by sentinel GPs and community pharmacies) three were influenza A(H1N1), two influenza A(H2N2), one influenza B, and one influenza A(not subtyped) (Figure 6).
- **Confirmed RSV case incidence in children aged under 5 further increased in the most recent week and remains at very high intensity levels (compared to historic levels before 2021).** In week 44 there were 146.9 confirmed cases per 100,000 in this age group. The provisional MEM threshold in Wales which predicts the start of the annual RSV season in children younger than five years is 6.3 confirmed cases per 100,000 (Figure 9).
- The 7-day rolling sums of cases hospitalised within 28 days of an influenza or RSV positive test result in the community (or up to two days post-admission) were 0 and 112 respectively during Week 44 (Figures 10 & 11) and 43 for SARS-CoV-2 during week 44 (Figure 12).
- During week 44, six **ARI outbreaks** were reported to the Public Health Wales Health Protection team. All outbreaks were reported as COVID-19; all six were in residential homes.
- According to [EuroMoMo](#) analysis, all-cause deaths in Wales were not in excess during week 43.
- As at 24/10/2023, uptake of influenza vaccination was 56.5% in adults aged 65 years and older, 24.3% in those aged 6 months to 64 years at clinical risk, 22.8% in two- and three-year-old children, 62.9% in children aged four to 10 years and 45.7% in children aged 11 to 15 years (Table 3).

## Respiratory infection activity in Wales

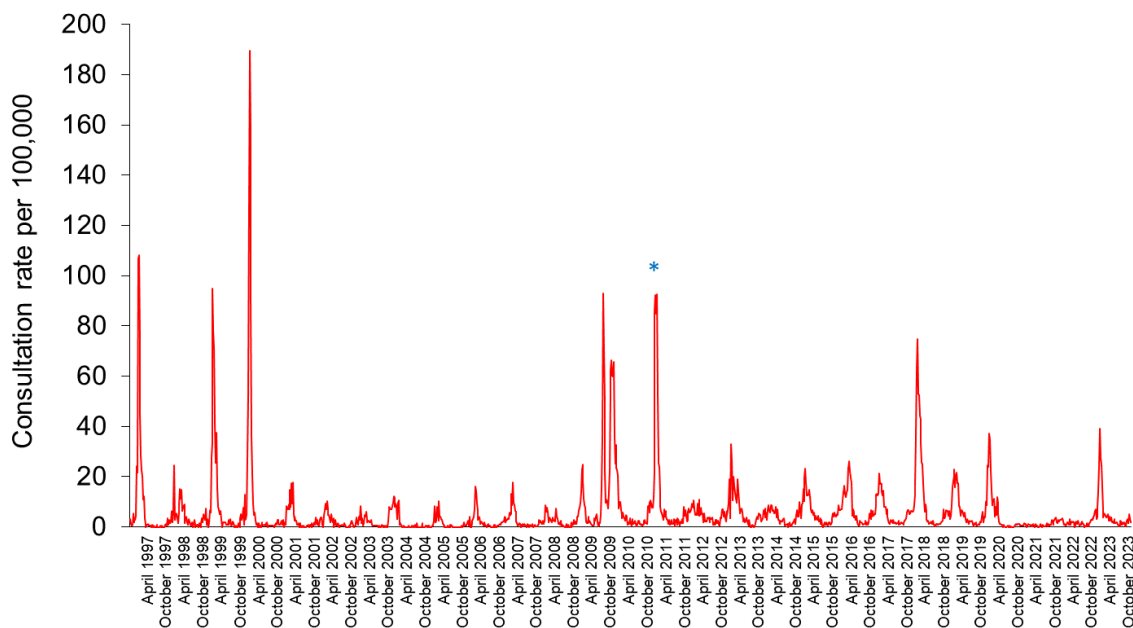
**Figure 1. Clinical consultation rate for ILI per 100,000 practice population in Welsh sentinel practices (as of 06/11/2023)**



\* The Moving Epidemic Method (MEM) threshold calculated for Wales ILI consultation rates is 11.1 per 100,000. MEM thresholds used in this chart are based on influenza from 2010-11 to 2018-19 seasons. Caution should be used when comparing consultation rates from March 2020 onwards to previous periods due to the changes in health-seeking behaviours brought about by the COVID-19 pandemic.

\*\*Clinical consultations for ILI seasons are monitored from W40 to W40, the most recent data is presented in red.

**Figure 2. Clinical consultation rate for ILI per 100,000 practice population in Welsh sentinel practices (Week 48 1996 – Week 44 2023)**



\* Reporting changed to Audit+ surveillance system

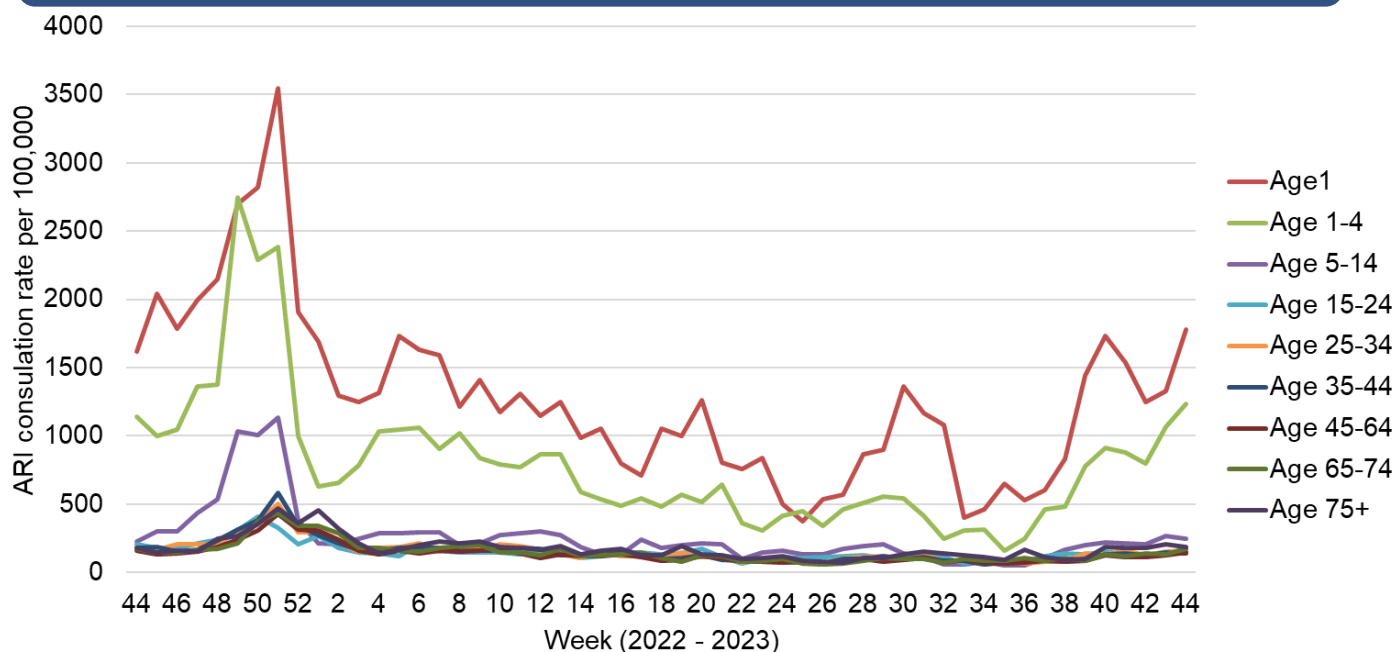
**Table 1. Age-specific consultations (per 100,000) for ILI in Welsh sentinel practices, Week 39 – Week 44 2023 (as of 06/11/2023)**

Age group	39	40	41	42	43	44
< 1	0.0	0.0	0.0	0.0	0.0	0.0
1 - 4	6.9	6.7	0.0	0.0	0.0	7.1
5 - 14	4.6	0.0	0.0	0.0	0.0	2.3
15 - 24	0.0	6.4	4.3	0.0	0.0	2.2
25 - 34	0.0	1.9	3.8	0.0	7.6	4.0
35 - 44	0.0	11.1	1.8	7.6	5.5	5.8
45 - 64	0.9	5.5	5.5	1.9	3.6	5.7
65 - 74	4.4	2.2	2.2	0.0	2.2	2.3
75+	0.0	6.5	2.2	2.2	0.0	0.0
<b>Total</b>	<b>1.5</b>	<b>5.0</b>	<b>3.1</b>	<b>1.7</b>	<b>2.9</b>	<b>3.8</b>

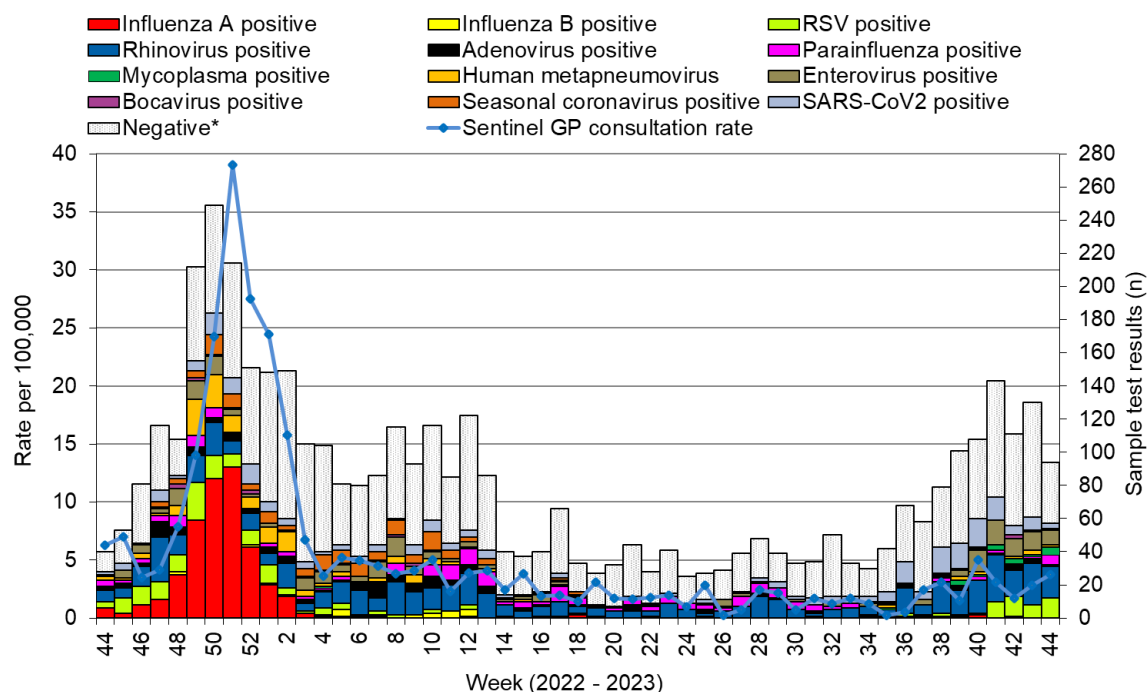
**Table 2. Age-specific consultations (per 100,000) for ARI in Welsh sentinel practices, Week 39 – Week 44 2023 (as of 06/11/2023)**

Age group	39	40	41	42	43	44
< 1	1441.3	1730.5	1534.4	1250.4	1330.2	1780.1
1 - 4	780.2	913.7	881.3	800.7	1068.5	1236.5
5 - 14	203.2	223.9	212.7	205.3	270.0	248.9
15 - 24	132.5	151.5	136.3	122.9	138.3	173.8
25 - 34	138.1	135.8	158.7	124.5	150.7	157.6
35 - 44	100.8	132.6	138.0	125.9	147.0	141.0
45 - 64	83.8	123.7	115.5	112.0	129.1	144.4
65 - 74	84.0	133.7	122.9	142.3	135.8	176.9
75+	102.4	185.8	183.5	180.7	204.8	186.1
<b>Total</b>	<b>147.9</b>	<b>187.8</b>	<b>182.2</b>	<b>169.7</b>	<b>201.3</b>	<b>218.8</b>

**Figure 3. Age-specific consultations (per 100,000) for ARI in Welsh sentinel practices, Week 44 – Week 44 2023 (as of 06/11/2023)**

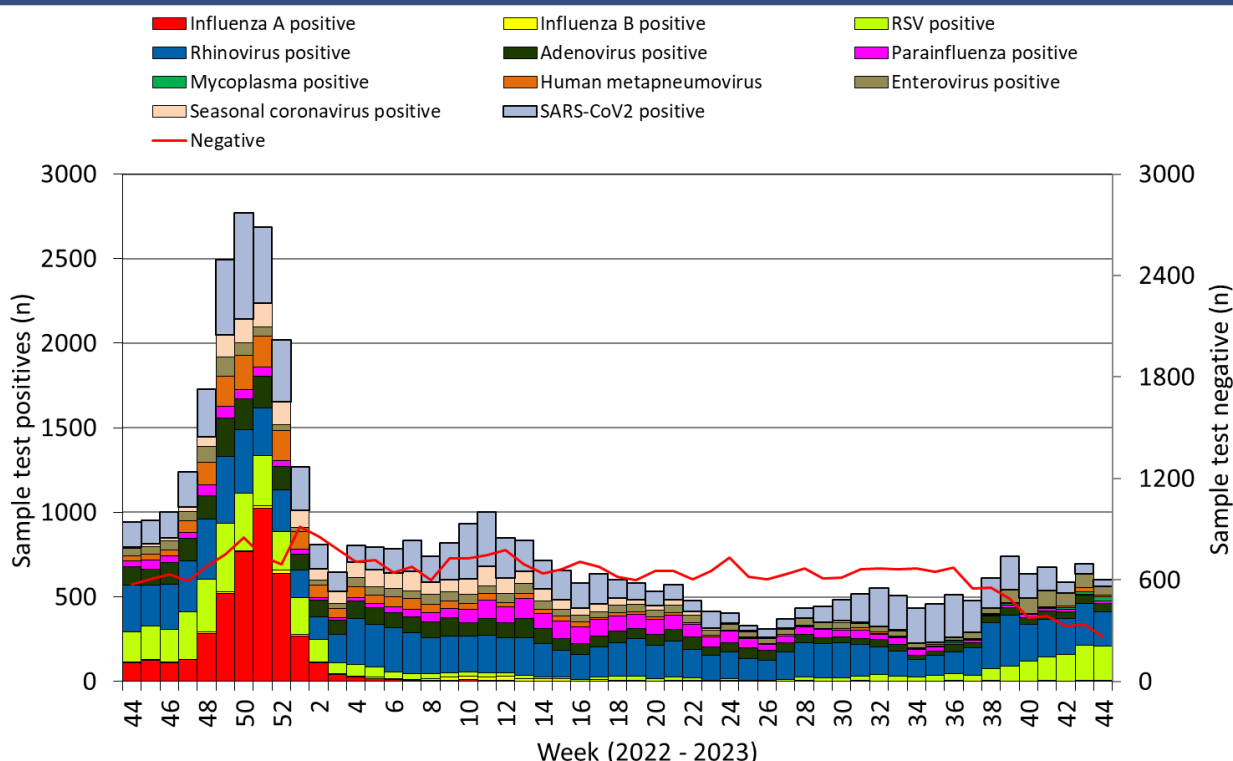


**Figure 4. Specimens submitted for virological testing by sentinel GPs and community pharmacies as of 06/11/2023, by week of sample collection, Week 44 2022 to Week 44 2023**



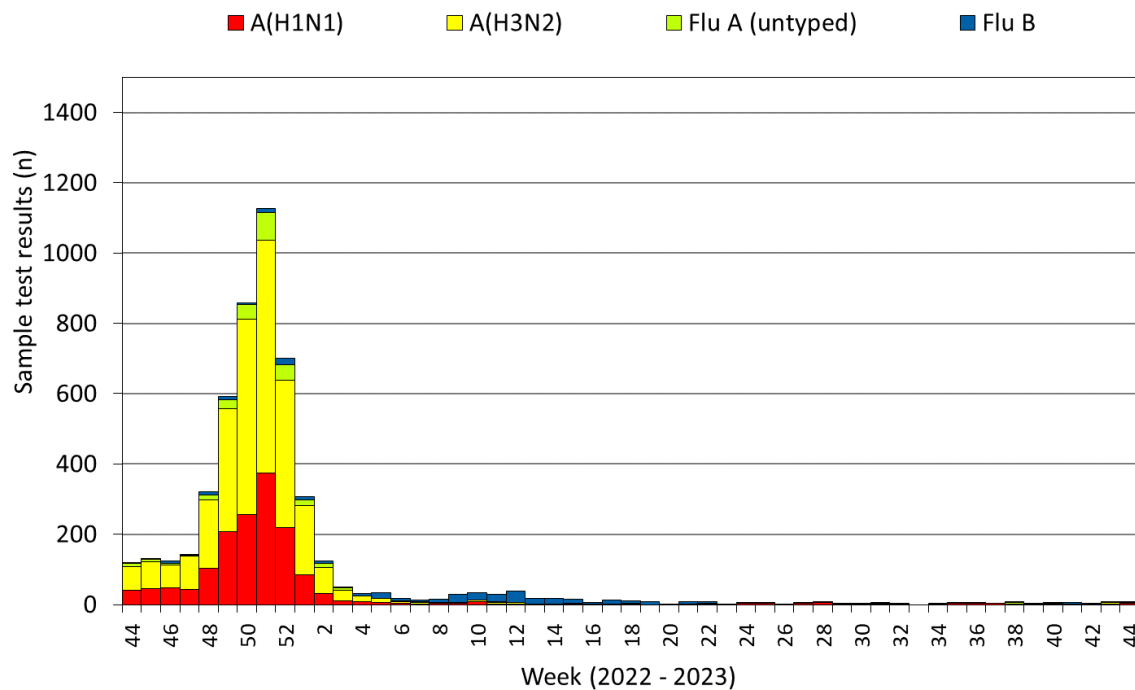
\* Tested negative for influenza, adenovirus, rhinovirus, RSV, parainfluenza, mycoplasma, human metapneumovirus, enterovirus, bocavirus and coronaviruses. Samples which test positive for more than on pathogen will appear more than once in the chart. **Results for the latest week will underestimate activity as not all samples will have been received, tested and authorised at time of writing this report.**

**Figure 5. Specimens submitted for virological testing for hospital patients and non-sentinel GPs as of 06/11/2023 by week of sample collection, Week 44 2022 to Week 44 2023.**

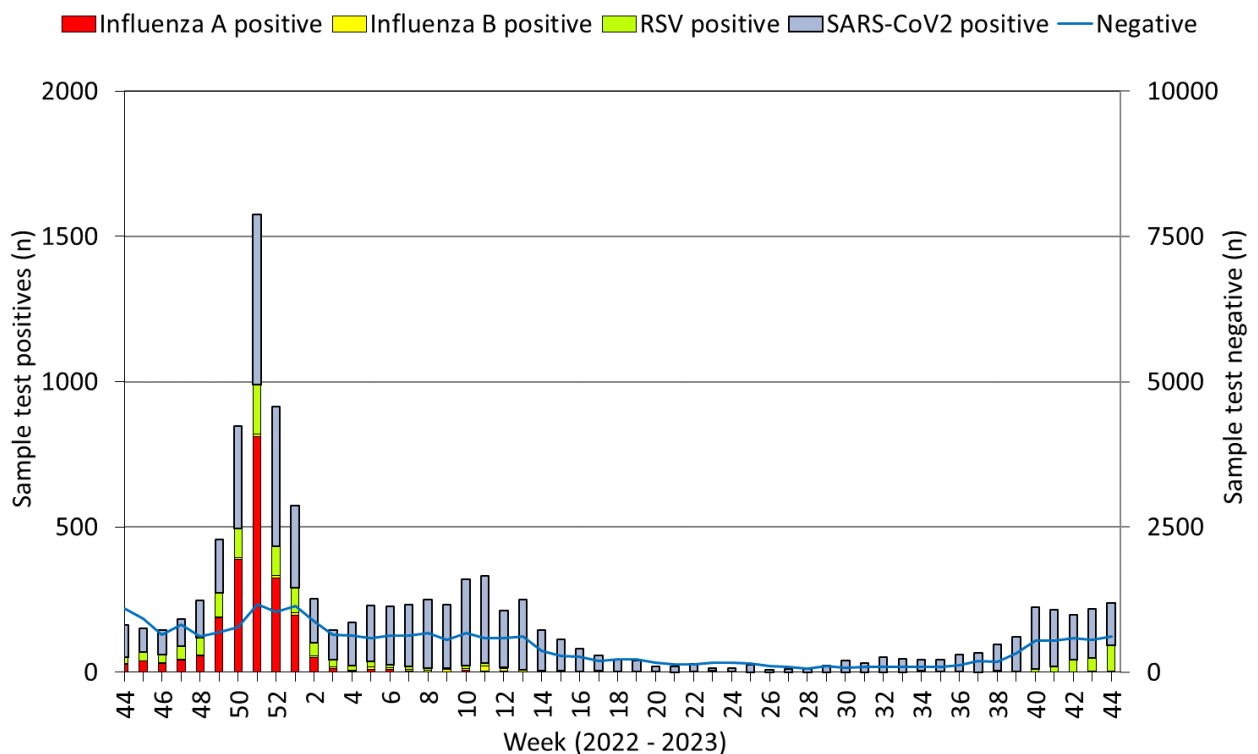


This chart summarises respiratory panel test data and does not include data for patients tested SOLEY for SARS-CoV2. Combined data for tests carried out in Public Health Wales Microbiology: Cardiff laboratory, provided by Public Health Wales Microbiology Cardiff Specialist Virology Centre. This chart summarises individual test results, patients who are positive for multiple infections within a given week will appear multiple times. Samples which test positive for more than on pathogen will appear more than once in the chart.

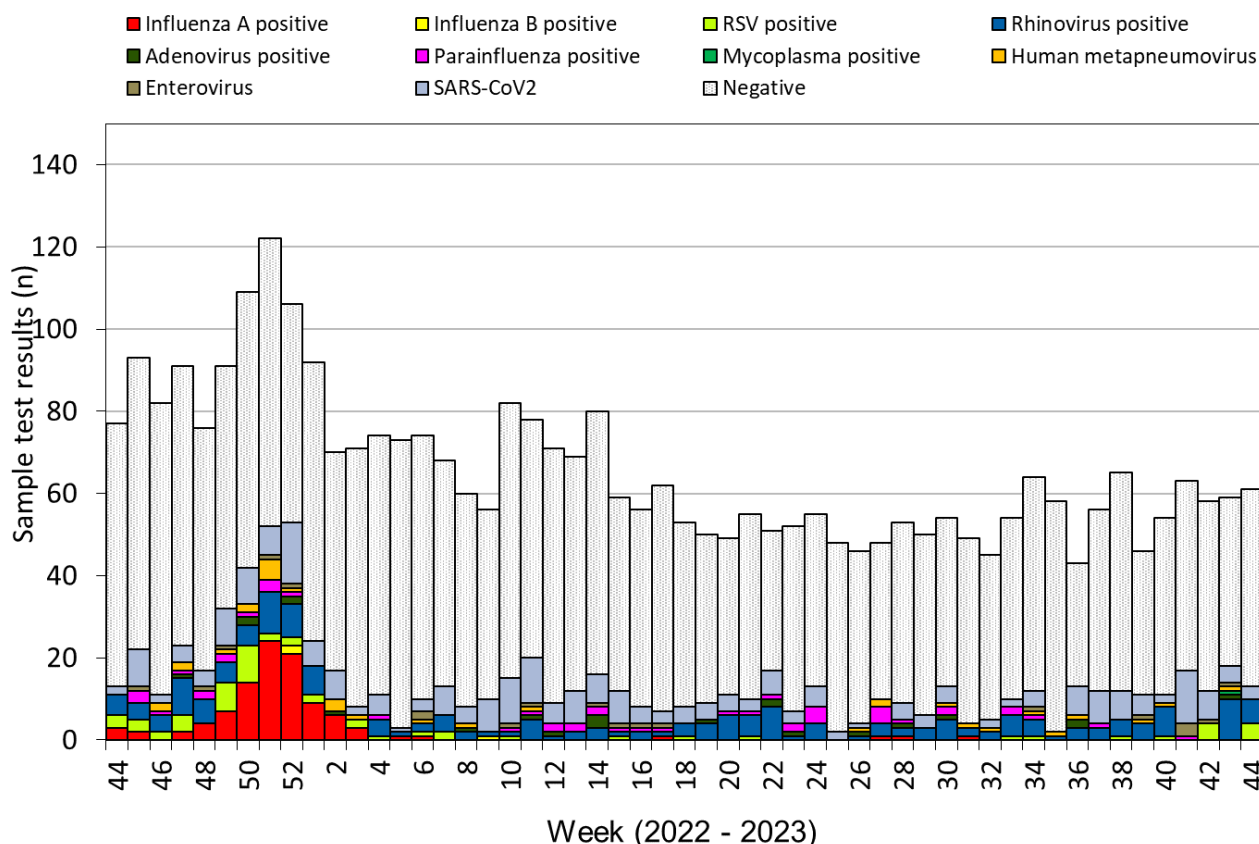
**Figure 6. Flu subtypes based on specimens submitted for virological testing by sentinel GPs and community pharmacies, hospital patients, and non-sentinel GPs, as of 06/11/2023 by week of sample collection, Week 44 2022 to Week 44 2023.**



**Figure 7. Specimens from hospital patients submitted for RSV, Influenza and SARS-CoV2 testing only, as of 06/11/2023 by week of sample collection, Week 44 2022 to Week 44 2023.**

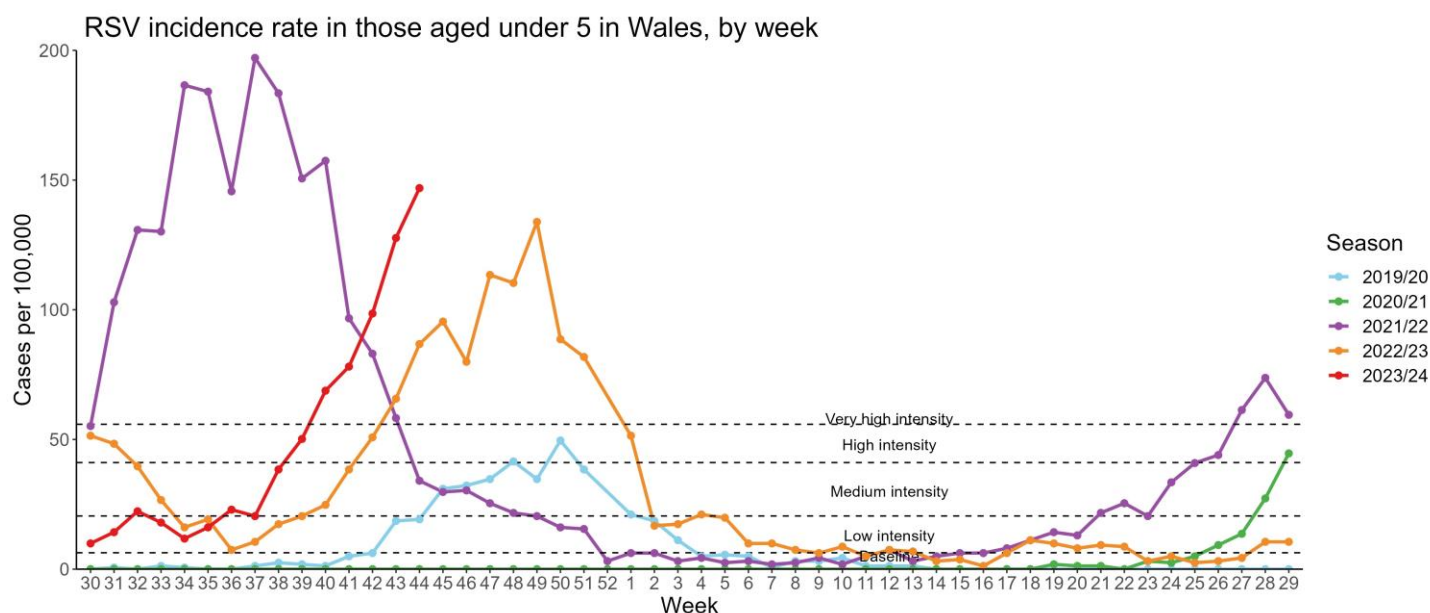


**Figure 8. Specimens submitted for virological testing for ICU patients, by week of sample collection, Week 44 2022 to Week 44 2023.**



This chart summarises respiratory panel test data and does NOT include data for patients tested SOLELY for SARS-CoV2. Samples which test positive for more than one pathogen will appear more than once in the chart.

**Figure 9. RSV incidence rate per 100,000 population aged under five years, week 30 2019 to Week 44 2023.**

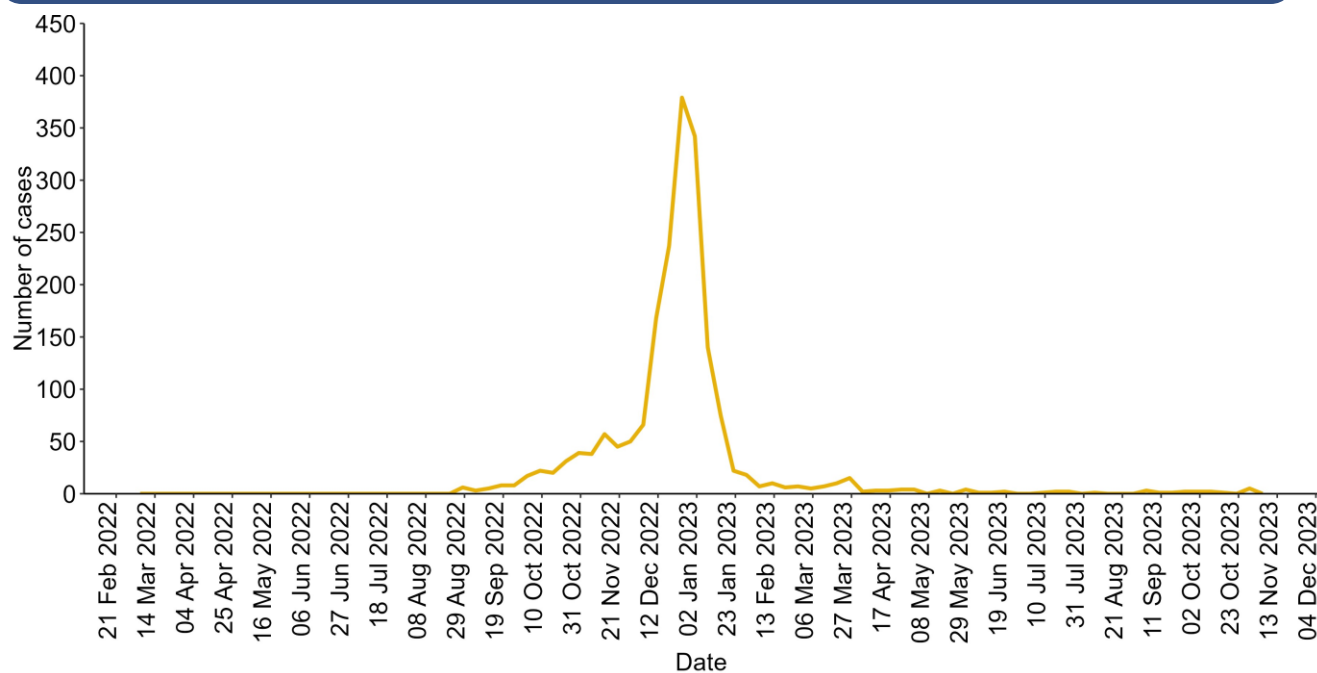


\*RSV seasons are monitored from W30 to W29, the most recent data is presented in red

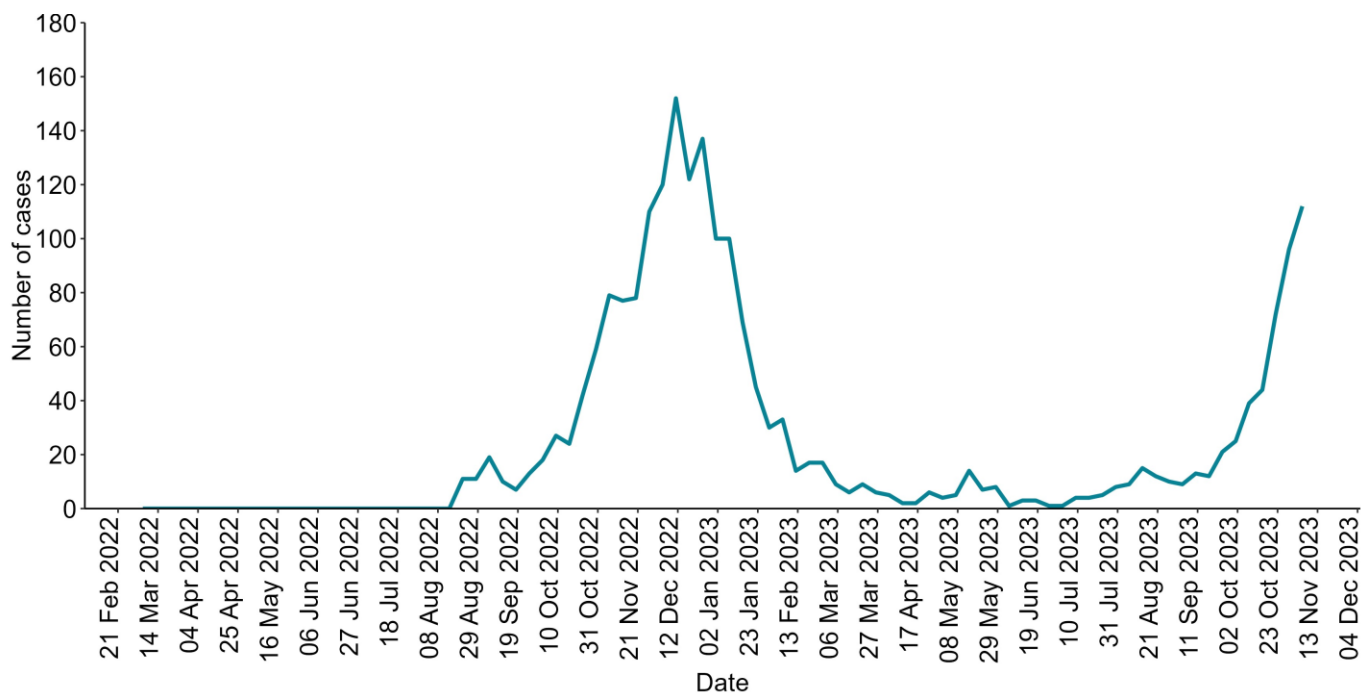


## ARI – Hospital admissions

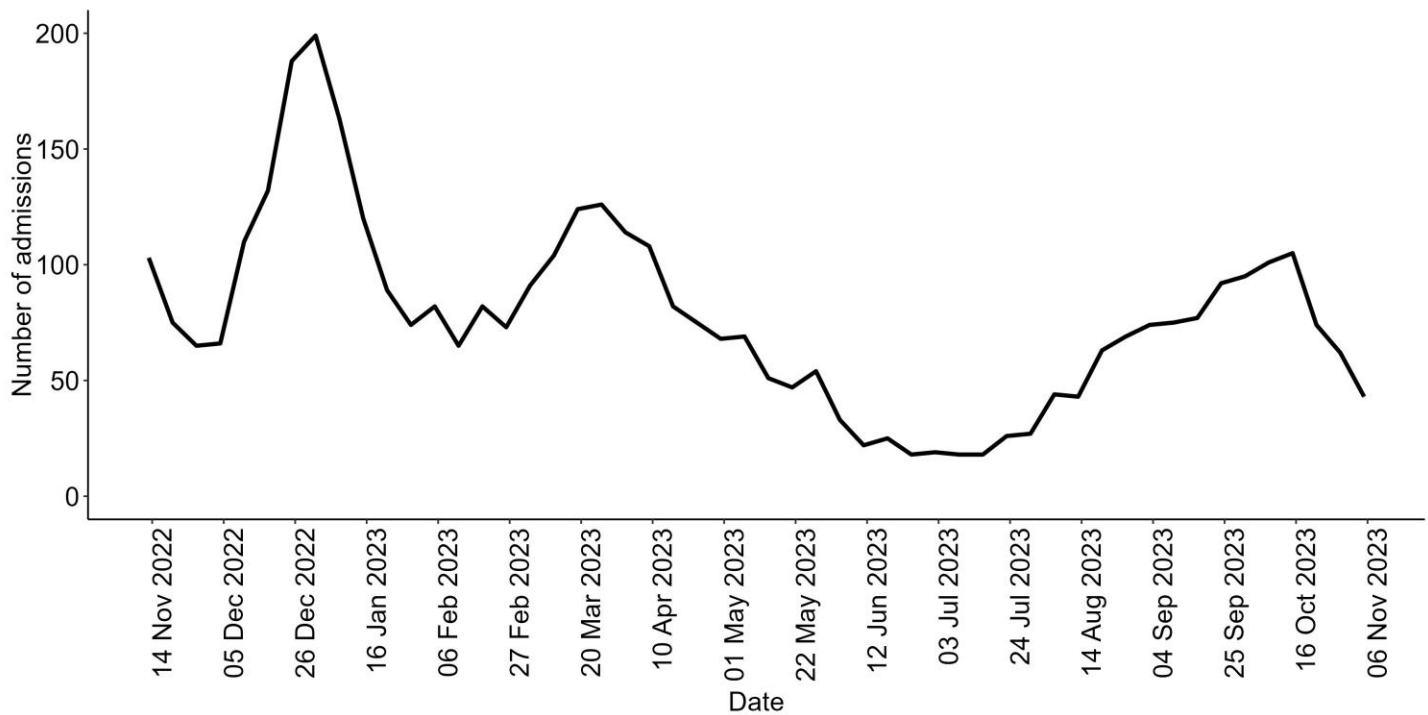
**Figure 10. Seven day rolling sum of cases hospitalised in Wales within 28 days of an influenza positive test result in the community (or up to 2 days post-admission), as of 06/11/2023.**



**Figure 11. Seven day rolling sum of cases hospitalised in Wales within 28 days of an RSV positive test result in the community (or up to 2 days post-admission), as of 06/11/2023.**

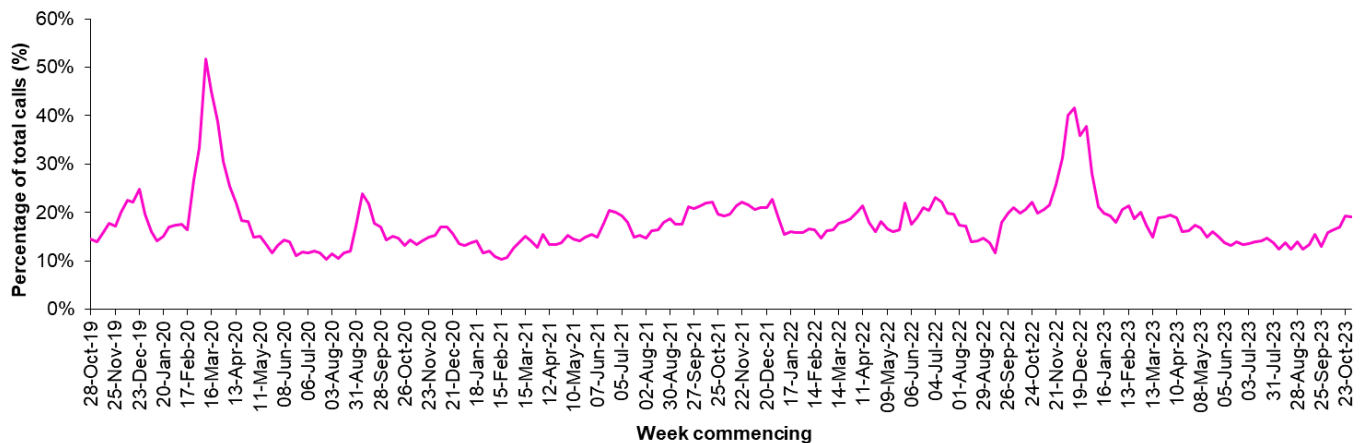


**Figure 12. Seven day rolling sum of cases hospitalised in Wales within 28 days of an Covid-19 positive test result in the community (or up to 2 days post-admission), as of 06/11/2023.**



## Calls to NHS Direct Wales

**Figure 13. Influenza related calls to NHS Direct Wales<sup>1</sup> (as a percentage of total calls) from Week 44 2019 - Week 44 2023.**



<sup>1</sup> Data supplied by Health Statistics and Analysis Unit, Welsh Government.

*Flu related calls are the sum of calls recorded as 'cold/flu', 'cough', 'headache', 'fever' and 'sore throat'. Following changes to the NHS Direct calls system, including the start of the 111 pilot, there has been a change in the way in which denominator data are calculated for this chart, NHS Direct Wales now count the total number of nurse triaged calls (i.e. calls which could have symptom data recorded against them), note that 111 includes out-of-hours calls.*



## Influenza Vaccine Uptake in Wales

**Table 3. Uptake of influenza immunisations in GP Practice patients in Wales 2023/24 (as of 31/10/2023).**

<b>Influenza immunisation uptake in the 2022/23 season</b>	
People aged 65y and older	56.5%
People younger than 65y in a clinical risk group	24.3%
Children aged two & three years	22.8%
Children aged between four & ten years	62.9%
Children aged between 11 & 15 years	45.7%
Total NHS staff	12.4%
NHS staff with direct patient contact	12.2%

The end of season report Influenza in Wales 2019/20 is available to download and contains a full breakdown of vaccination uptake amongst eligible groups.

Link to report: <https://phw.nhs.wales/topics/immunisation-and-vaccines/flu vaccine/annual-influenza-surveillance-and-influenza-vaccination-uptake-reports/>

### Influenza activity – UK and international summary

- As of Week 43, GP ILI consultations decreased slightly to 3.2 per 100,000, in England, and to 3.1 per 100,000 in Scotland (latest data available).
- During Week 42, 72 samples tested positive for influenza were reported in England (35 A(not subtyped), 21 A(H3N2), 15 influenza B, and one influenza A(H1N1)). Overall influenza positivity slightly increased to 1.3%.
- In England, RSV hospitalisations in the under 5 year olds increased to 30.3 per 100,000 in week 43. In Scotland, RSV hospitalisations in the under 1-year olds was 215.9 per 100,000 (latest data available) UK summary data are available from the [UKHSA Influenza and COVID-19 Surveillance Report](#) and [Viral respiratory diseases \(including influenza and COVID-19\) in Scotland](#).
- The WHO and the European Centre for Disease Prevention and Control (ECDC) reported that influenza positivity is still below seasonal epidemic activity threshold which is set at 10%. As of week 40 there were 11 influenza A (8 influenza not subtyped and 3 A(H1N1)) detections and one influenza B.

**Source:** Flu News Europe: <http://www.flunewseurope.org/>

- The WHO reported on 30/10/2023, based on data up to 15/10/2023 that globally, influenza detections remained low, although increased activity was reported in the Northern Hemisphere, Western and Eastern Asia.
  - In Oceania influenza activity decreased with influenza A predominating.
  - In South Africa, influenza activity remained below the seasonal threshold.
  - In the temperate zones of South America influenza detection remained low overall with influenza B viruses predominating especially in Chile.
  - In the Caribbean countries influenza activity remained low overall.
  - In the countries of Central America, influenza activity decreased overall. Influenza B and influenza A(H1N1)pdm09 viruses were predominant.
  - In tropical South America, influenza detections of primarily influenza B viruses were low. SARS-CoV-2 activity increased in Brazil.
  - In tropical Africa, influenza A(H3N2) predominated. Influenza detections remained low in Middle, Eastern Africa and Western Africa.
  - In Southern Asia, influenza activity remained low overall with the exception of Iran, where influenza A increased.
  - In South-East Asia, influenza activity decreased, with continued reporting of predominantly influenza A(H1N1)pdm09 and A(H3N2) virus detections.
  - In the temperate zones of the northern hemisphere, indicators of influenza activity were reported at low levels.
- Source:** WHO influenza update: <https://www.who.int/teams/global-influenza-programme/surveillance-and-monitoring/influenza-updates/current-influenza-update>

- Based on FluNet reporting (as of 31/10/2023), during the period from 02/10/2023 – 15/10/2023 National Influenza Centres and other national influenza laboratories from 124 countries, areas or territories reported influenza surveillance data. The WHO Global Influenza Surveillance and Response System laboratories tested more than 357,752 specimens during that period, of which 11,470 were positive for influenza viruses, 9,518 (83.0%) of those positive for influenza were typed as influenza A (of the subtyped influenza A viruses, 2,239 (32.8%) were influenza A(H1N1)pdm09 and 4,582 (67.2%) were influenza A(H3N2). Of the 9,518 samples testing positive for influenza viruses, 1,952 tested positive for Influenza B (17.02%). **Source:** Flu Net: <https://www.who.int/tools/flunet>

### Update on influenza activity in North America

- The USA Centers for Disease Control and Prevention (CDC) report that influenza activity remained low at national levels but continued to increase across most parts of the country during week 43 (ending 28/10/2023). Nationally, 964 (1.9%) out of 50,459 specimens have tested positive for influenza in week 43 in clinical laboratories nationwide, of these positives 676 (70.1%) were influenza A and 288 (29.9%) were influenza B. Further characterisation has been carried out on 2,213 specimens by public health laboratories, and 189 samples tested positive for influenza; 84 influenza A(H1N1)pdm09, 14 influenza A(H3N2), 47 influenza A(not subtyped) and 44 influenza B.

**Source:** CDC Weekly US Influenza Surveillance Report: <http://www.cdc.gov/flu/weekly/>

- The Public Health Agency of Canada reported that during week 42-43, influenza activity is stable and at interseasonal levels. During week 43, 254 influenza detections were reported: 233 influenza A, and 21 influenza B. The percentage of ILI visits was 0.8%. **Source:** Public Health Agency of Canada: <https://www.canada.ca/en/public-health/services/diseases/flu-influenza/influenza-surveillance/weekly-influenza-reports.html>

#### **Respiratory syncytial virus (RSV) in North America**

- The USA CDC reported that the RSV positivity rate increased in the week beginning 28/10/2023. **Source:** CDC RSV national trends: <https://www.cdc.gov/surveillance/nrevss/rsv/natl-trend.html>

#### **COVID-19 – UK and international summary**

- As of 02/11/2023, there were 7.23 new positive PCR episodes per 100,000 population in Wales, for the most recent 7-day reporting period. There were 9 suspected COVID-19 deaths with a date of death in the most recent 7-day reporting period, reported to Public Health Wales. There were 32 COVID-19 death registrations recorded in ONS data for the latest data period reported. Latest COVID-19 data from Public Health Wales is available from: <https://phw.nhs.wales/topics/latest-information-on-novel-coronavirus-covid-19/>
- The latest UKHSA COVID-19 data summary is available from: <https://coronavirus.data.gov.uk/>
- WHO situation updates on COVID-19 are available from: <https://covid19.who.int/>

#### **Middle East respiratory syndrome coronavirus (MERS-CoV) – latest update from WHO and ECDC**

- On the 10/07/2023 WHO were notified by the United Arab Emirates (UAE) of a case of MERS-CoV. In total, 2,605 laboratory-confirmed cases of locally acquired Middle East Respiratory Syndrome coronavirus (MERS-CoV) worldwide, including 937 deaths. WHO Global Alert and Response website: <https://www.who.int/emergencies/disease-outbreak-news>
- Rapid risk assessments of the situation from ECDC, which contain epidemiological updates and advice for travellers and healthcare workers, are available from: <https://ecdc.europa.eu/en/middle-east-respiratory-syndrome-coronavirus>
- Further updates and advice for healthcare workers and travellers are available from WHO: <http://www.who.int/emergencies/mers-cov/en/> and from NaTHNaC: <https://travelhealthpro.org.uk/news/237/mers-cov-update-travelhealthpro-country-pages>

#### **Human infection with avian influenza A(H7N9), China**

- The latest WHO Influenza at Human-Animal Interface summary reports that there have been no publicly available reports from China or other countries on influenza A(H7N9) in recent months, but overall risk assessments are unchanged. Previous reports are available from: <https://www.who.int/teams/global-influenza-programme/avian-influenza/monthly-risk-assessment-summary>  
The risk of international spread of avian influenza A(H7N9) is considered to be low at present. However, it is important that clinicians are aware of the possibility of human infection with animal influenza, in persons presenting with severe acute respiratory disease, while travelling or soon after returning from an area where avian influenza is a concern. WHO Global Alert & Response updates: <https://www.who.int/emergencies/disease-outbreak-news>

## **Links:**

**Public Health Wales influenza surveillance webpage:**

<http://www.wales.nhs.uk/sites3/page.cfm?orgid=457&pid=25480>

**Public Health Wales COVID-19 data dashboard:**

<https://phw.nhs.wales/topics/latest-information-on-novel-coronavirus-covid-19/>

**Public Health Wales interactive report on hospitalisations in influenza and RSV cases:**

<https://public.tableau.com/app/profile/public.health.wales.health.protection/viz/ARI-Hospitaladmissionsdashboard/ARIHospitaladmissionsdashboard?publish=yes>

**GP Sentinel Surveillance of Infections Scheme:**

<http://www.wales.nhs.uk/sites3/page.cfm?orgid=457&pid=27918>

**NICE influenza antiviral usage guidance:**

<http://www.nice.org.uk/Guidance/TA158>

**England influenza and COVID-19 surveillance:**

<https://www.gov.uk/government/statistics/national-flu-and-covid-19-surveillance-reports-2023-to-2024-season>

**Scotland seasonal respiratory surveillance:**

<https://www.publichealthscotland.scot/publications>

**Northern Ireland influenza surveillance:**

<https://www.publichealth.hscni.net/directorate-public-health/health-protection/seasonal-influenza>

**European Centre for Communicable Disease:**

<http://ecdc.europa.eu/>

**European influenza information:**

<http://flunewseurope.org/>

**Advice on influenza immunisation**

<https://phw.nhs.wales/topics/immunisation-and-vaccines/flu vaccine/>

**Advice on influenza immunisation (for intranet users)**

[Influenza \(sharepoint.com\)](#)

**For further information on this report, please email Public Health Wales using:**

[surveillance.requests@wales.nhs.uk](mailto:surveillance.requests@wales.nhs.uk)