

Current level of influenza activity: Low

Influenza activity trend: Increasing

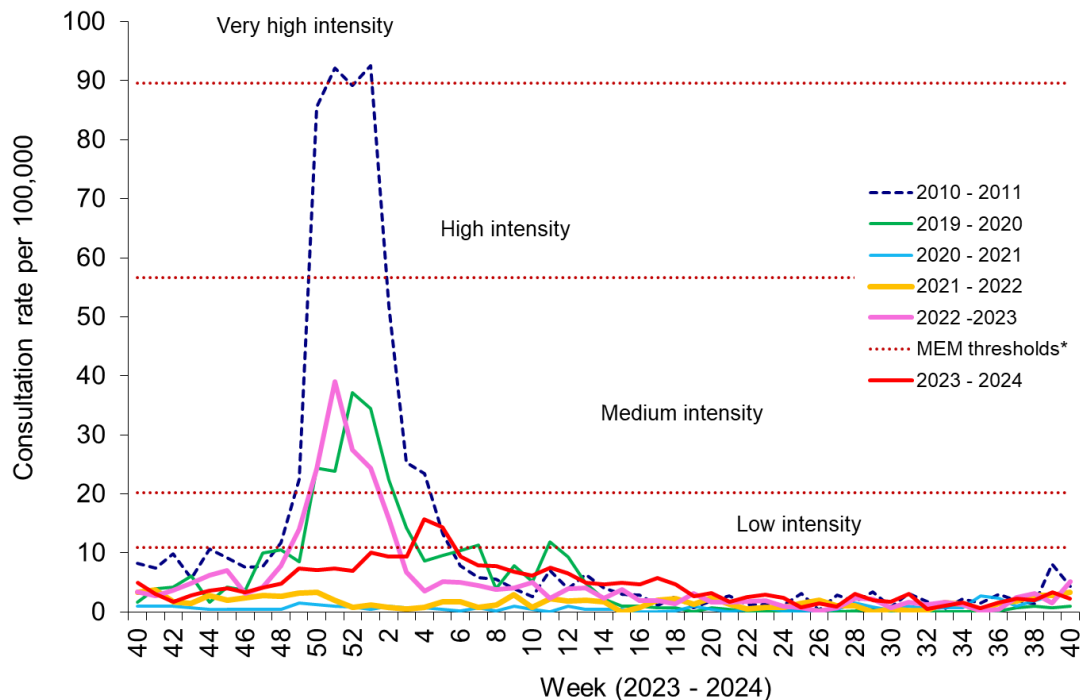
Confirmed influenza cases since 2024 Week 40: 33 (5 influenza A(H3N2), 5 influenza A(H1N1)pdm09, 21 influenza A untyped and 2 influenza B)

During Week 40 (ending 06/10/2024) there were 33 cases of influenza confirmed. Influenza detections have increased in the most recent week, but remains low. RSV incidence in children under 5 has increased and is now at medium intensity levels. Detections of COVID-19 have increased in recent weeks, as have detections of rhinovirus.

- The **Sentinel GP consultation rate for influenza-like illness (ILI)** in Wales during Week 40, was 2.3 consultations per 100,000 practice population (Table 1). The rate decreased compared to the previous week (3.4 consultations per 100,000. Figure 1).
- The **Sentinel GP consultation rate for Acute Respiratory Infections (ARI)** was 142.5 per 100,000 practice population during Week 40 (Table 2 and Figure 3). This is a decrease compared to the previous week (165.3 per 100,000). During week 40, Lower Respiratory Tract Infections decreased to 56.9 per 100,000 and Upper Respiratory Tract Infections decreased to 87.1 per 100,000 compared to the previous week.
- During Week 40, 1,204 specimens received multiplex respiratory panel testing from patients attending hospitals. **Sixteen tested positive for influenza (three influenza A(H1N1), nine influenza A(untyped), and four influenza A(H3N2)).** Overall influenza test-positivity increased to 2.1% from 0.7%. In those aged under 18 positivity increased to 1.8% from 1.4%, and in those aged over 18 to 1.1% from 0.2%. In addition, there were: 199 rhinovirus, 167 SARS-CoV-2, 50 enterovirus, 31 adenovirus, 25 parainfluenza, 38 RSV, 11 human metapneumovirus, six seasonal coronavirus, and two mycoplasma positive samples (Figure 5). Additionally, 414 samples from patients were tested for influenza, RSV and SARS-CoV-2 only. Of these 414 samples there were **11 influenza A, two influenza B**, eight RSV and 101 SARS-CoV-2 positive samples (Figure 7). Furthermore, during week 40, 80 respiratory specimens were tested from patients in intensive care units (ICU) of which one was positive for influenza A(H1N1) (Figure 8).
- There were 125 surveillance samples from patients with ILI symptoms collected by **sentinel GPs and community pharmacies** during Week 40. Of the 125 samples, 33 tested positive for rhinovirus, four for SARS-CoV-2, seven for enterovirus, two for adenovirus, three for mycoplasma, **two for influenza A(H1N1), one for influenza A(H3N2), one influenza A untyped**, three for RSV, one for human metapneumovirus, and four for parainfluenza as at 07/10/2024 (Figure 4).
- From all samples where influenza subtyping information was immediately available during week 40, five were influenza A(H3N2), ten influenza A(untyped), five A(H1N1) and two influenza B (Figure 6). *Additional typing is carried out on all confirmed influenza A samples where typing results are not available from first-line testing, the additional information from these tests will be added to case totals after the end of the season.*
- **Confirmed RSV case incidence in children aged under 5y increased to 25.4 per 100,000 and is now at medium intensity levels.** The baseline MEM threshold of 6.3 per 100,000 (the baseline MEM threshold is used to identify the start of RSV seasons in Wales compared to levels before 2021, 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 six and three respectively during Week 39 (latest available data) (Figures 10 & 11) and 70 for SARS-CoV-2 during week 40 (Figure 12).
- During week 40, four **ARI outbreaks** were reported to the Public Health Wales Health Protection Team, of which all were SARS-CoV-2. All outbreaks were in residential care homes.
- According to [EuroMoMo](#) analysis, there was no excess in all-cause deaths in Wales during week 39.

Respiratory infection activity in Wales

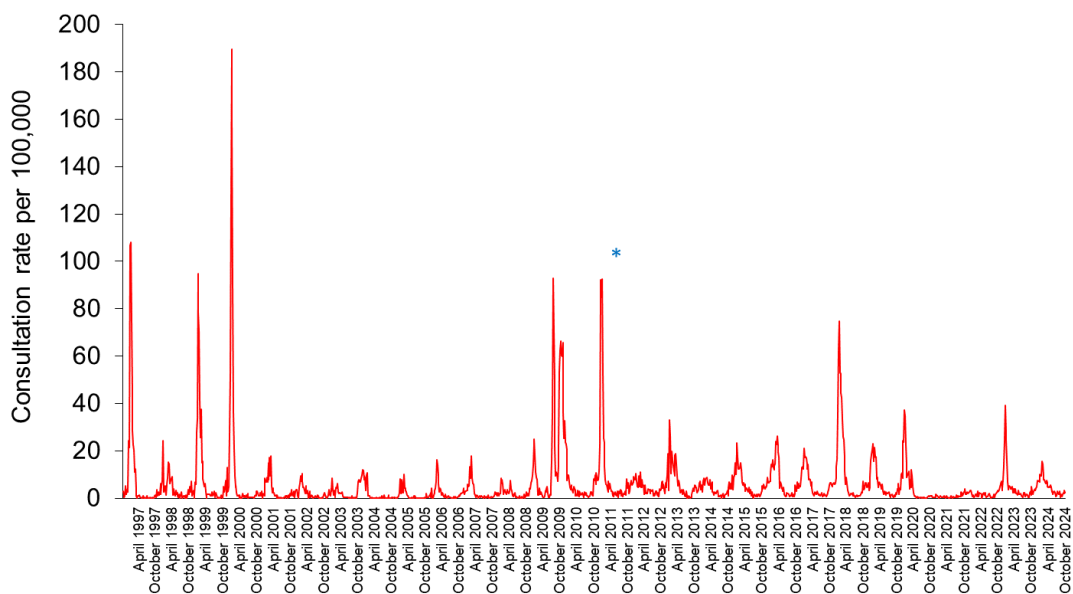
Figure 1. Clinical consultation rate for ILI per 100,000 practice population in Welsh sentinel practices (as of 06/10/2024)



* 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 50 1996 – Week 40 2024)



* Reporting changed to Audit+ surveillance system

Table 1. Age-specific consultations (per 100,000) for ILI in Welsh sentinel practices, Week 35– Week 40 2024 (as of 06/10/2024).

Age group	35	36	37	38	39	40
< 1	32.3	0.0	0.0	0.0	0.0	0.0
1 - 4	0.0	0.0	28.8	0.0	6.8	0.0
5 - 14	0.0	0.0	0.0	0.0	4.5	2.4
15 - 24	0.0	6.4	2.2	6.5	0.0	2.3
25 - 34	0.0	0.0	4.0	2.0	5.8	2.1
35 - 44	0.0	3.6	3.8	3.7	3.7	0.0
45 - 64	0.0	0.9	0.0	1.9	2.8	3.0
65 - 74	2.2	2.1	0.0	0.0	2.2	2.3
75+	2.1	0.0	0.0	0.0	4.2	4.4
Total	0.7	1.7	2.3	1.9	3.4	2.3

Table 2. Age-specific consultations (per 100,000) for ARI in Welsh sentinel practices, Week 35 – Week 40 2024 (as of 06/10/2024).

Age group	35	36	37	38	39	40
< 1	354.8	413.2	637.8	757.8	1016.5	918.4
1 - 4	240.2	277.0	346.0	454.7	604.8	525.7
5 - 14	58.2	81.5	125.6	166.6	203.7	187.0
15 - 24	88.6	97.5	96.1	120.8	103.8	130.6
25 - 34	53.9	79.6	78.3	89.8	143.2	78.7
35 - 44	38.3	88.0	84.4	98.6	130.7	96.8
45 - 64	55.0	73.0	76.7	84.3	128.6	120.2
65 - 74	62.9	74.4	91.8	111.1	134.8	108.3
75+	68.2	102.3	124.0	129	173.5	148.9
Total	67.8	92.5	105.8	125.5	165.3	142.5

Figure 3. Age-specific consultations (per 100,000) for ARI in Welsh sentinel practices, Week 40 2023 – Week 40 2024.

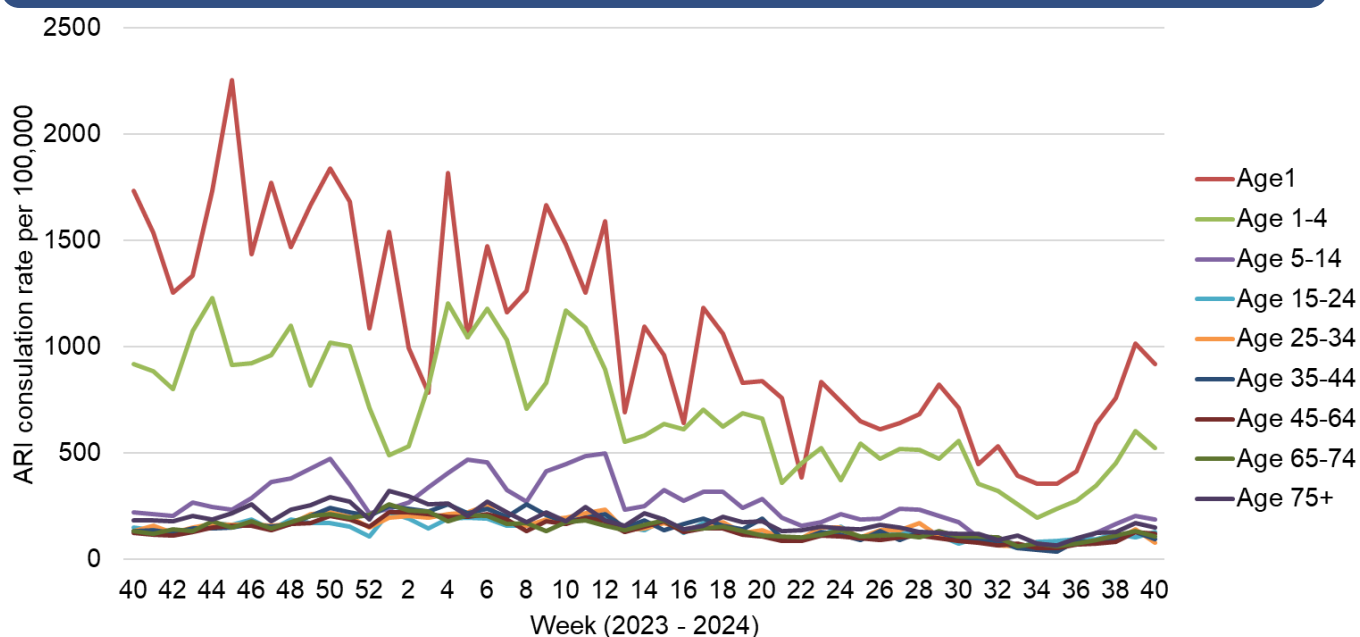
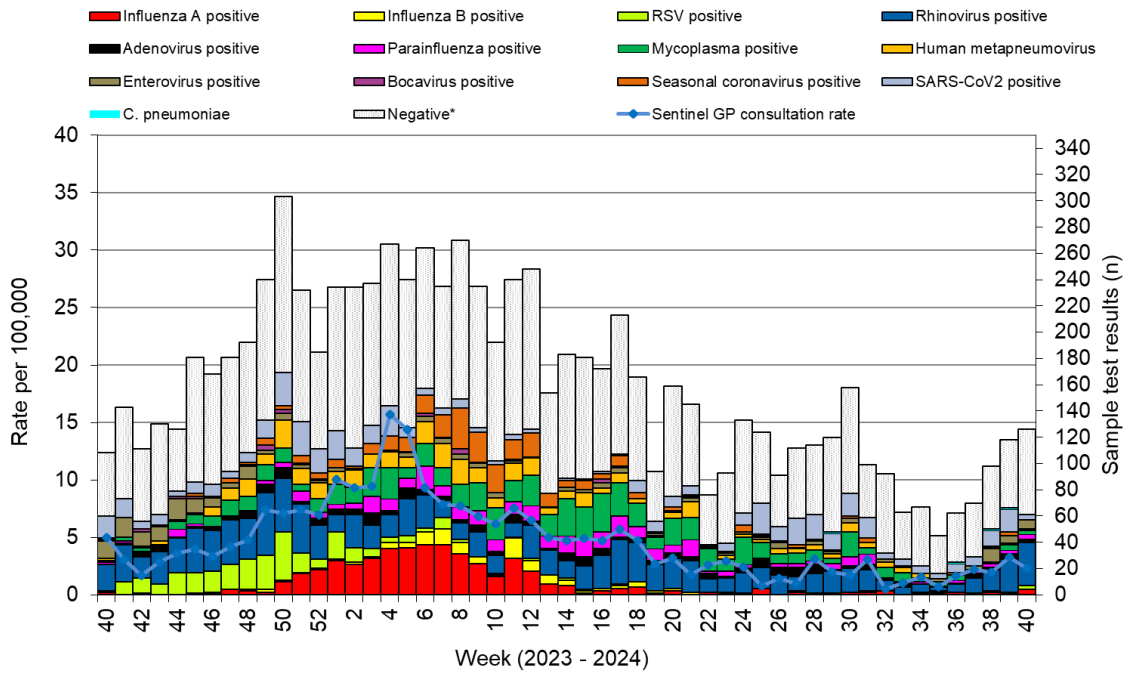
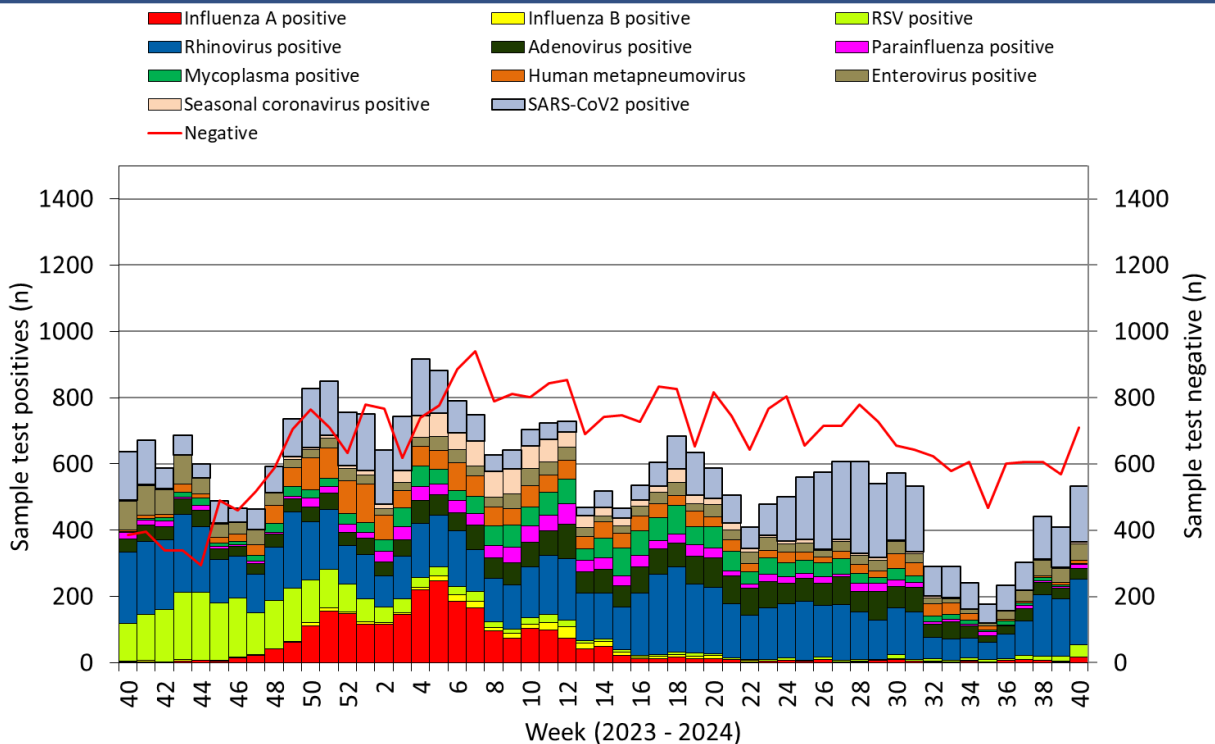


Figure 4. Specimens submitted for virological testing by sentinel GPs and community pharmacies as of 06/10/2024, by week of sample collection, Week 40 2023 to Week 40 2024.



* Tested negative for influenza, adenovirus, rhinovirus, RSV, parainfluenza, mycoplasma, human metapneumovirus, enterovirus, bocavirus and coronaviruses. Samples which test positive for more than one 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 06/10/2024 by week of sample collection, Week 40 2023 to Week 40 2024.



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 one 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 06/10/2024 by week of sample collection, Week 40 2023 to Week 40 2024.

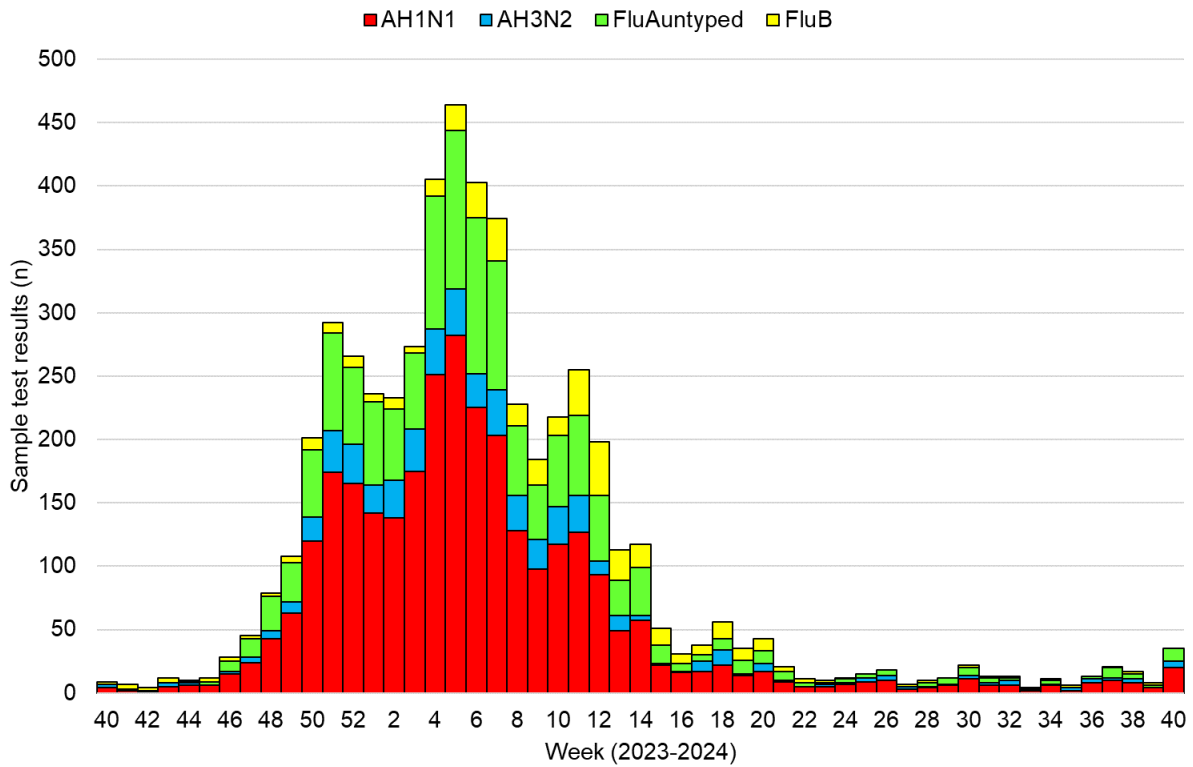


Figure 7. Specimens from hospital patients submitted for RSV, Influenza and SARS-CoV2 testing only, as of 06/10/2024 by week of sample collection, Week 40 2023 to Week 40 2024.

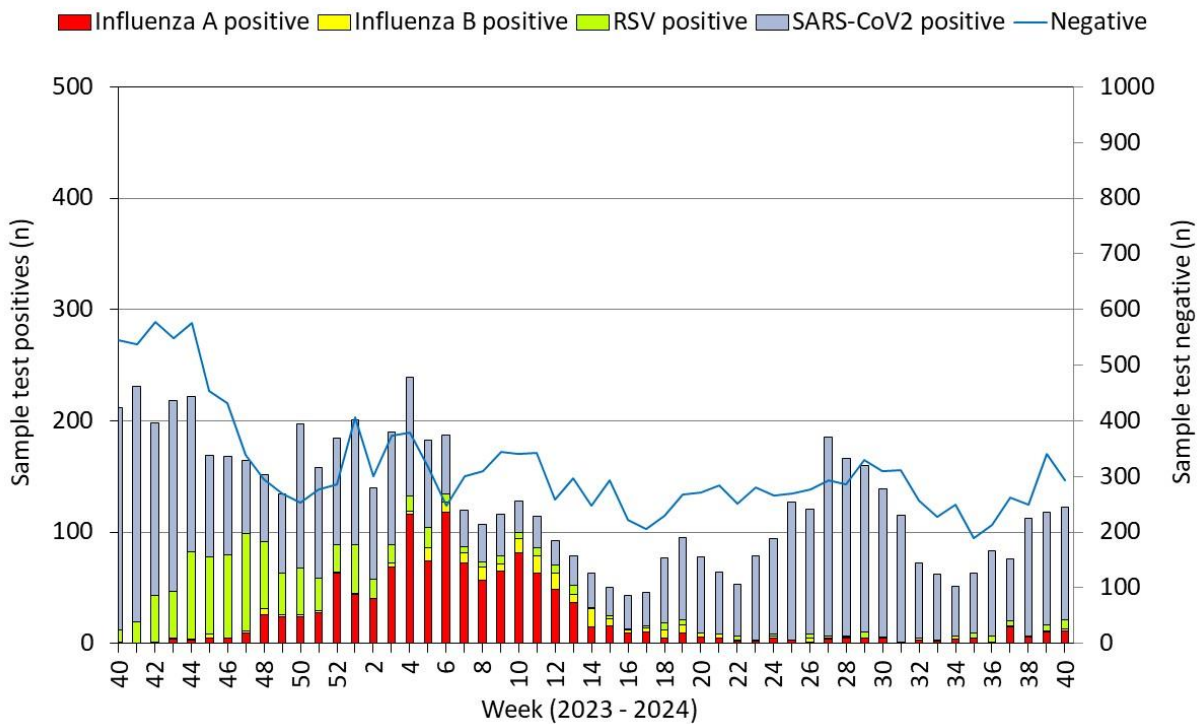
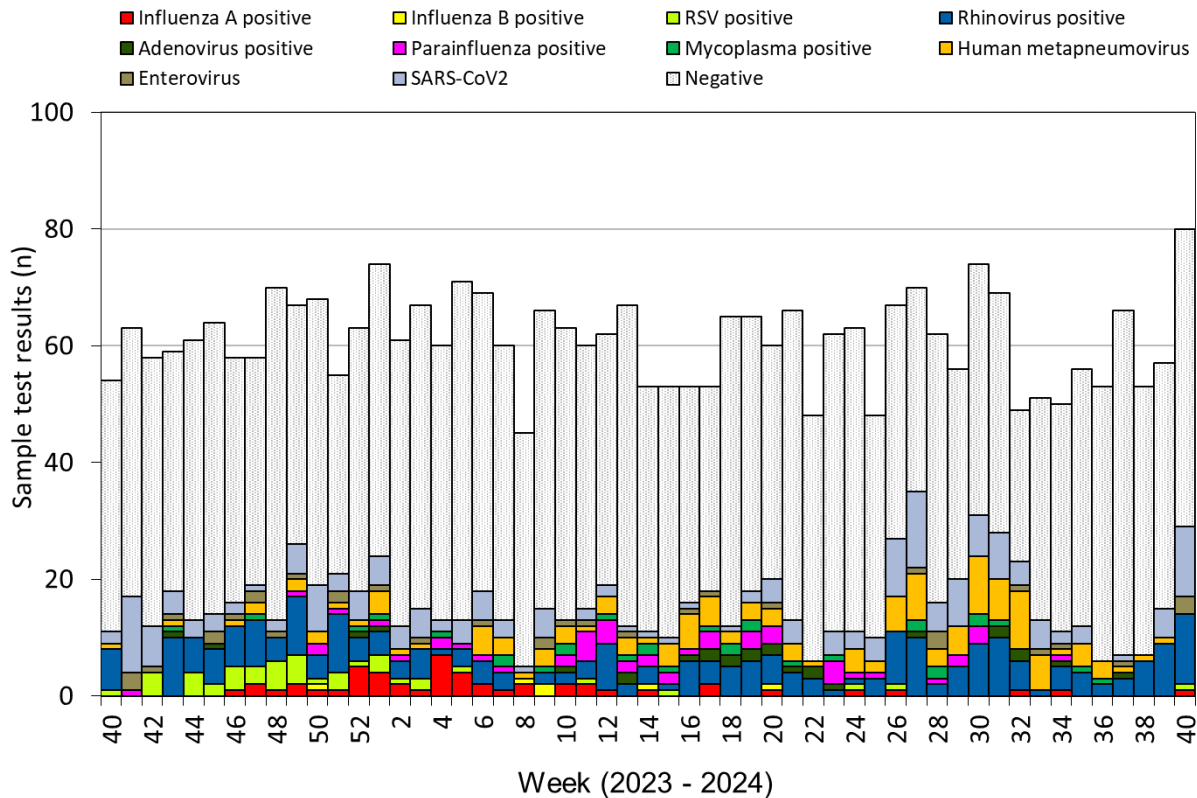
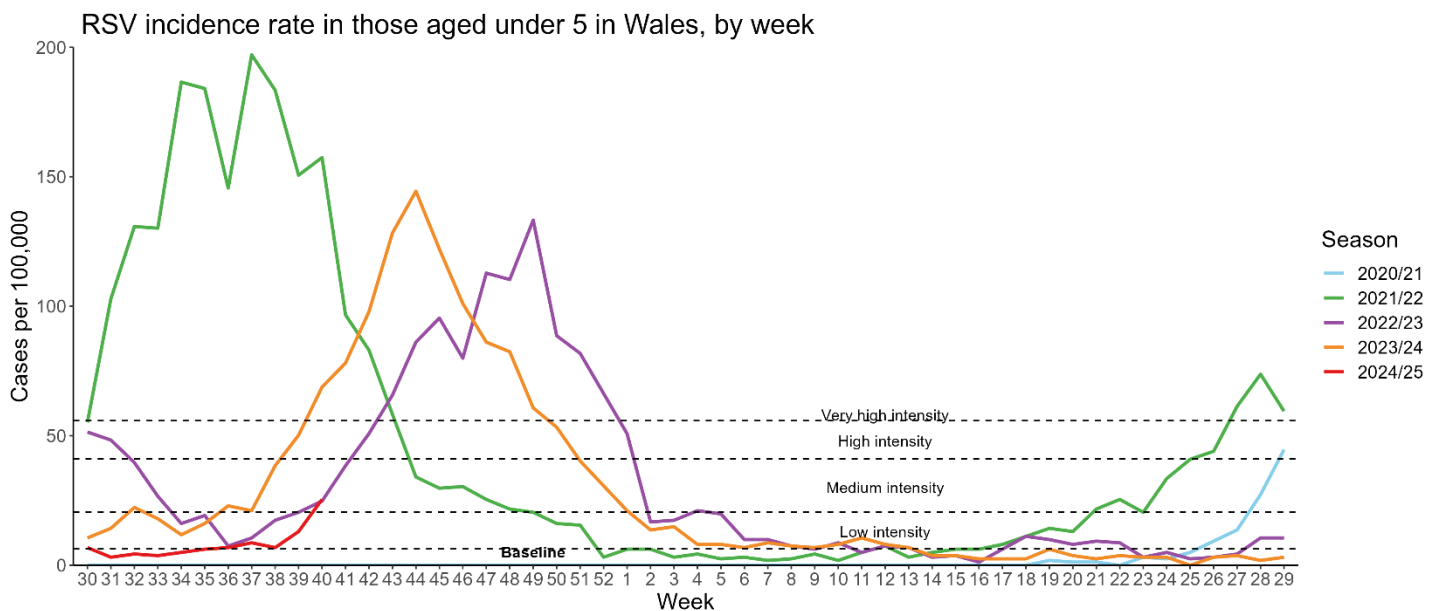


Figure 8. Specimens submitted for virological testing for ICU patients, by week of sample collection, Week 40 2023 to Week 40 2024.



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 2020 to Week 40 2024.



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 29/09/2024 (latest available data).

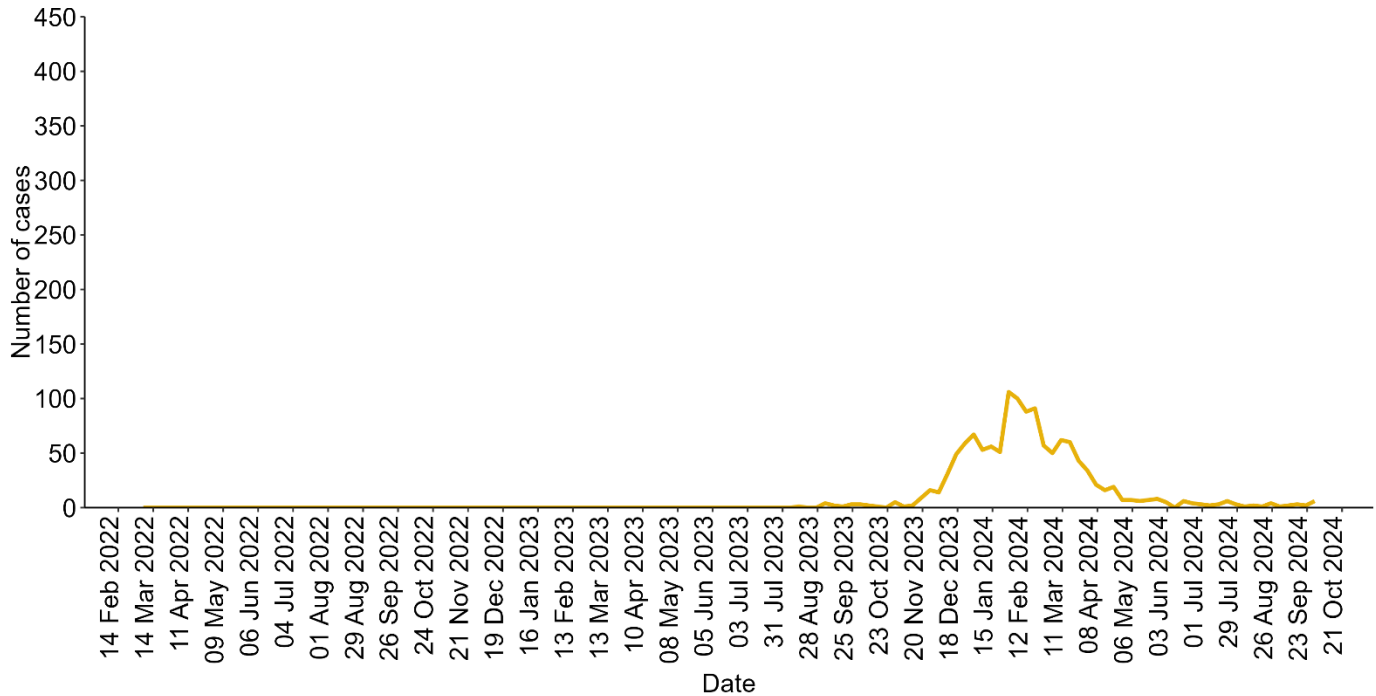


Figure 11. Seven day rolling sum of cases hospitalised in Wales within 28 days of an RSV positive test result in the community (or up to 2 days post-admission), as of 29/09/2024 (latest available data).

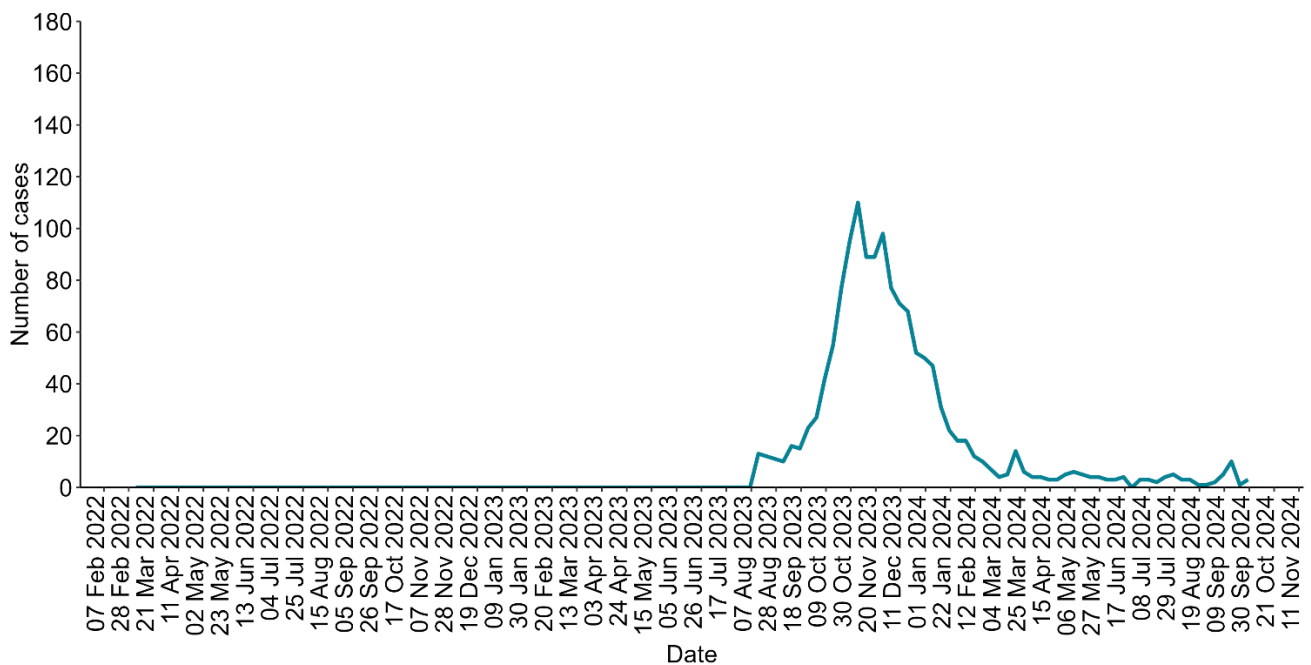
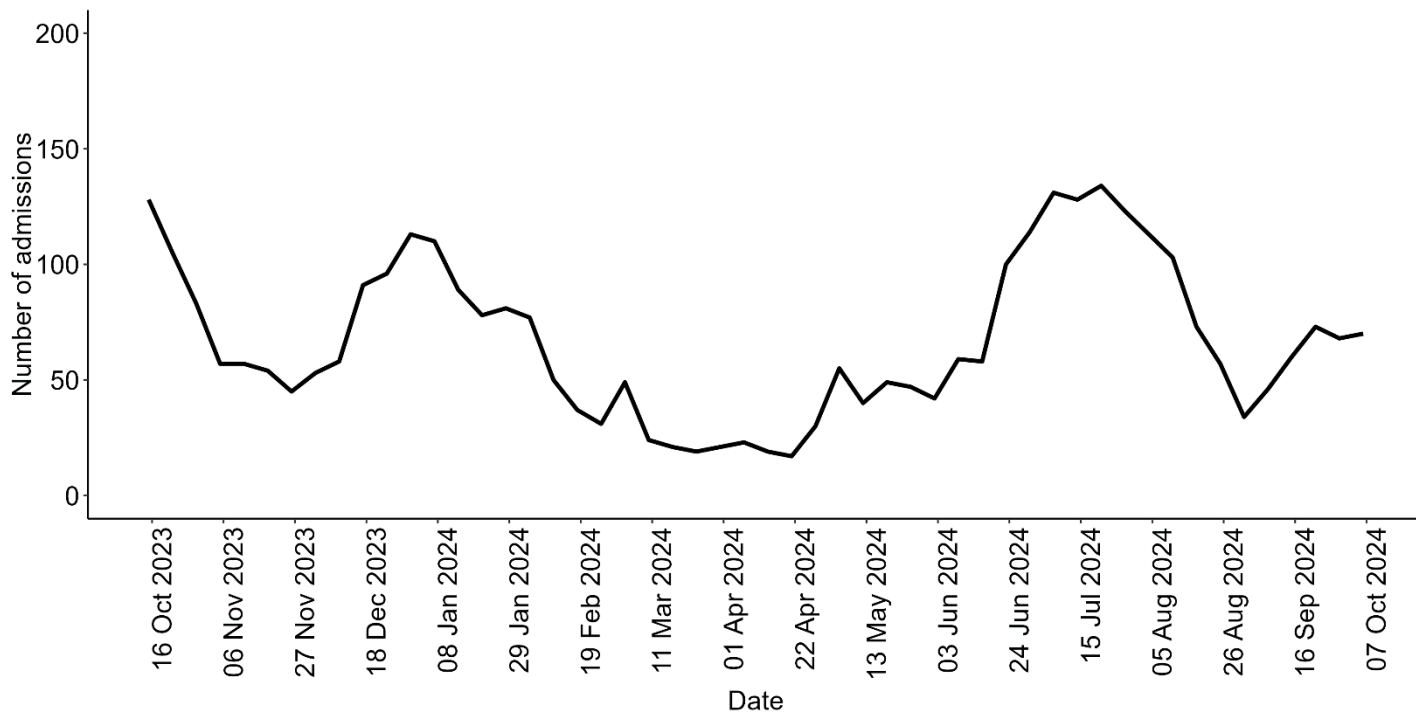


Figure 12. Seven day rolling sum of cases hospitalised in Wales within 28 days of a Covid-19 positive test result in the community (or up to 2 days post-admission), as of 06/10/2024.



Influenza Vaccine Uptake in Wales

Table 3. Uptake of influenza immunisations in GP Practice patients in Wales 2023/24 (as of 23/04/2024) (latest data available).

Influenza immunisation uptake in the 2023/24 season	
People aged 65y and older	72.5%
People younger than 65y in a clinical risk group	39.1%
Children aged two & three years	42.8%
Children aged between four & ten years	61.9%
Children aged between 11 & 15 years	49.7%
Total NHS staff	40.8%
NHS staff with direct patient contact	40.5%

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 38, GP ILI consultations increased to 3.2 per 100,000 in Scotland.
- During Week 38, 3,896 samples testing positive for influenza were reported in England of which 63 were positive for influenza (28 influenza A(not subtyped), 22 influenza A(H3N2), 1 influenza A(H1N1) and 12 influenza B. Overall influenza positivity decreased to 1.4% in England in week 38 and decreased to 2.0% in Scotland in week 39.
- UK summary data are available from the [UKHSA Influenza and COVID-19 Surveillance Report](#) and [COVID-19 & Respiratory Surveillance \(shinyapps.io\)](#)
- The WHO and the European Centre for Disease Prevention and Control (ECDC) reported during week 39, that influenza positivity is below the 10% positivity epidemic threshold at 1%. Of the 22 countries and areas reporting on influenza intensity, none reported medium intensity or higher. Of the 21 countries and areas reporting on geographic spread of influenza viruses within a country or area, two reported widespread or regional distribution. There were 21 confirmed influenza virus infection detections reported from sentinel primary care.
Source: European Respiratory Virus Surveillance Summary (ERVISS): <https://erviss.org/>
- The WHO reported on 02/10/2024, based on data up to 22/09/2024 that in the Northern hemisphere elevated activity continued to be reported in countries in Western Africa (A(H3N2) and influenza B), Middle Africa (H3N2), Western Asia (H1N1 and influenza B viruses), South and South-East Asia (H1N1), Central America and the Caribbean (H3N2 viruses).
- In the Southern hemisphere, influenza activity declined overall. However, it was still elevated in some countries in South America (influenza B), Eastern Africa (influenza A and influenza B), and Oceania. **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 21/06/2024), during the period from 13/05/2024 – 26/05/2024 National Influenza Centres and other national influenza laboratories from 131 countries, areas or territories reported influenza surveillance data. The WHO Global Influenza Surveillance and Response System laboratories tested more than 354,429 specimens during that period, of which 20,741 were positive for influenza viruses, 17,211 (83.0%) were typed as influenza A (of the subtyped influenza A viruses, 6,275 (63.5%) were influenza A(H1N1)pdm09 and 3,604 (36.5%) were influenza A(H3N2). Of the 354,429 samples testing positive for influenza viruses, 3,530 tested positive for Influenza B (17.0%). **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 levels are low during week 39 (ending 28/09/2024). Nationally, 223 (0.5%) out of 41,057 specimens have tested positive for influenza in week 39 in clinical laboratories nationwide, of these positive samples, 174 (78.0%) were influenza A and 49 (22.0%) were influenza B. Further characterisation has been carried out on 880 specimens by public health laboratories, and 68 samples tested positive for influenza; 39 influenza A(H1N1)pdm09, 15 influenza A(H3N2), 11 influenza A(not subtyped) and 3 influenza B.
Source: CDC Weekly US Influenza Surveillance Report: [FluView | FluView | CDC](#)

Respiratory syncytial virus (RSV) in North America

- The USA CDC reported that the RSV positivity rate increased in week 39.
Source: CDC RSV national trends: [National Respiratory and Enteric Virus Surveillance System | CDC](#)

COVID-19 – UK and international summary

- As of 25/09/2024, there were 7.6 new positive PCR episodes per 100,000 population in Wales, for the most recent 7-day reporting period. 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

- WHO was notified of one new MERS cases on 5 September 2024 by the Ministry of Health of the Kingdom of Saudi Arabia.
- Since the beginning of the year, five cases including four deaths have been reported from KSA. 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

The WHO has published an updated assessment of recent influenza A(H5N1) virus events in animals and people. Currently, the global public health risk of influenza A(H5N1) viruses to be low, while the risk of infection for occupationally exposed persons is low to moderate, depending on the risk mitigation measures in place. Transmission between animals continues to occur and, to date, a limited number of human infections have been reported.14 August 2024: [https://www.who.int/publications/m/item/updated-joint-fao-who-woah-assessment-of-recent-influenza-a\(h5n1\)-virus-events-in-animals-and-people](https://www.who.int/publications/m/item/updated-joint-fao-who-woah-assessment-of-recent-influenza-a(h5n1)-virus-events-in-animals-and-people)

Other updates on zoonotic influenza infections and risks to humans are available from the WHO Global Alert & Response website: <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/fluvaccine/>

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