

Current level of influenza activity: Low

Influenza activity trend: **Increasing**

Confirmed influenza cases since 2024 Week 40: 104 (15 influenza A(H3N2), 9 influenza A(H1N1)pdm09, 64 influenza A untyped and 16 influenza B)

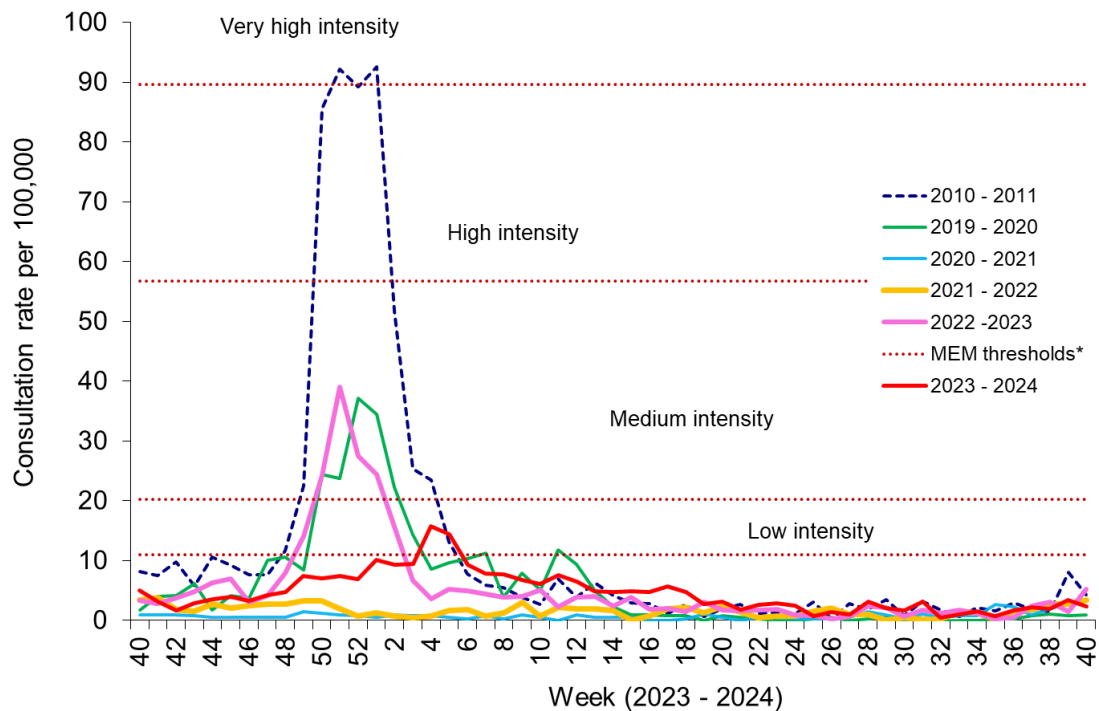
This will be the last weekly edition of this report, from next week please see the [Public Health Wales Weekly Integrated Respiratory Infection Report](#)

During Week 42 (ending 20/10/2024) there were 34 cases of influenza confirmed with a further five cases from previous weeks. Influenza detections have remained stable in the most recent week and remain at low levels. RSV incidence in children aged under 5 has increased and is at high 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 41, was 2.8 consultations per 100,000 practice population (Table 1). The rate increased compared to the previous week (2.3 consultations per 100,000. Figure 1) (latest data available, Week 42 data not yet available).
- The **Sentinel GP consultation rate for Acute Respiratory Infections (ARI)** was 136.3 per 100,000 practice population during Week 41 (Table 2 and Figure 3). This is a decrease compared to the previous week (139.0 per 100,000). During week 41, Lower Respiratory Tract Infections decreased to 57.6 per 100,000 and Upper Respiratory Tract Infections decreased to 80.8 per 100,000 compared to the previous week (latest data available).
- During Week 42, 1,256 specimens received multiplex respiratory panel testing from patients attending hospitals. **20 tested positive for influenza (one influenza A(H1N1), 12 influenza A(untyped), five influenza A(H3N2) and two influenza B).** Overall influenza test-positivity increased to 2.5% from 1.9%. In those aged under 18 positivity decreased to 1.8% from 3.1%, and in those aged over 18 increased to 1.5% from 0.7%. In addition, there were: 183 rhinovirus, 146 SARS-CoV-2, 72 RSV, 48 enterovirus, 44 adenovirus, 25 parainfluenza, 23 human metapneumovirus, seven seasonal coronavirus, and four mycoplasma positive samples (Figure 5). Additionally, 487 samples from patients were tested for influenza, RSV and SARS-CoV-2 only. Of these 487 samples there were **11 influenza A, three influenza B, 35 RSV and 113 SARS-CoV-2** positive samples (Figure 7). Furthermore, during week 42, 70 respiratory specimens were tested from patients in intensive care units (ICU) of which one was positive for influenza A(untyped) (Figure 8).
- There were 150 surveillance samples from patients with ILI symptoms collected by **sentinel GPs and community pharmacies** during Week 42. Of the 150 samples, 19 tested positive for rhinovirus, 19 for SARS-CoV2, 16 for enterovirus, nine for RSV, six for parainfluenza, four for adenovirus, three for human metapneumovirus, one for influenza A(H1N1), one for influenza A(H3), one for influenza B and one for seasonal coronavirus as at 21/10/2024 (Figure 4).
- From all samples where influenza subtyping information was immediately available during week 42, three were influenza A(H3N2), two were A(H1N1), 12 influenza A(untyped) and six 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 53.3 per 100,000 and is at high 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 eight and three respectively during Week 42 (Figures 10 & 11) and 76 for SARS-CoV-2 during week 42 (Figure 12).
- During week 42, five **ARI outbreaks** were reported to the Public Health Wales Health Protection Team, of which all were SARS-CoV-2. All Five outbreaks were in residential care homes.
- According to [EuroMoMo](#) analysis, there was no excess in all-cause deaths in Wales during week 41.
- As at 17/10/2024, uptake of influenza vaccination was 22.3% in adults aged 65 years and older, 7.9% in those aged 6 months to 64 years at clinical risk and 22.6% in two- and three-year-old children (Table 3).

Respiratory infection activity in Wales

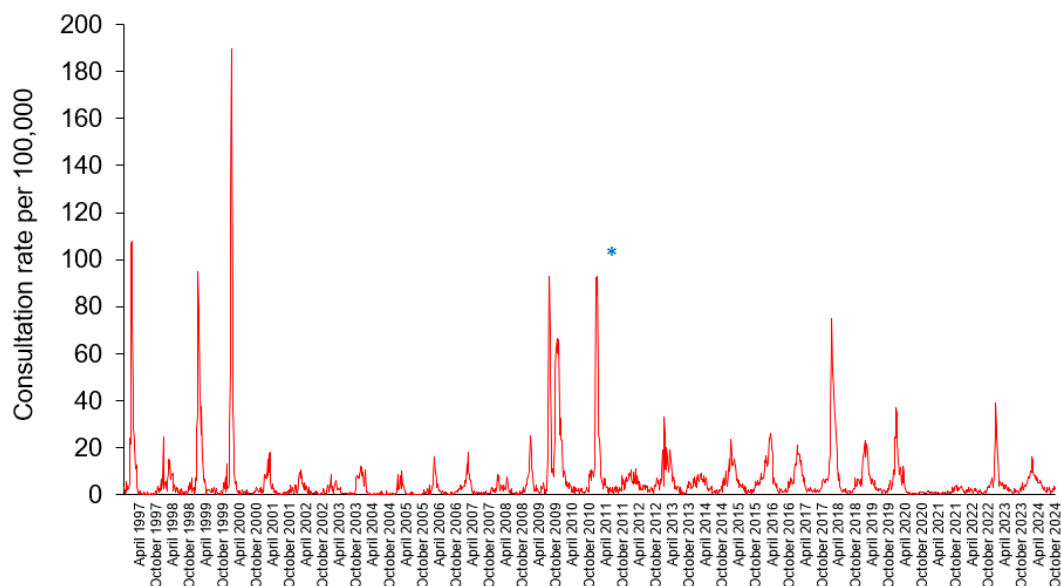
Figure 1. Clinical consultation rate for ILI per 100,000 practice population in Welsh sentinel practices (as of 13/10/2024) (latest data available).



* 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 41 2024) (latest data available).



* Reporting changed to Audit+ surveillance system

Table 1. Age-specific consultations (per 100,000) for ILI in Welsh sentinel practices, Week 36– Week 41 2024 (as of 13/10/2024) (latest data available).

Age group	36	37	38	39	40	41
< 1	0.0	0.0	0.0	0.0	0.0	0.0
1 - 4	0.0	28.8	0.0	6.8	0.0	0.0
5 - 14	0.0	0.0	0.0	4.5	2.4	0.0
15 - 24	6.4	2.2	6.5	0.0	2.2	2.7
25 - 34	0.0	4.0	2.0	5.8	2.0	2.5
35 - 44	3.6	3.8	3.7	3.7	0.0	0.0
45 - 64	0.9	0.0	1.9	2.8	2.9	1.2
65 - 74	2.1	0.0	0.0	2.2	2.3	5.4
75+	0.0	0.0	0.0	4.2	4.4	10.7
Total	1.7	2.3	1.9	3.4	2.3	2.8

Table 2. Age-specific consultations (per 100,000) for ARI in Welsh sentinel practices, Week 36 – Week 41 2024 (as of 13/10/2024) (latest data available).

Age group	36	37	38	39	40	41
< 1	413.2	637.8	757.8	1016.5	918.4	1009.7
1 - 4	277.0	346.0	454.7	604.8	522.8	476.5
5 - 14	81.5	125.6	166.6	203.7	181.8	142.0
15 - 24	97.5	96.1	120.8	103.8	126.7	116.0
25 - 34	79.6	78.3	89.8	143.2	76.8	113.5
35 - 44	88.0	84.4	98.6	130.7	94.2	111.2
45 - 64	73.0	76.7	84.3	128.6	116.9	103.1
65 - 74	74.4	91.8	111.1	134.8	105.8	111.0
75+	102.3	124.0	129	173.5	146.4	151.9
Total	92.5	105.8	125.5	165.3	139.0	136.3

Figure 3. Age-specific consultations (per 100,000) for ARI in Welsh sentinel practices, Week 41 2023 – Week 41 2024 (latest data available).

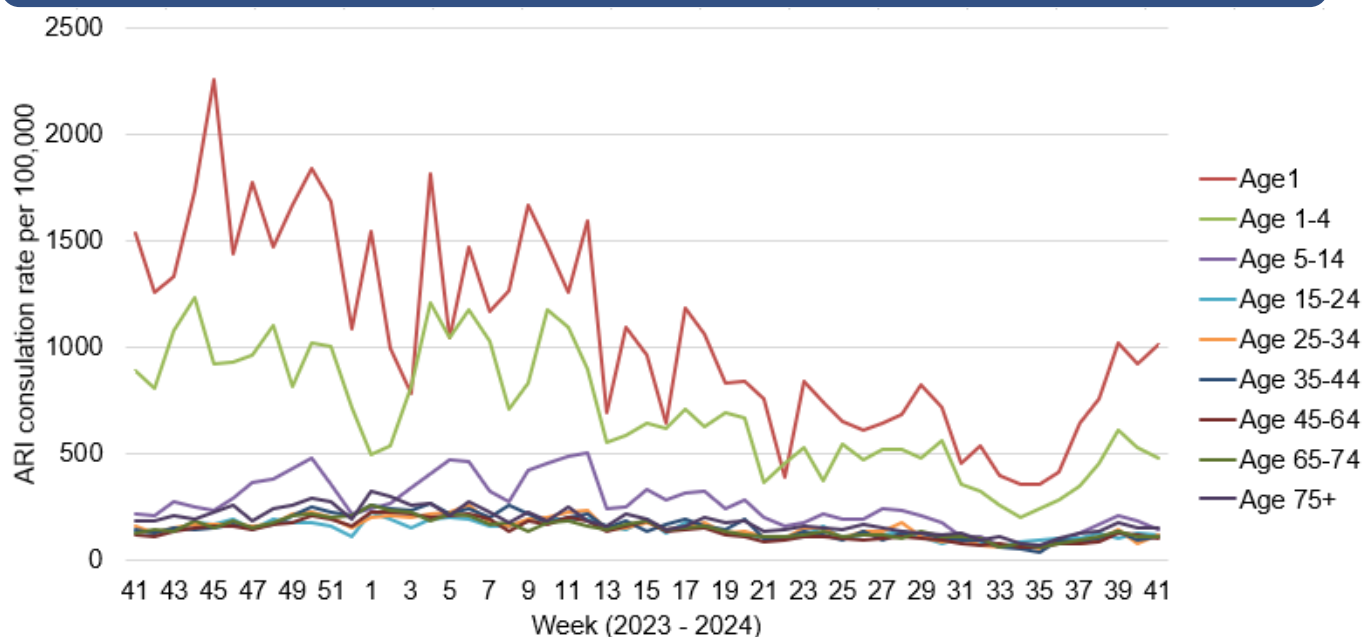
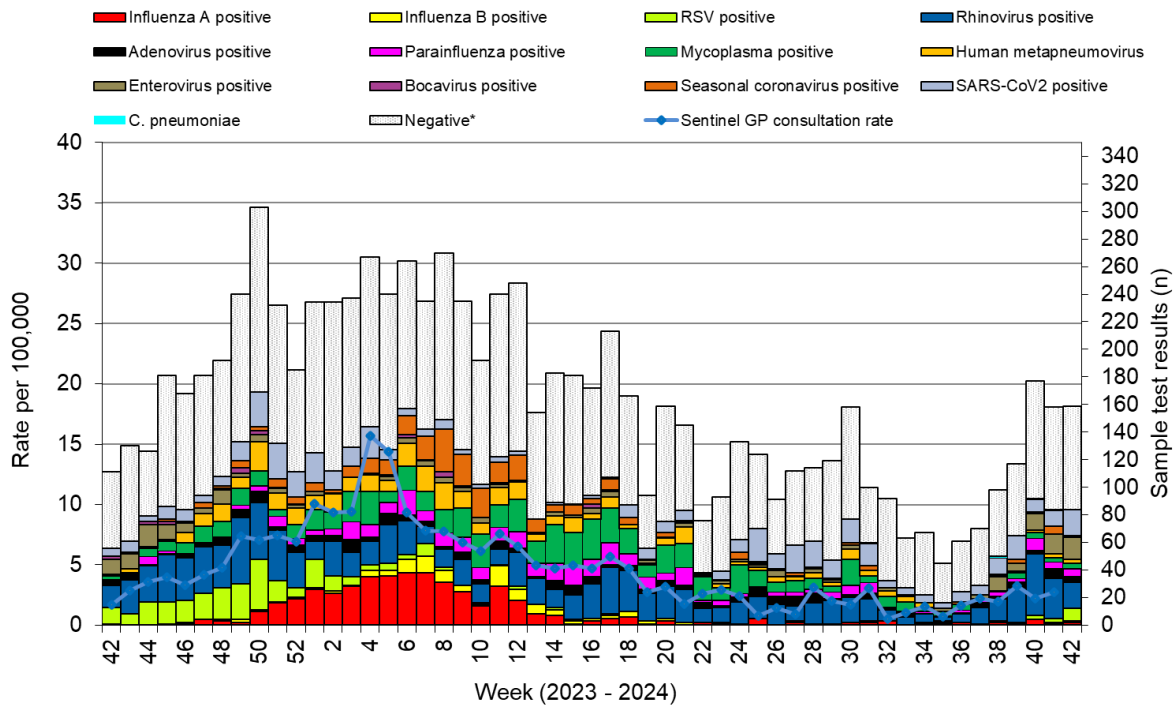
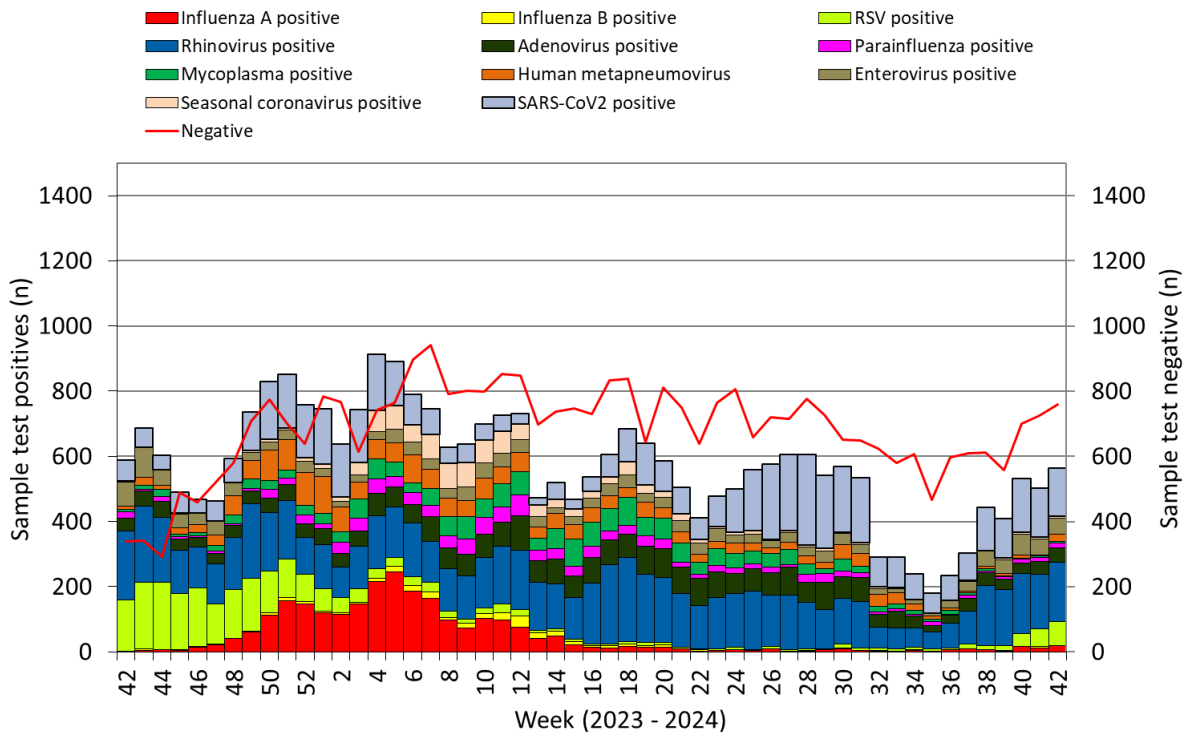


Figure 4. Specimens submitted for virological testing by sentinel GPs and community pharmacies as of 20/10/2024, by week of sample collection, Week 42 2023 to Week 42 2024.



* 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 20/10/2024 by week of sample collection, Week 42 2023 to Week 42 2024.



This chart summarises respiratory panel test data and does not include data for patients tested SOLELY 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 20/10/2024 by week of sample collection, Week 42 2023 to Week 42 2024.

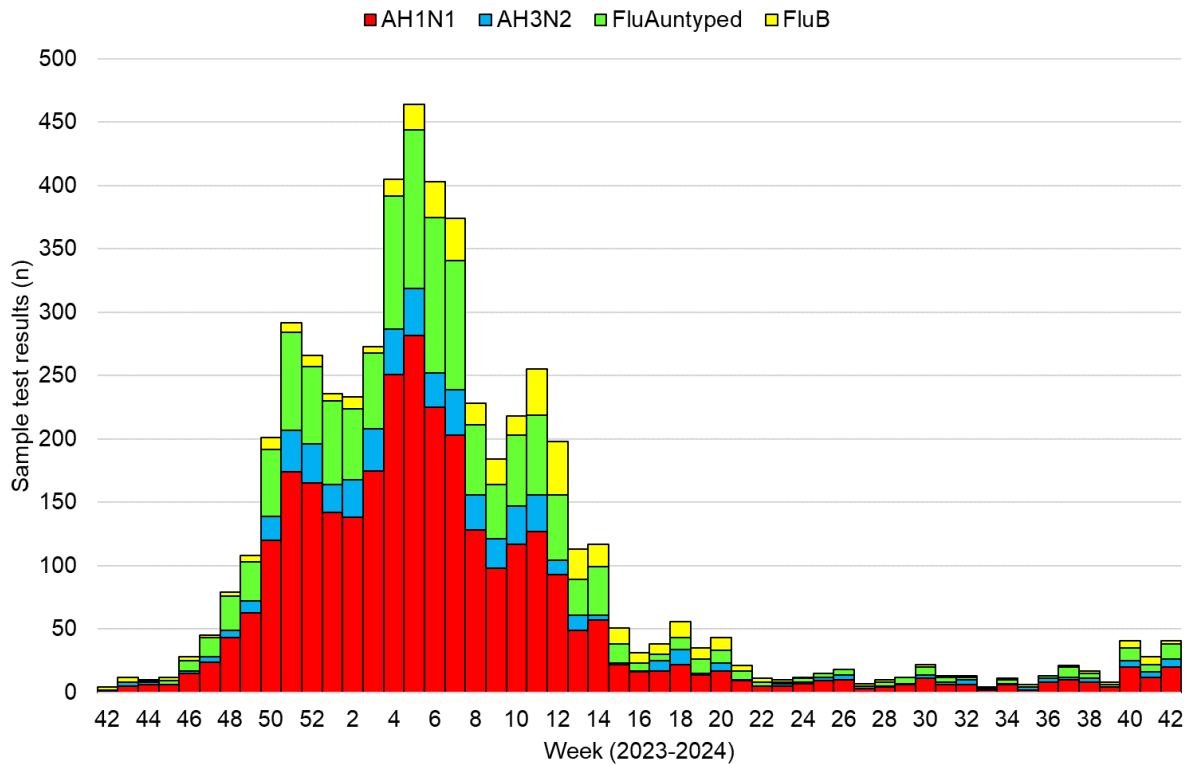


Figure 7. Specimens from hospital patients submitted for RSV, Influenza and SARS-CoV2 testing only, as of 20/10/2024 by week of sample collection, Week 42 2023 to Week 42 2024.

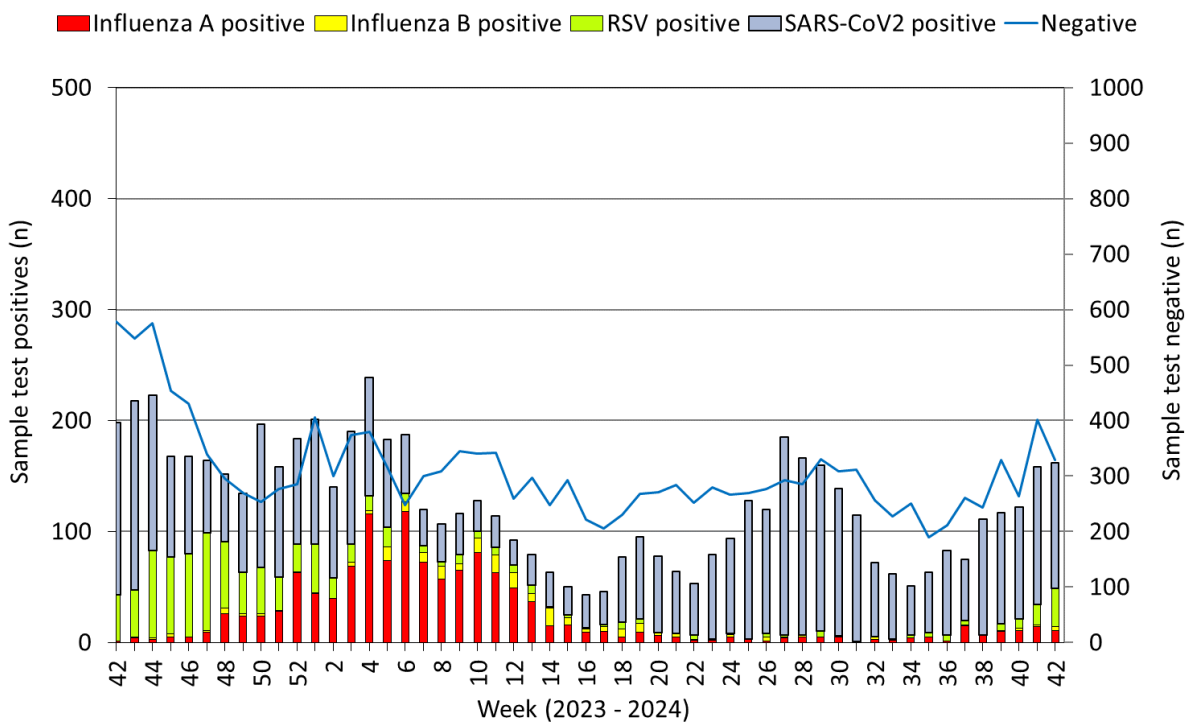
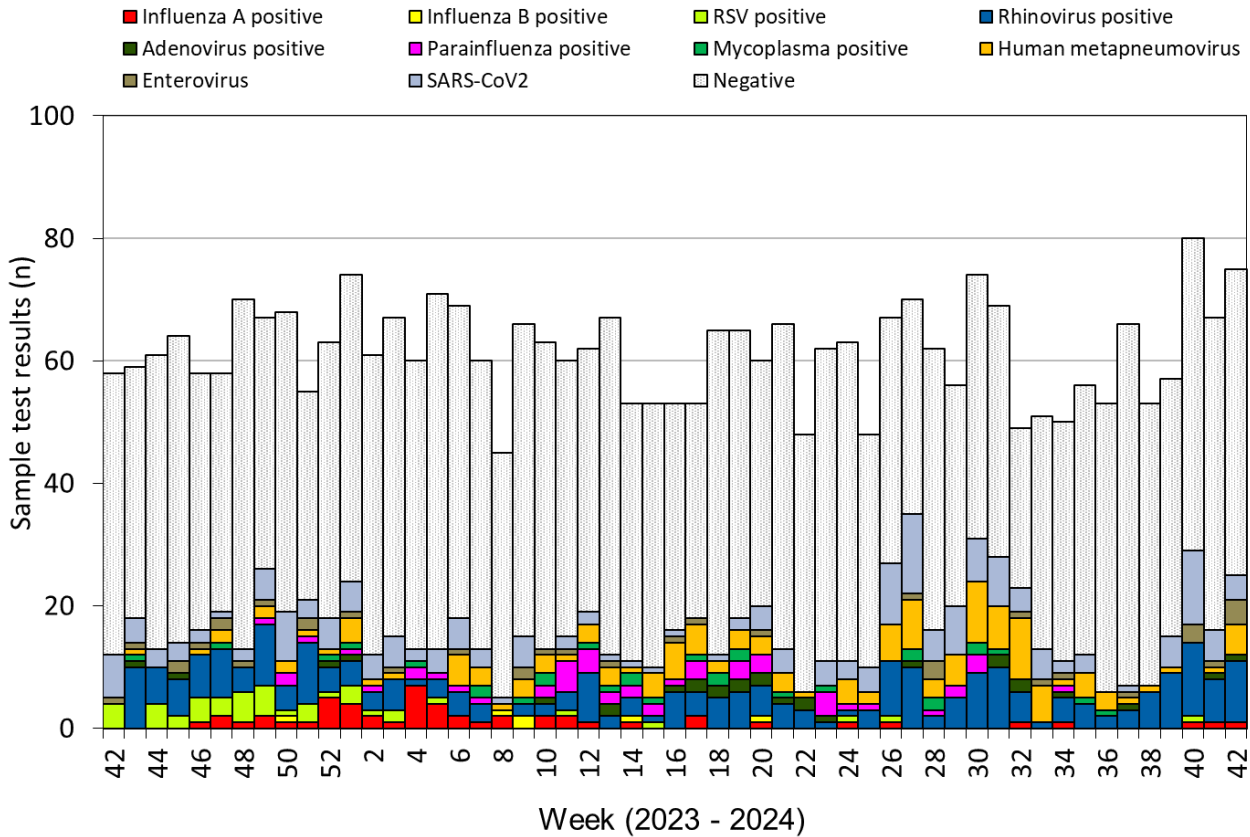
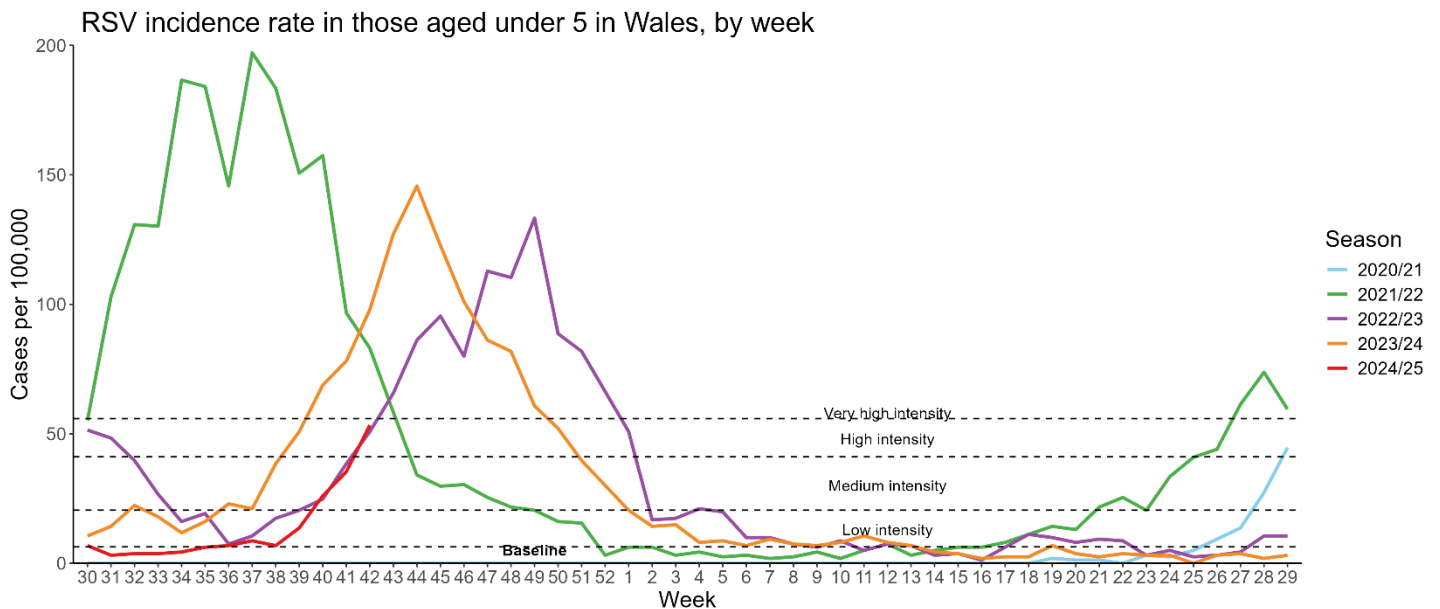


Figure 8. Specimens submitted for virological testing for ICU patients, by week of sample collection, Week 42 2023 to Week 42 2024.



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 42 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 20/10/2024

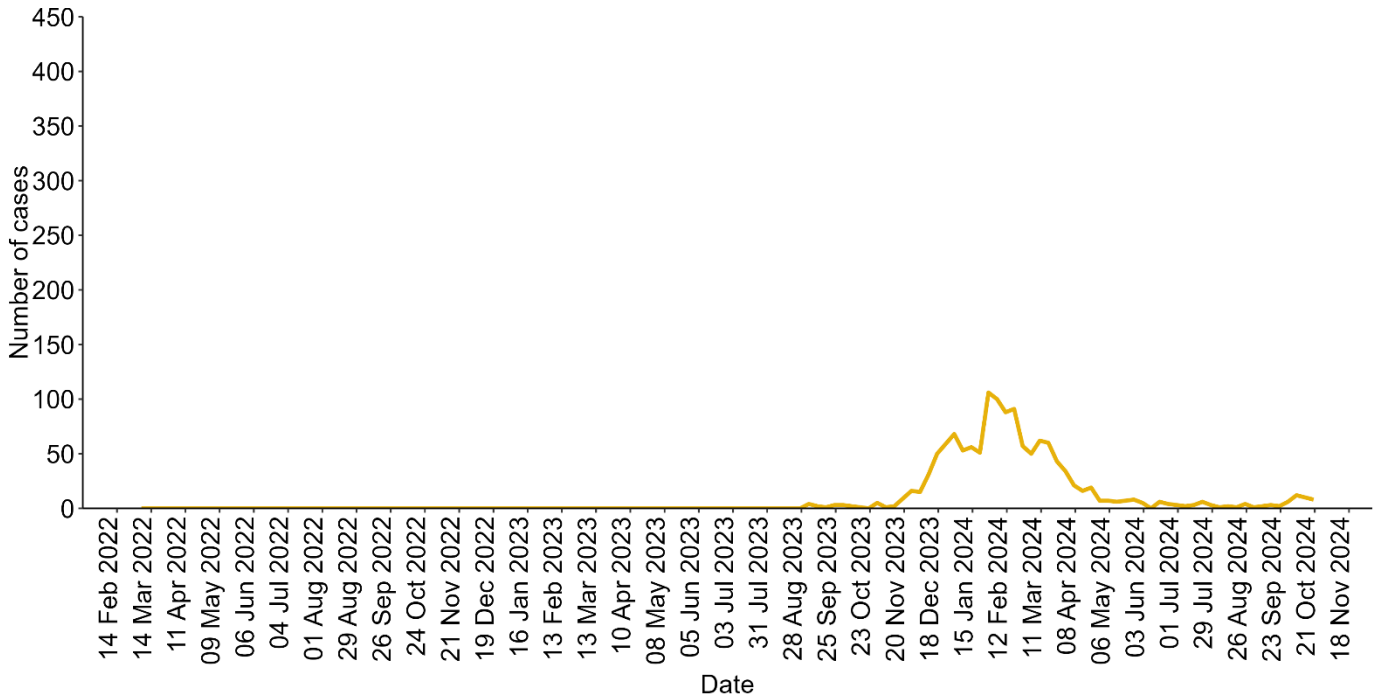


Figure 11. Seven day rolling sum of cases hospitalised in Wales within 28 days of an RSV positive test result in the community (or up to 2 days post-admission), as of 20/10/2024

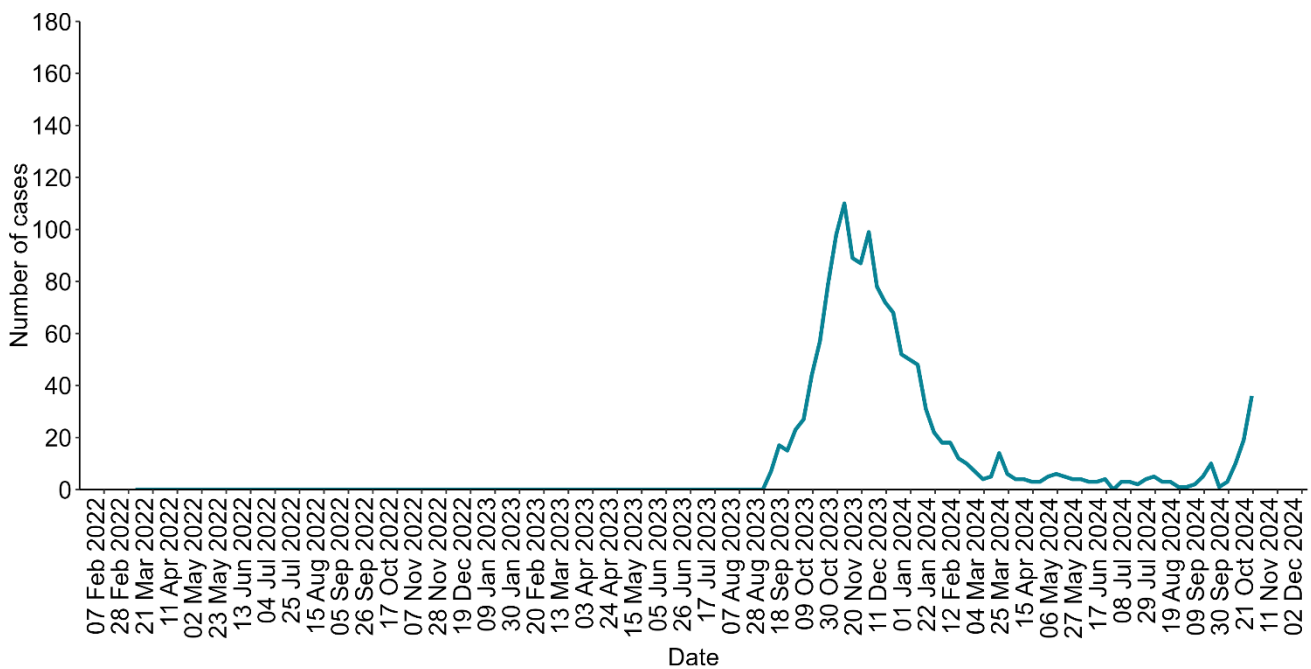
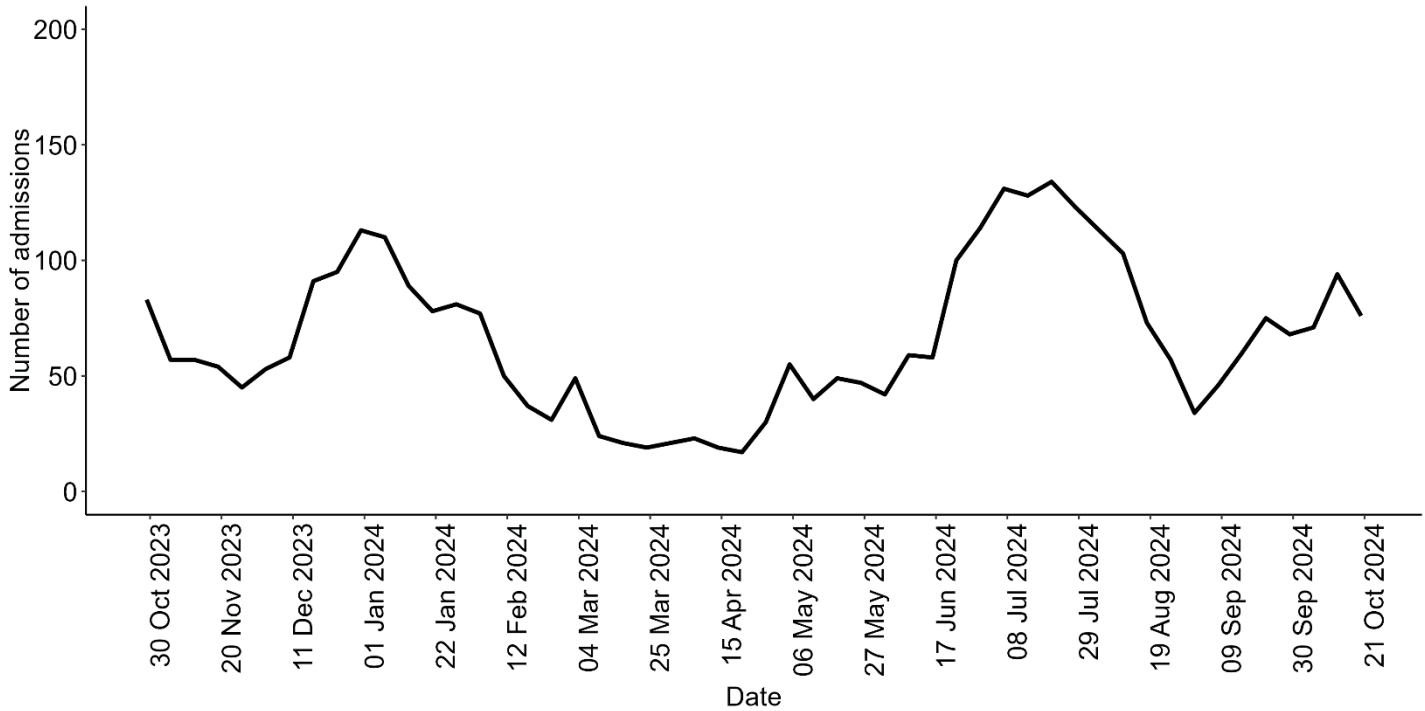


Figure 12. Seven day rolling sum of cases hospitalised in Wales within 28 days of a Covid-19 positive test result in the community (or up to 2 days post-admission), as of 20/10/2024.



Influenza Vaccine Uptake in Wales

Table 3. Uptake of influenza immunisations in GP Practice patients in Wales 2024/25 (as of 17/10/2024)

Influenza immunisation uptake in the 2024/25 season	
People aged 65y and older	22.3%
People younger than 65y in a clinical risk group	7.9%
Children aged two & three years	22.6%
Children aged between four & ten years	-
Children aged between 11 & 15 years	-
Total NHS staff	-
NHS staff with direct patient contact	-

The end of season report Influenza in Wales 2023/24 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 41, GP ILI consultations increased to 3.6 per 100,00 in England decreased to 1.5 per 100,000 in Scotland.
- During Week 41, 4,135 samples testing positive for influenza were reported in England of which 123 were positive for influenza (47 influenza A(not subtyped), 38 influenza A(H3N2), 29 influenza A(H1N1) and 16 influenza B. Overall influenza positivity increased to 3% in England in week 41 and increased to 4.2% in Scotland in week 41.
- 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 41, that influenza positivity is below the 10% positivity epidemic threshold at 2%. Of the 31 countries and areas reporting on influenza intensity, none reported medium intensity or higher. Of the 30 countries and areas reporting on geographic spread of influenza viruses within a country or area, none reported widespread or regional distribution. There were 14 confirmed influenza virus infection detections reported from sentinel primary care.
Source: European Respiratory Virus Surveillance Summary (ERVISS): <https://erviss.org/>
- The WHO reported on 16/10/2024, based on data up to 06/10/2024 that in the Northern hemisphere influenza activity in temperate countries remained at interepidemic levels. Elevated activity was elevated in Western Africa and Middle Africa (A(H3N2) and influenza B), Western Asia, Southern Asia and South-East Asia (H1N1), Central America and the Caribbean (AH3 viruses). Influenza activity increased in countries in Western and Middle Africa and Central America.
- In the Southern hemisphere, influenza activity remained elevated in some countries in South America (influenza B), Eastern Africa (influenza A and influenza B). Elevated activity was seen in Tropical South America. **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 were low during week 41 (ending 12/10/2024). Nationally, 359 (0.8%) out of 46,025 specimens have tested positive for influenza in week 41 in clinical laboratories nationwide, of these positive samples, 323 (90.0%) were influenza A and 36 (10.0%) were influenza B. Further characterisation has been carried out on 688 specimens by public health laboratories, and 38 samples tested positive for influenza; 14 influenza A(H1N1)pdm09, 15 influenza A(H3N2), nine influenza A(not subtyped) and 0 influenza B.
Source: CDC Weekly US Influenza Surveillance Report: [FluView | FluView | CDC](#)
- The Public Health Agency of Canada reported that during week 40, influenza activity remained stable compared to the previous week. During week 41, 98 influenza detections were reported: 90 influenza A and eight influenza B. The percentage of ILI visits was 1.8%. **Source:** <https://health-infobase.canada.ca/respiratory-virus-surveillance/>

Respiratory syncytial virus (RSV) in North America

- The USA CDC reported that the RSV positivity rate increased in week 41.
Source: CDC RSV national trends: [National Respiratory and Enteric Virus Surveillance System | CDC](#)

COVID-19 – UK and international summary

- As of 16/10/2024, there were 8.8 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/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