



Llywodraeth Cymru
Welsh Government

Science Evidence Advice

Weekly Surveillance Report

2 September 2025



gov.wales

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Science Evidence Advice: Weekly Surveillance Report

A. Top Line Summary (as at week 34 2025, up to 24 August 2025)

- Overall, COVID-19 confirmed case admissions to hospital **decreased**.
- COVID-19 cases who are inpatients have **increased**.
- RSV activity in children under 5 years has **remained stable at zero**.
- Influenza in-patient cases have **remained stable** in the latest week and admissions **decreased to zero**.
- Norovirus confirmed cases have **decreased** in week 34 (the most recent week available).
- Whooping Cough notifications have **increased** in week 33 (the most recent reporting week).
- Scarlet Fever notifications **decreased** in the most recent week (week 34).

Please note, from the 10th of June 2025 the SEA weekly surveillance report has been produced fortnightly, returning to weekly in September 2025.

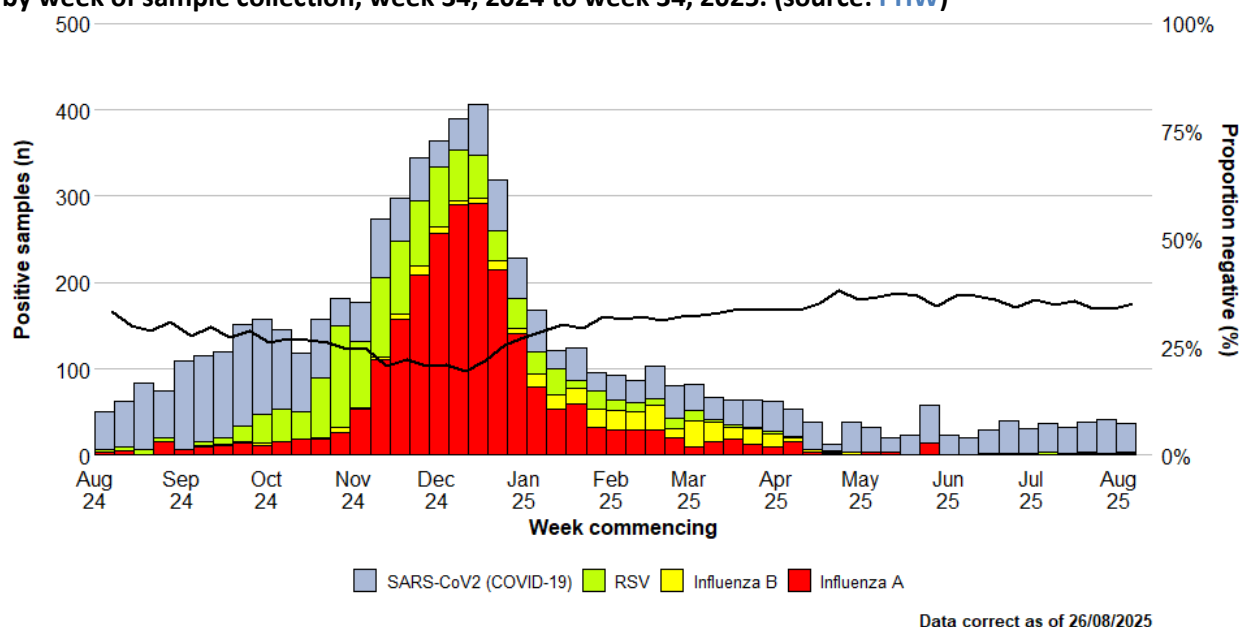
B. Acute Respiratory Infections Situation Update

B.1. COVID-19 Situation Update

- At a national level, the weekly number of confirmed cases of community-acquired admissions to hospital **decreased** and the number of cases who were inpatients **increased** in week 34 2025 (to 24 August 2025).
- As at 24 August 2025 (week 34), the number of confirmed cases of community acquired COVID-19 admitted to hospital **decreased** to 29 (31 two weeks ago) and there were 178 in-patient cases of confirmed COVID-19, none of whom were in critical care compared to 159 and three two weeks ago.
- Confirmed cases of positive tests **increased** to 10.8 % in hospital and non-sentinel GP practices. Confirmed cases of COVID-19 in symptomatic patients attending sentinel GPs for COVID-19 remained stable in the most recent week.

- Thus far this season, according to European Mortality Monitoring (EuroMoMo) methods, no excess has been reported in the weekly number of deaths from all causes in Wales.
- In the last six weeks, **Omicron group Other** is the most frequently detected COVID-19 variant in Wales, accounting for **30.3%** of all sequenced cases.
- The number of ambulance calls recorded referring to syndromic indicators **decreased** from **1,617** in the previous week to **1,579** in the latest reporting week.
- During Week 34, 2025, **3** ARI outbreaks were reported to the Public Health Wales Health Protection Team. Of these, two were Covid-19 and one was respiratory. All three were in residential homes.

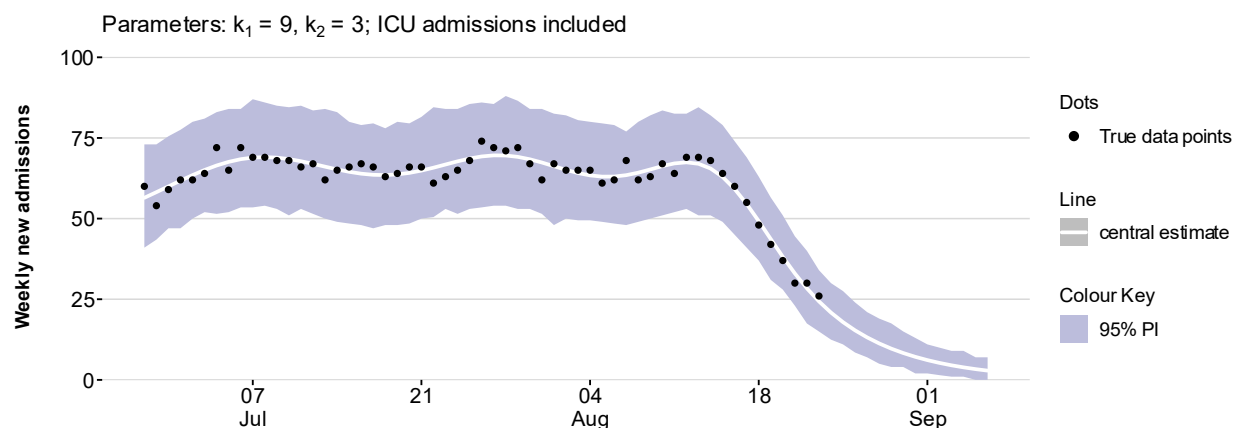
Figure 1: Samples from hospital patients submitted for RSV, Influenza and SARS-CoV2 testing only, by week of sample collection, week 34, 2024 to week 34, 2025. (source: PHW)



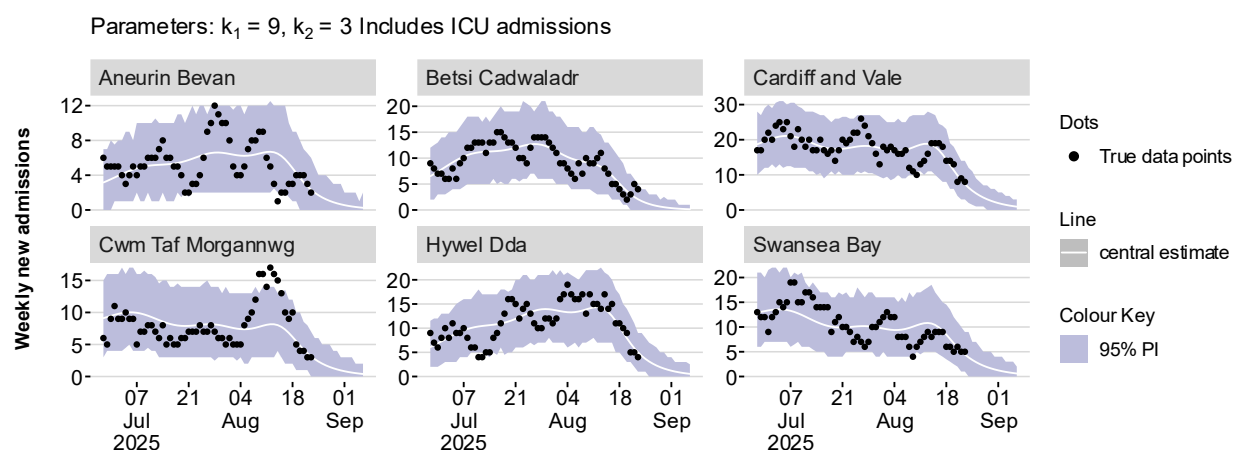
COVID-19 Short Term Projections

The Science Evidence Advice team at Welsh Government have produced short-term projections (STPs) for COVID-19 which can be produced nationally and at the Local Health Board unit. STPs project 2 weeks forward from 8 weeks of current data, and do not explicitly factor in properties of the infectious disease, policy changes, changes in testing, changes in behaviour, emergence of new variants or rapid changes in vaccinations.

The COVID-19 STPs uses admissions data from PHW until **23 August 2025** to make short term projections for COVID-19 two weeks forward (**6 September 2025**). The black dots show the actual data points while the white line is the best fit from the most recent projection. The colour shadings represent the 95% confidence interval of the projections with light purple showing the most recent projection and the dark purple showing the oldest. The STPs for Wales show that COVID-19 admissions are projected to decrease over the next two week period (Figure 2). Figure 3 shows that COVID-19 admissions are projected to decrease in health boards in Wales over the next two weeks.

Figure 2: Short Term Projections for COVID-19 hospital admissions in Wales (data until 23 August 2025)

Source: Public Health Wales

Figure 3: Short Term Projections for COVID-19 hospital admissions in Wales Health Boards (data until 23 August 2025)

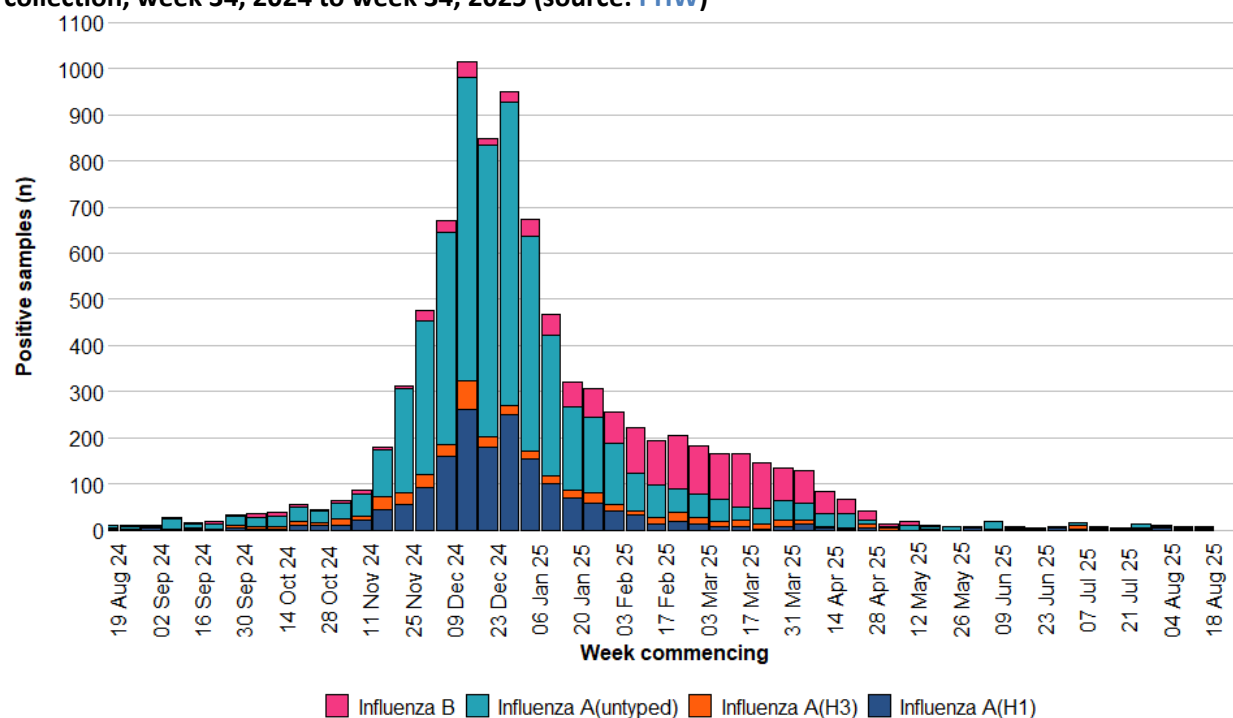
Source: Public Health Wales

B.2. Influenza Situation Update

Influenza activity is at baseline levels and case numbers remain broadly stable. Confirmed cases of community acquired influenza admitted to hospital **decreased** to 0 in the current week. Test positivity remained stable at 0.7%.

There were **4** in-patient cases of confirmed influenza, **none** of whom were in critical care (compared to **4** and **0** two weeks ago). In week 34 2025, there were 3 confirmed cases of influenza A(H3), 2 cases of influenza A(H1N1), 3 influenza A untyped and 1 influenza B. (Figure 4).

Figure 4: Influenza subtypes based on samples submitted for virological testing by Sentinel GPs and community pharmacies, hospital patients, and non-Sentinel GPs, by week of sample collection, week 34, 2024 to week 34, 2025 (source: PHW)



Data correct as of 26/08/2025

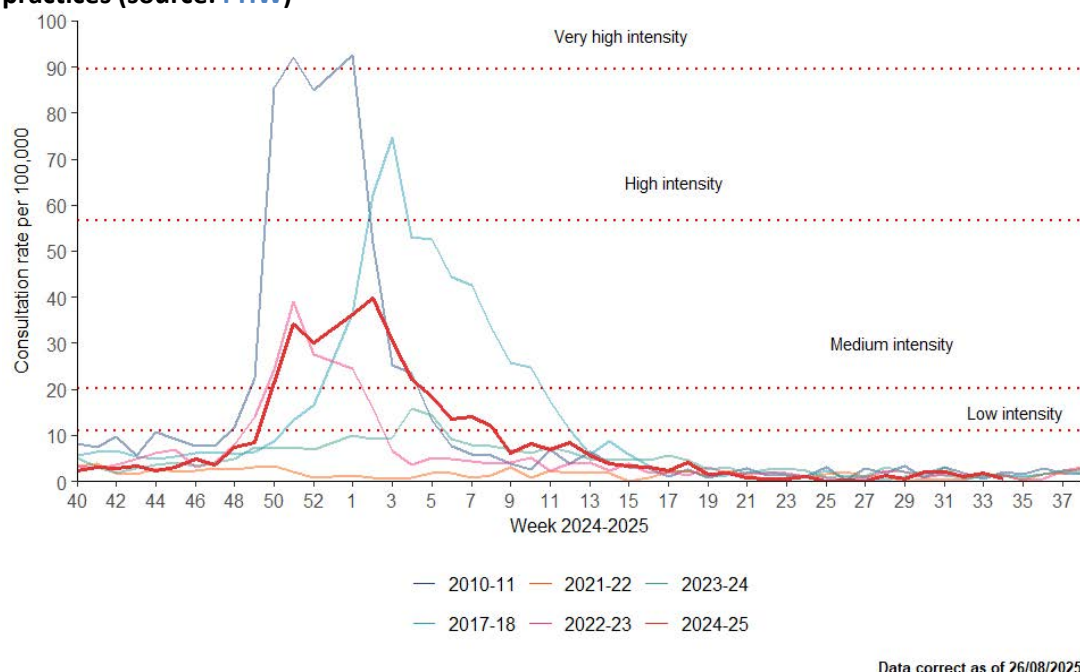
The sentinel GP consultation rate for influenza-like illness (ILI) is at baseline and the three-week trend is variable.

There were **0.6** ILI consultations per 100,000 practice population in the most recent week, a decrease compared to the previous week (1.7 consultations per 100,000).

In the most recent week, using all available data from general practices, there were 8.8 ARI consultations per 100,000 practice population, a decrease from 10 in the previous week. The highest rates were found in people aged under 1 year (269.1) followed by people aged 1 to 4 (234.1) and people aged 75+ (133.4).

Surveillance indicators for acute respiratory infections in GP consultation data in Wales are decreasing in people aged under 5 years.

Figure 5: Clinical consultation rate for ILI per 100,000 practice population in Welsh sentinel practices (source: PHW)

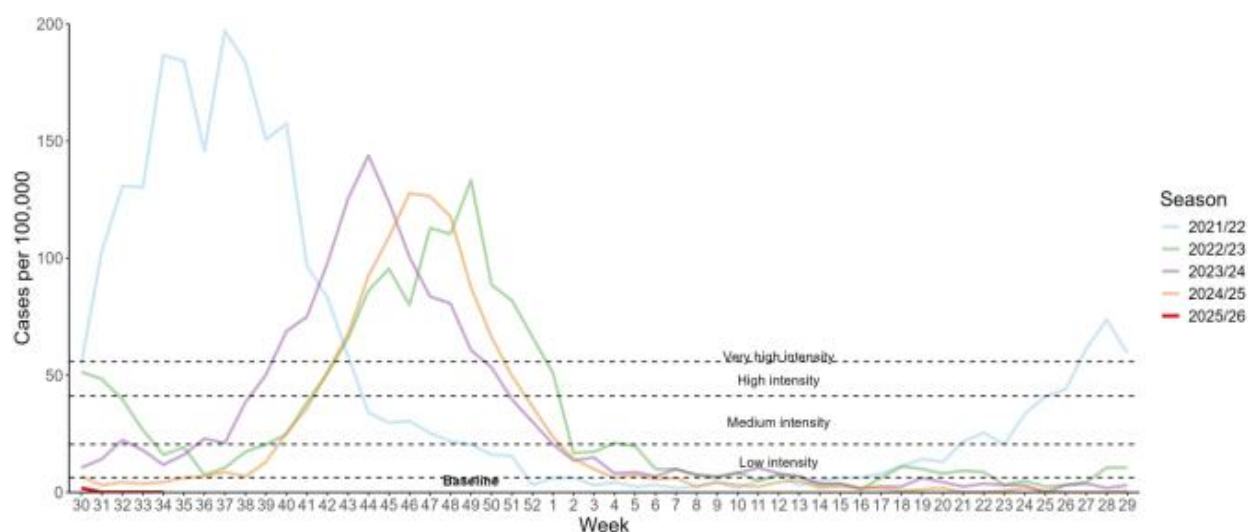


B.3. Respiratory Syncytial Virus (RSV) update

The number of confirmed cases of community acquired RSV admitted to hospital remained stable at one.

Incidence per 100,000 population in children aged up to 5y **remained stable** at 0.0 in the most recent week (0.0 two weeks ago). During Week 34 there were two inpatient cases of confirmed RSV, none in critical care.

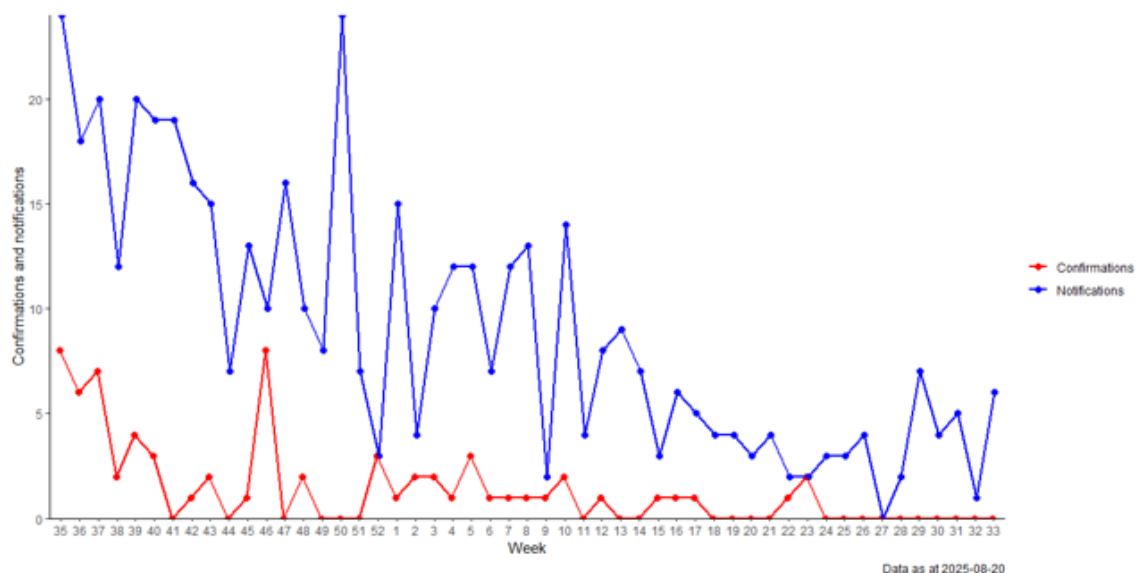
Figure 6: RSV Incidence Rate per 100,000 population under 5 years, week 30 2020 to week 34 2025 (source: PHW)



B.4. Whooping Cough (Pertussis)

Figure 7 below shows that whooping cough notifications up to the end of week 33 (latest available) **increased** but remained at low levels. Lab confirmations continue to be at very low levels (Whooping cough is now reported on every two weeks).

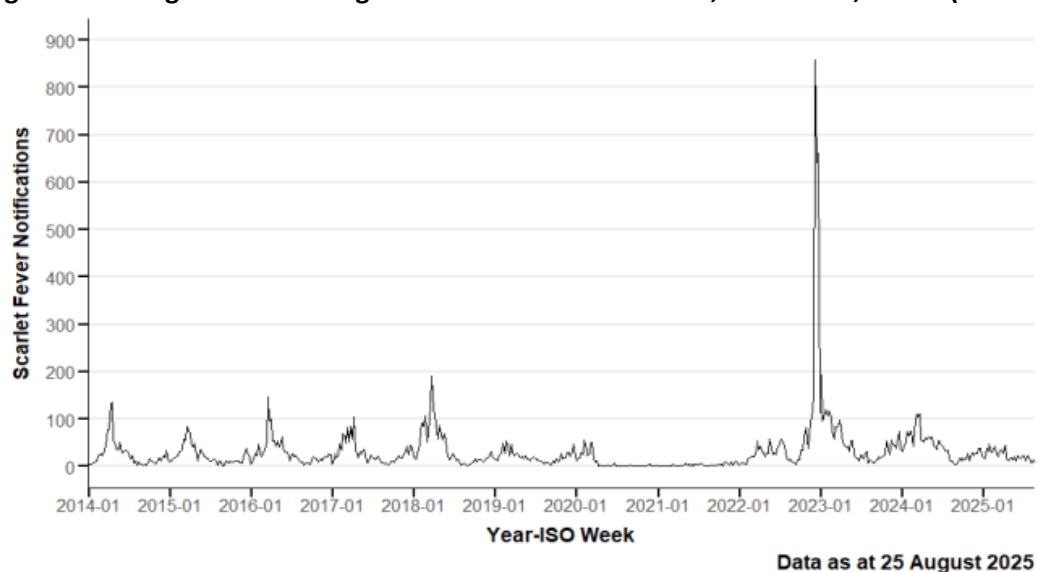
Figure 7: Weekly notifications and confirmations of Pertussis/Whooping Cough in Wales. (Source: PHW)



B.5. iGAS and Scarlet Fever

The number of iGAS notifications are currently low, remaining at seasonally expected levels. Scarlet Fever notifications have **decreased** in the most recent week (week 34) as shown in the figure below.

Figure 8: Rolling 3 Week Average Scarlet Fever Notifications, 2014-2025, Wales (source: PHW)



C. Science Evidence Advice Winter Modelling

The Science Evidence Advice (SEA) team in Welsh Government published modelled scenarios for COVID-19, RSV and Influenza for [Winter 2024-25](#). This used analysis of historical data and projected forward to estimate hospital demand throughout winter 2024/25, which contributed to winter planning for NHS Wales.

The modelled scenarios were produced from September 2024 until April 2025 and these can be found in previous surveillance reports along with the technical notes, [Science Evidence Advice: communicable disease surveillance reports | GOV.WALES](#)

Note that the modelling was an estimate of what may happen not a prediction of what would happen.

D. Communicable Disease Situation Update (non-respiratory)

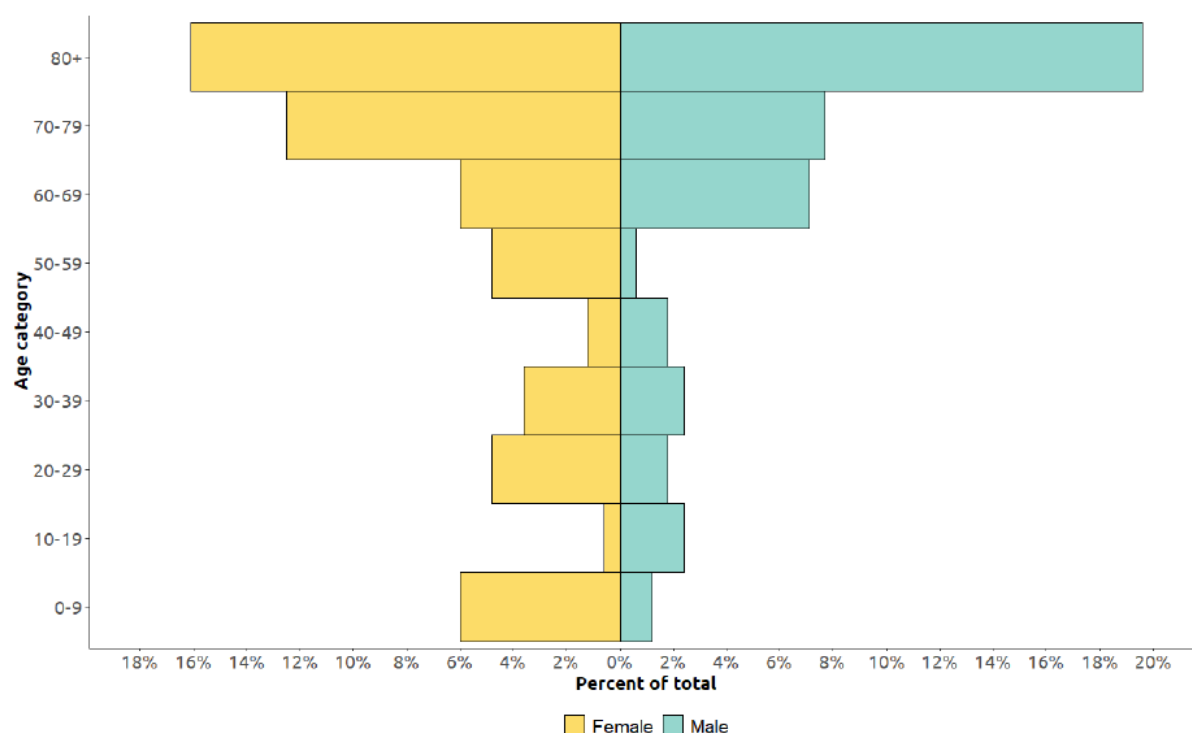
D.1. Norovirus

In the latest available reporting week (week 34 2025), a total of **7** Norovirus confirmed cases were reported in Welsh residents. This is a decrease **(-22.2%)** in reported cases compared to the previous reporting week (week 33 2025), when 9 Norovirus confirmed cases were reported.

In the last 12 week period (02/06/2025 to 24/08/2025) a total of **168** Norovirus confirmed cases were reported in Welsh residents. This is a decrease **(-61.9%)** in reported cases compared to the same 12 week period in the previous year (02/06/2024 to 24/08/2024) when **441** Norovirus confirmed cases were reported.

In the last 12 weeks (02/06/2025 to 24/08/2025) **93 (55.4%)** confirmed Norovirus cases were female and **75 (44.6%)** confirmed cases were male. The age groups with the most cases were the 80+ (**60** cases) and 70-79 (**34** cases) age groups.

Figure 9: Age and sex distribution of confirmed Norovirus cases in the last 12 weeks (02/06/2025 to 24/08/2025)



Notes: This data from PHW only includes laboratory-confirmed PCR positive cases of Norovirus in Wales within the 12-week period up until the end of the current reporting week, week 32 2025 (19/05/2025 to 10/08/2025).

Under-ascertainment is a recognised challenge in Norovirus surveillance with sampling, testing and reporting known to vary by health board. In addition, only a small proportion of community cases are confirmed microbiologically.

E. UK and International Surveillance Update

E.1. Updates on Avian Influenza in the UK (up to 1 September 2025)

31 August 2025

Highly pathogenic avian influenza (HPAI) H5N1 was confirmed in poultry at a [premises near Exminster, Teignbridge, Devon](#) (AIV/2025/61).

A 3km protection zone and 10km surveillance zone has been declared around the premises. All poultry on the premises will be humanely culled.

28 August 2025

Highly pathogenic avian influenza (HPAI) H5N1 was confirmed in other captive birds at a premises near [Evercreech, Frome and East Somerset, Somerset \(AIV 2025/60\)](#).

A 3km captive bird (monitoring) controlled zone has been declared surrounding the premises. The affected birds on the premises have been humanely culled.

27 August 2025

Following successful completion of disease control activities and surveillance in the [zone around a premises near Dulverton, Tiverton and Minehead, Somerset \(AIV 2025/51\)](#), the 3km protection zone has ended and the area that formed it becomes part of the surveillance zone.

20 August 2025

Due to the recent increase in avian influenza cases in game birds and increasing risk of avian influenza, particularly in coastal counties, the [avian influenza prevention zone \(AIPZ\) with mandatory biosecurity measures](#) has been updated to include additional biosecurity measures for game bird rearers and shoot operators.

These include:

- a requirement to cleanse and disinfect vehicles and footwear
- a requirement to collect and report dead birds found in the vicinity of release pens
- measures to prevent access to feeders and drinkers by wild birds

E.2. [Seasonal surveillance of dengue](#) (29 August)

Since the beginning of 2025 and as of 27 August 2025, three countries in Europe have reported cases of dengue: France (14), Italy (five), and Portugal (two).

This week France and Italy reported new cases.

E.3. [Seasonal surveillance of West Nile virus infection in the EU/EEA](#) (29 August)

Since the beginning of 2025, and as of 27 August 2025, nine countries in Europe have reported human cases of West Nile virus infection: Albania, Bulgaria, France, Greece, Hungary, Italy, Romania, Serbia and Spain.

E.4. [Seasonal surveillance of Crimean-Congo haemorrhagic fever](#) (29 August)

Since the beginning of 2025 and as of 27 August 2025, two countries in Europe have reported cases of Crimean-Congo haemorrhagic fever (CCHF): Spain (three) and Greece (two).

This week, no new cases of CCHF have been reported to ECDC.

E.5. [Chikungunya virus disease](#) (29 August)

Since the beginning of 2025 and as of 27 August 2025, two countries in Europe have reported cases of chikungunya virus disease: France (227) and Italy (63).

This week France reported 71 new locally acquired cases of chikungunya virus disease, while Italy reported 34 new locally acquired cases.

E.6. [Influenza A\(H5N1\) – Multi-country \(World\) – Monitoring human cases](#) (29 August)

There has been no further update regarding Influenza A(H5N1) – Multi-country (World) – Monitoring human cases since 8th August 2025.

E.7. [Vibrio non-cholerae infection - Poland - 2025](#) (29 August)

There has been no further update regarding Vibrio non-cholerae infection in Poland since 8th August 2025.

E.8. [Circulating vaccine-derived poliovirus type 1 \(cVDPV1\) - Israel - 2025](#) (22 August)

On 4 August 2025, Israel informed WHO of an outbreak of circulating vaccine-derived poliovirus type 1 (cVDPV1), as described in the WHO Disease Outbreaks News published on 20 August 2025.

Between February and July 2025, cVDPV1 was detected in nine environmental samples from seven sites, mainly in Jerusalem and the Central Region. No cases of paralysis have been reported. Genetic analysis shows that all isolates collected are linked and are also linked to earlier Sabin-like viruses that have been detected since October 2024.

The ongoing detection in environmental samples indicates sustained community transmission. Israel stopped using the oral bivalent polio vaccine (bOPV) in March 2025 but continues to provide four doses of inactivated polio vaccine (IPV) as part of the routine immunization schedule for infants up to 12 months of age. WHO/UNICEF (WUENIC)

Estimates of National Immunization Coverage for three doses of IPV was 98% in 2024, but Jerusalem's rates are notably lower.

In response to the outbreak, the authorities have enhanced surveillance, conducted investigations to assess the scale of local circulation, and intensified immunization campaigns in under-vaccinated communities. The Ministry of Health's emergency response team, established during previous polio outbreaks, remains active. Communication strategies are being tailored to address vaccine hesitancy and improve immunization rates, with support from international partners such as WHO and the Global Polio Eradication Initiative.