



Llywodraeth Cymru
Welsh Government

Science Evidence Advice (SEA)

Summary of Advice

28 July 2023



gov.wales

Top Line Summary

- **Please note that due to limited data availability this is the last document in the series.**
- **The general public as well as animal workers should be advised to avoid contact with sick and dead animals and to report these to animal health authorities.**
- There is a slightly mixed picture of COVID-19 infections across all Wales-wide indicators.
- Deaths related to COVID-19 are stable.
- COVID-19 still poses a significant threat to human health. COVID-19 is still circulating and vaccines should be prioritised for high-priority groups in settings where coverage (including boosters) is incomplete.
- PHW report that influenza activity has decreased to baseline levels, but small numbers of cases continue to be detected. UKHSA reports that influenza positivity remains low and stable. WHO reports that the influenza detections are generally low. Australian government reports that the influenza impact on society has decreased.
- Avian influenza continues to be a risk, there is limited evidence that avian influenza virus is getting better at infecting humans or other mammals.
- PHW report that cases of RSV in children under 5 years of age increased above the baseline threshold.
- PHW report that Scarlet fever notifications are back to baseline but iGAS reports remain at higher than seasonally expected levels.

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1. Wales COVID-19 Situation Update

- There is a slightly mixed picture of COVID-19 infections across all Wales-wide indicators.
- The weekly number of confirmed case admissions to hospital and the number of cases who are inpatients have increased slightly. Admissions to critical care wards based on the weekly number of confirmed cases have decreased.
- COVID-19 still poses a significant threat to human health. COVID-19 is still circulating and vaccines should be prioritised for high-priority groups in settings where coverage (including boosters) is incomplete.
- Deaths related to COVID-19 are stable.
- Data from sequenced cases shows that XBB1.16 is the most dominant variant in Wales accounting for 39.4% of all sequenced cases.

1.1. PHW Cases (PCR & LFD Testing)

PHW most recent epidemiological report from 26 July 2023 [reports](#)¹ that the data suggest a slightly mixed picture of COVID-19 infections. Many parameters remain at low levels and relatively stable. However, in most recent weeks there has been a slight increase in certain indicators.

PHW report that confirmed PCR cases and the adjusted case episode rates (PCR +LFD episodes) continue to remain at low levels but have increased slightly in the most recent week. Compared to the previous week, LFT positivity rate was 39.57% in week 28 and increased to 49.33% in week 29. Incidence based on LFT testing was highest in the 40-59 age group.

1.2. Hospitalisations

PHW most recent epidemiological report from 26 July 2023 [reports](#)² that at a national level, the weekly number of confirmed case admissions to hospital and the number of cases who are inpatients have increased slightly in week 29 but remains at a low level. Admissions to critical care wards based on the weekly number of confirmed cases have decreased in week 29 compared to week 28. As at 23th July, 108 people currently in hospital have had a positive COVID test, including 3 currently in ICU.

PHW report that confirmed PCR cases and the adjusted case episode rates (PCR +LFD episodes) continue to remain at low levels but have increased slightly in the most recent week. Compared to the previous week, LFT positivity rate was 39.57% in week 28 and increased to 49.33% in week 29. Incidence based on LFT testing was highest in the 40-59 age group.

1.3. Deaths

ONS published statistics on 25 July 2023 on provisional [weekly deaths](#)³, including deaths involving COVID-19, for the week ending 14 July 2023. 4 deaths involving COVID-19 were registered in the latest week. This was 0.6% of all deaths and the same number as the previous week.

653 deaths from all causes were registered in the latest week. This was 21 more than the previous week and is 69 more than the five-year average for 2017-2019 and 2021-2022.

1.4. International overview – World Health Organisation update

As of 27 July 2023, [WHO reports](#)**Error! Bookmark not defined.** that globally, over 868 000 new COVID-19 cases and over 3700 deaths were reported in the last 28 days (26 June to 23 July 2023). While five WHO regions have reported decreases in

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³ [Deaths registered weekly in England and Wales, provisional - Office for National Statistics \(ons.gov.uk\)](#)

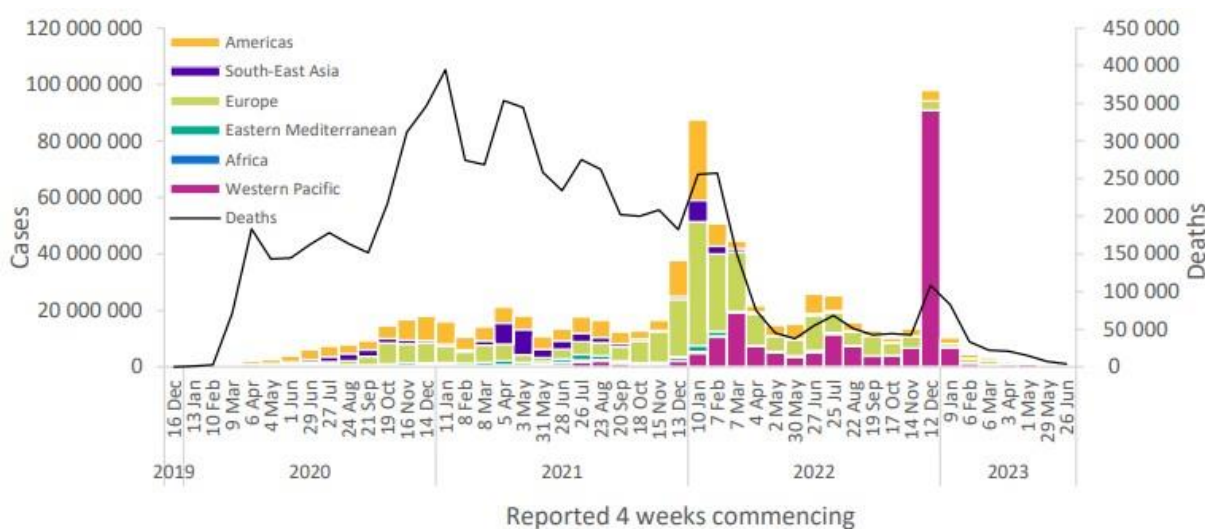
the number of both cases and deaths, the Western Pacific Region has reported an increase in the number of both cases and deaths. As of 23 July 2023, over 768 million confirmed cases and over 6.9 million deaths have been reported globally.

Reported cases do not accurately represent infection rates due to the reduction in testing and reporting globally. During this 28-day period, 52% (122 of 234) of countries and territories reported at least one case – a proportion that has been declining since mid-2022. Additionally, data from previous weeks are continuously being updated to incorporate retrospective changes in reported COVID-19 cases and deaths made by countries. Data presented in this report are therefore incomplete and should be interpreted in light of these limitations.

Some countries continue to report high burdens of COVID-19, including increases in newly reported cases and, more importantly, increases in hospitalizations and deaths – the latter of which are considered more reliable indicators given the reductions in testing.

At the regional level, the number of newly reported cases within a 28-day period has decreased across five of the six WHO regions: the Eastern Mediterranean Region (-75%), the European Region (-72%), the South-East Asia Region (-70%), the African Region (-48%), and the Region of the Americas (-35%); while cases increased in the Western Pacific Region (+8%). The number of newly reported deaths within a 28-day period has decreased across five regions: the Eastern Mediterranean Region (-77%), the European Region (-74%), the South-East Asia Region (-70%), the African Region (-48%), and the Region of the Americas (-31%); while deaths increased in the Western Pacific Region (+23%).

Figure 1 - COVID-19 cases reported by WHO Region, and global deaths by 28-day intervals, as of 23 July 2023



Source: [WHO Weekly Epidemiological Update on COVID-19](#)

The highest numbers of new cases reported within the 28-day period were from the Republic of Korea (593 023 new cases; +60%), Brazil (48 548 new cases; -37%), Australia (35 873 new cases; -68%), Singapore (30 214 new cases; -25%), and New Zealand (20 329 new cases; -47%). The highest numbers of new 28-day deaths

were reported from Brazil (769 new deaths; -27%), Australia (623 new deaths; +82%), the Russian Federation (336 new deaths; -35%), Peru (218 new deaths; -13%), and the Republic of Korea (199 new deaths; -3%).

1.5. European Centre for Disease Prevention and Control (ECDC)

As of 27 July 2023, [ECDC reports](#)⁴ decreasing or stable trends were observed in all EU/EEA indicators based on pooled country data for COVID-19 in all age groups. This is a continuation of the pattern observed in recent weeks.

Out of 20 countries reporting COVID-19 cases, one showed an increase in overall case rates compared to the previous week. Out of seven countries reporting information on hospital admissions, one reported an increase in that indicator. There were 28 deaths reported from 15 countries.

No country is predicted to see increases in the number of reported COVID-19 cases, hospital admissions, or deaths in the period up to 6 August 2023, based on ensemble model forecasts.

Figure 2 - EU/EEA weekly test positivity, 27 July 2023



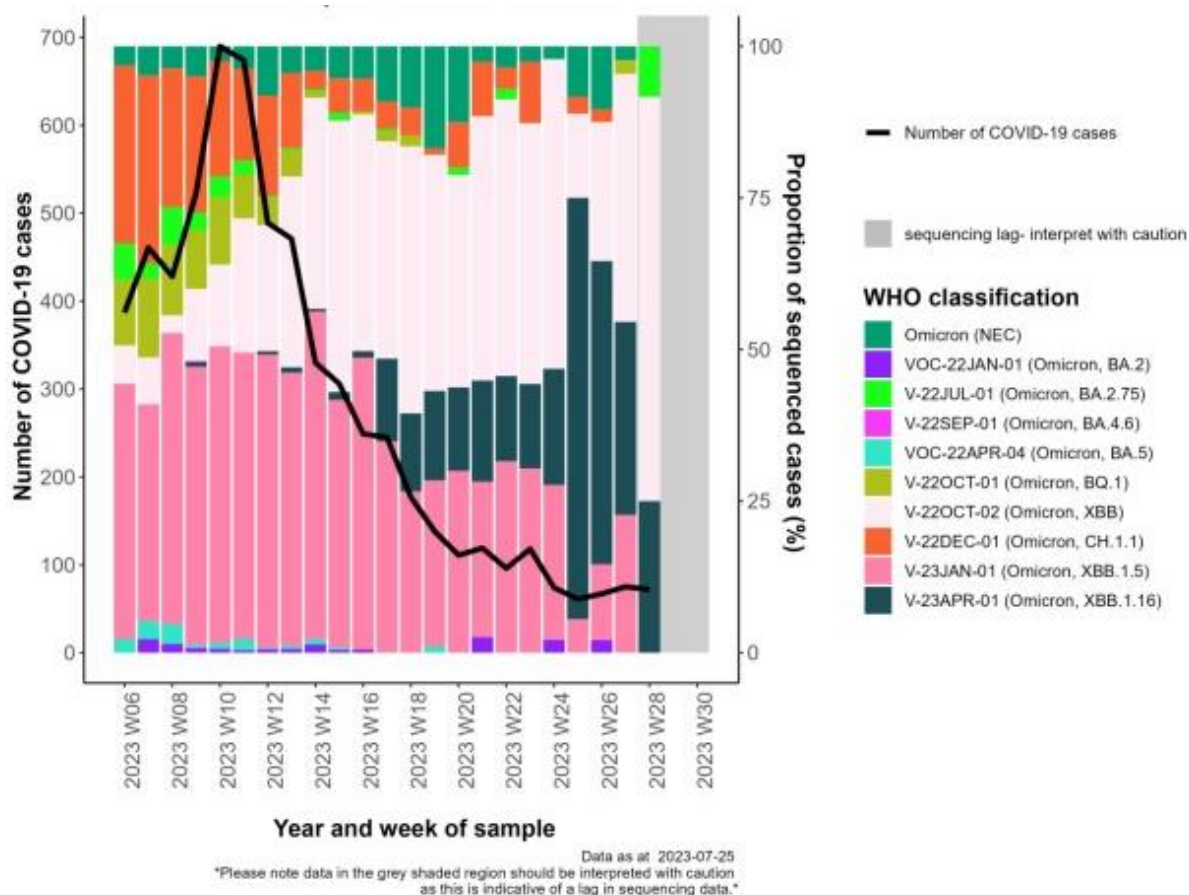
Data source: [Weekly COVID-19 country overview \(europa.eu\)](#)

⁴ [Weekly COVID-19 country overview \(europa.eu\)](#)

1.6. Variant of Concern update

As of 26 July 2023, [PHW reports](#)⁵ that in the last four reporting weeks, V-23APR-01 (Omicron, XBB.1.16) has been the most dominant variant in Wales, accounting for 39.4% of all sequenced cases.

Figure 3 – Proportion of sequenced cases typed as each variant in the past six months in Wales (Data as of 25 July 2023)



Source: [Public Health Wales COVID-19 genomic surveillance](#)

As of 25/07/2023 there have been 57,117 cases of VOC-21NOV-01 (Omicron, BA.1), 29,329 cases of VOC-22JAN-01 (Omicron, BA.2), 1,192 cases of VOC-22APR-03 (Omicron, BA.4), 7,459 cases of VOC-22APR-04 (Omicron, BA.5), 2,079 cases of V-22OCT-01 (Omicron, BQ.1), 1,377 cases of V-22DEC-01 (Omicron, CH.1.1), 1,989 cases of V-23JAN-01 (Omicron XBB.1.5), 1,136 cases of V-22OCT-02 (Omicron XBB), and 187 cases if V-23APR-01 (Omicron, XBB.1.16) confirmed in Wales.

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As of 27 July 2023, [WHO is currently tracking](#)⁶ several SARS-CoV-2 variants, including two variants of interest (VOIs); XBB.1.5 and XBB.1.16. Seven variants under monitoring (VUMs) and their descent lineages; BA.2.75, CH.1.1, XBB, XBB.1.9.1, XBB.1.9.2, XBB.2.3 and EG.5.

Globally, 118 countries have reported the detection of XBB.1.5 since its emergence. Notably, its prevalence has seen a week-on-week decline since epidemiological week 23 (5 to 11 June 2023) when XBB.1.5 accounted for 21.6% of sequences, compared to 11.3% in week 27 (3 to 9 July 2023).

XBB.1.16 has been reported from 99 countries globally. Since epidemiological week 24 (12 to 18 June 2023), XBB.1.16 has become the most prevalent VOI, surpassing the prevalence of XBB.1.5. XBB.1.16 accounted for 24.1% of sequences in week 27, an increase from its prevalence of 20.5 noted in the previous epidemiological report.

As of 27 July 2023, [ECDC reports](#)⁷ that among the five countries reporting at least 10 results from SARS-CoV-2 sequencing or genotyping for weeks 27–28 (3 July to 16 July 2023), the estimated distribution of variants of concern (VOC) or of interest (VOI) was 97.7% (78.9–100.0% from five countries) for XBB.1.5, 13.0% (5.0–21.1% from two countries) for BA.2.75, and 7.0% (1.2–12.9% from two countries) for XBB.

⁶ <https://www.who.int/emergencies/diseases/novel-coronavirus-2019/situation-reports>

⁷ <https://www.ecdc.europa.eu/en/covid-19/country-overviews>

2. Influenza Situation Update

- **The general public as well as animal workers should be advised to avoid contact with sick and dead animals and to report these to animal health authorities.**
- PHW report that influenza activity has decreased to baseline levels, but small numbers of cases continue to be detected.
- UKHSA reports that influenza positivity remained low and stable.
- WHO reports that the influenza detections are generally low.
- Australian government reports that the number of laboratory-confirmed influenza notifications has decreased.

2.1. Weekly Influenza and Acute Respiratory Infection Report – PHW

As of 26 July 2023, [PHW report](#)⁸ that there were four cases of influenza. Overall influenza activity remains at baseline levels, but small numbers of cases continue to be detected.

The Sentinel GP consultation rate for influenza-like illness (ILI) in Wales during Week 29, was 2.4 consultations per 100,000 practice population (Table 1). This remained stable compared to the previous Week (2.4 consultations per 100,000).

The Sentinel GP consultation rate for Acute Respiratory Infections (ARI) was 130.3 per 100,000 practice population during Week 29 (Table 2 and Figure 3). This is a decrease compared to the previous week (135.2 per 100,000). Weekly consultations for Lower Respiratory Tract Infections remained stable (41.66 per 100,000) and Upper Respiratory Tract Infections (89.72 per 100,000) decreased compared to the previous week.

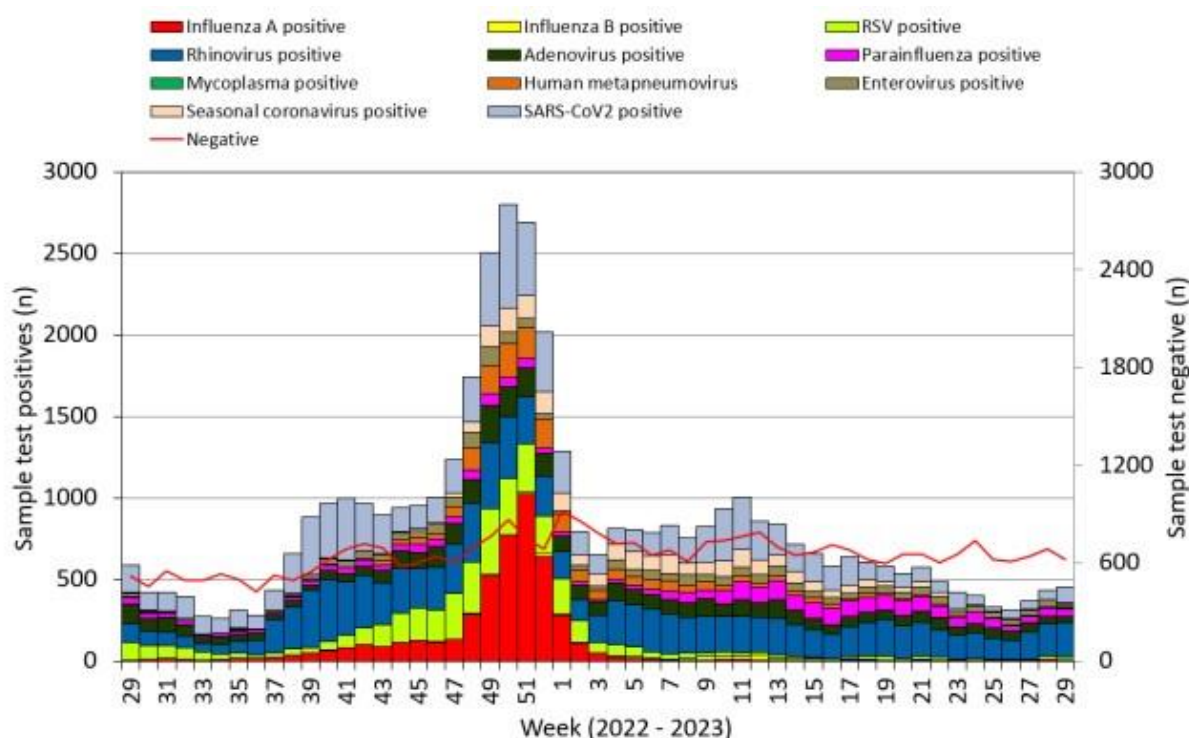
The percentage of calls to NHS Direct Wales which were 'influenza-related' (cold/flu, cough, fever, headache, and sore throat) during Week 29 increased to 14.1%.

⁸ [Weekly Influenza and Acute Respiratory Infection Report - Public Health Wales \(nhs.wales\)](#)

Figure 4 - Uptake of influenza immunisations in GP Practice patients in Wales

Influenza immunisation uptake in the 2022/23 season	
People aged 65y and older	76.3%
People younger than 65y in a clinical risk group	44.2%
Children aged two & three years	44.0%
Children aged between four & ten years	63.9%
Children aged between 11 & 15 years	54.4%
Total NHS staff	46.2%
NHS staff with direct patient contact	46.7%

Figure 5 - Specimens submitted for virological testing for hospital patients and non-sentinel GPs



Data Source: [PHW Weekly Influenza](#) & Acute Respiratory Infection Surveillance

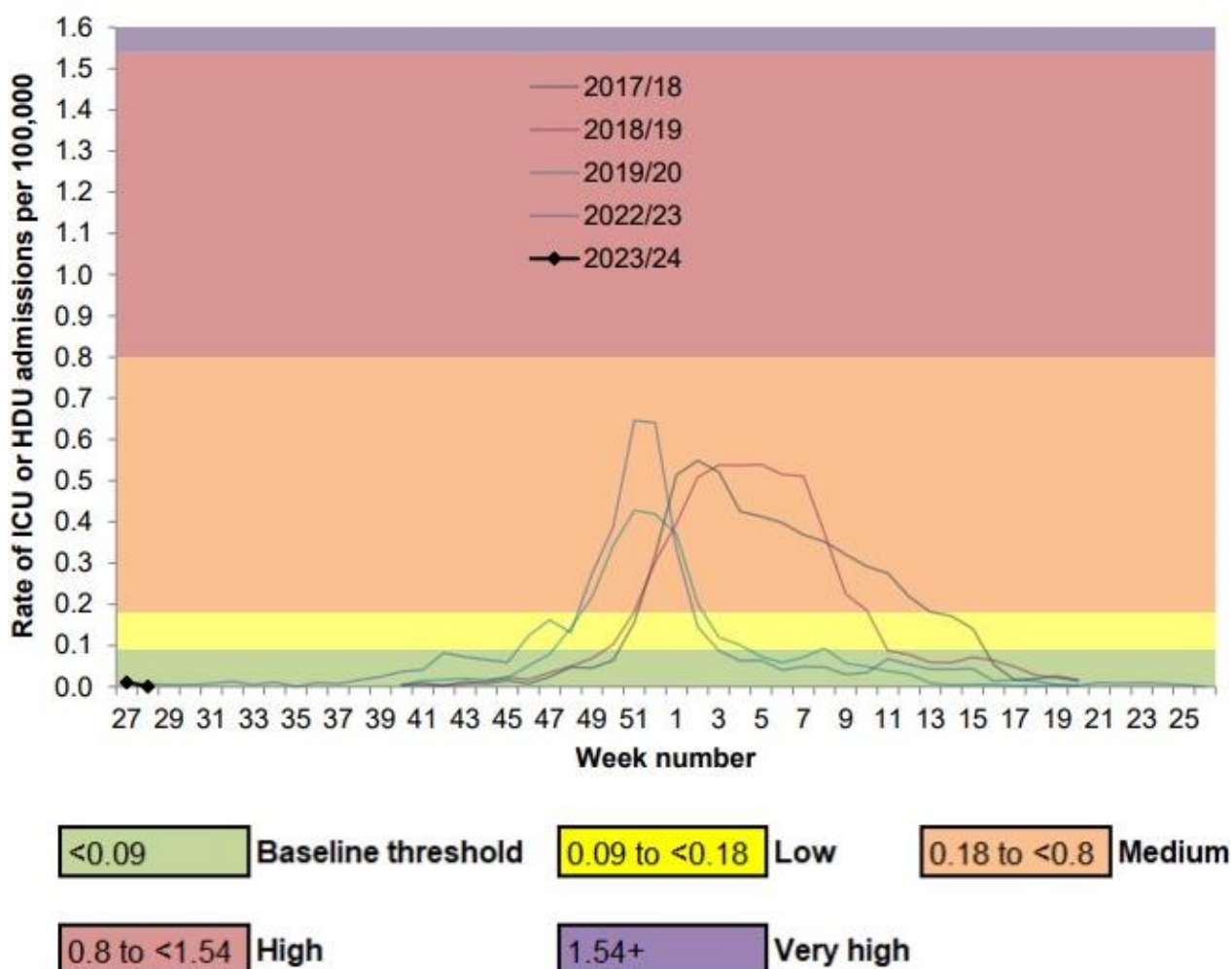
2.2. UKHSA Weekly national influenza surveillance report

As of 20 July 2023, [UKHSA reports](#)⁹, that influenza remained low and stable at 0.8% compared to the previous week, with highest positivity seen in children aged 5 to 14 years old at 1.7%. Through primary care surveillance, the influenza-like-illness consultations indicator remained stable in week 28 compared to the previous week and was within the baseline activity level range.

One influenza A (not subtyped) confirmed outbreak was reported in week 28 in England, in a care home. Influenza ICU admissions remained low and stable in week 28 and remained within the baseline range of activity.

Emergency department attendances for influenza-like illness remained stable nationally.

Figure 6 - Weekly influenza ICU or HDU admissions by influenza type, SARI Watch, England



⁹ <https://www.gov.uk/government/statistics/national-flu-and-covid-19-surveillance-reports-2022-to-2023-season>

2.3. WHO influenza update

As of 24 July 2023, [WHO reports](#)¹⁰ that globally, influenza detections remained low, but in the southern hemisphere, some countries reported increased influenza detections in recent weeks while detections in other countries seemed to have peaked. In Europe, influenza detections were low in all reporting countries. Influenza A viruses predominated with A(H1N1) pdm09 predominant among subtyped A viruses. Pooled all-cause mortality estimates from the EuroMOMO network showed no excess mortality across all age groups.

2.4. Australian Influenza Surveillance

As of 28 July 2023, the [Australian government](#) reports that Influenza-like-illness (ILI) activity in the community reported to FluTracking has decreased in the last fortnight, while ILI presentations to ASPREN sentinel general practitioners (GPs) have been stable.

In the year-to-date (1 January to 23 July 2023), there have been 174,898 notifications reported to the National Notifiable Diseases Surveillance System (NNDSS) in Australia, of which 22,436 notifications had a diagnosis date this fortnight.

There is currently not enough information to comprehensively assess the potential severity of the 2023 influenza season at this time.

In the year-to-date, of the 174,898 notifications of laboratory-confirmed influenza, 162 influenza-associated deaths have been notified to the NNDSS.

Since seasonal surveillance commenced in April 2023, there have been 1,991 sentinel hospital admissions, of which 137 (6.88%) were admitted directly to ICU

This fortnight, community ILI activity has decreased or stabilised, notifications of laboratory-confirmed influenza to the NNDSS have decreased, and admissions to sentinel hospitals with influenza appear to be decreasing.

It is likely that the impact on society due to the 2023 influenza season this fortnight has decreased.

¹⁰ <https://www.who.int/publications/m/item/influenza-update-n--445>

2.5. Avian Influenza

[WHO reports](#)¹¹ that between 14 July and 20 July 2023, no new cases of human infection with avian influenza A(H5N1) virus were reported to WHO in the Western Pacific Region. As of 31 May 2023, a total of 244 cases of human infection with avian influenza A(H5N1) virus have been reported from four countries within the Western Pacific Region since January 2003. Of these cases, 136 were fatal, resulting in a case fatality rate (CFR) of 56%. The last cases in the Western Pacific Region were reported from Cambodia on 23 and 24 February 2023.

Figure 7 - World Health Organisation cumulative number of laboratory-confirmed human cases and deaths of influenza A(H5N1) virus infections.

Country	2003-2009		2010-2014		2015		2016		2017		2018		2019		2020		2021		2022		2023		Total	
	C	D	C	D	C	D	C	D	C	D	C	D	C	D	C	D	C	D	C	D	C	D	C	D
Cambodia	9	7	47	30	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	1	58	38
China	38	25	9	5	6	1	0	0	0	0	0	0	0	0	0	0	0	0	1	1	1	0	55	32
Lao PDR	2	2	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	3	2
Viet Nam	112	57	15	7	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	128	64
Total	161	91	71	42	6	1	0	0	0	0	0	0	0	1	0	0	0	2	1	3	1	244	136	

Globally, from January 2003 to 31 May 2023, 876 cases of human infection with avian influenza A(H5N1) virus were reported from 23 countries. Of these 876 cases, 458 were fatal (CFR of 52%). Between 14 July and 20 July 2023, one new case of human infection with avian influenza A(H5N6) virus was notified to WHO in the Western Pacific Region. The case was a 64-year-old male from Guilin city, Guangxi province with onset of illness on 3 July 2023. He had exposure to live poultry which he kept. He has been hospitalized since 4 July 2023, and is currently in severe condition. No family members have developed symptoms at the time of reporting.

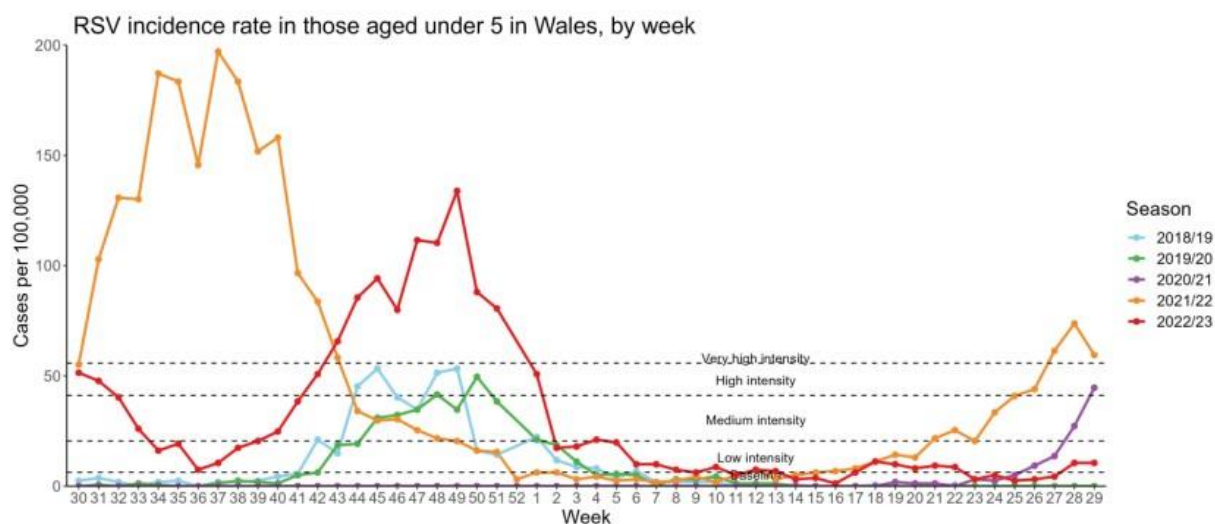
¹¹ <https://www.who.int/westernpacific/emergencies/surveillance/avian-influenza>

3. Respiratory Syncytial Virus (RSV) and Invasive Group A streptococcal update

- PHW report that cases of RSV in children under 5 years of age increased above the baseline threshold.
- UKHSA reports that the overall positivity for RSV remained low.
- PHW report that Scarlet fever notifications are back to baseline but iGAS reports remain at higher than seasonally expected levels.

As of 23 July 2023, PHW report that cases of RSV in children under 5 years of age increased above the baseline threshold.

Figure 8 - RSV Incidence rate in those aged under 5 in Wales, by week



As of 20 July 2023, [UKHSA reports](#)¹² the overall positivity for RSV remained low at 0.2%, with the highest positivity in those aged under 5 years old at 0.7%. Emergency department attendances for acute bronchiolitis increased slightly nationally.

¹² [National flu and COVID-19 surveillance reports: 2022 to 2023 season - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/news/national-flu-and-covid-19-surveillance-reports-2022-to-2023-season)

3.1. Incidence data for Strep A and Scarlet Fever

As of 23 July 2023, PHW report that Scarlet fever notifications are back to baseline but iGAS reports remain at higher than seasonally expected levels.

Figure 9 - PHW Scarlet Fever Notifications by year, 23 July 2023



Figure 10 - PHW Lab Confirmed Invasive group A streptococcal infections, 23 July 2023

