



Llywodraeth Cymru
Welsh Government

Science Evidence Advice

Weekly Surveillance Report

19 August 2025



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Science Evidence Advice: Weekly Surveillance Report

A. Top Line Summary (as at week 32 2025, up to 10 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 and admissions have **remained stable** in the latest week.
- Norovirus confirmed cases have **decreased** in the most recent week (week 32).
- Whooping Cough notifications have **increased** in week 31 (the most recent reporting week).
- Scarlet Fever notifications **increased** in the most recent week (week 32).

Please note, from the 10th of June 2025 the SEA weekly surveillance report is now produced fortnightly until September 2025.

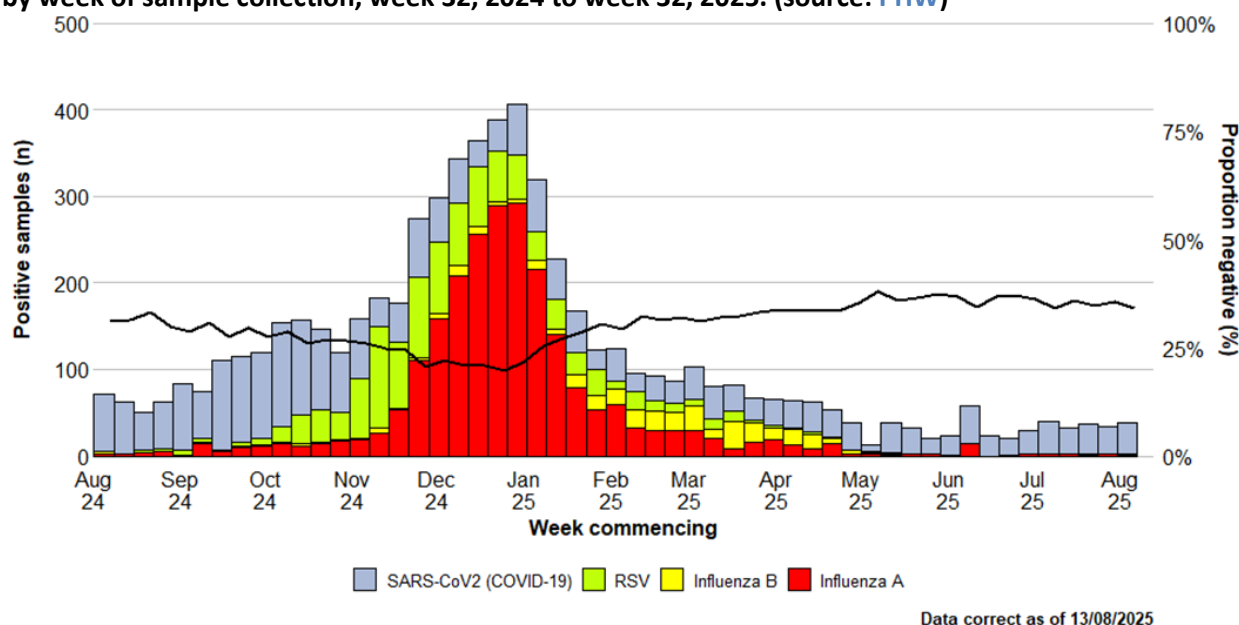
B. Acute Respiratory Infections Situation Update

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 32 2025 (to 10 August 2025).
- As at 10 August 2025 (week 32), the number of confirmed cases of community acquired COVID-19 admitted to hospital **decreased** to 31 (37 two weeks ago) and there were 159 in-patient cases of confirmed COVID-19, three of whom were in critical care compared to 148 and one two weeks ago.
- Confirmed cases of positive tests **remained stable** at 8.8% in hospital and non-sentinel GP practices. Consultations with sentinel GPs for COVID-19 decreased in the most recent week.
- Thus far this season, according to European Mortality Monitoring (EuroMoMo) methods, 'no excess deaths' were 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 **increased** from **1,578** in the previous week to **1,637** in the latest reporting week.
- During week 32, 2025, **1** ARI outbreak was reported to the Public Health Wales Health Protection Team. The incident was Covid-19 + Rhinovirus. The incident was in a Residential Home.

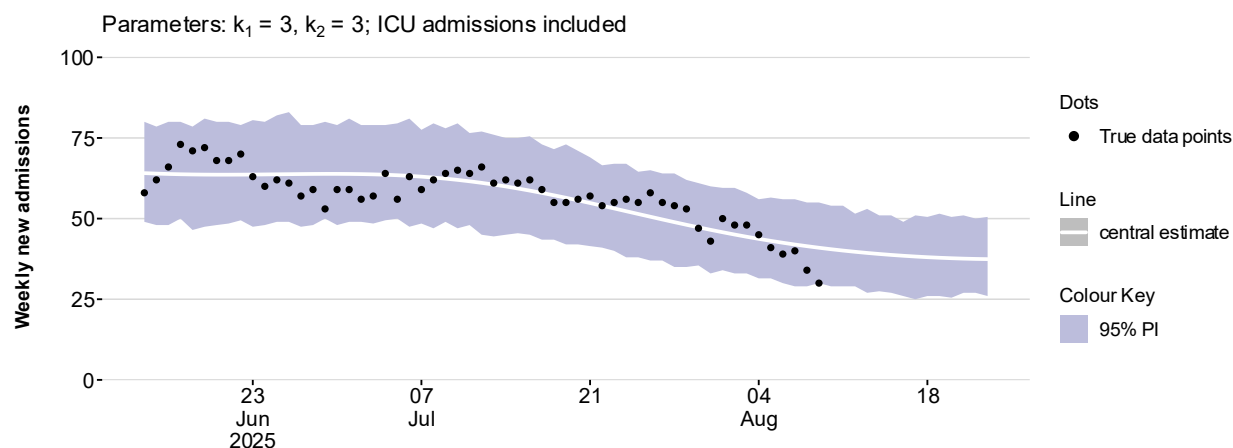
Figure 1: Samples from hospital patients submitted for RSV, Influenza and SARS-CoV2 testing only, by week of sample collection, week 32, 2024 to week 32, 2025. (source: PHW)



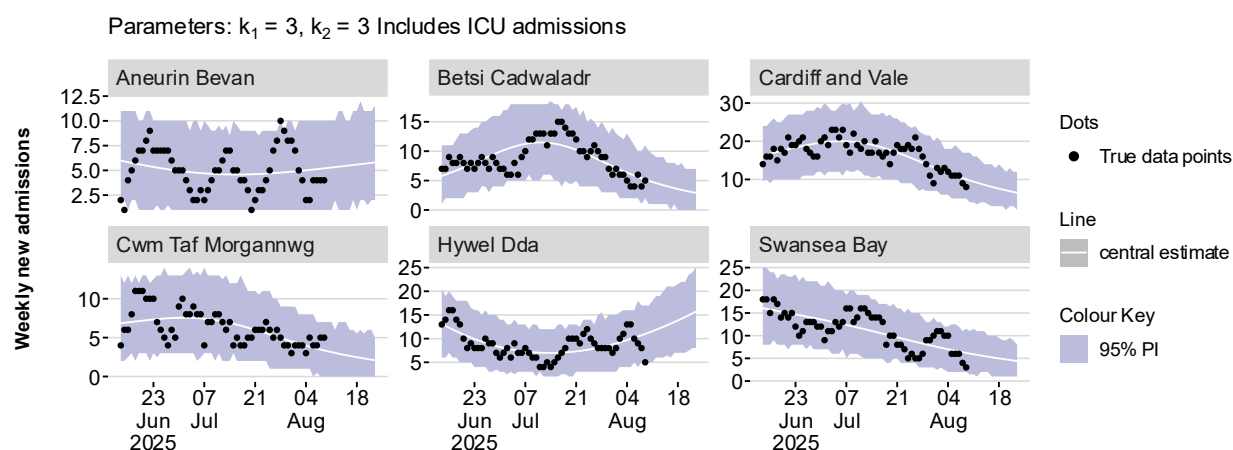
COVID-19 Short Term Projections

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 **9 August 2025** to make short term projections for COVID-19 two weeks forward (**23 August 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 except for Aneurin Bevan and Hywel Dda health boards where an increase in admissions for COVID-19 is projected over the next two weeks.

Figure 2: Short Term Projections for COVID-19 hospital admissions in Wales (data until 09 August 2025)

Source: Public Health Wales

Figure 3: Short Term Projections for COVID-19 hospital admissions in Wales Health Boards (data until 09 August 2025)

Source: Public Health Wales

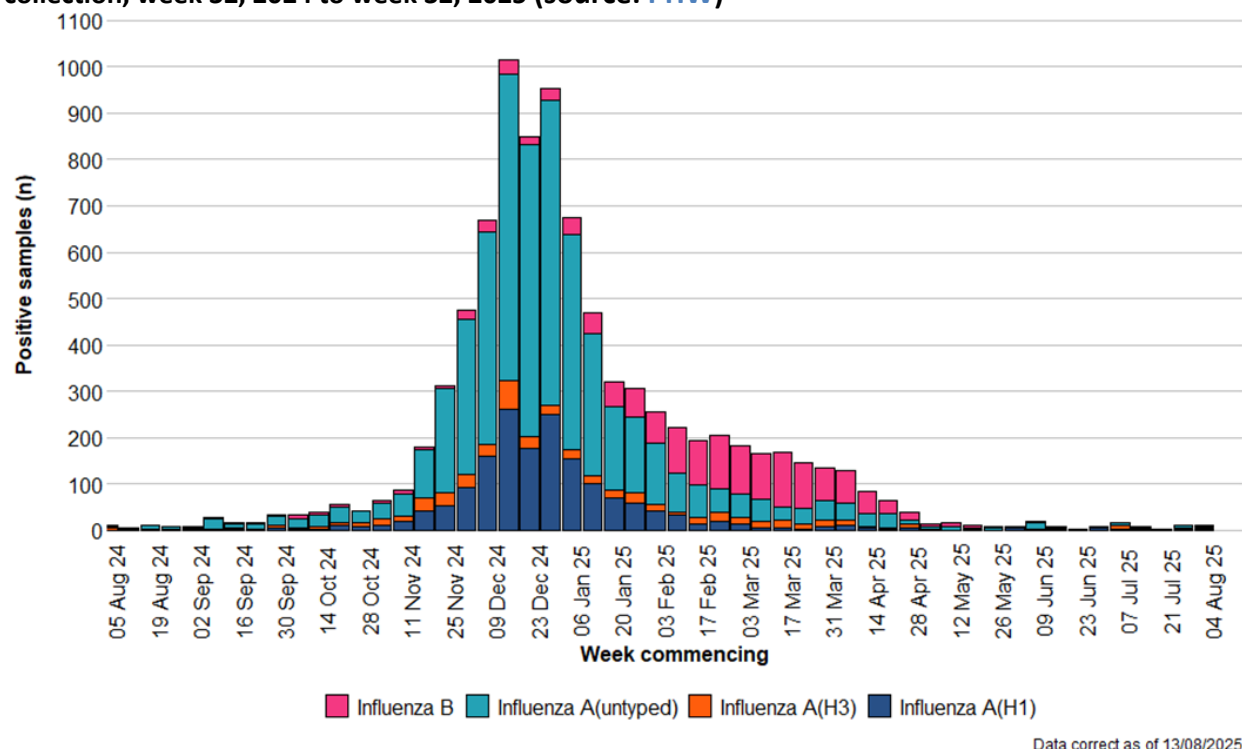
B.2. Influenza Situation Update

Influenza activity is at baseline intensity and case numbers remain broadly stable.

Confirmed cases of community acquired influenza admitted to hospital **remained stable** at 1 in the current week. Test positivity remained stable at 0.9%.

There were **4** in-patient cases of confirmed influenza, **none** of whom were in critical care (identical to **4** and **0** two weeks ago). In week 32 2025, there were 3 confirmed cases of influenza A(H3), 2 cases of influenza A(H1N1), 4 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 32, 2024 to week 32, 2025 (source: PHW)



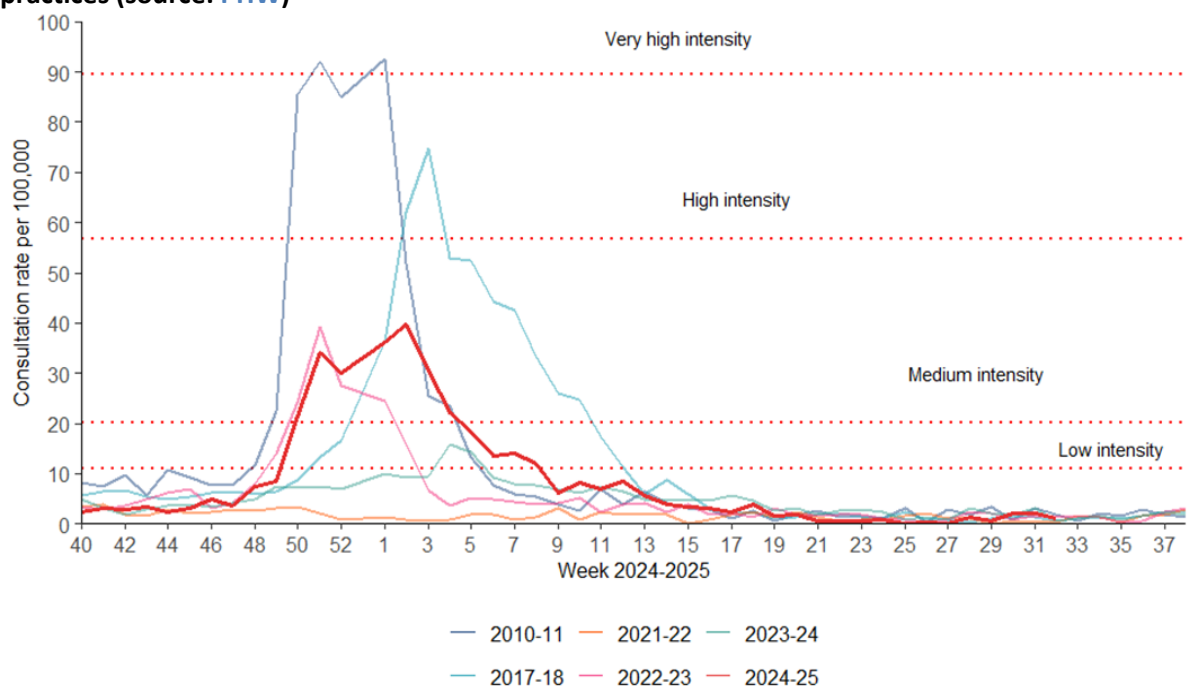
The sentinel GP consultation rate for influenza-like illness (ILI) is at baseline and the three-week trend is variable.

There were **1.2** ILI consultations per 100,000 practice population in the most recent week, a decrease compared to the previous week (2.1 consultations per 100,000).

In the most recent week, using all available data from general practices, there were 11.8 ARI consultations per 100,000 practice population, stable compared to the previous week. The highest rates were found in people aged under 1 year (696.5) followed by people aged 1 to 4 (363.8) and people aged 75+ (140.3).

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

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



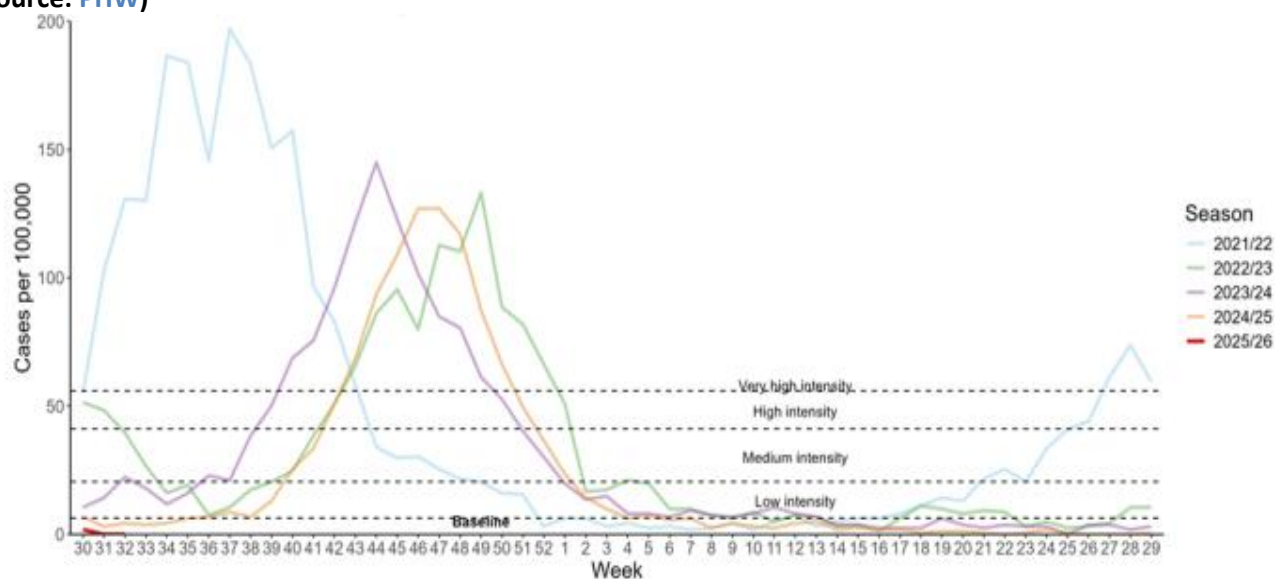
Data correct as of 12/08/2025

B.3. Respiratory Syncytial Virus (RSV) update

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

Incidence per 100,000 population in children aged up to 5y **remained stable** at 0.0 in (1.9 two weeks ago). During Week 32 there were **no** inpatient cases of confirmed RSV, none in critical care.

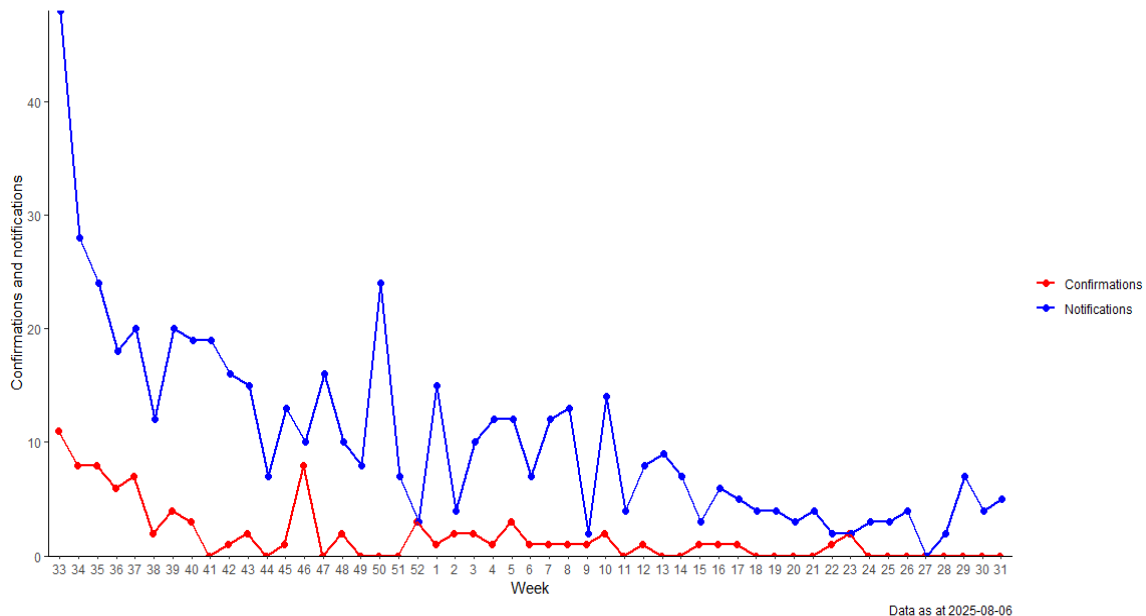
Figure 6: RSV Incidence Rate per 100,000 population under 5 years, week 30 2020 to week 32 2025 (source: PHW)



B.4. Whooping Cough (Pertussis)

Figure 7 below shows that whooping cough notifications up to the end of week 31 **increased** but remain at low levels. Lab confirmations continue to be at very low levels (Whooping cough is now reported on every two weeks).

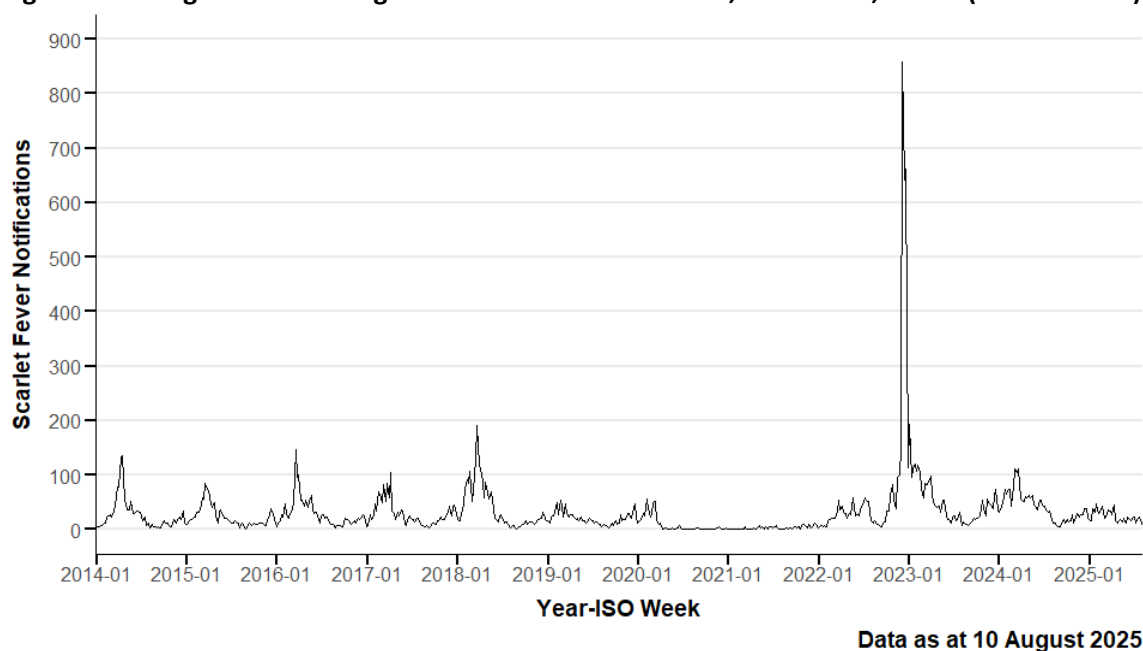
Figure 7: Weekly notifications and confirmations of Pertussis/Whooping Cough in Wales. (Source: PHW)



B.5. iGAS and Scarlet Fever

The number of iGAS notifications are currently low, remaining at seasonally expected levels. Scarlet Fever notifications **increased** in the most recent week (week 32) as shown in the figure below (up to 10 August 2025).

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)

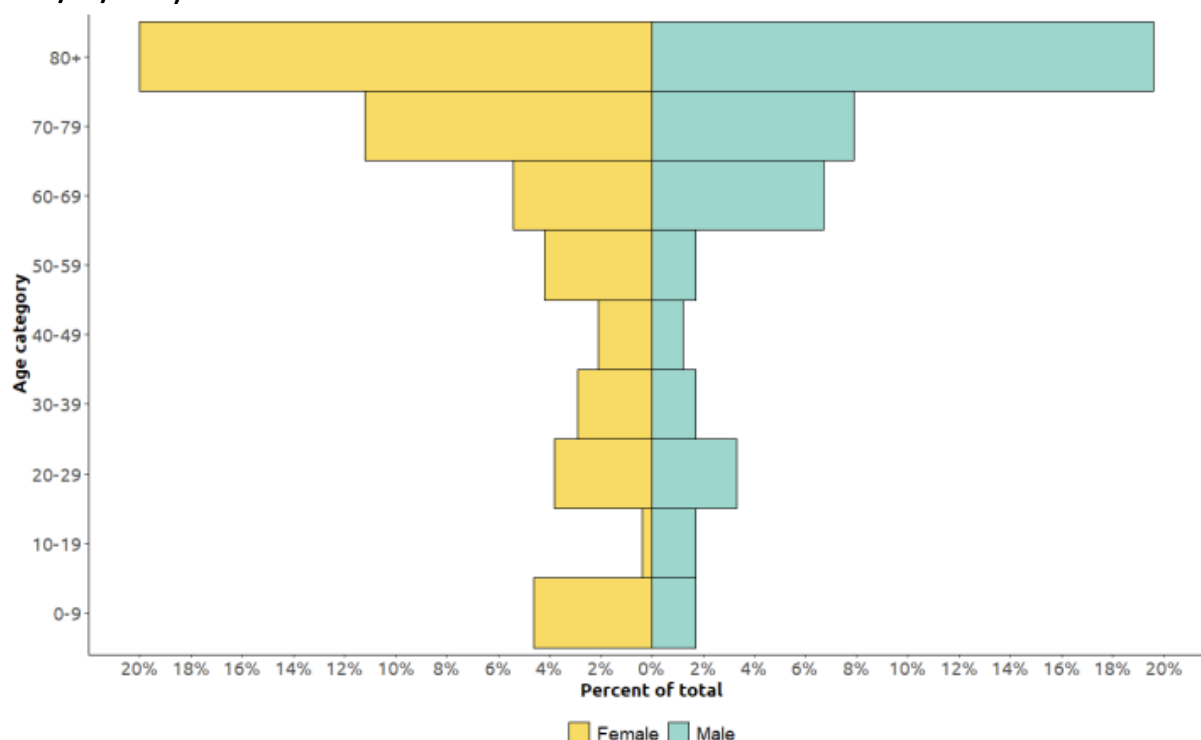
D.1. Norovirus

In the current reporting week (week 32 2025), a total of **8** Norovirus confirmed cases were reported in Welsh residents. This is a decrease **(-11.1%)** in reported cases compared to the previous reporting week (week 31 2025), when **9** Norovirus confirmed cases were reported.

In the last 12-week period (19/05/2025 to 10/08/2025) a total of **240** Norovirus confirmed cases were reported in Welsh residents. This is a decrease **(-47.7%)** in reported cases compared to the same 12-week period in the previous year (19/05/2024 to 10/08/2024) when **459** Norovirus confirmed cases were reported.

In the last 12-week period (19/05/2025 to 10/08/2025) **131 (54.6%)** confirmed Norovirus cases were female and **109 (45.4%)** confirmed cases were male. The age groups with the most cases were the 80+ (**95** cases) and 70-79 (**46** cases) age groups.

Figure 9: Age and sex distribution of confirmed Norovirus cases in the last 12 weeks (19/05/2025 to 10/08/2025)



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 18 August 2025)

18 August 2025

Following successful completion of disease control activities and surveillance in the zone around a [premises near Tow Law, Bishop Auckland, County Durham \(AIV 2025/50\)](#), the 3km captive bird (monitoring) controlled zone has been revoked.

15 August 2025

Following a change in the pattern of wild bird findings and an increase in cases in poultry and captive birds, the [risk of highly pathogenic avian influenza](#) in poultry with sub-optimal biosecurity has been increased to medium (event occurs regularly).

11 August 2025

Following successful completion of disease control activities and surveillance in the zone around a [premises in Wales near Glyn Ceiriog, Wrexham \(AIV 2025/49\)](#), the 10km surveillance zone has been revoked.

10 August 2025

Following further official testing at the avian influenza national reference laboratory at the Animal and Plant Health Agency (APHA) Weybridge laboratory notifiable avian influenza is no longer suspected at the [premises near Woodbridge, East Suffolk, Suffolk \(AIV SOS 2025/03\)](#). The 3km temporary control zone A and 10km temporary control zone B surrounding this premises have therefore been revoked.

9 August 2025

The Chief Veterinary Officer for Wales has confirmed that low pathogenic avian influenza (LPAI) H5N3 is present on a premises near Dulas, Ynys Môn, Wales. A 1km Restricted Zone is in force surrounding this premises. Further information on this case can be found at gov.wales/birdflu.

E.2. [Seasonal surveillance of dengue](#) (15 August)

Since the beginning of 2025 and as of 13 August 2025, three countries in Europe have reported cases of dengue: France (11), Italy (four), and Portugal (two).

Since last week, two new cases of dengue have been reported (one in France, one in Italy).

E.3. [Seasonal surveillance of West Nile virus infection in the EU/EEA](#) (15 August)

Since the beginning of 2025, and as of 13 August 2025, eight countries in Europe have reported human cases of West Nile virus infection: Bulgaria, France, Greece, Hungary, Italy, Romania, Serbia and Spain.

E.4. [Seasonal surveillance of Crimean-Congo haemorrhagic fever](#) (15 August)

Since the beginning of 2025 and as of 13 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](#) (15 August)

Since the beginning of 2025 and as of 13 August 2025, two countries in Europe have reported cases of chikungunya virus disease: France (111) and Italy (seven).

This week France reported 48 new cases, while Italy reported an additional five cases.

E.6. [Influenza A\(H5N1\) – Multi-country \(World\) – Monitoring human cases](#) (8 August)

On 7 August 2025, the Cambodian Ministry of Health reported one human case of avian influenza A(H5N1) virus infection in a female aged <10 years from Takeo Province, Cambodia.

The case had reported consumption of sick poultry prior to the onset of symptoms. The patient is currently receiving intensive medical care. The outbreak investigation is ongoing.

Since 2003, and as of 7 August 2025, there have been 990 human cases of avian influenza A(H5N1) infection worldwide, including 474 deaths.

E.7. [Vibrio non-cholerae infection - Poland - 2025](#) (8 August)

The Polish National Public Health Authority communicated the laboratory results of the second confirmatory test for the suspected case of cholera in the West Pomeranian Voivodeship. It showed the pathogen is non-O1 and non O-139 V. cholerae, and lacking the enterotoxin. This is the same result as the first sample test.

In Poland, the occurrence of non-toxin-causing vibrio in water reservoirs has been observed periodically for many years. When the route of infection is via food or water, the symptomatology is usually mild. Therefore, the impact for the general population is considered low.