



Llywodraeth Cymru
Welsh Government

Science Evidence Advice

Weekly Surveillance Report

24 June 2025



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Science Evidence Advice: Weekly Surveillance Report

A. Top Line Summary (as at week 24 2025, up to 15 June 2025)

- Overall, COVID-19 confirmed case admissions to hospital **increased** in the most recent week.
- COVID-19 cases who are inpatients have **increased** in the most recent week.
- RSV activity in children under 5 years has **increased** in the most recent week.
- Influenza in-patient cases and admissions have **increased** in the latest week.
- Norovirus confirmed cases have **increased** in the most recent week (week 24).
- Whooping Cough notifications have **decreased** in week 23 (the most recent reporting week).
- Scarlet Fever notifications **increased** in the most recent week (week 24).

Please note, the SEA weekly surveillance report is now produced fortnightly until September 2025.

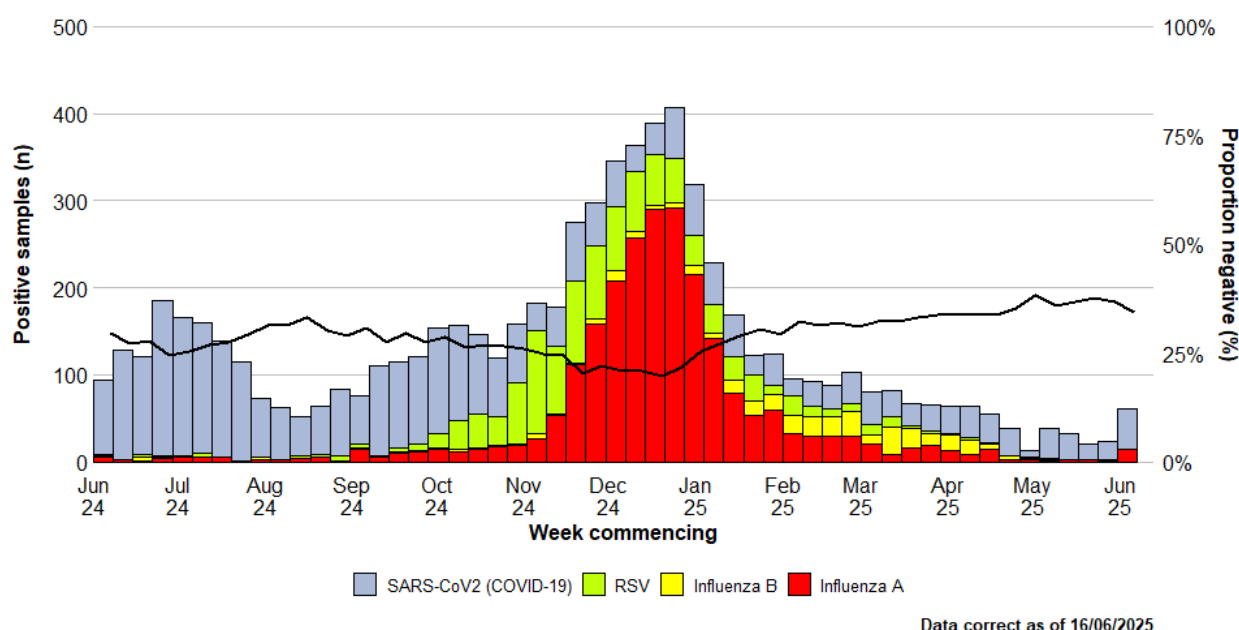
B. Acute Respiratory Infections Situation Update

B.1. COVID-19 Situation Update

- At a national level, the weekly number of confirmed cases of community-acquired admissions to hospital **increased** and the number of cases who were inpatients **increased** in week 24 2025 (to 15 June 2025).
- As at 15 June 2025 (week 24), the number of confirmed cases of community acquired COVID-19 admitted to hospital **increased** to 28 (22 two weeks ago) and there were 127 in-patient cases of confirmed COVID-19, 4 of whom were in critical care compared to 126 and 2 two weeks ago.
- Confirmed cases of positive tests **remained stable** at 6.6% in hospital and non-sentinel GP practices (6.5% two weeks ago). 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 LP.8** is the most frequently detected COVID-19 variant in Wales, accounting for **44.7 %** of all sequenced cases.
- The number of ambulance calls recorded referring to syndromic indicators **increased** from **1,588** in the previous week to **1,680** in the latest reporting week.
- During week 24 2025, **0** ARI outbreaks were reported to the Public Health Wales Health Protection Team.

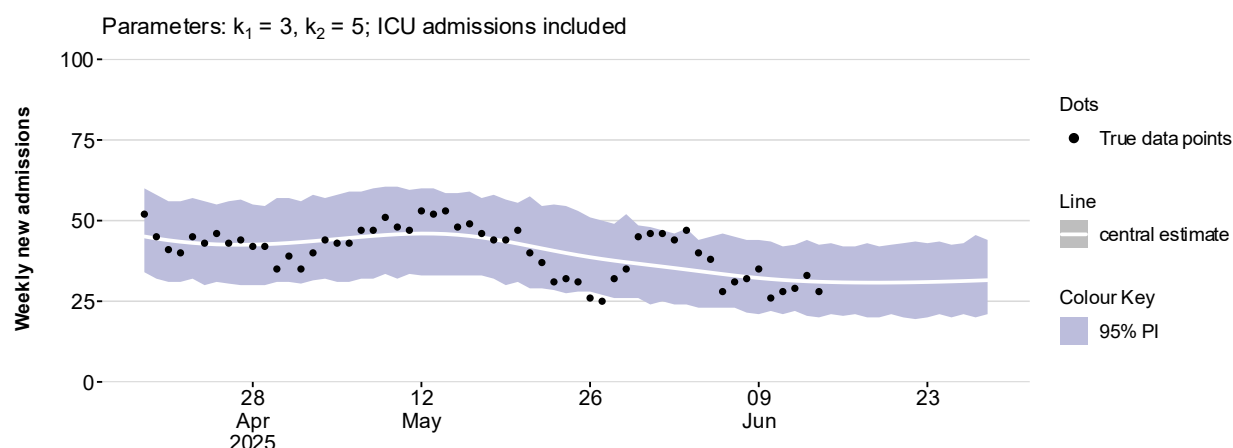
Figure 1: Samples from hospital patients submitted for RSV, Influenza and SARS-CoV2 testing only, by week of sample collection, week 24, 2024 to week 24, 2025. (source: PHW)



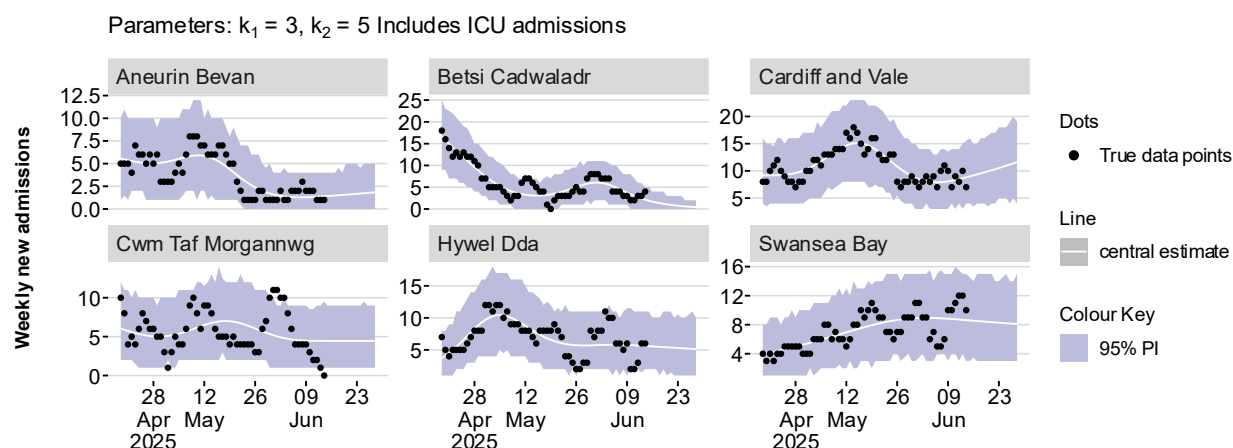
COVID-19 Short Term Projections

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 **14 June 2025** to make short term projections for COVID-19 two weeks forward (**28 June 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 plateau over the next two-week period (Figure 2). Figure 3 shows that COVID-19 admissions are projected to decrease or plateau in health boards in Wales except for Cardiff and Vale 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 14 June 2025)

Source: Public Health Wales

Figure 3: Short Term Projections for COVID-19 hospital admissions in Wales Health Boards (data until 14 June 2025)

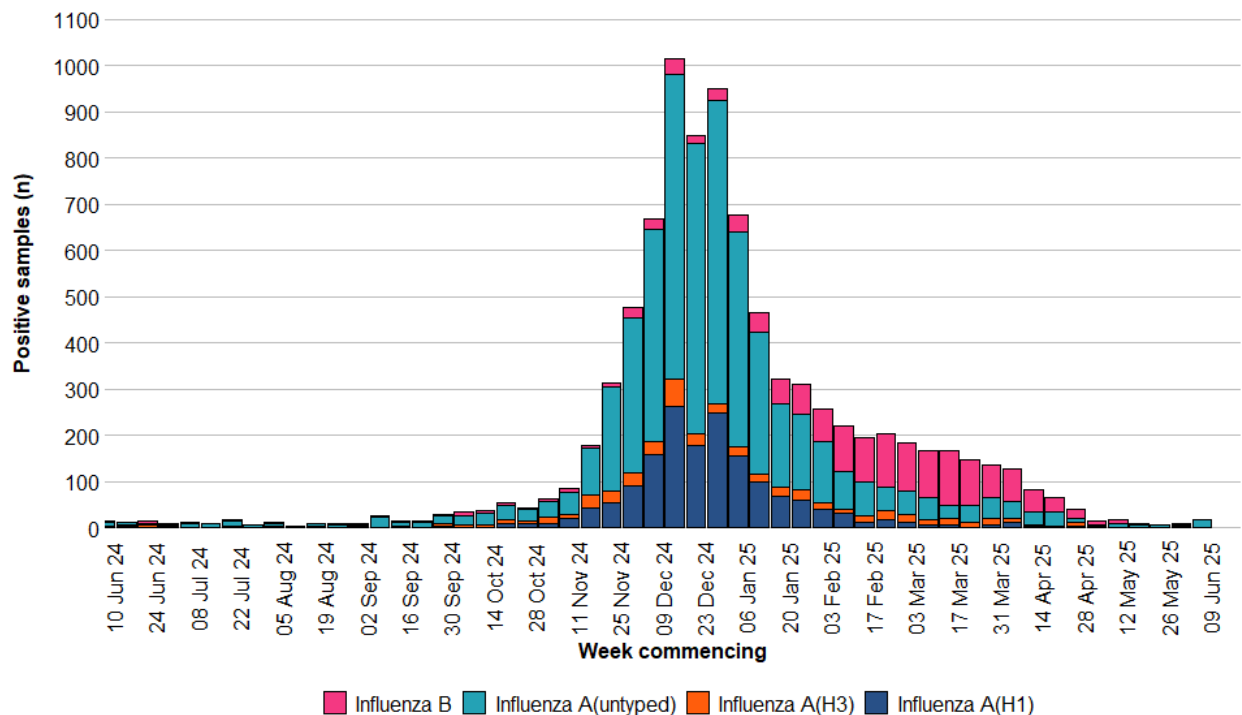
Source: Public Health Wales

B.2. Influenza Situation Update

Influenza activity is at baseline levels and case numbers remain broadly stable. GP consultations for influenza-like illness increased slightly but remained at baseline intensity. Confirmed cases of community acquired influenza admitted to hospital increased in the current week (week 24). Test positivity remained stable at 0.4%. Influenza A untyped was the most frequently detected type last week.

During the week ending 15 June the number of confirmed cases of community acquired influenza admitted to hospital **increased** to 4 and there were **20** in-patient cases of confirmed influenza, **1** of whom were in critical care (compared to **8** and **0** two weeks ago). In week 24 2025, there were zero confirmed cases of influenza A(H3), 2 cases of influenza A(H1N1), 16 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 24, 2024 to week 24, 2025 (source: [PHW](#))



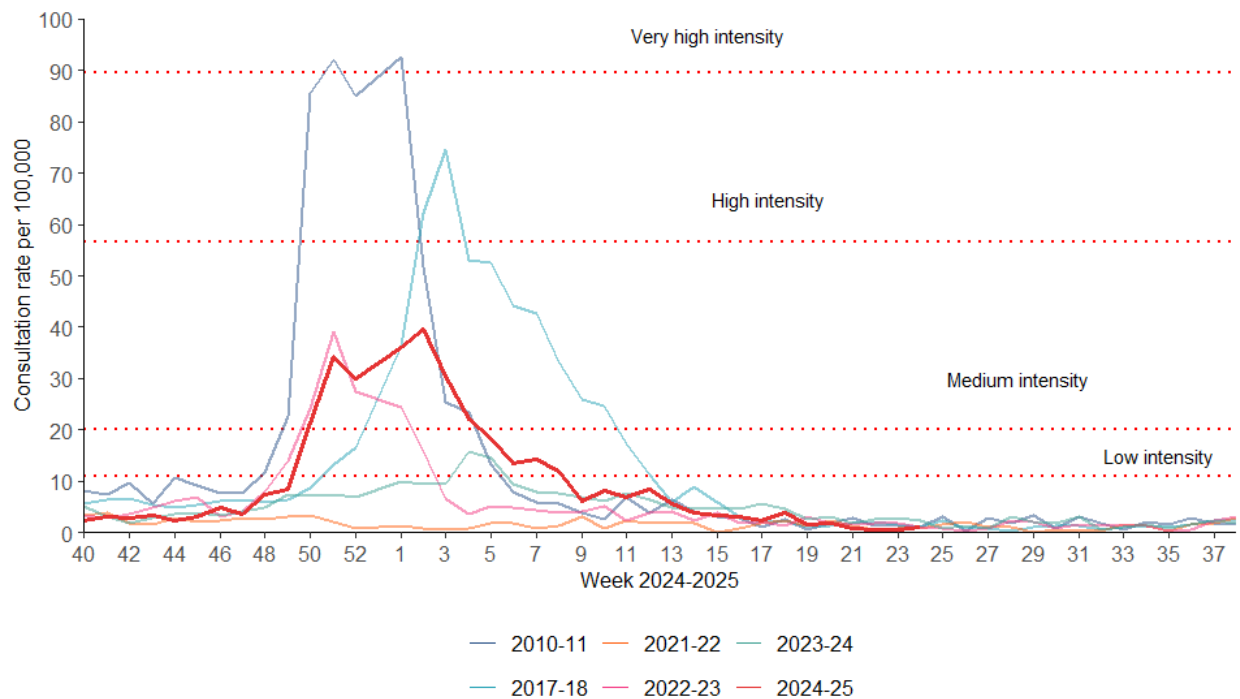
The sentinel GP consultation rate for influenza-like illness (ILI) is at baseline and the three-week trend is stable.

There were **1.0** ILI consultations per 100,000 practice population in the most recent week, an increase compared to the previous week (0.5 consultations per 100,000).

In the most recent week, using all available data from general practices, there were 7.3 ARI consultations per 100,000 practice population, a decrease from 7.7 in the previous week. The highest rates were found in people aged under 1 year (295.5) followed by people aged 1 to 4 (105.3) and people aged 5 to 14 (71.9).

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)



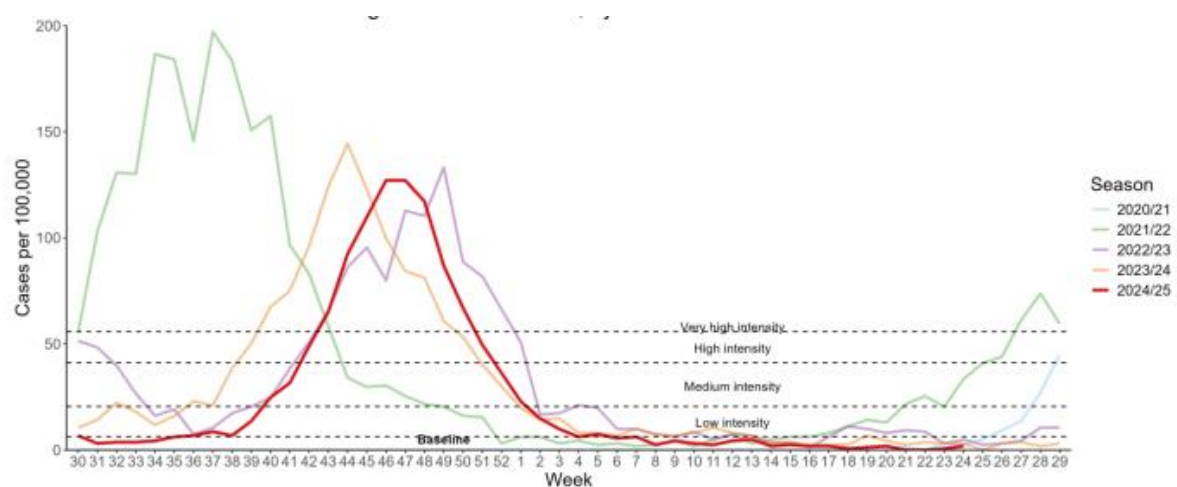
Data correct as of 17/06/2025

B.3. Respiratory Syncytial Virus (RSV) update

The number of confirmed cases of community acquired RSV admitted to hospital remained stable at one during Week 24.

Incidence per 100,000 population in children aged up to 5y **increased** to 1.9 in the most recent week (0 two weeks ago). week. During Week 24 there was **one** in patient case of confirmed RSV, none in critical care.

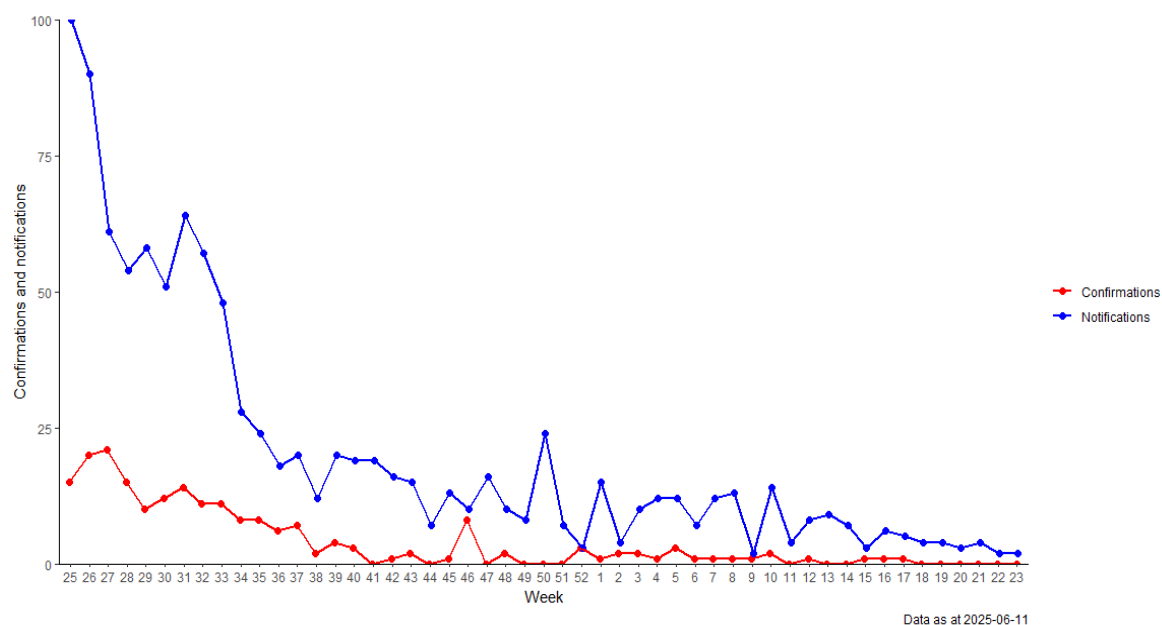
Figure 6: RSV Incidence Rate per 100,000 population under 5 years, week 30 2020 to week 24 2025 (source: PHW)



B.4. Whooping Cough (Pertussis)

Figure 7 below shows that whooping cough notifications up to the end of week 23 **decreased** and remain at low levels. Weekly lab confirmations have remained at zero since week 18 (Whooping cough is now reported on every two weeks).

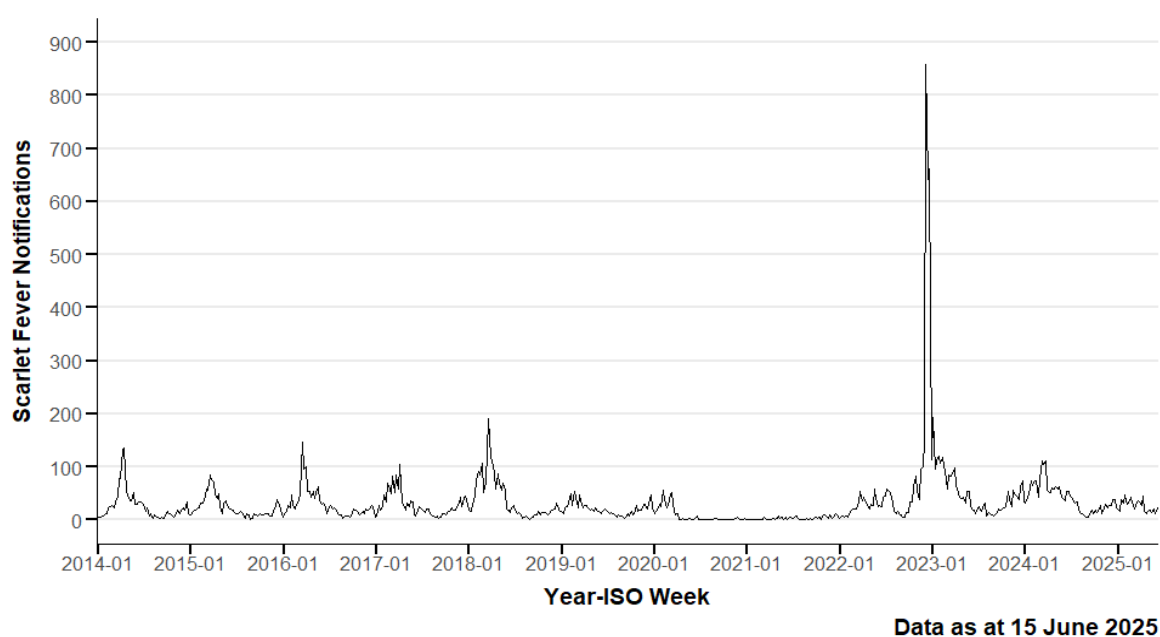
Figure 7: Weekly notifications and confirmations of Pertussis/Whooping Cough in Wales. (Source: PHW)



B.5. iGAS and Scarlet Fever

The number of iGAS notifications remain at seasonally expected levels. Scarlet Fever notifications have **increased** in the most recent week 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)

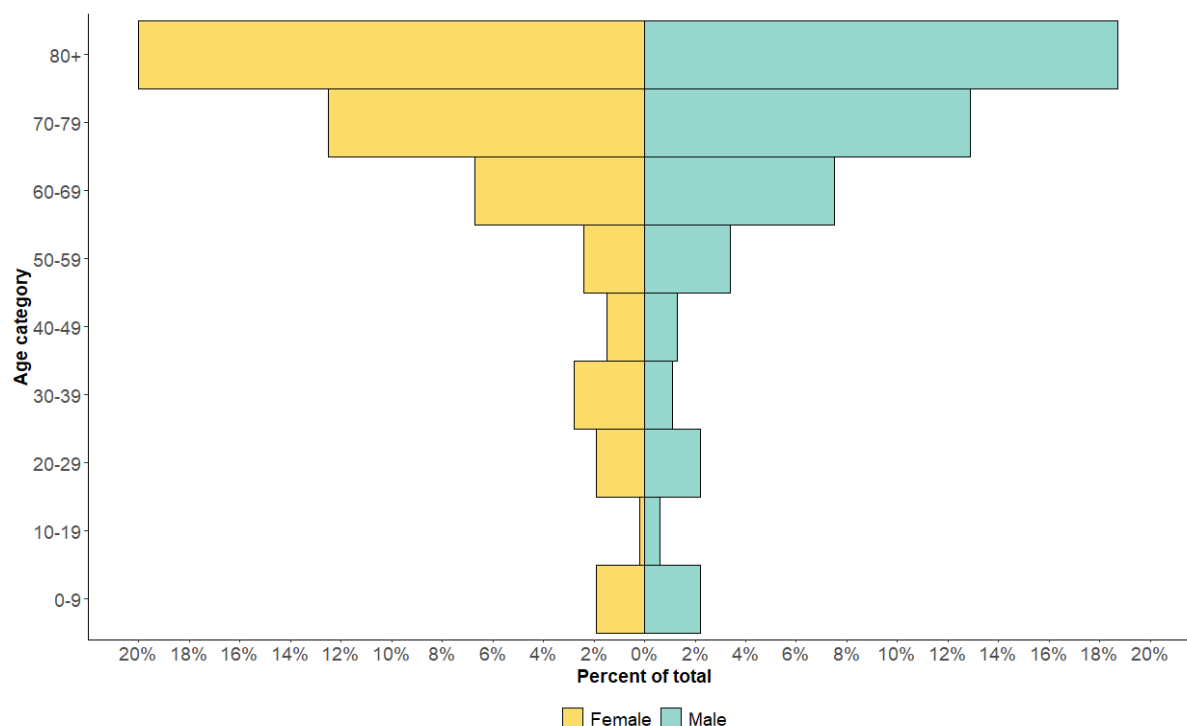
D.1. Norovirus

In the current reporting week (week 24 2025), a total of **41** Norovirus confirmed cases were reported in Welsh residents. This is an increase (**46.4%**) in reported cases compared to the previous reporting week (week 23 2025), when **28** Norovirus confirmed cases were reported.

In the last 12-week period (24/03/2025 to 15/06/2025) a total of **534** Norovirus confirmed cases were reported in Welsh residents. This is an increase (**20.3%**) in reported cases compared to the same 12-week period in the previous year (24/03/2024 to 15/06/2024) when **444** Norovirus confirmed cases were reported.

In the last 12 weeks (24/03/2025 to 15/06/2025) **267 (50.0%)** confirmed Norovirus cases were female and **267 (50.0%)** confirmed cases were male. The age groups with the most cases were the 80+ (**207** cases) and 70-79 (**136** cases) age groups.

Figure 9: Age and sex distribution of confirmed Norovirus cases in the last 12 weeks (24/03/2025 to 15/06/2025)



Notes: This data from PHW only includes locally confirmed PCR positive cases of Norovirus in Wales within the 12-week period up until the end of the current reporting week, week 24 2025 (24/03/2025 to 15/06/2025).

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 23 June 2025)

20 June 2025

Highly pathogenic avian influenza (HPAI) H5N1 was confirmed in commercial poultry at a [premises near Linton-on-Ouse, Wetherby and Easingwold, North Yorkshire](#) (AIV 2025/47).

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

17 June 2025

Highly pathogenic avian influenza (HPAI) H5N1 was confirmed in poultry near Stanhope, Bishop Auckland, Country Durham.

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

[England is in an AIPZ with mandatory biosecurity measures](#). Poultry gatherings remain banned.

These measures will be in place until further notice. They will be kept under regular review as part of the government's work to monitor and manage the risks of avian influenza.

E.2. [Mpox in the EU/EEA, Western Balkan countries and Türkiye](#) (23 June)

Since the last update on 19 May 2025, and as of 19 June 2025, 81 mpox cases have been reported from 14 EU/EEA countries: Germany (29), France (14), Spain (8), Italy (7), Netherlands (7), Portugal (4), Austria (2), Czechia (2), Malta (2), Poland (2), Belgium (1), Ireland (1), Luxembourg (1) and Sweden (1). Since 19 May 2025, no new countries have reported confirmed cases.

Since 19 May 2025, two new Western Balkan countries have reported confirmed cases (North Macedonia and Albania). Since the start of the mpox outbreak and as of 19 June 2025, 24 772 confirmed cases of mpox (MPX) have been reported from 29 EU/EEA countries.

E.3. [Outbreak of Hepatitis A, mostly associated with sexual transmission among MSM, in Portugal](#) (23 June)

MSM attending EuroPride 2025 Lisbon in Portugal 14-22 June 2025 and engaging in sexual activity may be exposed to hepatitis A virus (HAV) infection along with other infections transmitted through sex, with a higher likelihood of infection for those with multiple partners and those not taking precautions.

Member States should also be aware of MSM returning from Pride events with hepatitis A infection and consider raising awareness among clinicians and laboratory professionals accordingly.

E.4. [Chikungunya virus disease \(France and Reunion\)](#) (23 June)

Since the beginning of the 2025, and as of 18 June 2025, France has reported two cases of locally acquired chikungunya virus disease.

Since the beginning of the year, and as of 15 June 2025, more than 54 000 confirmed autochthonous cases of chikungunya virus disease have been reported in Réunion. Since the beginning of the outbreak, 23 deaths, mostly in people aged over 64 years, have been classified as chikungunya virus disease related.

E.5. [Influenza A\(H5N1\) – Multi-country \(World\) – Monitoring human cases](#) (23 June)

One new human case with avian influenza A(H5N1) infection was reported in a 65-year-old adult in Cambodia in a press release from the Cambodian Ministry of Health on 13 June 2025. The patient had exposure to backyard poultry, though no sick or dead birds were detected in the village the case comes from.

At the time of this report there were no detected and/or reported instances of human-to-human transmission around this case.