

Influenza and COVID-19 Surveillance graphs

UKHSA publishes a national influenza and COVID-19 surveillance report which summarises the information from the surveillance systems which are used to monitor influenza, COVID-19, and other seasonal respiratory viruses in England.

Additional figures based on these surveillance systems are included in this slide set.

The figures presented in this slide set are based on data from week 40 (between 30 September 2024 and 6 October 2024).



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Laboratory confirmed cases (England)



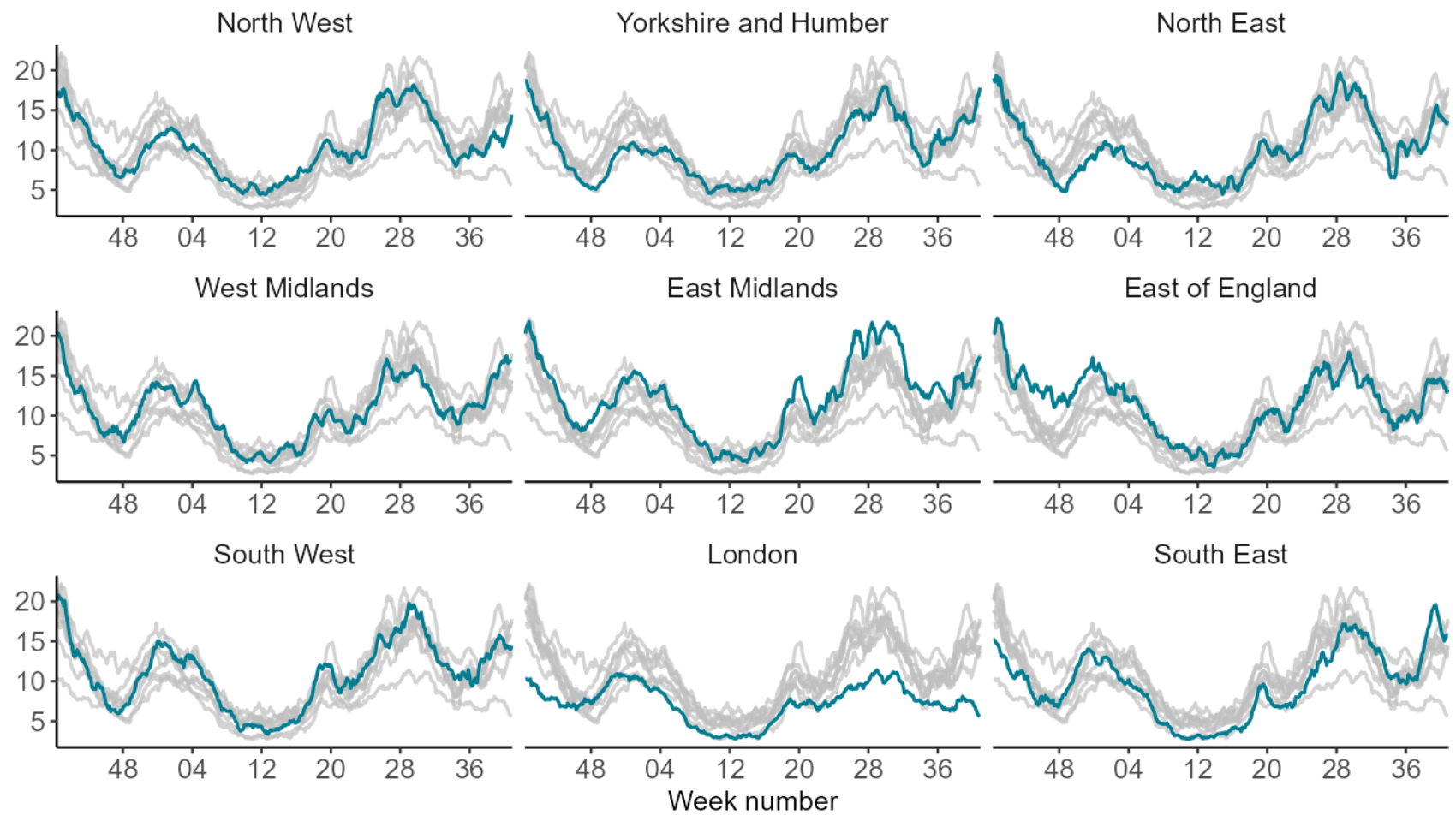
Confirmed COVID-19 episodes in England

Data Information

- From week 32 report onwards, case rates have been updated to use the latest ONS population estimates for mid-2020. Previously case rates were calculated using the mid-2019 population estimates
- From 11 January 2022 the requirement for [confirmatory PCR testing in individuals who test positive using a lateral flow device was temporarily removed](#).
- Rates by ethnicity and IMD quantile will continue to be presented using the mid-2019 estimates.
- From 31 January 2022, UKHSA moved all COVID-19 case reporting in England to use a new episode-based definition which includes possible reinfections. Each infection episode is counted separately if there are at least 91 days between positive test results (PCR or LFD). Each infection episode begins with the earliest positive specimen date. Further information can be found on the [UK COVID-19 dashboard](#).
- Since 1 April 2022, free universal symptomatic and asymptomatic testing for the general public in England is no longer available, as outlined in the plan for [living with COVID-19](#). As such, there will be a reduction in the reporting of data obtained through Pillar 2 from April 2022 onwards. Data in this report should be interpreted in the context of this change to testing. [Public health guidance](#) remains in place for cases and their close contacts. Additionally, further changes in [testing policy](#) are in effect since 1 April 2023, which may affect case rates and positivity rates.

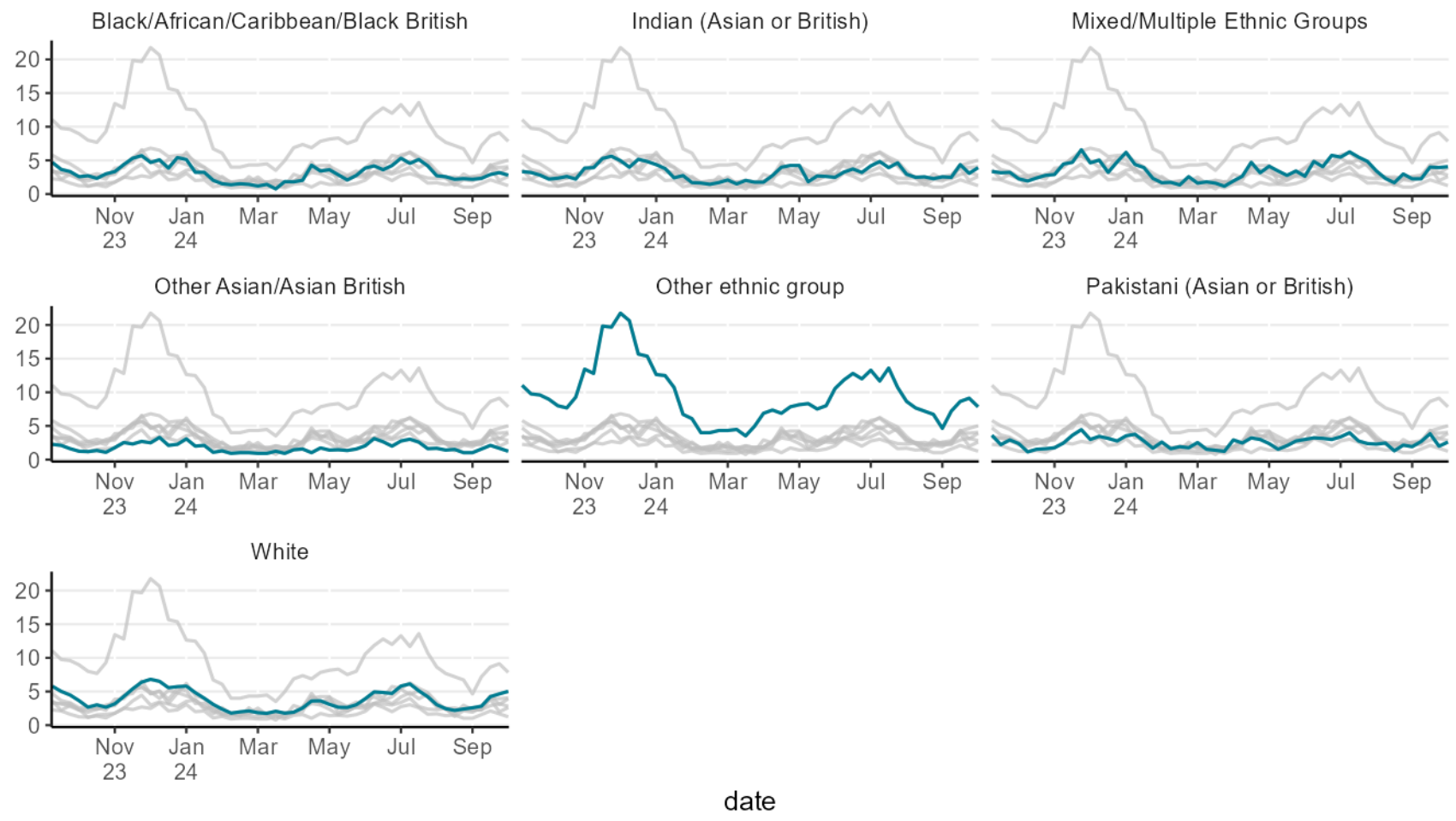


Confirmed COVID-19 cases - weekly positivity by UKHSA region





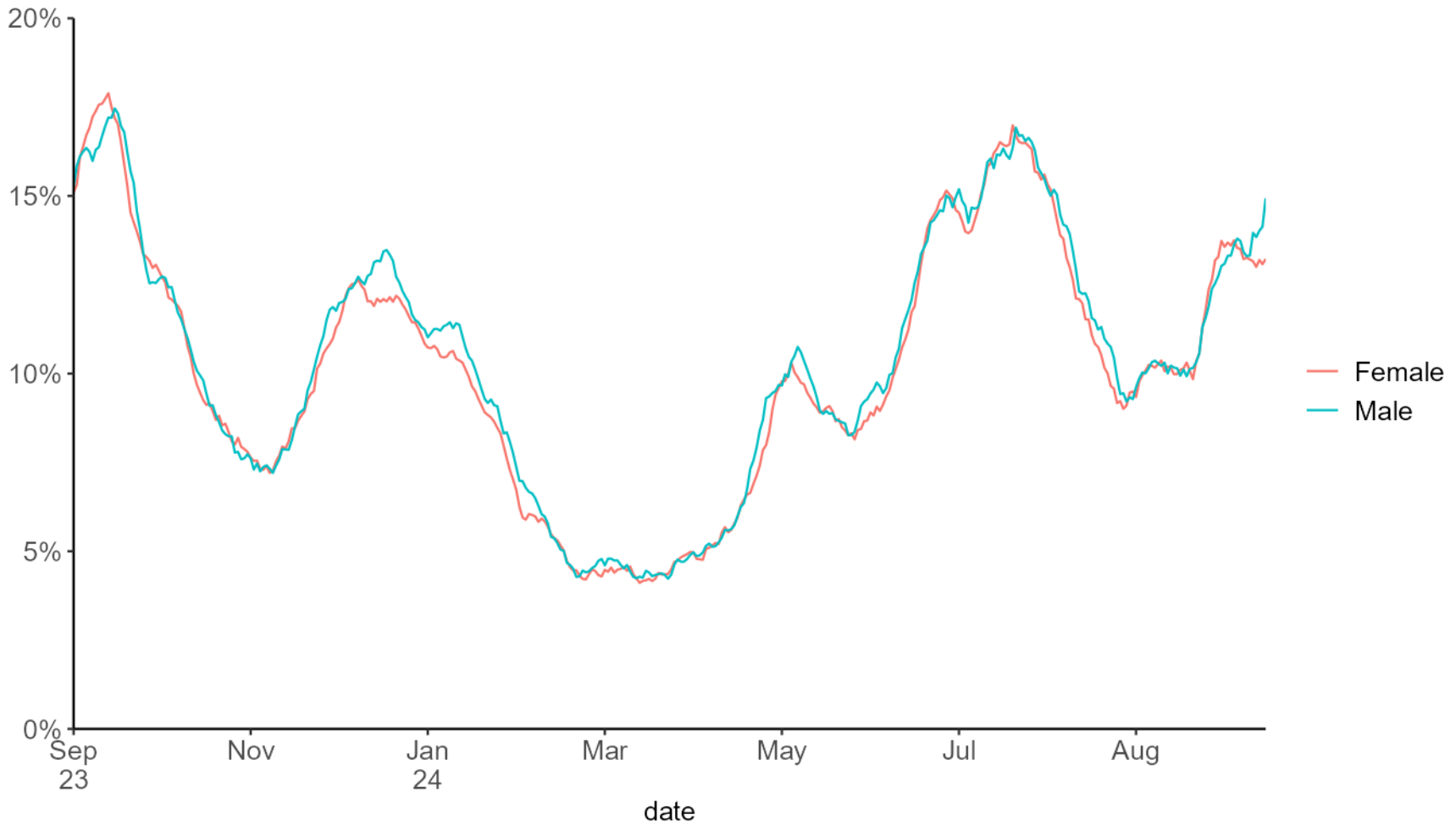
Confirmed COVID-19 cases - weekly positivity by Ethnicity



date

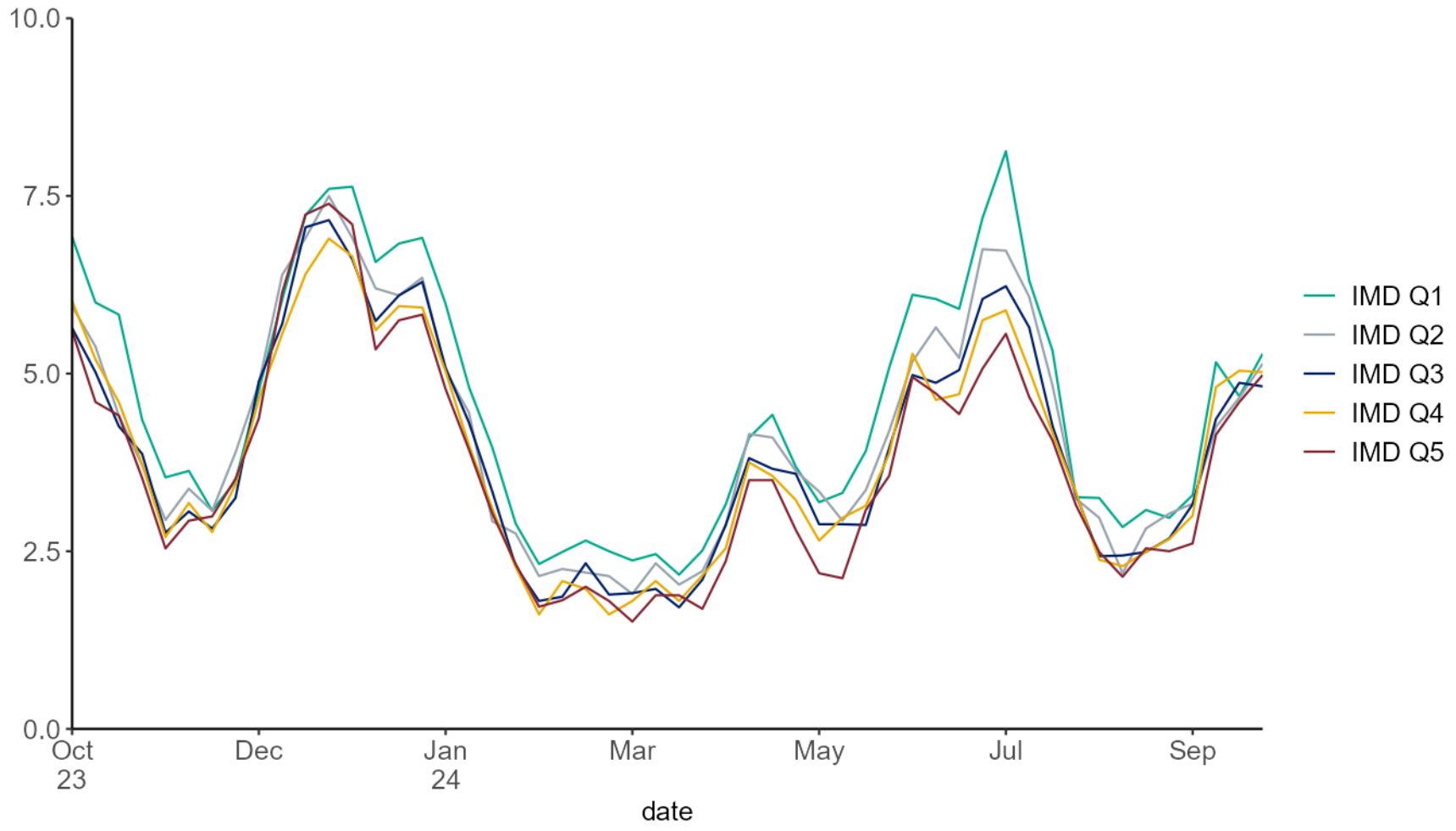


Seven-day rolling average PCR positivity (%) of confirmed COVID-19 cases tested by sex under Pillar 1





Weekly COVID-19 rate tested under Pillar 1, per 100,000 population by IMD quintile (1 being the most deprived and 5 being the least deprived)



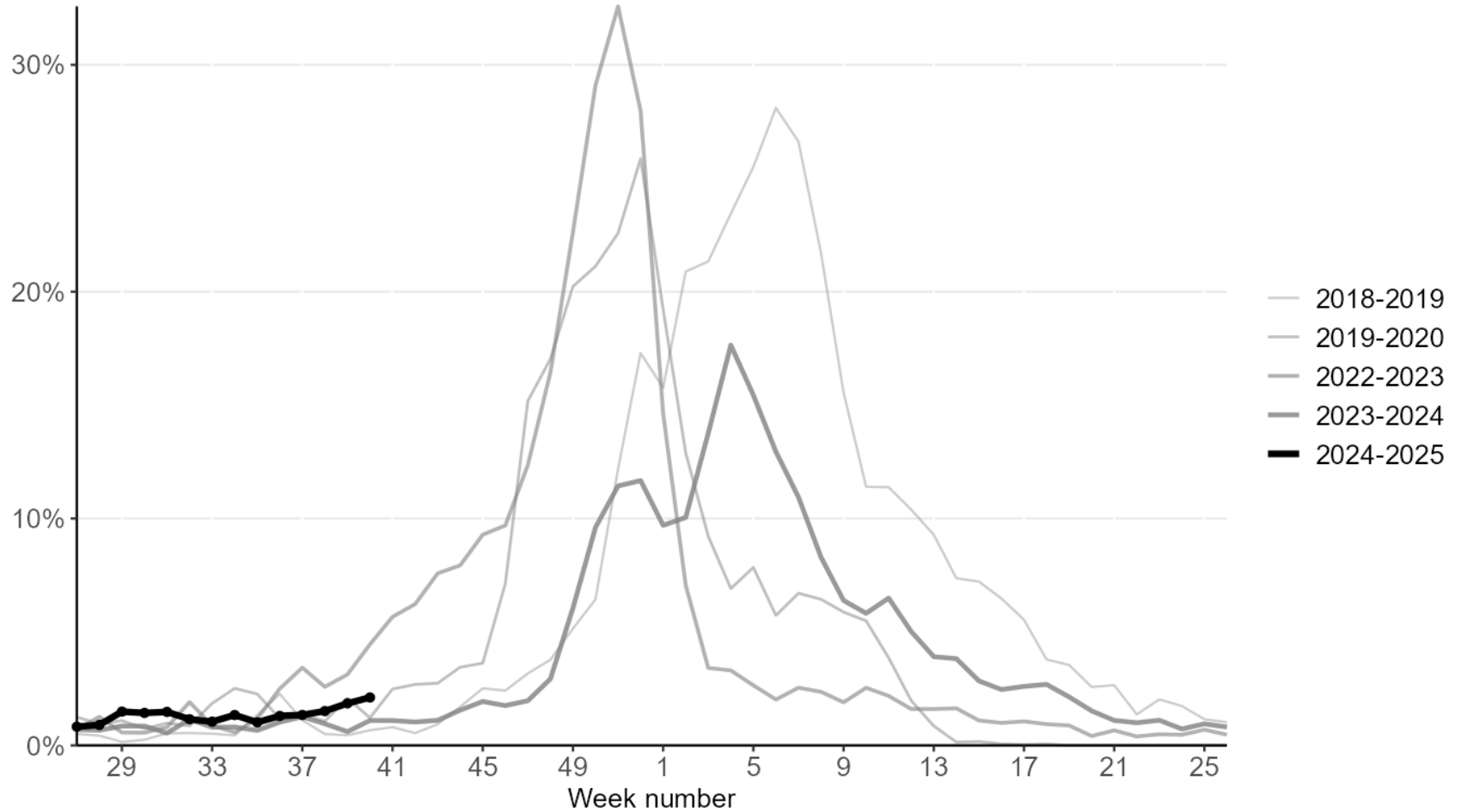
*incidence rates have been calculated using the mid-2019 ONS population estimates



Respiratory Datamart system (England)



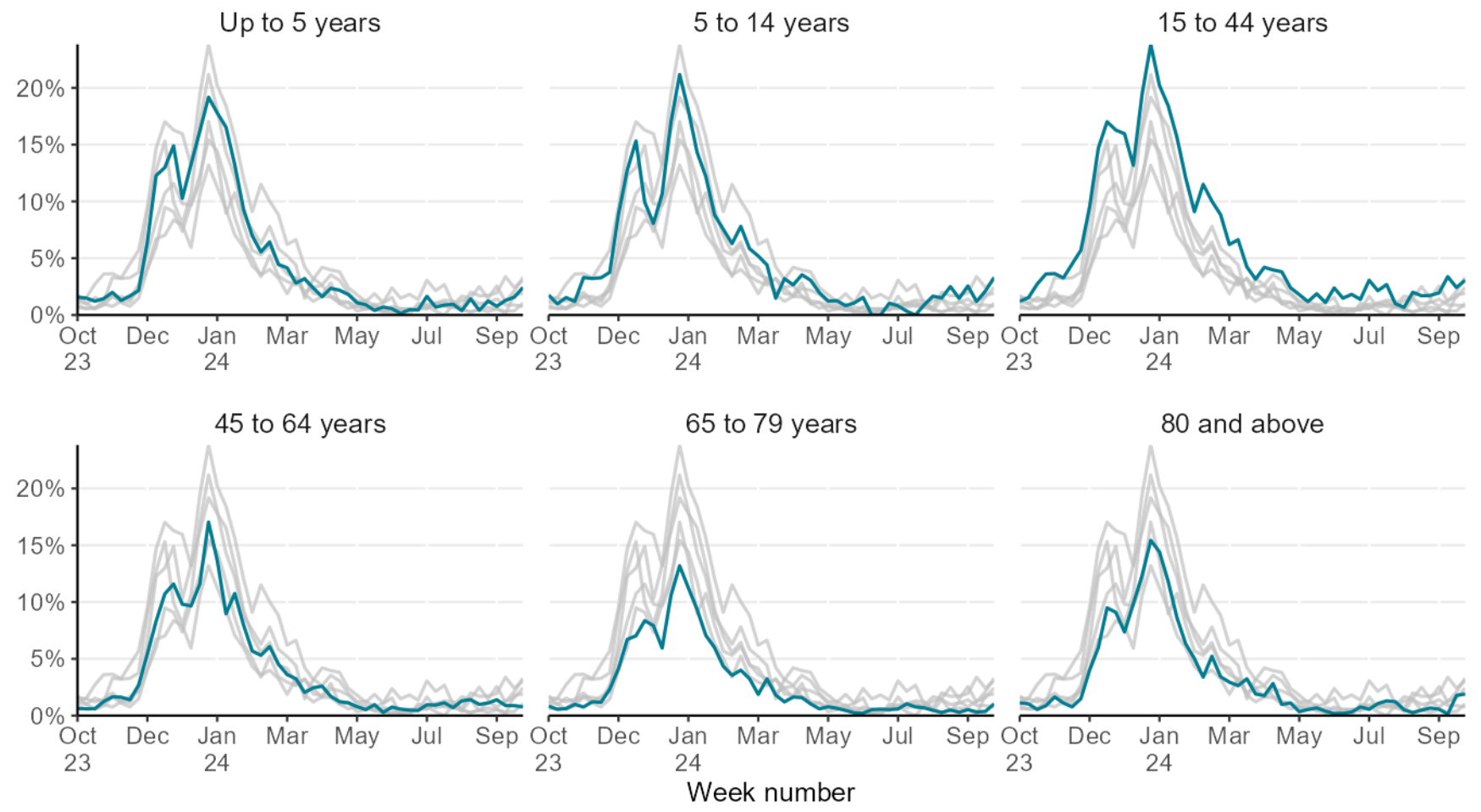
Respiratory DataMart – influenza positivity by seasons



[note 1] Data from seasons 2020 to 2021 and 2021 to 2022 has been removed as there was low activity throughout these seasons.

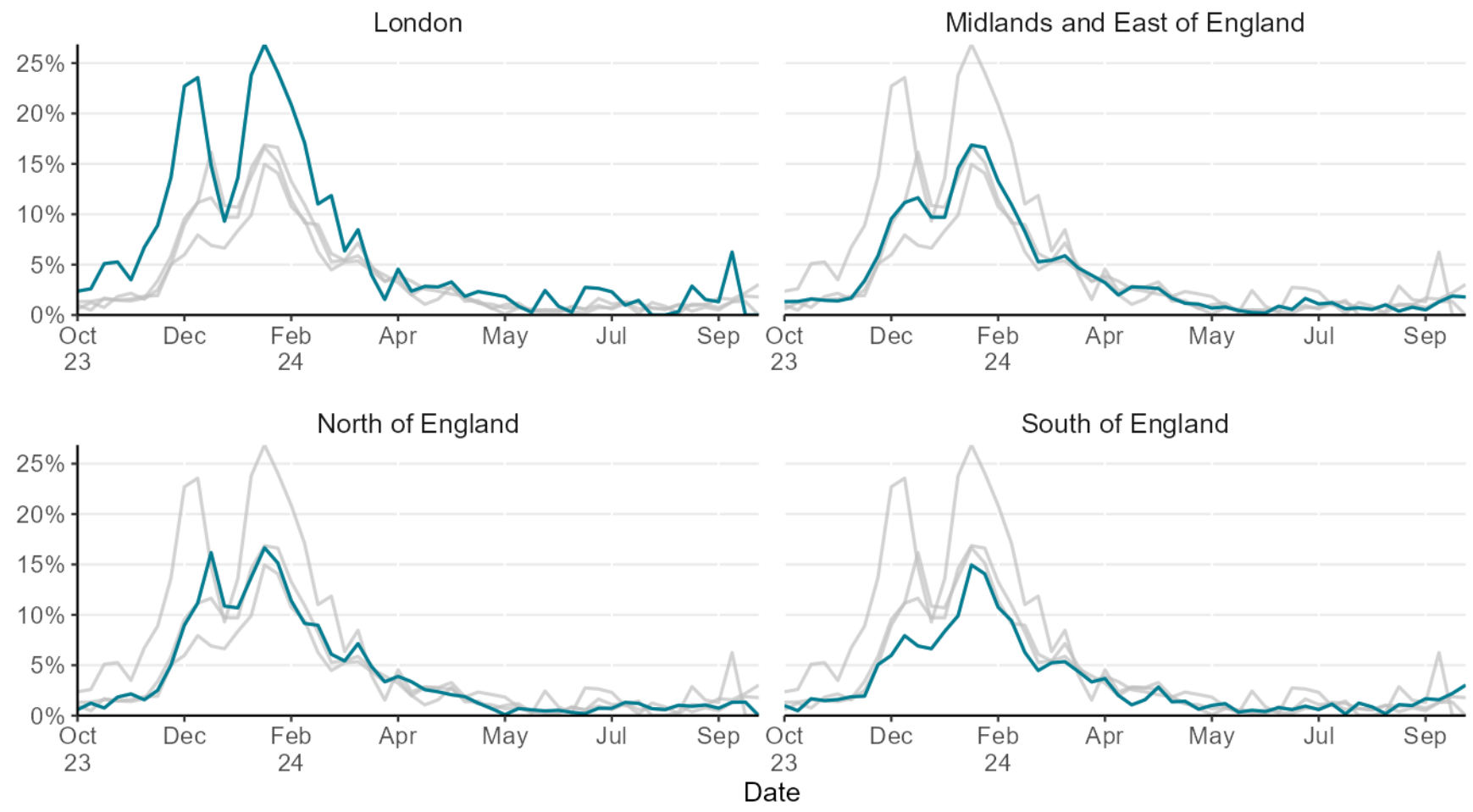


Respiratory DataMart – influenza weekly positivity by age





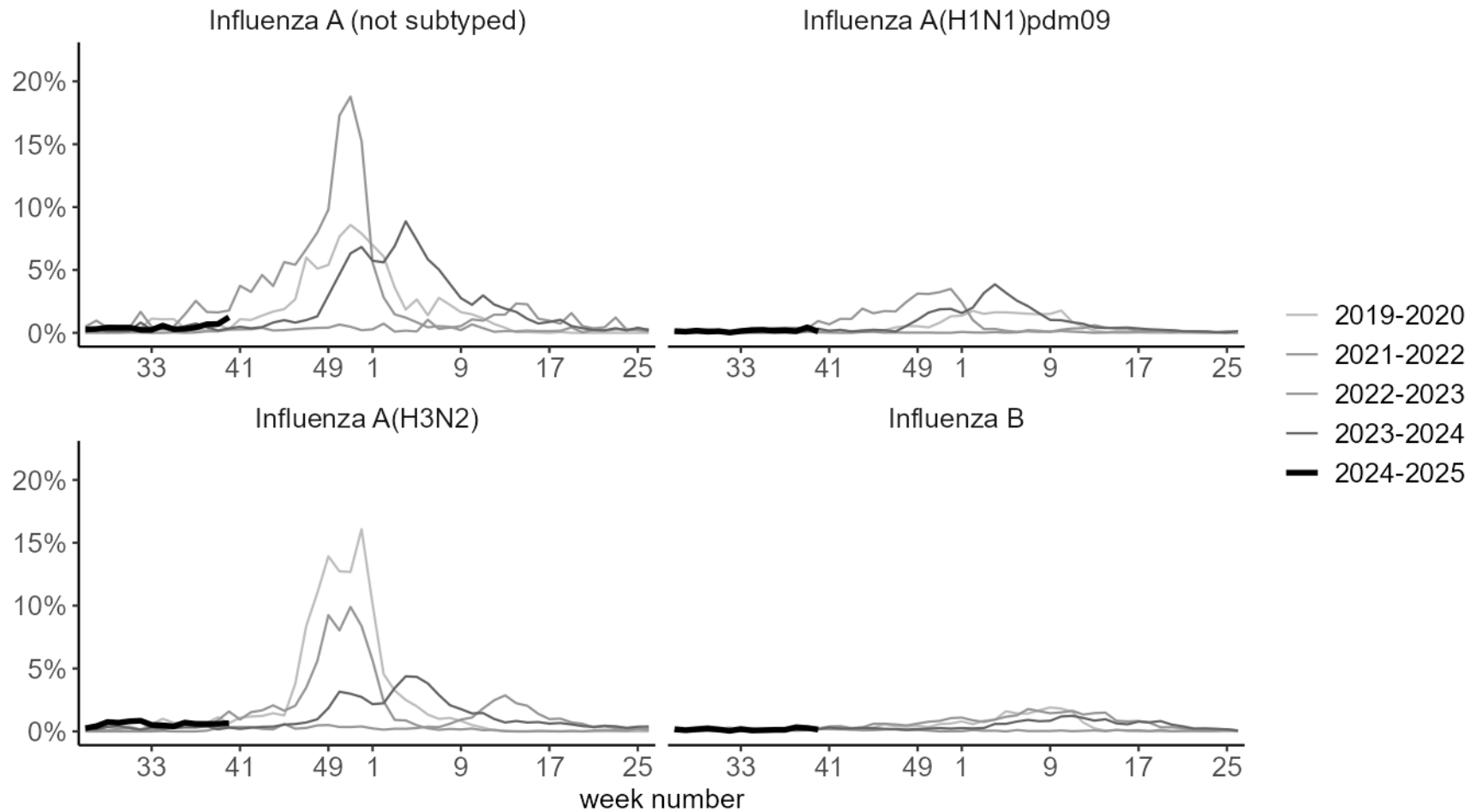
Respiratory DataMart – influenza weekly positivity by UKHSA region



*Changes in positivity in London should be interpreted with caution as there was a low number of samples this week and is subject to retrospective updates

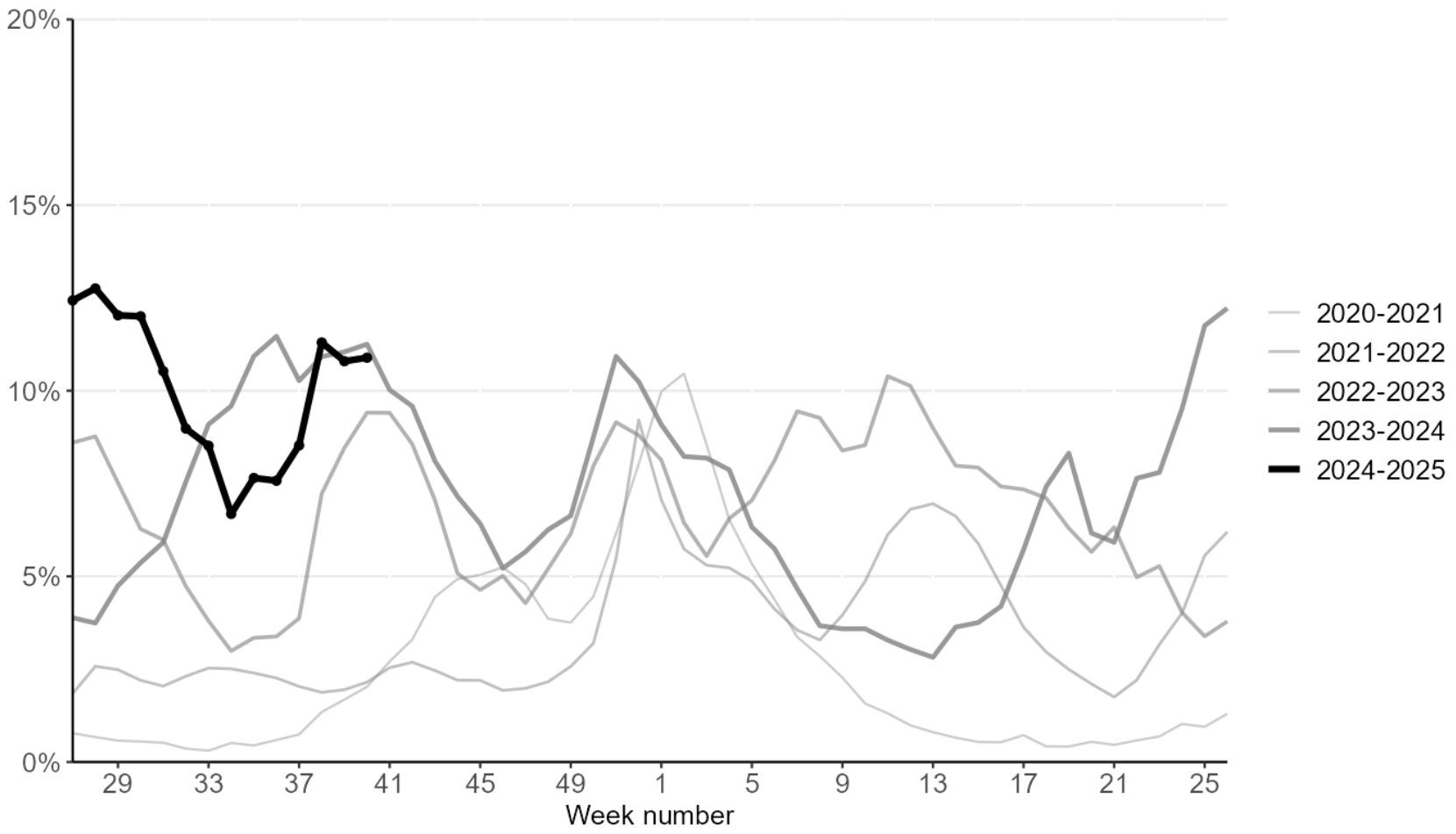


Respiratory DataMart – Influenza subtypes



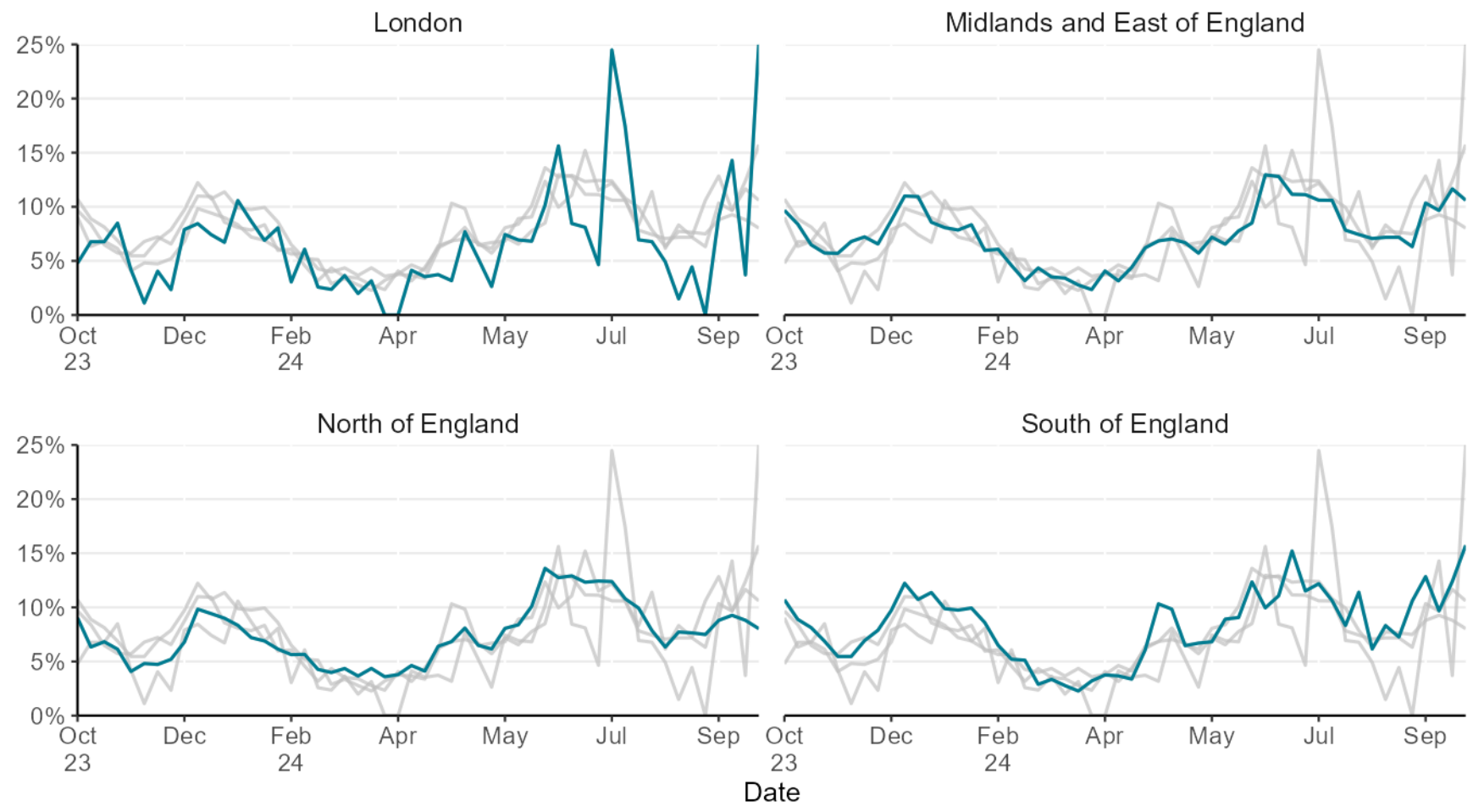


Respiratory DataMart – SARS-CoV-2 weekly positivity by seasons

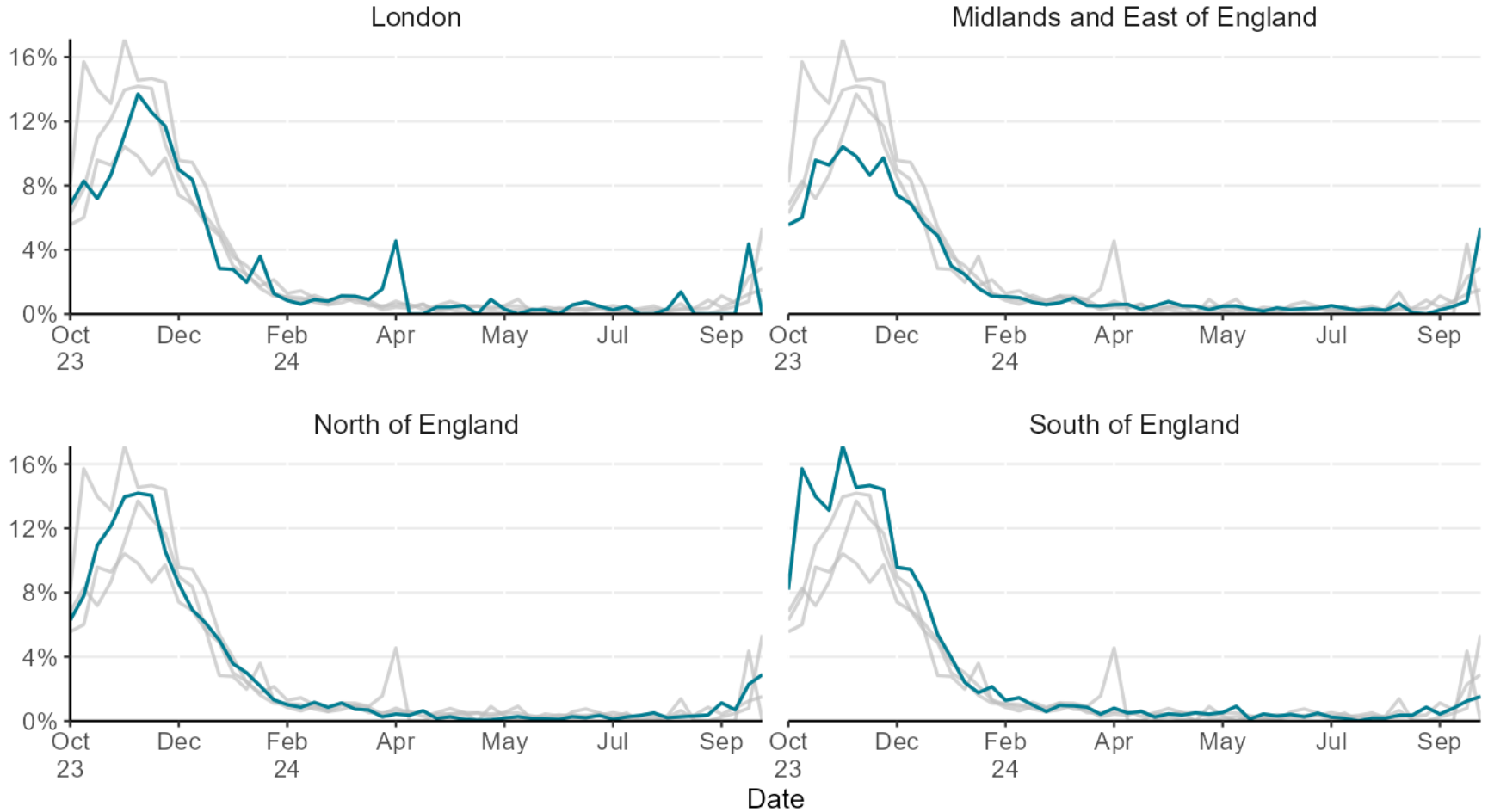




Respiratory DataMart – SARS-CoV-2 weekly positivity by UKHSA region



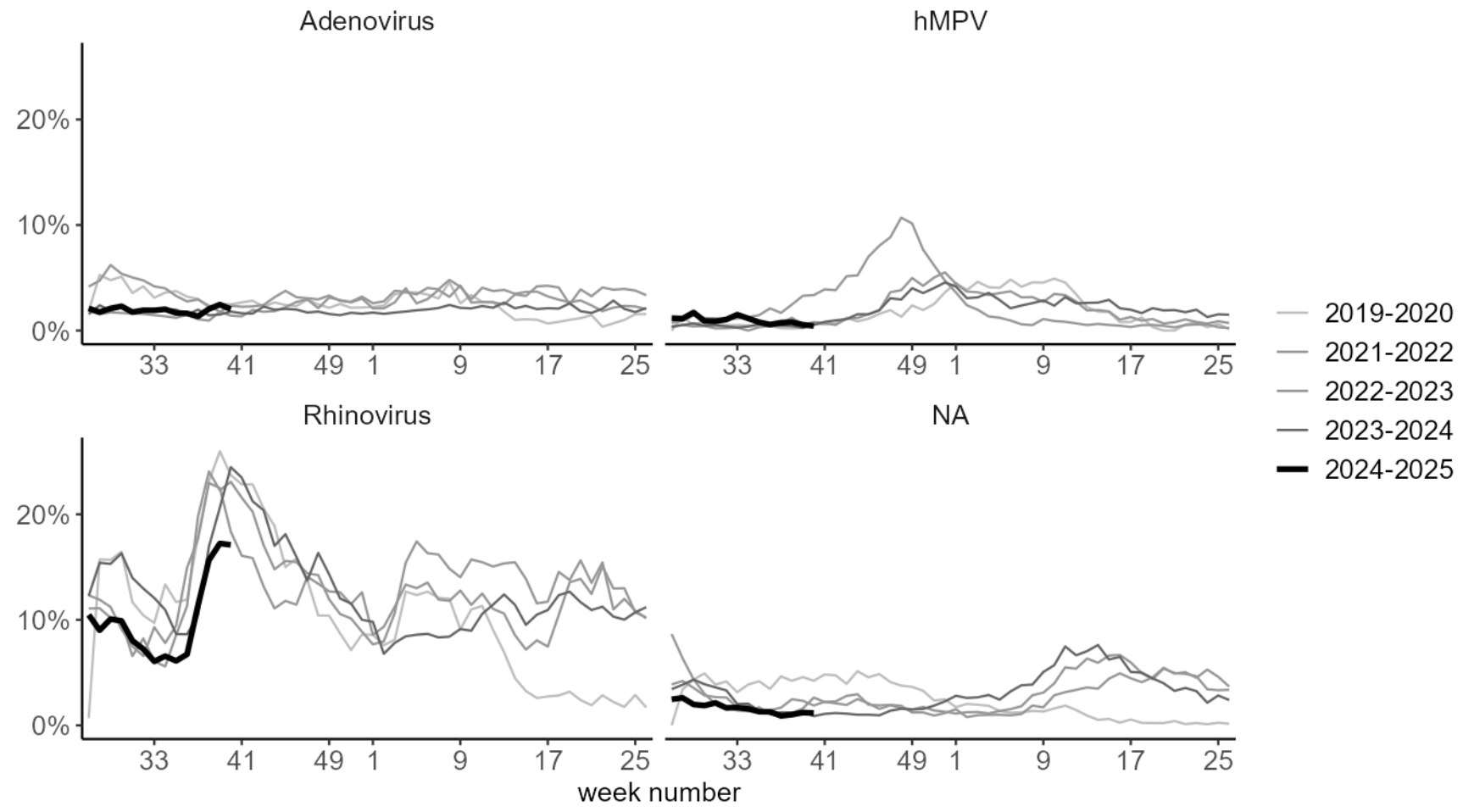
Respiratory DataMart – Respiratory syncytial virus (RSV) weekly positivity by UKHSA region



*Changes in positivity in London should be interpreted with caution as there was a low number of samples this week and is subject to retrospective updates

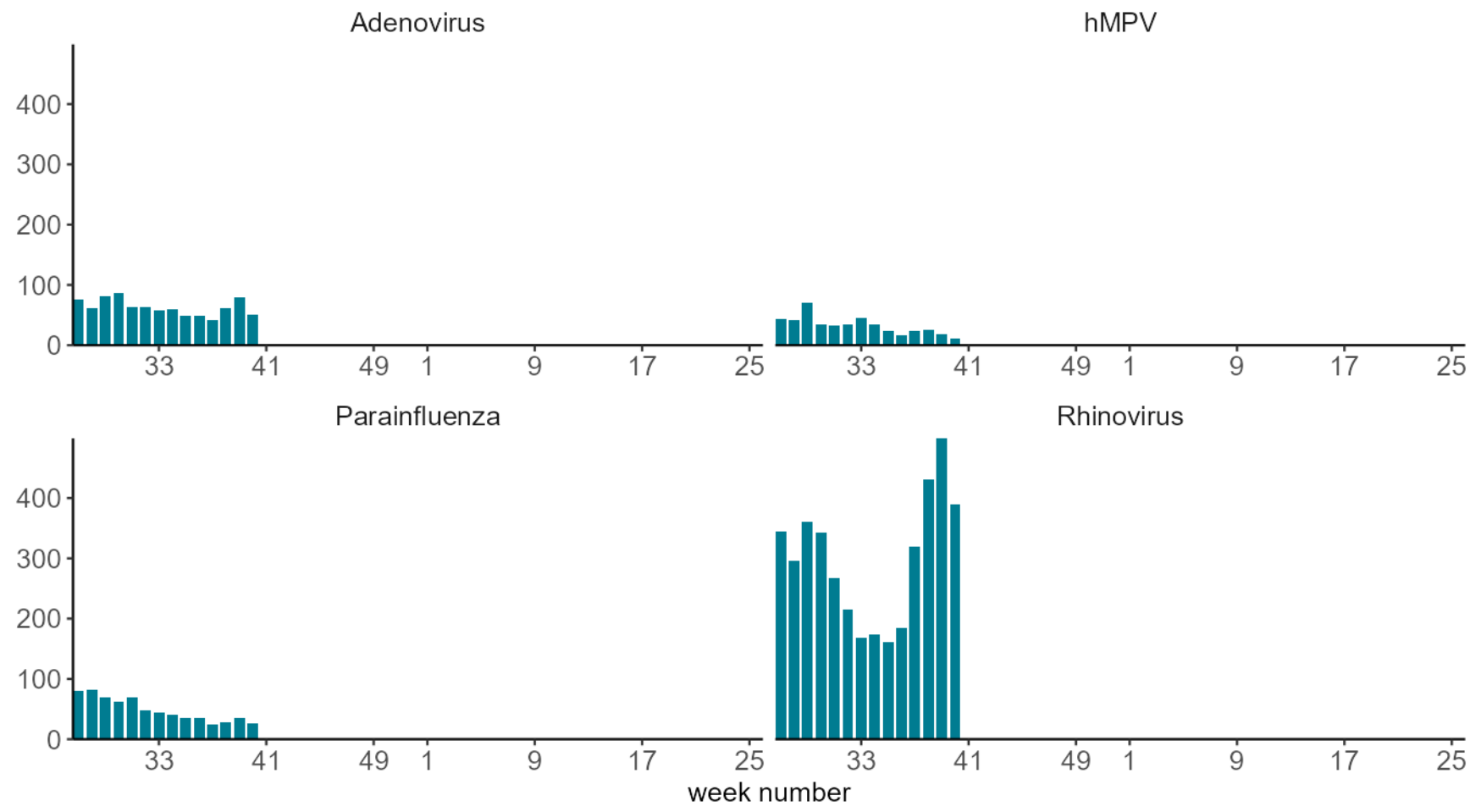


Respiratory DataMart – other respiratory viruses



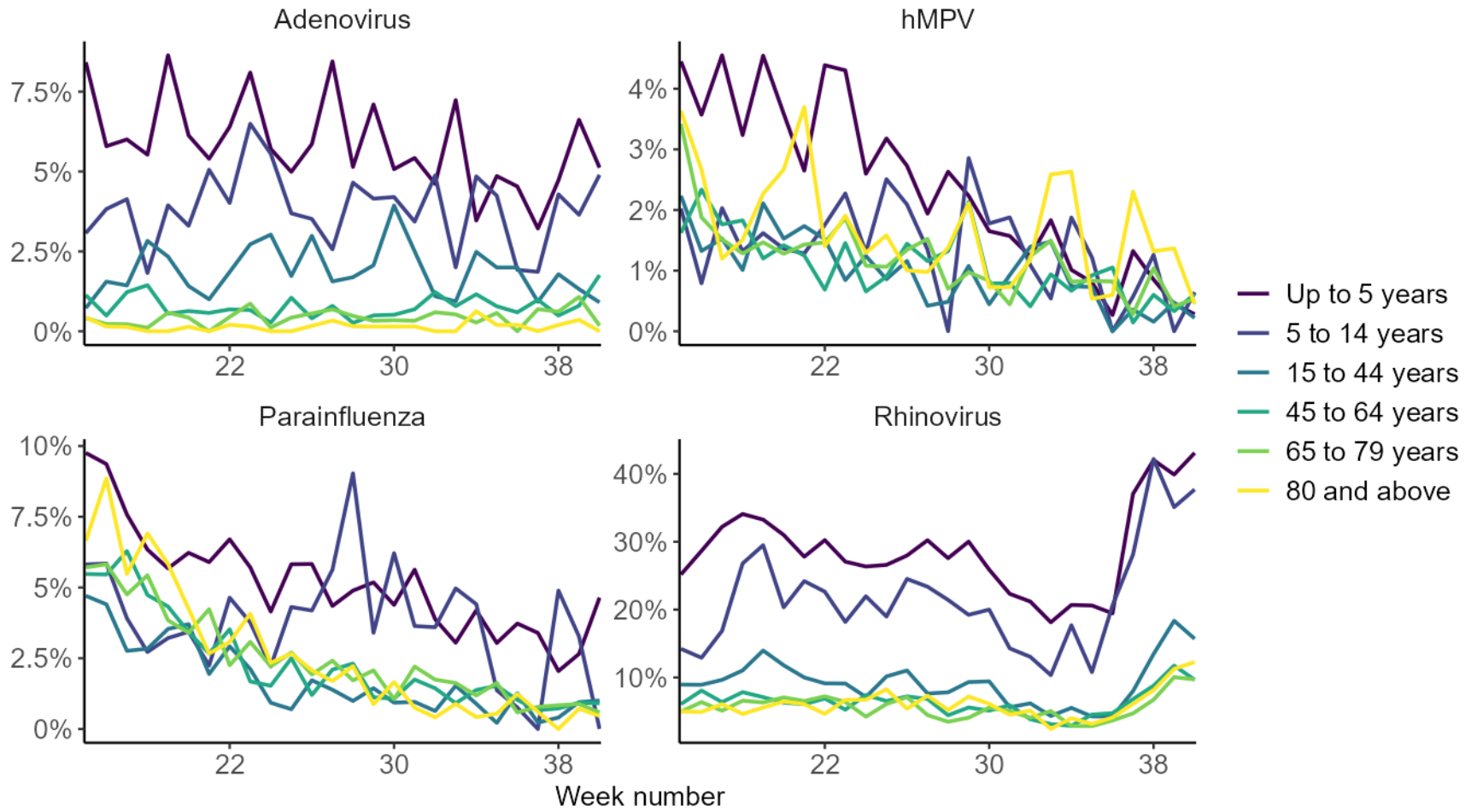


Respiratory DataMart – other respiratory viruses





Respiratory DataMart – other respiratory viruses



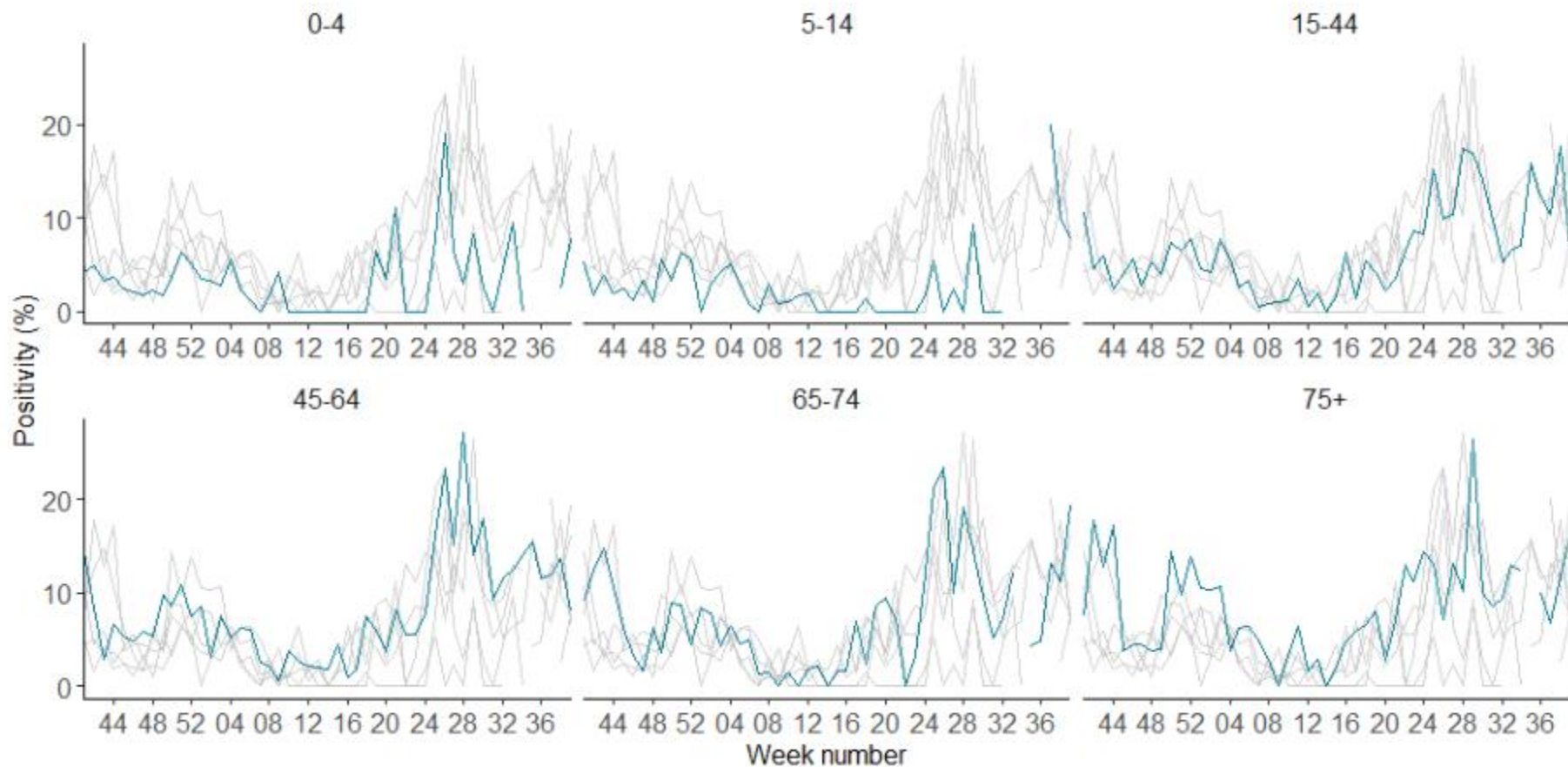
Please note y-axis uses different scales across graphs



Primary Care surveillance



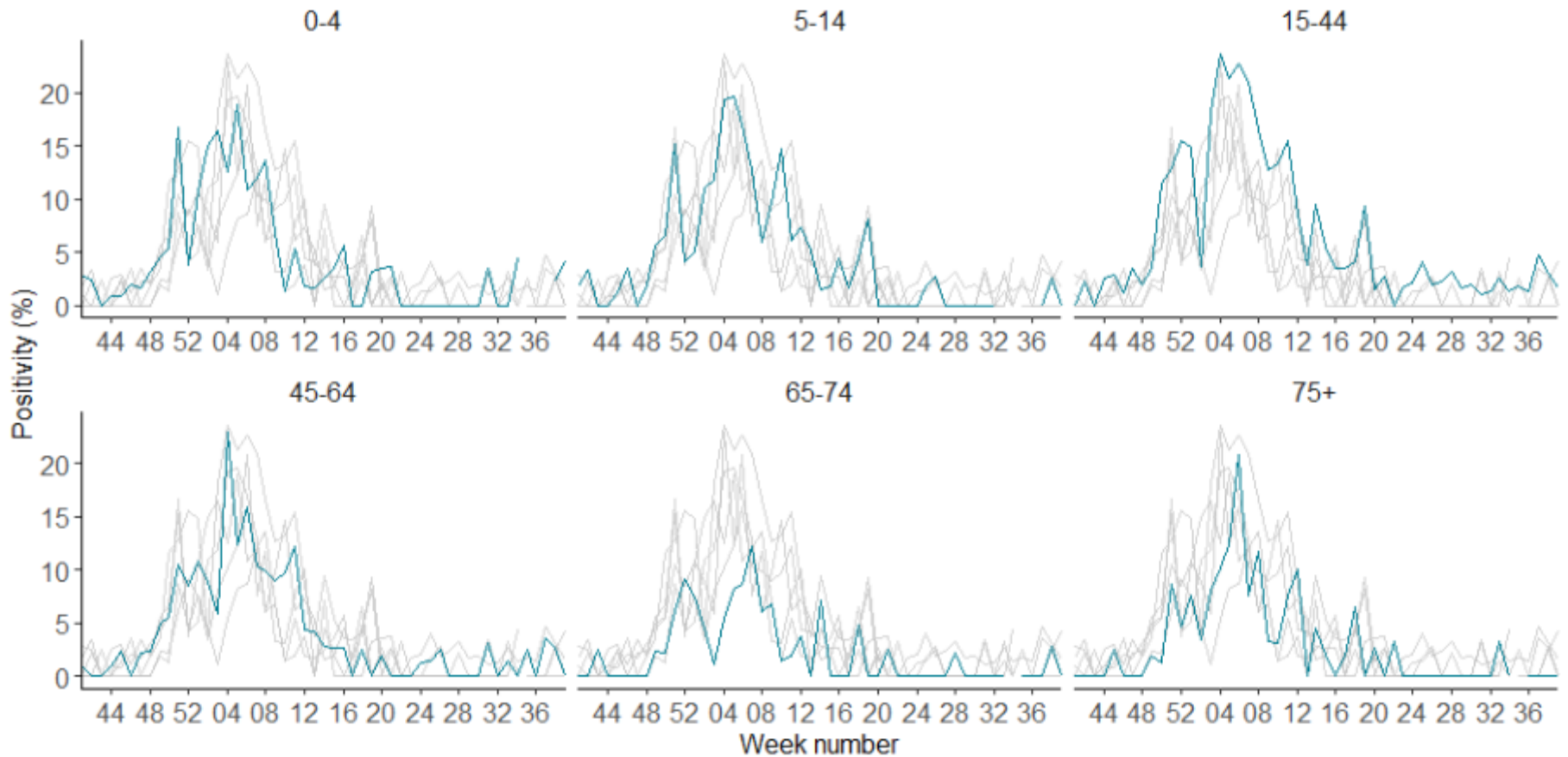
Weekly positivity for SARS-CoV-2 by age group in England, GP sentinel swabbing



Note: Weeks where fewer than 20 samples were tested in the age group are omitted



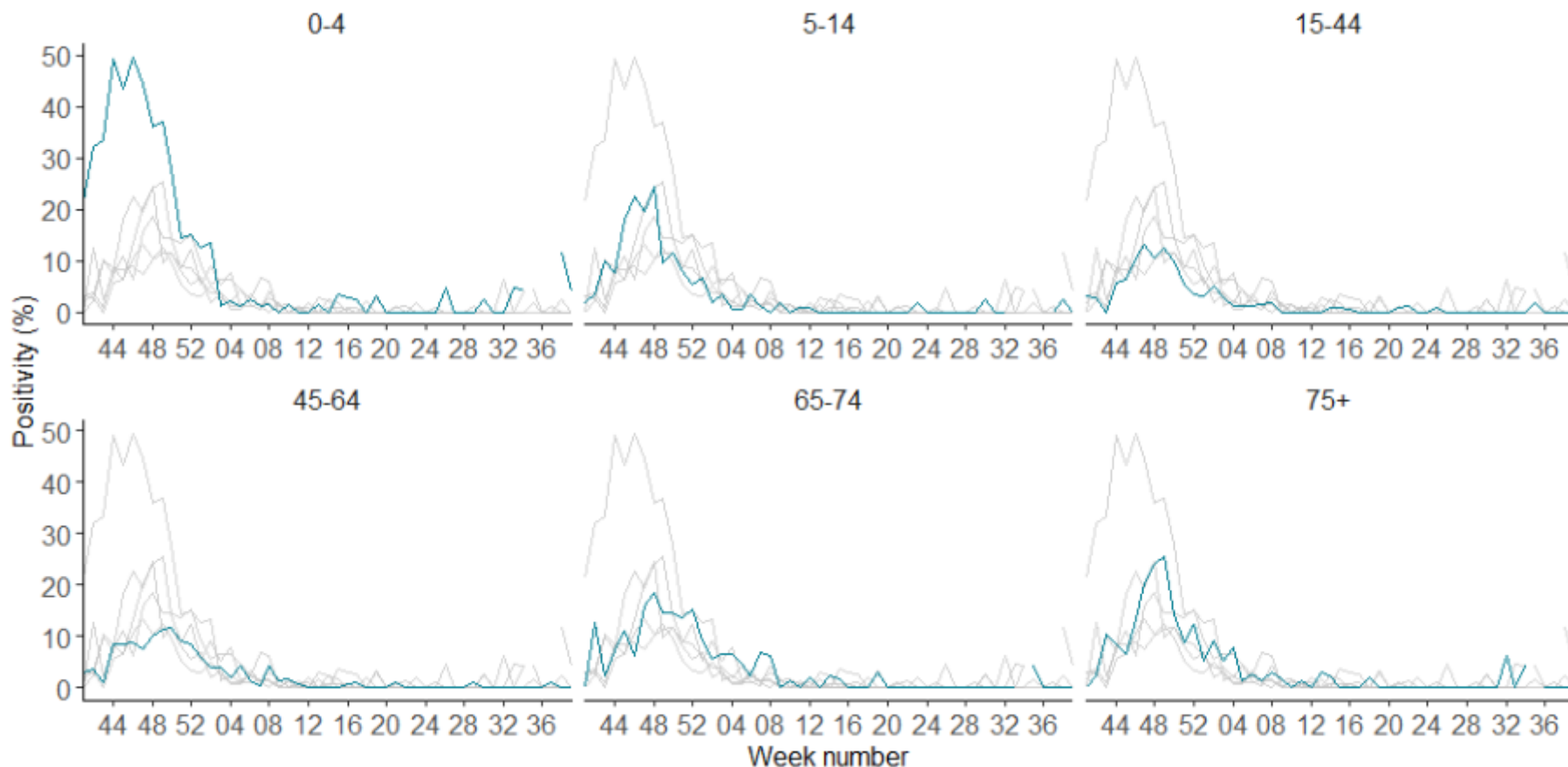
Weekly positivity for influenza by age group in England, GP sentinel swabbing



Note: Weeks where fewer than 20 samples were tested in the age group are omitted



Weekly positivity for RSV by age group in England, GP sentinel swabbing



Note: Weeks where fewer than 20 samples were tested in the age group are omitted

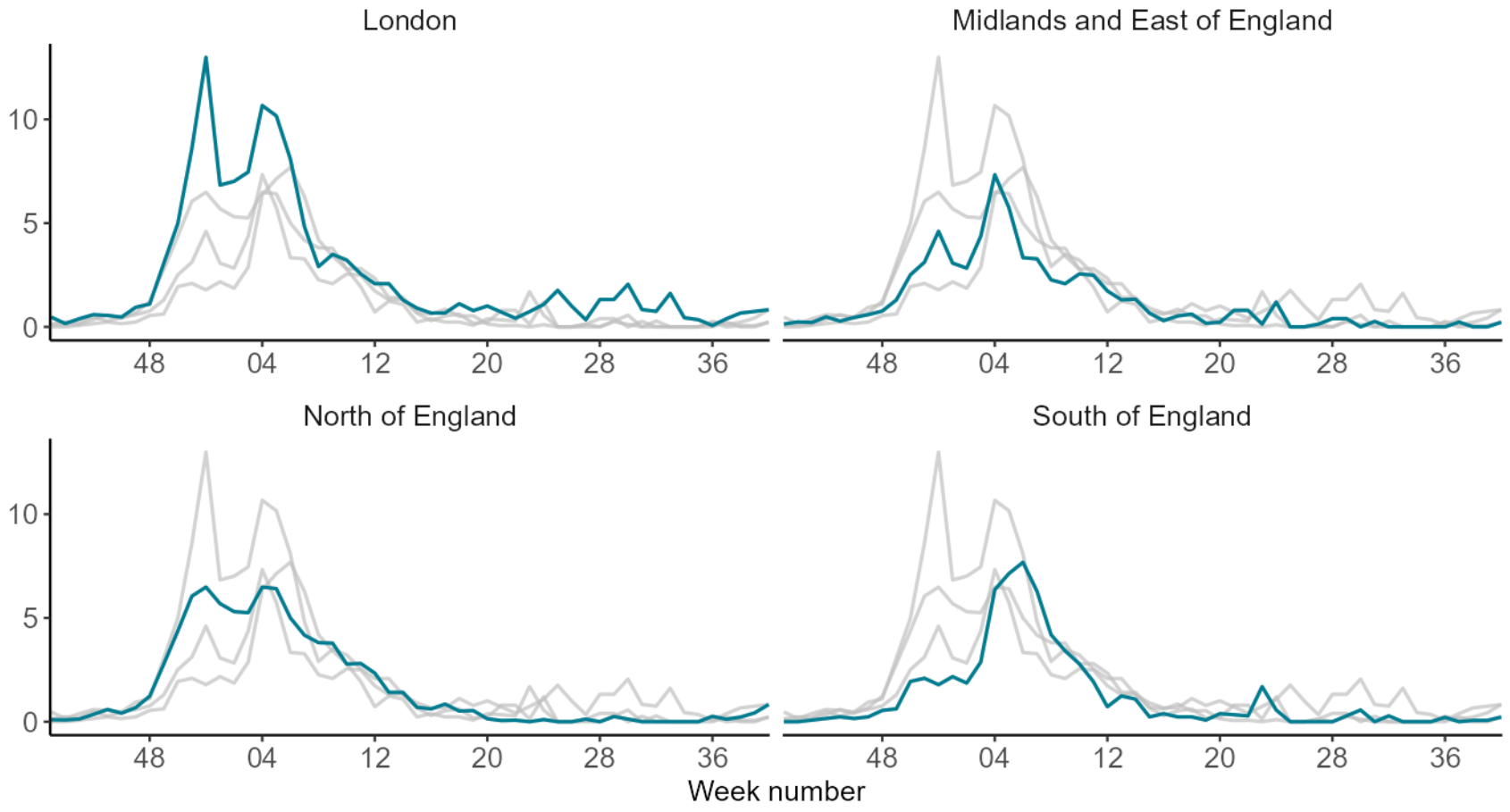


Secondary Care surveillance



Weekly influenza hospitalisations per 100,000 trust catchment population by UKHSA region

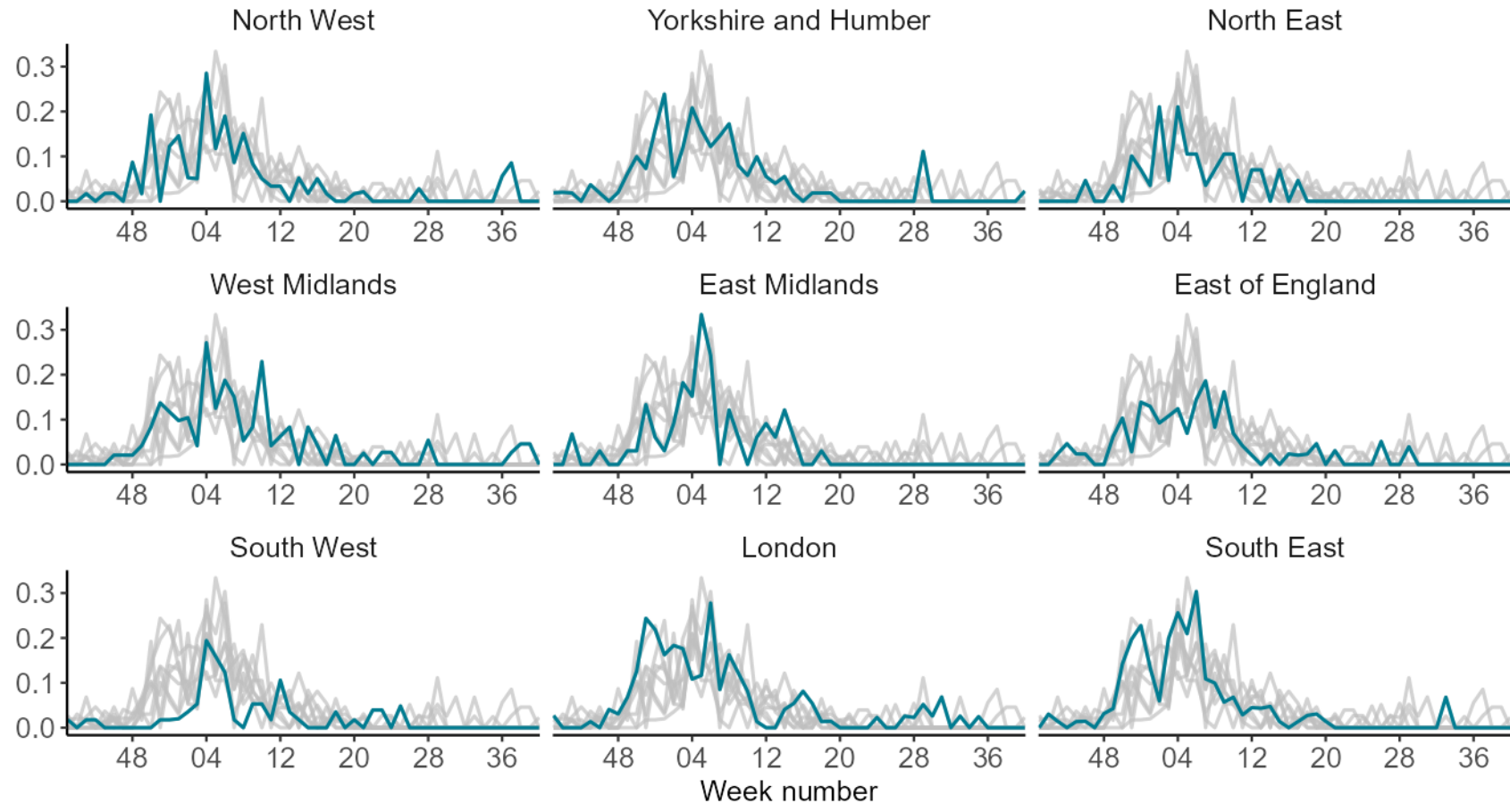
Weekly Hospitalisation rate per 100,000 trust catchment population





Weekly influenza ICU or HDU admissions per 100,000 trust catchment population by UKHSA region

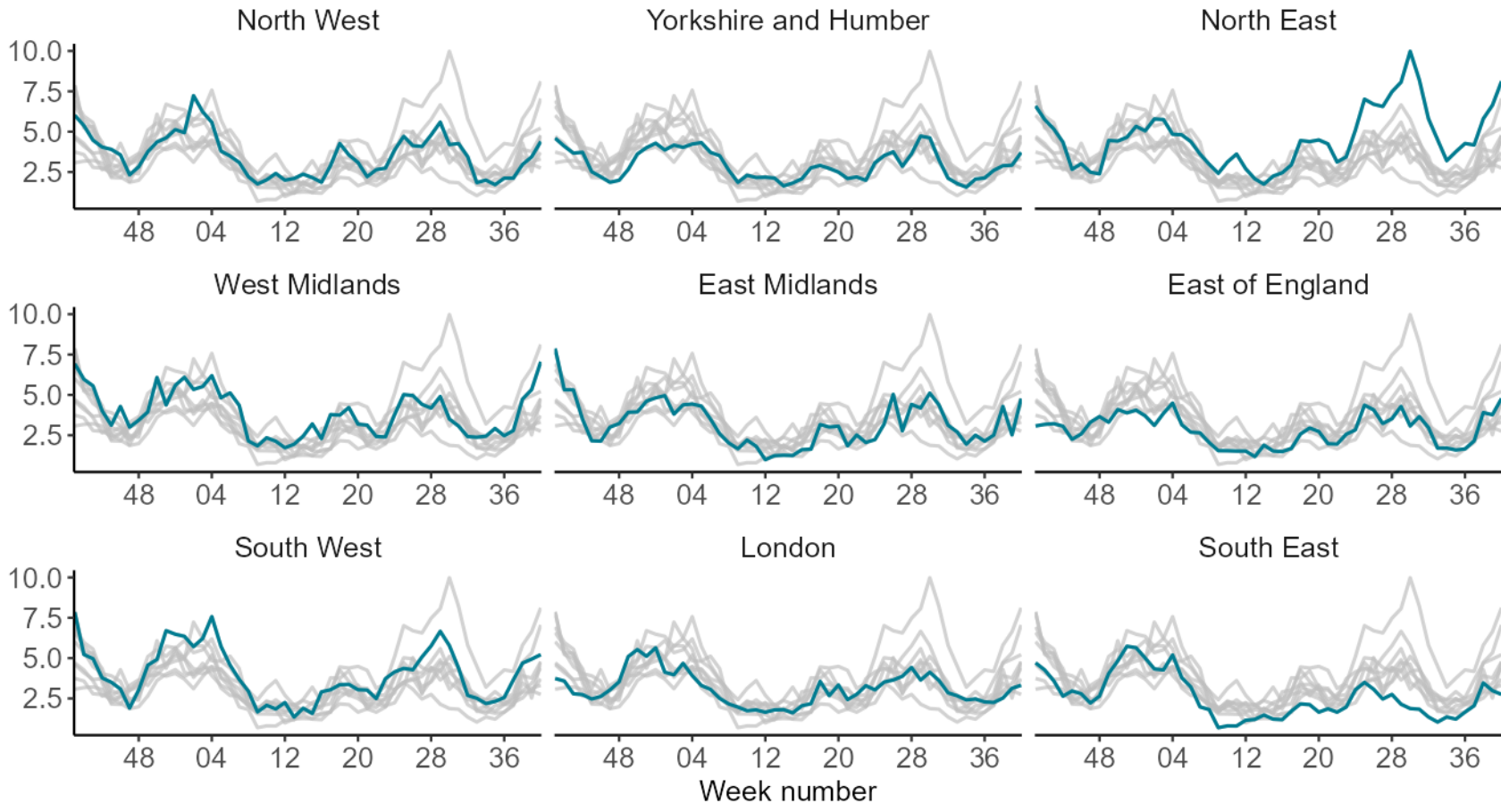
ICU admission rate per 100,000 trust catchment population





Weekly COVID-19 hospitalisations per 100,000 trust catchment population by UKHSA region

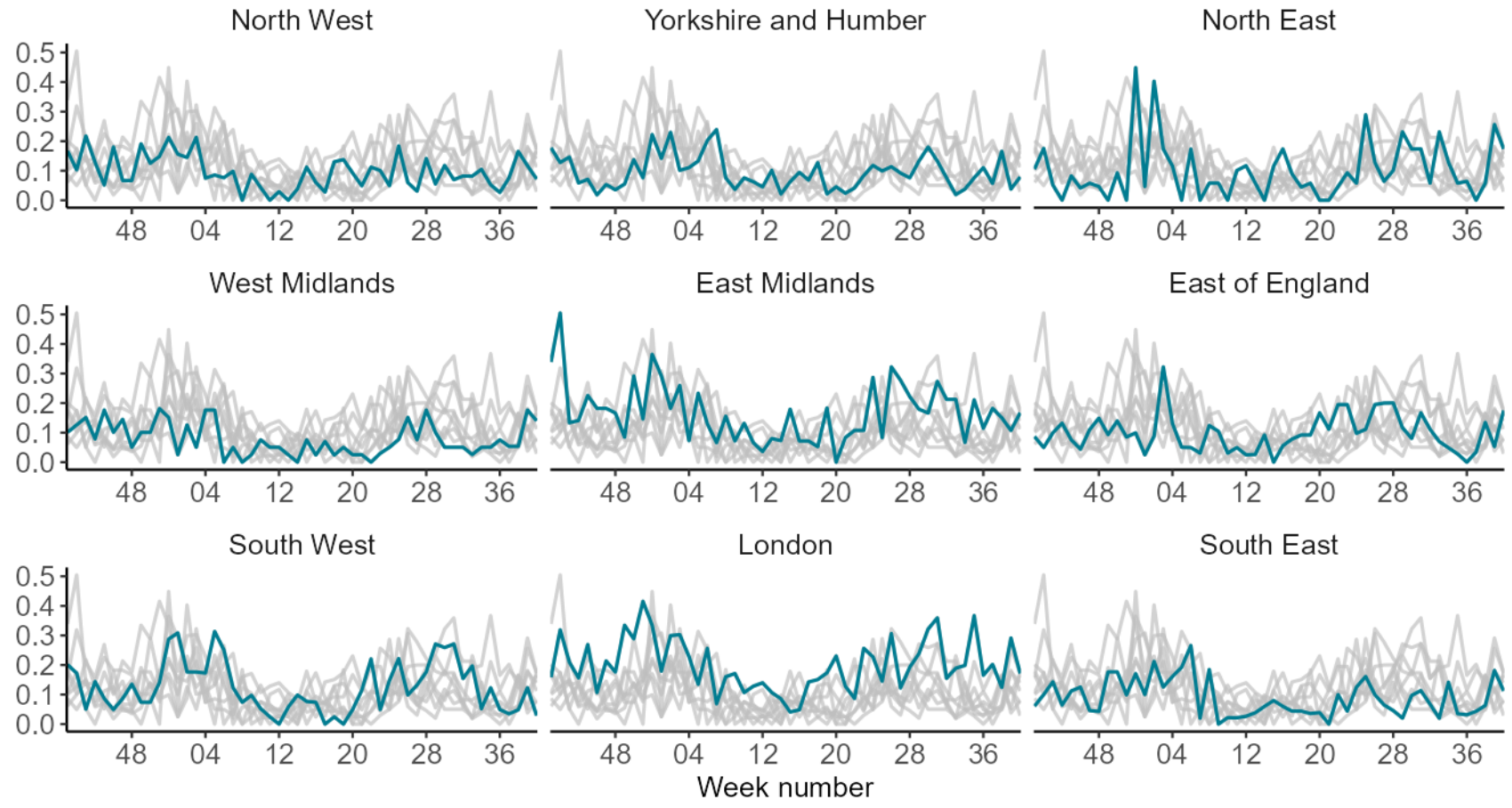
Weekly Hospitalisation rate per 100,000 trust catchment population





Weekly COVID-19 ICU or HDU admissions per 100,000 trust catchment population by UKHSA region

ICU admission rate per 100,000 trust catchment population





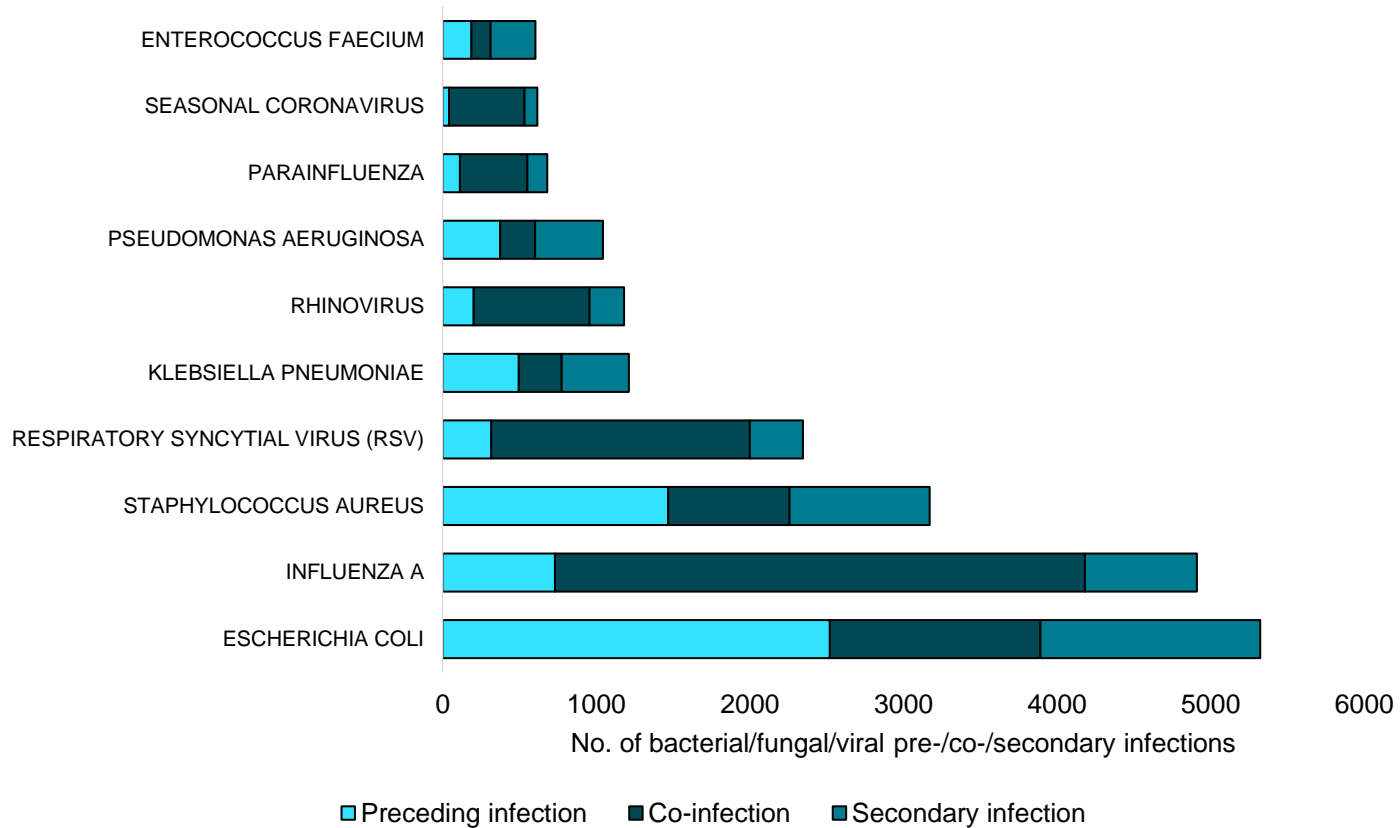
UK Health
Security
Agency

Preceding, co- and secondary infections in persons with COVID-19 and influenza in England, Jul 2022 –7th October 2024

HCAI, Fungal, AMR, AMU & Sepsis Division



Most frequent bacterial, fungal, and viral specimens, by timing of diagnosis, in persons with COVID-19 in England from ISO week 27 of 2022

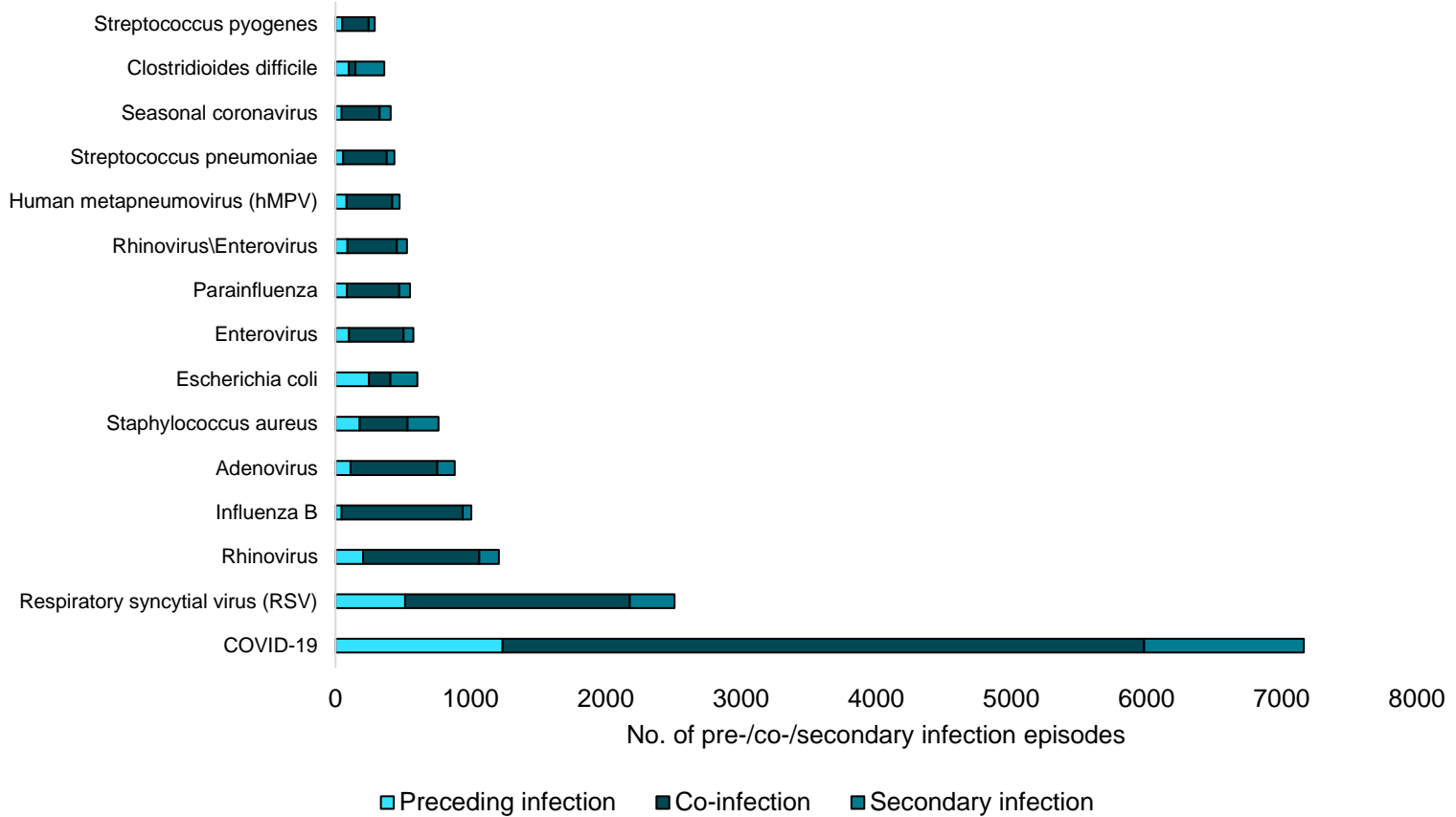


Key findings:

From ISO week 27 of 2022, the most frequent organisms identified were *Escherichia coli*, Influenza A, and *Staphylococcus aureus*.



Most frequent bacterial/fungal/respiratory viral infections, by timing of diagnosis, in persons with influenza in England from ISO week 27 of 2022



Key findings:

From ISO week 27 of 2022, the most frequent organisms identified were COVID-19, RSV, and rhinovirus.

*The baseline infection is any type of influenza (influenza A or B or both) for all bacterial/fungal/respiratory viral preceding/co-/secondary infections except for influenza B, where the baseline infection is influenza A.