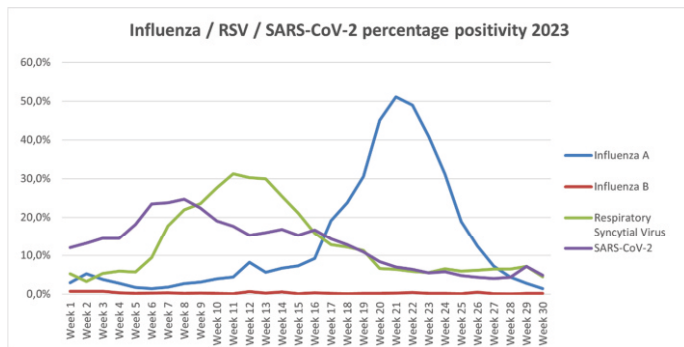


# THE PATHCARE NEWS

## Respiratory pathogen statistics: July 2023

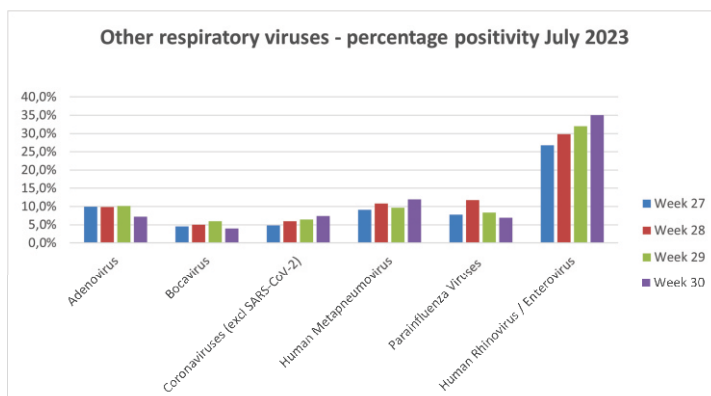
### Influenza, respiratory syncytial virus and SARS-CoV-2

- Influenza A detection rates continued to decline during July, dropping below 2% in week 30 (week ending 30 July).
- Influenza B percentage positivity has remained below 1% throughout 2023 thus far.
- RSV percentage positivity was stable at approximately 4-7% overall. While the highest detection rates were again noted in infants <1 year of age, the percentage positivity declined to 15.9% in week 30 in this age group and to 4.4% in children aged 1-5 years.
- SARS-CoV-2 percentage positivity has remained below 10% since week 20 (week ending 21 May).



### Other respiratory viruses

- Human rhinovirus/enterovirus detection rates increased to 35% during July, with the other respiratory viruses remaining relatively stable.
- Amongst the coronaviruses (excluding SARS-CoV-2), the majority of isolates during this reporting period were coronavirus OC43 (95.5%).
- Parainfluenza virus detections were predominately type 3 (50.7%) and type 1 (32.4%)



### Atypical bacteria

- In 2023 we have noted an increase in the rate of detection of *M. pneumoniae* from under 4% at the beginning of the year to up to 8-10% by the end of June.
- There has been no corresponding increase in the detection rates of other atypical respiratory bacterial pathogens, which remain uncommon.
- Mycoplasma pneumoniae* is a common respiratory pathogen that causes disease ranging from asymptomatic or mild upper respiratory tract infection to severe atypical pneumonia. A variety of extra-pulmonary manifestations sometimes also occur (haemolysis, mucocutaneous, central nervous system) either with respiratory infection or independently. *M. pneumoniae* affects both adults and children. Asymptomatic and prolonged carriage is common and may play a role in transmission. *M. pneumoniae* is not culturable on routine laboratory media, and diagnosis is mostly by molecular methods or serology.
- Please note that PCR may overstate the number of symptomatic cases since it also detects those with asymptomatic infection. *M. pneumoniae* typically causes epidemics every few years. Reliable local data for previous years is lacking, but it is likely that rates of *M. pneumoniae* plummeted in 2020-2021 in line with the declines in other respiratory infections, due to the non-pharmaceutical measures and social changes engendered by the COVID-19 pandemic. The increasing use of multiplex PCR panels may also be contributing to increased detection of *M. pneumoniae* infection.
- Mycoplasmas* lack a cell wall and therefore do not respond to cell wall active antibiotics such as beta-lactams. Doxycycline is regarded as therapeutic agent of choice with levofloxacin or azithromycin as alternatives, although macrolide resistance has been reported in other countries. One of these antibiotics is usually included in treatment of severe community acquired pneumonia.

