

THE PATHCARE NEWS

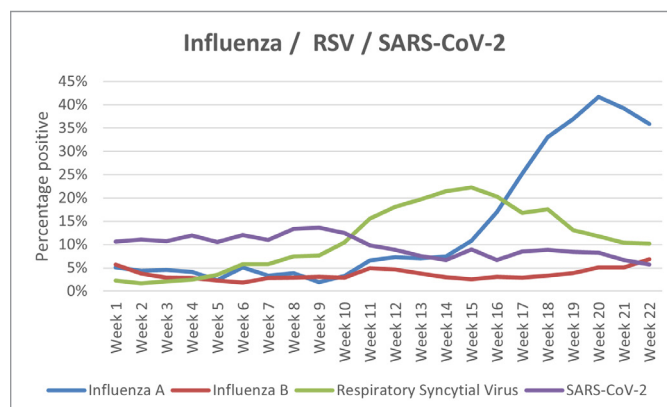
RESPIRATORY PATHOGEN STATISTICS: MAY 2024



This report is a summary of the results obtained from various molecular respiratory panels performed across PathCare laboratories during May 2024 (epidemiological weeks 18-22). The data is dependent on submission of samples by clinicians and therefore may not be representative of the general population but is intended to identify trends in the circulation of these viruses which may be of clinical relevance.

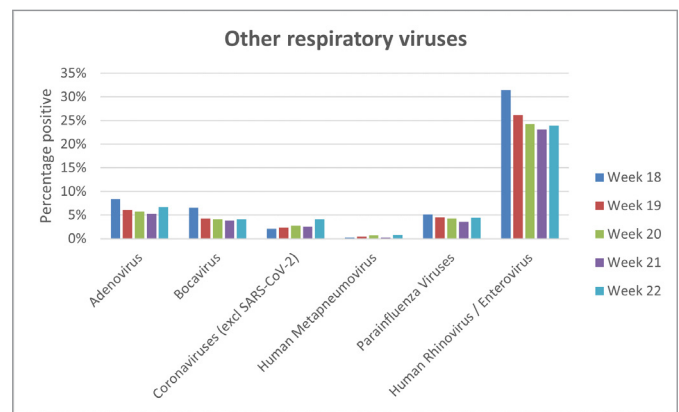
Influenza, respiratory syncytial virus (RSV) and SARS-CoV-2

- The NICD confirmed the start of the influenza season in week 17 (week starting 22 April). Nationally, influenza A positivity rates remained high throughout May (33-42%) and appear to have peaked in approximately week 20. Where molecular typing was available, these cases were almost entirely due to influenza A/H1N1. Similar trends were noted across all provinces. Some influenza B cases were detected during May but positivity rates were much lower, ranging from 3-7%.
- RSV detection rates continued on the downward trend, dropping from 18% to 10% overall. RSV positivity dropped below 10% in all age groups excepting those aged <5 years, where detection rates remained high and accounted for 75% of positive samples during the reporting period. In week 22, RSV percentage positivity remained at 46% in those aged <6 months, 27% in 6-12 month olds and 19% in 1-5 year olds.
- SARS-CoV-2 percentage positivity was below 10% throughout May.



Other respiratory viruses

- Human rhinovirus/enterovirus detection rates declined somewhat, ending at 24% in week 22.
- Adenovirus and parainfluenza viruses percentage positivity declined further during the reporting period (range 4-8%), while bocavirus and endemic coronaviruses detection rates remained low (2-6%).



Atypical bacteria

- Mycoplasma pneumoniae* (formerly *Mycoplasma pneumoniae*) detection rates continued to decline to ≤1%, as compared to 6-8% detected in the 3rd quarter of 2023.
- Chlamydia pneumoniae* rates remained in the 1-2% range.
- Bordetella pertussis* rates were low (0-0.2%), while no *Bordetella parapertussis* cases were detected during May.
- Similar to April, no *Legionella pneumophila* cases were detected during May.

