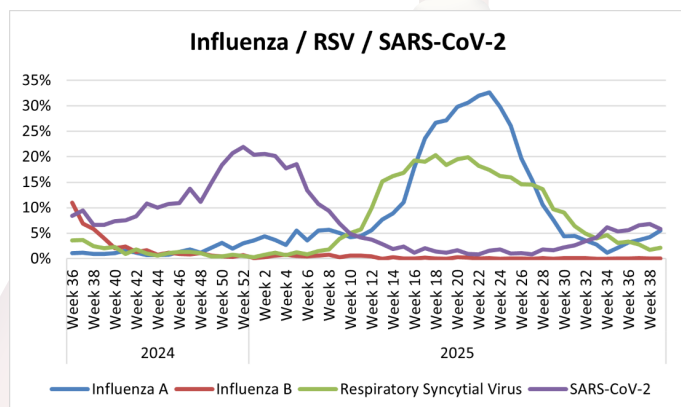




This report is a summary of the results obtained from various molecular respiratory panels performed across PathCare laboratories during September 2025 (epidemiological weeks 36-39). The data is dependent on submission of samples by clinicians and therefore may not be representative of the general population 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

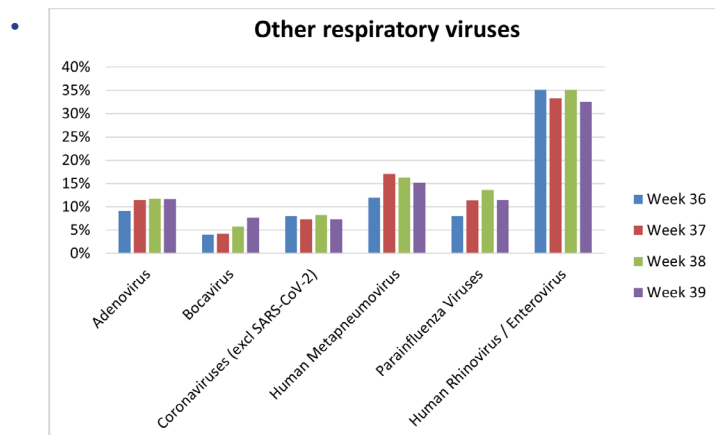
- SARS-CoV-2 detection rates ranged from 6-7% during September. SARS-CoV-2 detection rates had remained <5% from early March until mid-August but increased to ≥5% from week 34 (week starting 18 August).
- The percentage of samples testing positive for influenza A ranged from 3-6%, of which the majority of isolates for which typing was available were influenza A/H3 (88%).
- Influenza B positivity has remained below 1% throughout 2025 thus far.
- The decrease in RSV detection rates continued during September and dropped to 2% in week 39.



### OTHER RESPIRATORY VIRUSES

- The detection rate for human metapneumovirus increased further during September, ranging from 12-17%.
- Parainfluenza virus positivity rates also increased at 8-14% (previously 3-6%). The proportion of parainfluenza type 3 detections increased to 61% among isolates for which molecular typing was available, with type 4 dropping to 23%. Parainfluenza types 1 and 2 accounted for 10% and 6% of isolates respectively.
- Human rhino/enteroviruses were the most commonly detected viruses during September with detection rates of 33-35%.

- The positivity rates remained similar to the previous reporting period for adenoviruses (9-12%), bocavirus (4-8%), and coronaviruses (7-8%). OC43 remained the most commonly detected endemic coronavirus, accounting for 74% of isolates for which molecular typing was available.



### ATYPICAL BACTERIA

- Chlamydia pneumoniae* and *Mycoplasmoides pneumoniae* detection rates remained below 1% and have not exceeded 2% during 2025.
- Fifteen *Bordetella pertussis* cases were noted during August, with eleven from the Western Cape, two from the Northern Cape, and one each from Gauteng and the Eastern Cape. It should be noted that *Bordetella pertussis* is a notifiable medical condition, and post-exposure prophylaxis is recommended for close and vulnerable respiratory exposed contacts.
- Seven *Bordetella parapertussis* cases were detected during the reporting period, including five from the Western Cape and one each from Gauteng and Kwa-Zulu Natal.
- A single *Legionella pneumophila* case was detected in Gauteng during September. It should be noted that *Legionella pneumophila* is a notifiable disease and these statistics represent only molecular testing for *Legionella pneumophila*, as legionella urinary antigen results are not included in this report.

