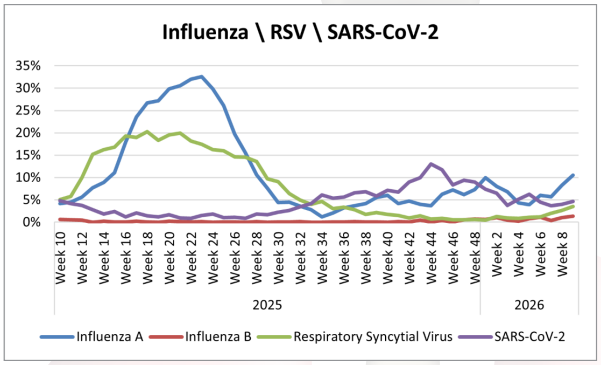
RESPIRATORY PATHOGEN STATISTICS

FEBRUARY 2026

This report is a summary of the results obtained from various molecular respiratory panels performed across PathCare laboratories during February 2026 (epidemiological weeks 6-9). 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.

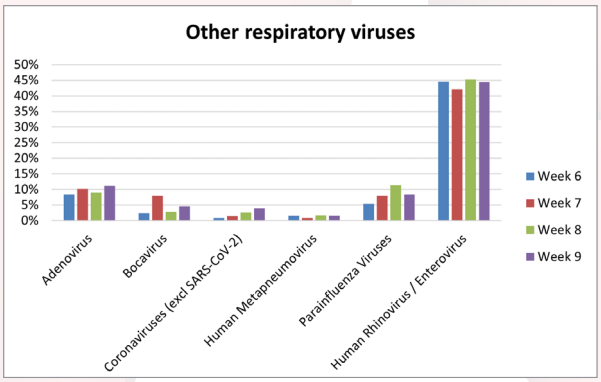
INFLUENZA, RESPIRATORY SYNCYTIAL VIRUS (RSV) AND SARS-COV-2

- The percentage of samples testing positive for influenza A increased from 6% in weeks 6-7 to 11% in week 9 and both influenza A/H1 and A/H3 were detected during this period. Where molecular typing was available, influenza A/H1 and influenza A/H3 detections accounted for 39% and 61% of isolates respectively.
- The influenza B detection rate was ≤1% throughout February.
- The percentage of samples testing positive for RSV showed an increasing trend from 1% in week 6 to 4% in week 9, however, remained below the threshold for the start of RSV season.
- The SARS-CoV-2 detection rate ranged from 4-5% during this reporting period, similar to the previous month.



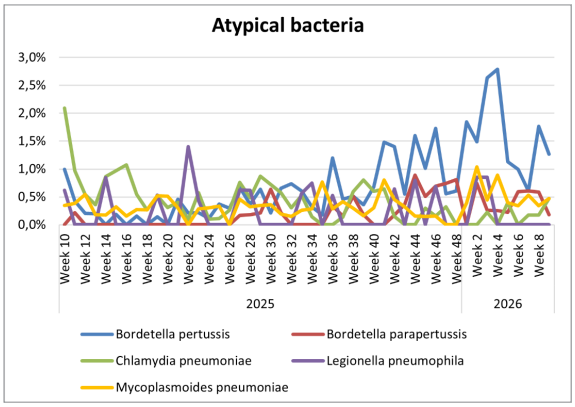
OTHER RESPIRATORY VIRUSES

- The high detection rate for human rhino/enteroviruses continued in February, ranging from 42-45%.
- For the other respiratory viruses, the detection rates were as follows: adenovirus 8-11% (previously 6-7%), bocavirus 2-8%, and human metapneumovirus 1-2%.
- The positivity rate for the parainfluenza viruses was 5-11% (4-6%), with the majority of isolates being parainfluenza type 3 (48%), followed by types 2 and 4 (21% and 20% respectively).
- Endemic coronaviruses were detected in 1-4% of samples. Where molecular typing was available, the majority of isolates were coronavirus OC43 (71%).



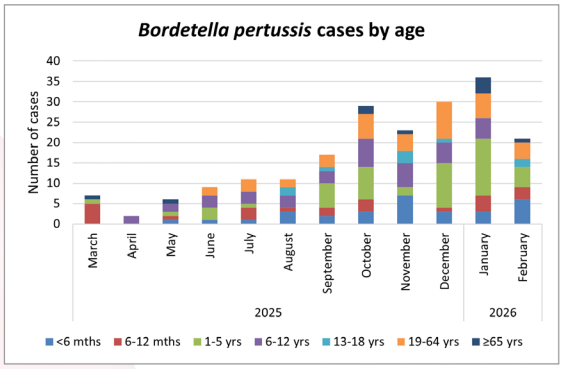
ATYPICAL BACTERIA

- *Chlamydia pneumoniae* and *Mycoplasmoides pneumoniae* detection rates remained below 1%.
- Ten cases of *Bordetella parapertussis* were detected last month, including five from the Western Cape, two from Gauteng, and one case each from the Eastern Cape, Northern Cape and Limpopo.
- No *Legionella pneumophila* cases were detected during February. *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.

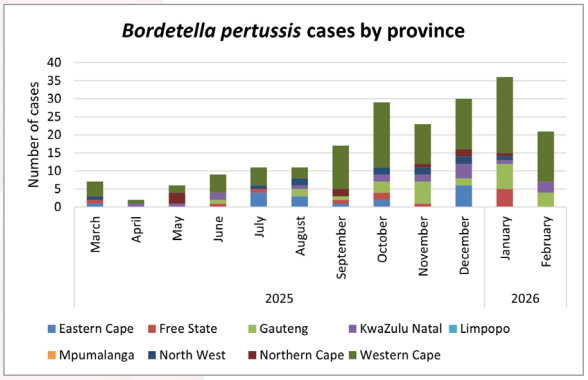


BORDETELLA PERTUSSIS

- During February, 21 *Bordetella pertussis* cases were detected. While the majority were children under 5 years of age (67%), adolescents (10%) and adults (24%) accounted for one third of cases and testing should be considered in all age groups when clinically relevant.



- As in previous months, most cases were from the Western Cape (14), with additional cases from Gauteng (4) and KwaZulu Natal (3).



- *Bordetella pertussis* is a vaccine-preventable disease, a notifiable medical condition, and post-exposure prophylaxis is recommended for close and vulnerable respiratory exposed contacts.