



GOVERNMENT OF BERMUDA  
Ministry of Health

# SURVEILLANCE SUMMARY REPORT

2025:

EPIDEMIOLOGICAL WEEKS 17-20: 20 APRIL 2025 – 17 MAY 2025

*The Surveillance Summary Report contains information on syndromes and communicable diseases reported into the Epidemiology and Surveillance Unit by Epidemiological Week (or as otherwise indicated). The Report currently contains 3 sections:*

1. [Syndromic Surveillance](#)
2. [Conditions of Interest](#) – Influenza, COVID-19, and SARI (Severe Acute Respiratory Infection)
3. [Routine Communicable Disease Surveillance](#)

REPORT BASED ON DATA RECEIVED IN THE EPIDEMIOLOGY AND SURVEILLANCE UNIT BY 21 MAY 2025

## Syndromic Surveillance

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Syndromic surveillance is the analysis of health-related data to detect or anticipate disease outbreaks. Action on an increase or alert in the reported syndromes under surveillance could potentially stop or slow the spread of the outbreak. The syndromes under surveillance are as follows:

**Acute Flaccid Paralysis (AFP):** Acute (sudden) onset of flaccid paralysis in the absence of trauma. *Any patient in whom a healthcare worker suspects acute flaccid paralysis is considered to be a suspected case of poliomyelitis.*

**Fever and Haemorrhagic symptoms:** Acute (sudden) onset of fever (> 38.0°C or 100.4°F) in a previously healthy person, presenting with at least one haemorrhagic (bleeding) manifestation with or without jaundice (e.g. purpura, epistaxis, haemoptysis, melena).

**Fever and Neurological symptoms (except AFP):** Acute (sudden) onset of fever (> 38.0°C or 100.4°F) with or without headache and vomiting in a previously healthy person presenting with at least one of the following signs: meningeal irritation, convulsions, altered consciousness, altered sensory manifestations, paralysis except AFP.

**Fever and Rash:** Acute (sudden) febrile illness (>38.0°C or 100.4°F) in a previously healthy person, presenting generalized rash. *Any patient in whom a healthcare worker suspects measles or rubella infection is considered to be a suspected measles/rubella case. These patients generally have fever and generalized rash illnesses.*

**Fever and Respiratory Symptoms (Acute Respiratory Infection):** Acute (sudden) febrile illness (> 38.0°C or 100.4°F) in a previously healthy person, presenting with cough or sore throat with or without respiratory distress.

**Gastroenteritis:** Acute (sudden) onset of diarrhoea, with or without fever (> 38C or 100.4F) and presenting with 3 or more loose or watery stools in the past 24 hours, with or without dehydration, vomiting and/or visible blood.

**Undifferentiated Fever:** An acute (sudden) febrile illness (> 38.0°C or 100.4°F) in a previously healthy person of less than 7 days duration with two or more of the following manifestations: headache, retro-orbital pain, myalgia, arthralgia, nausea, vomiting, jaundice – AND without any particular symptoms fitting another syndrome definition.

## Reported Syndromes

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The data presented in this section reflects reports submitted to the Epidemiology and Surveillance Unit through Bermuda's sentinel surveillance system.

Syndromes reported in EWs 17-20 included Fever and Neurological (leptospirosis), Fever and Rash (chickenpox), Fever and Respiratory (adenovirus, bordetella pertussis, chlamydia pneumoniae, common cold, coronavirus OC43, coronavirus "seasonal", COVID-19, human metapneumovirus, influenza, mycoplasma pneumoniae, parainfluenza, RSV, strep throat) Gastroenteritis (c.difficile, campylobacter, e.coli, norovirus, rotavirus, salmonella).

Alert levels are used to identify potential public health risks. A risk assessment will determine the need for any public health action.

During EWs 17-20, there were alerts for Fever and Neurological Symptoms, Fever and Rash, Fever and Respiratory Symptoms, and Gastroenteritis.

### Epidemiological Week 17

Syndrome	# of Reported Cases	5-Yr Average*	Medium Alert Threshold**	High Alert Threshold***	Alert Level
Acute Flaccid Paralysis	0	0	0	0	LOW
Fever and Haemorrhagic Symptoms	0	0	0	1	LOW
Fever and Neurological Symptoms	0	0	0	1	LOW
Fever and Rash	0	0	0	1	LOW
Fever and Respiratory Symptoms (under 5 years)	4	2	5	10	LOW
Fever and Respiratory Symptoms (5 years and older)	27	25	42	76	LOW
Gastroenteritis (under 5 years)	3	0	1	2	HIGH
Gastroenteritis (5 years and older)	7	4	8	15	LOW
Undifferentiated Fever (under 5 years)	0	0	1	2	LOW
Undifferentiated Fever (5 years and older)	0	0	0	1	LOW
<b>% of sentinel sites reporting</b>					<b>92.86%</b>

### Epidemiological Week 18

Syndrome	# of Reported Cases	5-Yr Average*	Medium Alert Threshold**	High Alert Threshold***	Alert Level
Acute Flaccid Paralysis	0	0	0	0	LOW
Fever and Haemorrhagic Symptoms	0	0	0	0	LOW
Fever and Neurological Symptoms	1	0	0	1	HIGH
Fever and Rash	0	0	1	2	LOW
Fever and Respiratory Symptoms (under 5 years)	12	2	5	10	HIGH
Fever and Respiratory Symptoms (5 years and older)	22	26	45	84	LOW
Gastroenteritis (under 5 years)	0	0	1	2	LOW
Gastroenteritis (5 years and older)	4	4	8	14	LOW
Undifferentiated Fever (under 5 years)	0	0	1	2	LOW
Undifferentiated Fever (5 years and older)	0	0	1	1	LOW
<b>% of sentinel sites reporting</b>					<b>92.86%</b>

### Epidemiological Week 19

Syndrome	# of Reported Cases	5-Yr Average*	Medium Alert Threshold**	High Alert Threshold***	Alert Level
Acute Flaccid Paralysis	0	0	0	0	LOW
Fever and Haemorrhagic Symptoms	0	0	0	0	LOW
Fever and Neurological Symptoms	0	0	0	0	LOW
Fever and Rash	1	0	1	2	MEDIUM
Fever and Respiratory Symptoms (under 5 years)	5	3	7	14	LOW
Fever and Respiratory Symptoms (5 years and older)	15	25	46	86	LOW
Gastroenteritis (under 5 years)	3	0	1	2	HIGH
Gastroenteritis (5 years and older)	7	4	8	14	LOW
Undifferentiated Fever (under 5 years)	0	0	0	1	LOW
Undifferentiated Fever (5 years and older)	0	0	1	1	LOW
<b>% of sentinel sites reporting</b>					<b>92.86%</b>

### Epidemiological Week 20

Syndrome	# of Reported Cases	5-Yr Average*	Medium Alert Threshold**	High Alert Threshold***	Alert Level
Acute Flaccid Paralysis	0	0	0	0	LOW
Fever and Haemorrhagic Symptoms	0	0	0	0	LOW
Fever and Neurological Symptoms	0	0	0	0	LOW
Fever and Rash	0	0	1	2	LOW
Fever and Respiratory Symptoms (under 5 years)	5	3	7	15	LOW
Fever and Respiratory Symptoms (5 years and older)	18	25	48	94	LOW
Gastroenteritis (under 5 years)	0	1	1	3	LOW
Gastroenteritis (5 years and older)	5	5	8	15	LOW
Undifferentiated Fever (under 5 years)	0	0	0	1	LOW
Undifferentiated Fever (5 years and older)	0	0	1	1	LOW
<b>% of sentinel sites reporting</b>					<b>92.86%</b>

### 4-Week Summary: Epidemiological Weeks 17-20

Syndrome	# of Reported Cases	5-Yr Average	Medium Alert Threshold**	High Alert Threshold***	Alert Level
Acute Flaccid Paralysis	0	0	0	0	LOW
Fever and Haemorrhagic Symptoms	0	0	0	1	LOW
Fever and Neurological Symptoms	1	0	0	1	MEDIUM
Fever and Rash	1	1	3	7	LOW
Fever and Respiratory Symptoms (under 5 years)	26	11	24	50	MEDIUM
Fever and Respiratory Symptoms (5 years and older)	82	101	181	341	LOW
Gastroenteritis (under 5 years)	6	2	4	10	MEDIUM
Gastroenteritis (5 years and older)	23	17	31	58	LOW
Undifferentiated Fever (under 5 years)	0	1	2	6	LOW
Undifferentiated Fever (5 years and older)	0	0	2	5	LOW

### Cumulative Summary: Epidemiological Weeks 1-20

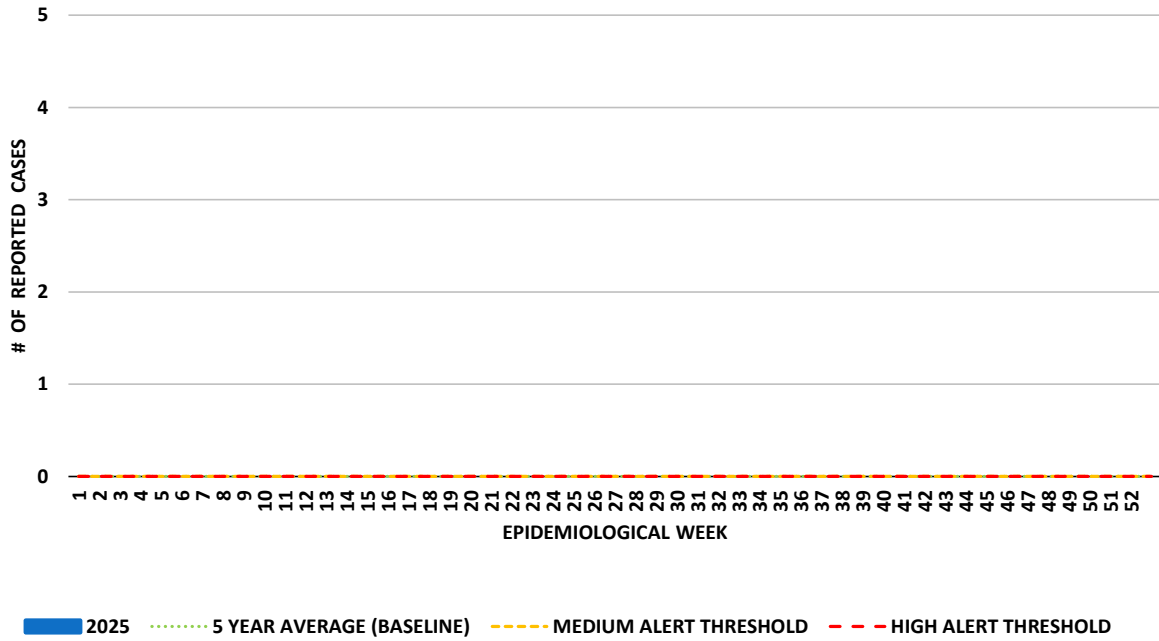
Syndrome	# of Reported Cases	5-Yr Average	Medium Alert Threshold**	High Alert Threshold***	Alert Level
Acute Flaccid Paralysis	0	0	0	0	LOW
Fever and Haemorrhagic Symptoms	0	0	1	3	LOW
Fever and Neurological Symptoms	2	1	3	8	LOW
Fever and Rash	16	10	27	63	LOW
Fever and Respiratory Symptoms (under 5 years)	117	88	172	340	LOW
Fever and Respiratory Symptoms (5 years and older)	700	758	1334	2487	LOW
Gastroenteritis (under 5 years)	13	13	33	74	LOW
Gastroenteritis (5 years and older)	77	66	118	222	LOW
Undifferentiated Fever (under 5 years)	0	1	6	15	LOW
Undifferentiated Fever (5 years and older)	0	1	3	8	LOW

\*5-Yr Average calculated by summing the incidence counts for the current week, the 2 weeks preceding the current week, and the 2 weeks following the current week, for a total of 5 preceding years.

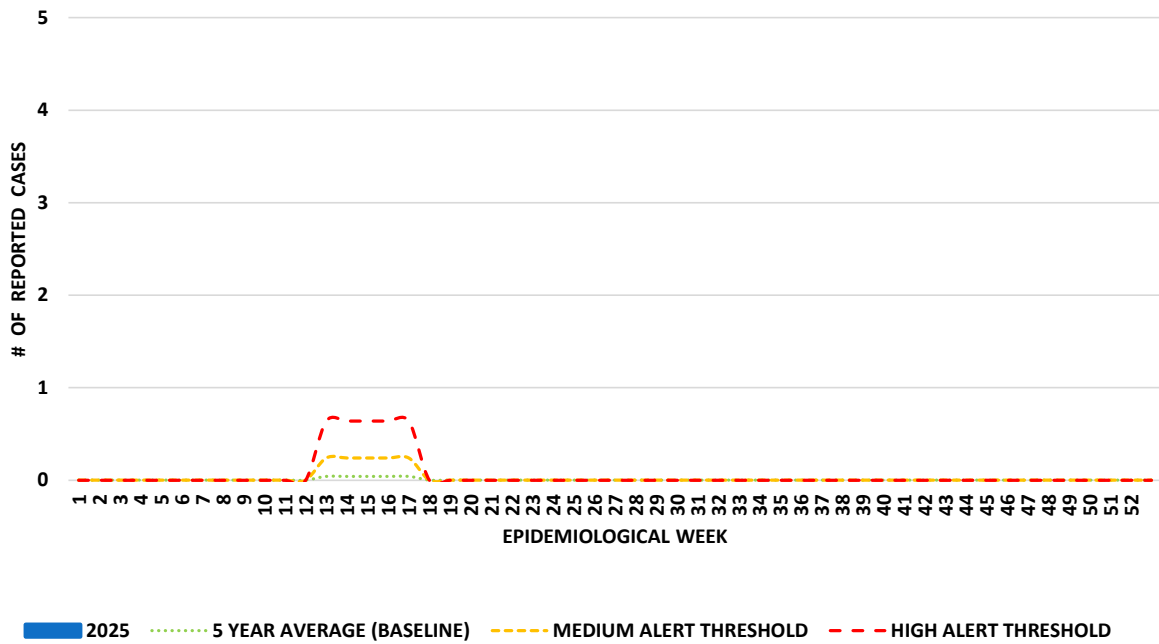
\*\* Medium Alert Threshold is set at 1 standard deviation above 5-yr average

\*\*\* High Alert Threshold is set at 3 standard deviations above 5-year average

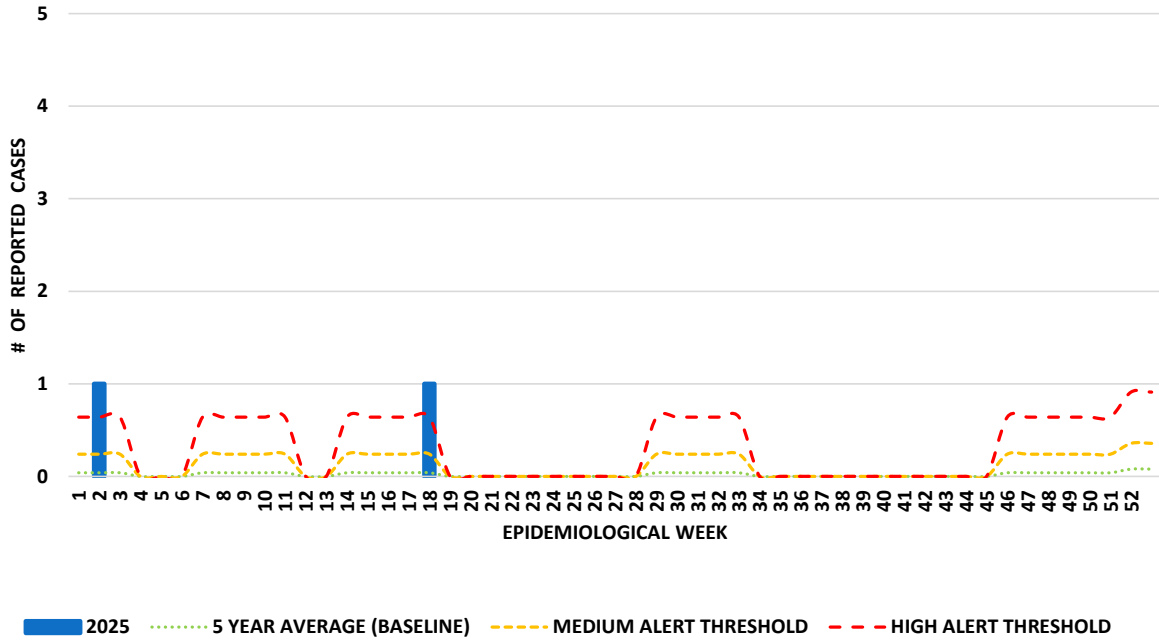
### ACUTE FLACCID PARALYSIS



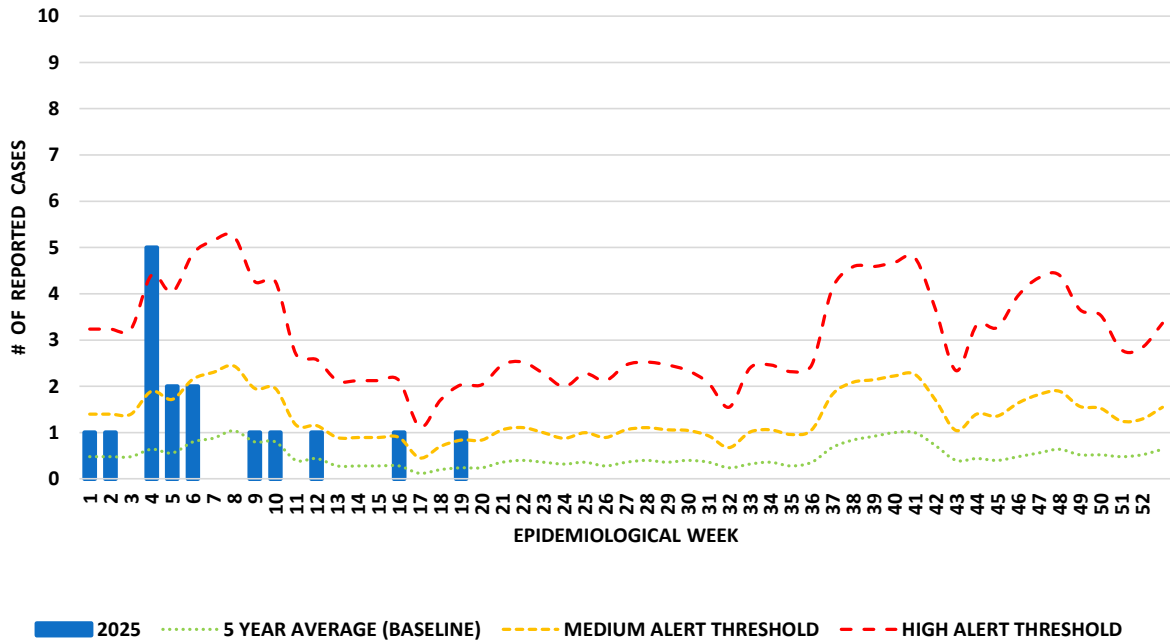
### FEVER AND HAEMORRHAGIC SYMPTOMS



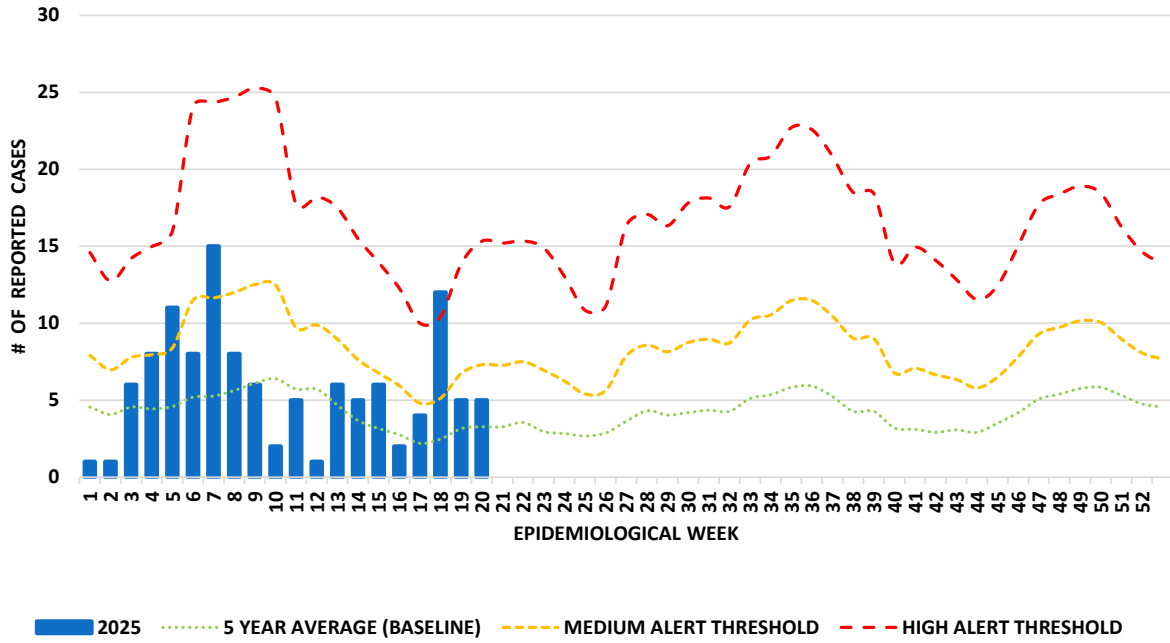
### FEVER AND NEUROLOGICAL SYMPTOMS



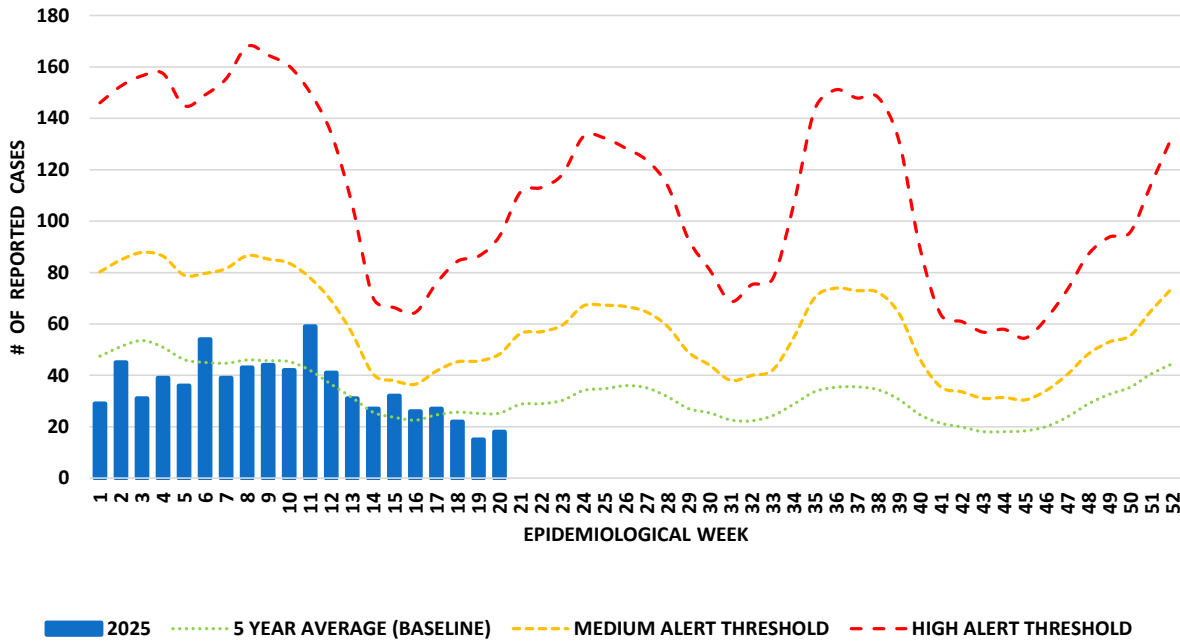
### FEVER AND RASH



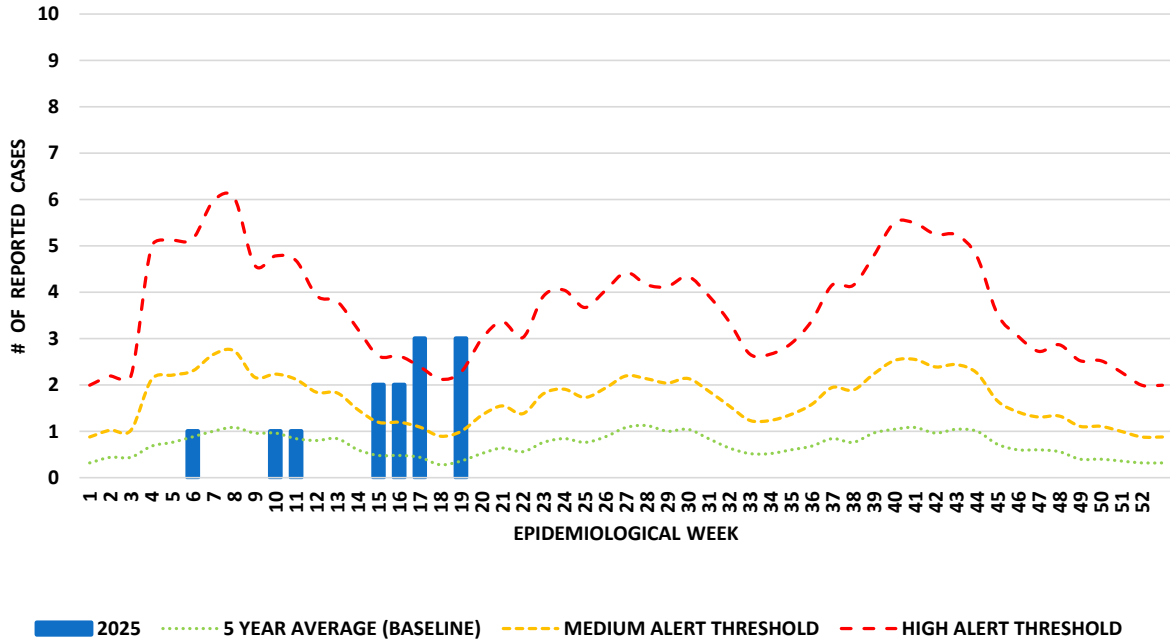
### FEVER AND RESPIRATORY SYMPTOMS IN PERSONS AGED UNDER 5 YEARS



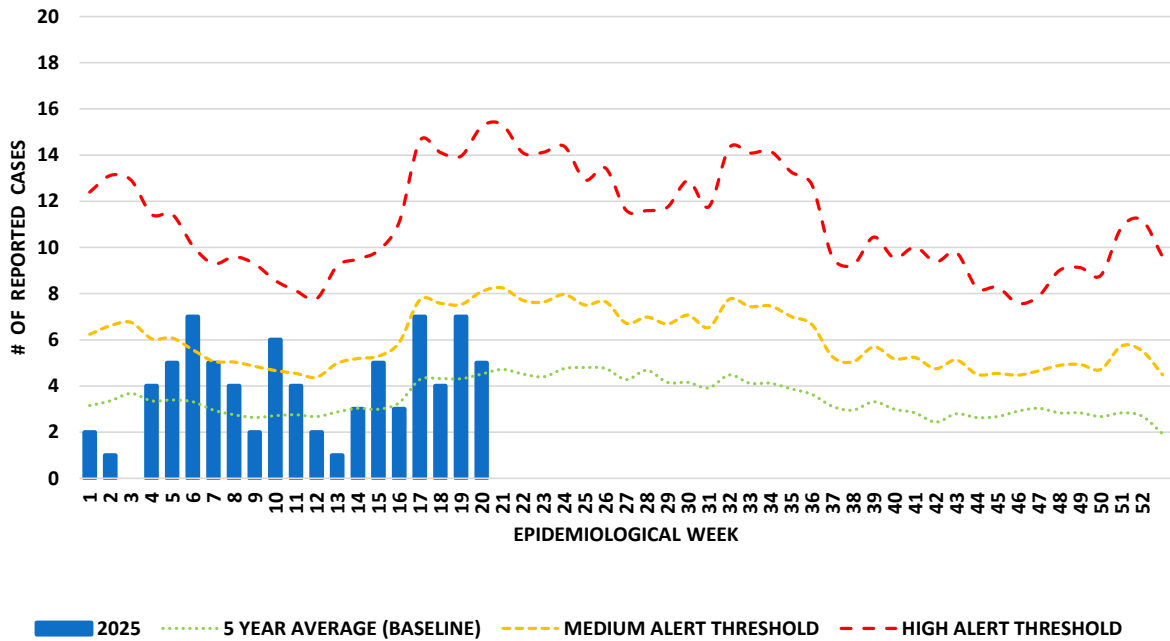
### FEVER AND RESPIRATORY SYMPTOMS IN PERSONS AGED 5 YEARS AND OLDER



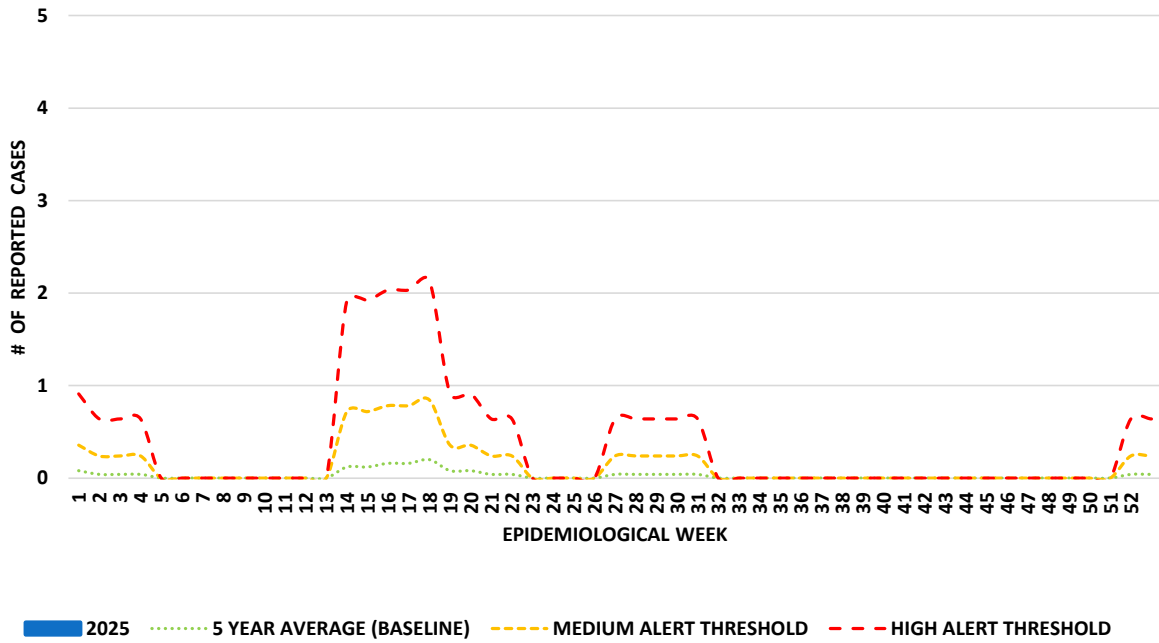
### GASTROENTERITIS IN PERSONS AGED UNDER 5 YEARS



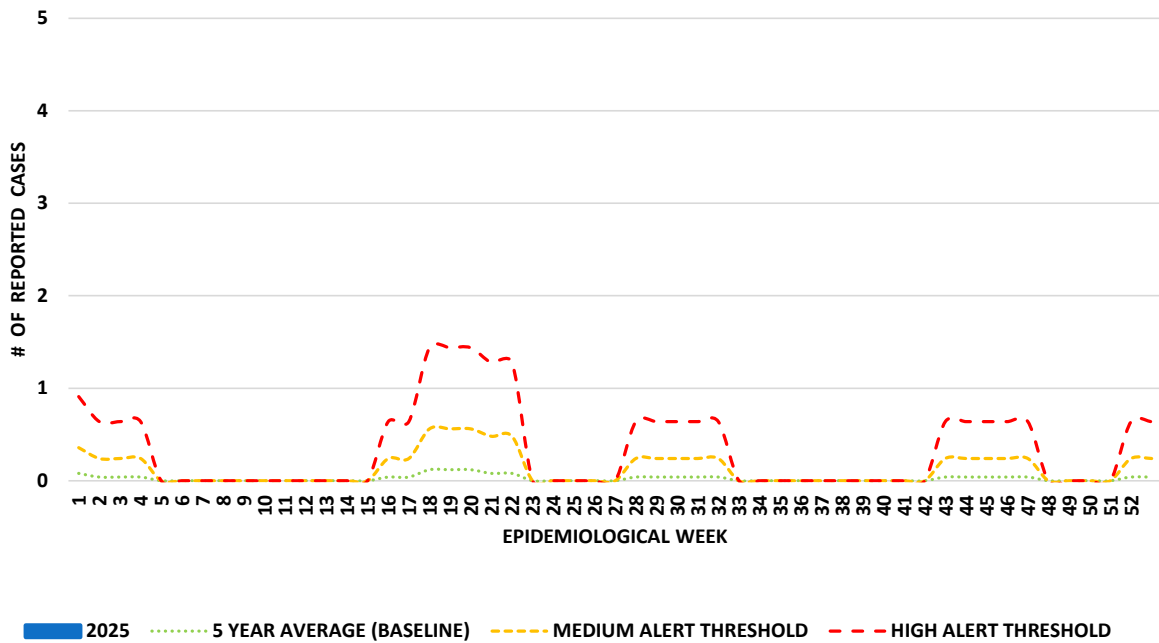
### GASTROENTERITIS IN PERSONS AGED 5 YEARS AND OLDER



### UNDIFFERENTIATED FEVER IN PERSONS AGED UNDER 5 YEARS



### UNDIFFERENTIATED FEVER IN PERSONS AGED 5 YEARS AND OLDER





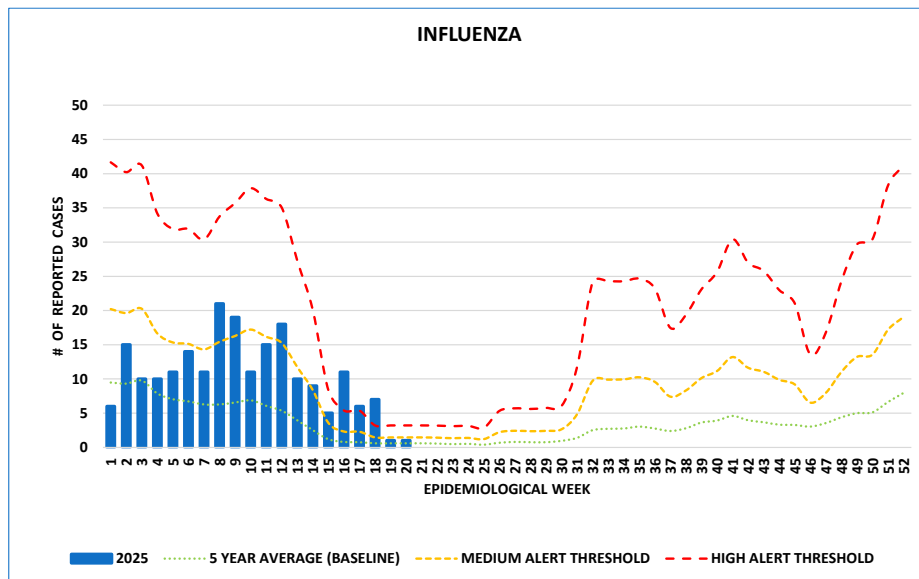
# Conditions of Interest: Influenza, COVID-19, and Severe Acute Respiratory Infection (SARI)

Surveillance case definitions included here are as follows:

## Influenza:

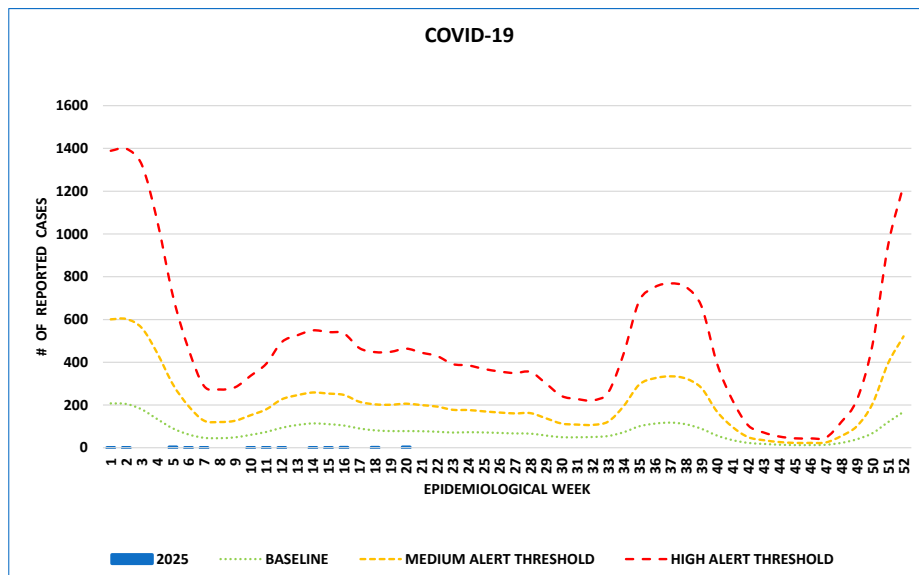
*Clinical (or suspect):* A person with fever, headache, myalgia, and cough

*Laboratory confirmed:* A clinical or suspect case with positive laboratory findings



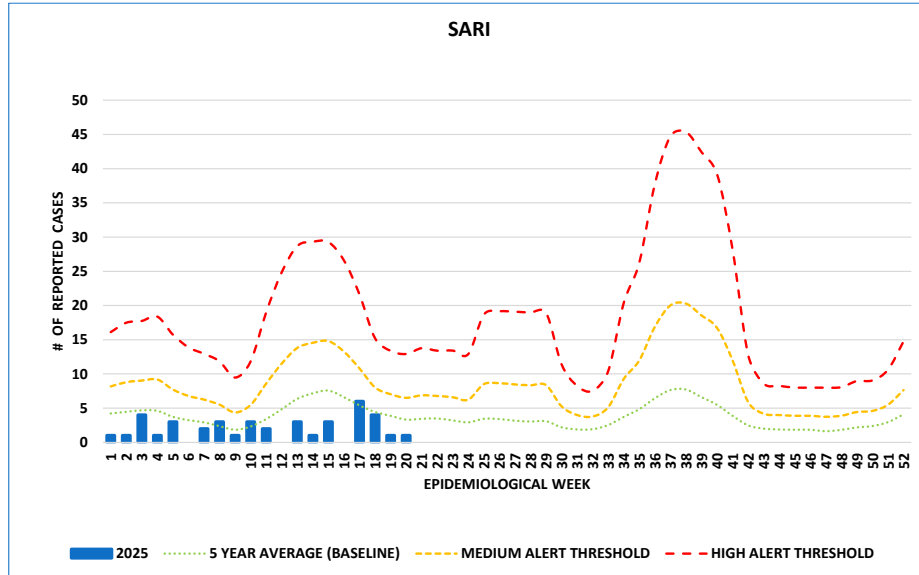
## COVID-19:

A person with laboratory or antigen test confirmation of COVID-19 infection, irrespective of clinical signs and symptoms



## Severe Acute Respiratory Infection (SARI):

An acute respiratory infection with history of fever or measured fever of  $\geq 38^{\circ}\text{C}$  and cough, with onset within the last 10 days, and requiring hospitalization.



## Summary

Influenza activity declined during EWs 17 to 20. After moderate activity in EW 17 (6 cases) and EW 18 (7 cases), counts dropped to 1 case each in EWs 19 and 20, indicating a possible end of the seasonal influenza period.

COVID-19 cases increased slightly, with no cases in EW 17 or 19, 2 cases in EW 18 and 3 cases in EW 20. These low counts suggest continued sporadic transmission.

SARI (Severe Acute Respiratory Infection) activity was elevated at the beginning of the period, with 6 cases in EW 17 and 4 cases in EW 18, before declining to 1 case per week in EWs 19 and 20. This pattern reflects a brief elevation followed by a return to baseline levels.

## Routine Communicable Disease Surveillance (EWs 17-20 2025)

An observed increase in confirmed diseases may not necessarily indicate a true increase in disease incidence. Such increases may result from factors like enhanced diagnostic capacity, improved access to confirmatory testing, or heightened awareness of circulating diseases—both locally and globally.

In instances where the relative level is above normal (indicated in red), further epidemiological investigation may be conducted to determine if there are clusters of illness or outbreaks occurring. This is dependent on many factors, including the severity of the illness, the potential for spread, and the availability of control measures.

DISEASES/PATHOGENS	Cumulative Total (Lab Conf. cases)	
	Curr. Yr	Last Yr.
<b>Diseases Reportable under the International Health Regulations</b>		
Cholera	0	0
Human Influenza (new sub-type)	0	0
Pneumonic Plague	0	0
Poliomyelitis	0	0
Severe Acute Respiratory Syndrome (SARS)	0	0
Yellow Fever	0	0
<b>Air Borne Diseases</b>		
Adenoviruses	14	53
COVID-19	18	160
Human Metapneumovirus [hMPV]	42	18
Influenza	221	154
Respiratory Syncytial Virus [RSV]	108	33
Tuberculosis - Extrapulmonary	0	0
Tuberculosis - Pulmonary	1	0
<b>Vaccine Preventable Diseases under the Caribbean Expanded Programme on Immunization</b>		
Chicken Pox [Varicella] (clinically confirmed)	7	6
Diphtheria	0	0
Measles	0	0
Meningitis [due to <i>Haemophilus influenzae</i> ]	0	0
Meningitis [due to <i>Streptococcus pneumoniae</i> ]	0	0
Meningococcal infection [due to <i>Neisseria meningitidis</i> ]	0	0
Mumps	0	0
Pertussis [Whooping Cough]	2	2
Pneumonia [due to <i>Haemophilus influenzae</i> ]	0	0
Pneumonia [due to <i>Streptococcus pneumoniae</i> ]	0	0
Rotavirus	6	0
Rubella [Congenital German Measles]	0	0
Rubella [German Measles]	0	0
Tetanus [excluding Neonatal]	0	0
Tetanus Neonatorum	0	0
<b>Vector Borne Diseases</b>		
Chagas Disease	0	0
Chikungunya	0	0
Dengue Fever	0	0
Dengue Haemorrhagic Fever/Shock Syndrome	0	0
Leptospirosis	1	0
Malaria	0	0
Zika	0	0
<b>Food and Water Borne Pathogens</b>		
<i>Campylobacter</i>	9	12
Ciguatera Poisoning (clinically confirmed)	0	0
<i>Cryptosporidium</i>	0	3
<i>E. Coll</i> (pathogenic)	15	19
<i>Giardia</i>	0	2
Hepatitis A	0	0
Listeria	0	0
Norovirus	5	5
Salmonella	7	15
Shigella	1	1
Staphylococcus (pathogenic)	0	0
Taxoplasma	0	0
Typhoid and Paratyphoid	0	0
<i>Vibrio</i> (excluding Cholera)	0	0
<b>Other Diseases</b>		
Viral Encephalitis/Meningitis	0	0
Hepatitis B	1	1
Hepatitis C	3	3
Leprosy (Hansens Disease)	0	0
Meningitis/Encephalitis (not specified)	1	0
Rabies (in Humans)	0	0
<b>Specific Diseases under Country Surveillance</b>		
Chlamydia	98	99
Gonorrhoea	5	7
Herpes	4	17
Syphilis	2	1

## EPIDEMIOLOGICAL WEEKS 2025

WEEK	FROM	TO
1	29-Dec-24	4-Jan-25
2	5-Jan-25	11-Jan-2025
3	12-Jan-25	18-Jan-25
4	19-Jan-25	25-Jan-25
5	26-Jan-25	01-Feb-25
6	02-Feb-25	08-Feb-25
7	09-Feb-25	15-Feb-25
8	16-Feb-25	22-Feb-25
9	23-Feb-25	01-Mar-25
10	02-Mar-25	08-Mar-25
11	09-Mar-25	15-Mar-25
12	16-Mar-25	22-Mar-25
13	23-Mar-25	29-Mar-25
14	30-Mar-25	05-Apr-25
15	06-Apr-25	12-Apr-25
16	13-Apr-25	19-Apr-25
17	20-Apr-25	26-Apr-25
18	27-Apr-25	03-May-25
19	04-May-25	10-May-25
20	11-May-25	17-May-25
21	18-May-25	24-May-25
22	25-May-25	31-May-25
23	01-Jun-25	07-Jun-25
24	08-Jun-25	14-Jun-25
25	15-Jun-25	21-Jun-25
26	22-Jun-25	28-Jun-25

WEEK	FROM	TO
27	29-Jun-25	05-Jul-25
28	06-Jul-25	12-Jul-25
29	13-Jul-25	19-Jul-25
30	20-Jul-25	26-Jul-25
31	27-Jul-25	02-Aug-25
32	03-Aug-25	09-Aug-25
33	10-Aug-25	16-Aug-25
34	17-Aug-25	23-Aug-25
35	24-Aug-25	30-Aug-25
36	31-Aug-25	06-Sep-25
37	07-Sep-25	13-Sep-25
38	14-Sep-25	20-Sep-25
39	21-Sep-25	27-Sep-25
40	28-Sep-25	04-Oct-25
41	05-Oct-25	11-Oct-25
42	12-Oct-25	18-Oct-25
43	19-Oct-25	25-Oct-25
44	26-Oct-25	01-Nov-25
45	02-Nov-25	08-Nov-25
46	09-Nov-25	15-Nov-25
47	16-Nov-25	22-Nov-25
48	23-Nov-25	29-Nov-25
49	30-Nov-25	06-Dec-25
50	07-Dec-25	13-Dec-25
51	14-Dec-25	20-Dec-25
52	21-Dec-25	27-Dec-25