

# SURVEILLANCE SUMMARY REPORT

2025:

EPIDEMIOLOGICAL WEEKS 21-24: 18 MAY 2025 – 14 JUNE 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. <u>Syndromic Surveillance</u>
- 2. <u>Conditions of Interest</u> 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 18 JUNE 2025

## Syndromic Surveillance

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

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 21-24 included Fever and Neurological (guillain barre syndrome, meningitis, meningoencephalitis), Fever and Rash (coxsackievirus), Fever and Respiratory (common cold, coronavirus "seasonal", COVID-19, human metapneumovirus, influenza, mycoplasma pneumoniae, parainfluenza, strep throat, streptococcus pneumoniae) Gastroenteritis (c.difficile, campylobacter, e.coli, norovirus, rotavirus).

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

During EWs 21-24, there were alerts for Fever and Neurological Symptoms, Fever and Rash, and Gastroenteritis.

#### **Epidemiological Week 21**

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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	29	56	111	LOW
Gastroenteritis (under 5 years)	1	1	2	3	LOW
Gastroenteritis (5 years and older)	4	5	8	15	LOW
Undifferentiated Fever (under 5 years)	0	0	0	1	LOW
Undifferentiated Fever (5 years and older)	0	0	0	1	LOW
% of sentinel sites reporting					92.86%

#### **Epidemiological Week 22**

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	2	0	0	0	HIGH
Fever and Rash	0	0	1	3	LOW
Fever and Respiratory Symptoms (under 5 years)	1	4	7	15	LOW
Fever and Respiratory Symptoms (5 years and older)	14	29	57	113	LOW
Gastroenteritis (under 5 years)	1	1	1	3	LOW
Gastroenteritis (5 years and older)	9	5	8	14	MEDIUM
Undifferentiated Fever (under 5 years)	0	0	0	1	LOW
Undifferentiated Fever (5 years and older)	0	0	0	1	LOW
% of sentinel sites reporting					92.86%

#### **Epidemiological Week 23**

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)	2	3	7	15	LOW
Fever and Respiratory Symptoms (5 years and older)	30	30	60	118	LOW
Gastroenteritis (under 5 years)	1	1	2	4	LOW
Gastroenteritis (5 years and older)	10	4	8	14	MEDIUM
Undifferentiated Fever (under 5 years)	0	0	0	0	LOW
Undifferentiated Fever (5 years and older)	0	0	0	0	LOW
% of sentinel sites reporting					92.86%

#### **Epidemiological Week 24**

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	0	HIGH
Fever and Rash	2	0	1	2	HIGH
Fever and Respiratory Symptoms (under 5 years)	5	3	6	13	LOW
Fever and Respiratory Symptoms (5 years and older)	18	34	67	133	LOW
Gastroenteritis (under 5 years)	0	1	2	4	LOW
Gastroenteritis (5 years and older)	4	5	8	14	LOW
Undifferentiated Fever (under 5 years)	0	0	0	0	LOW
Undifferentiated Fever (5 years and older)	0	0	0	0	LOW
% of sentinel sites reporting					92.86%

#### 4-Week Summary: Epidemiological Weeks 21-24

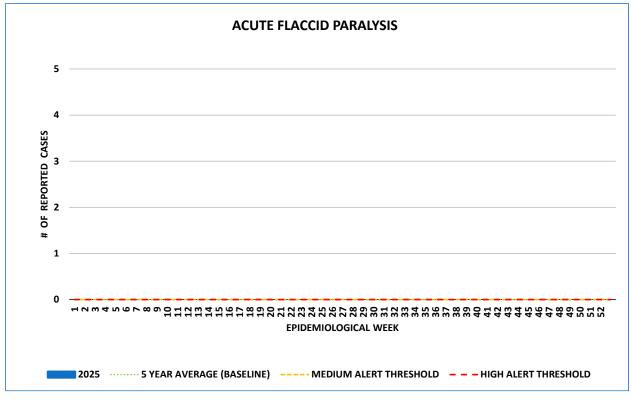
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Syndrome	# of Reported Cases	5-Yr Average	Medium Alert Threshold**	High Alert Threshold***	Alert Level
Acute Flaccid Paralysis	0	0	0	0	LOW
Fever and Haemorrhagic Symptoms	0	0	0	0	LOW
Fever and Neurological Symptoms	3	0	0	0	HIGH
Fever and Rash	2	1	4	9	LOW
Fever and Respiratory Symptoms (under 5 years)	13	13	28	58	LOW
Fever and Respiratory Symptoms (5 years and older)	80	122	240	476	LOW
Gastroenteritis (under 5 years)	3	3	7	14	LOW
Gastroenteritis (5 years and older)	27	18	32	58	LOW
Undifferentiated Fever (under 5 years)	0	0	0	1	LOW
Undifferentiated Fever (5 years and older)	0	0	1	3	LOW

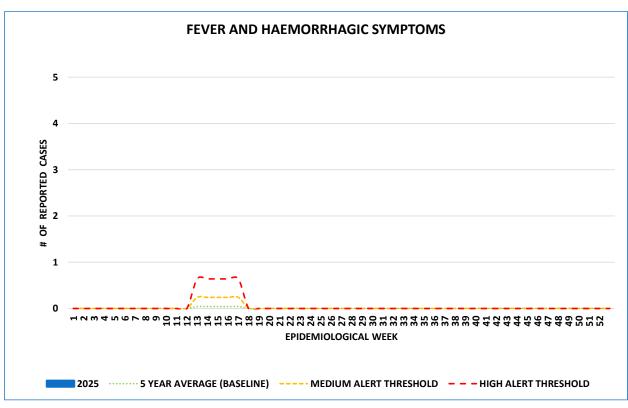
#### **Cumulative Summary: Epidemiological Weeks 1-24**

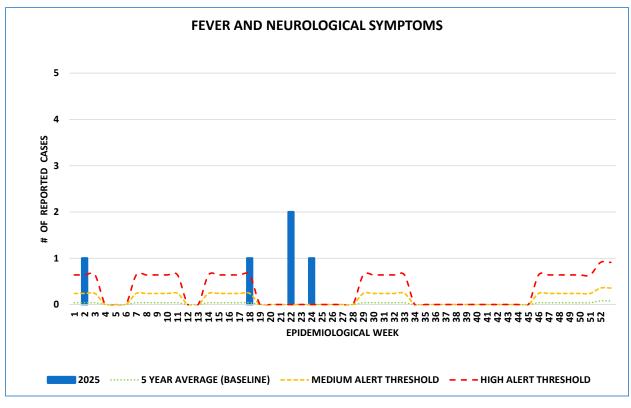
Syndrome	# of Reported Cases	5-Yr Average	Medium Alert Threshold**	High Alert Threshold***	Alert Level
Acute Flaccid Paralysis	0	0	0	0	LOW
Fever and Haemorrhagic Symptoms	0	0	1	3	LOW
Fever and Neurological Symptoms	5	1	3	8	MEDIUM
Fever and Rash	18	11	31	72	LOW
Fever and Respiratory Symptoms (under 5 years)	130	100	200	399	LOW
Fever and Respiratory Symptoms (5 years and older)	780	880	1574	2962	LOW
Gastroenteritis (under 5 years)	16	16	40	88	LOW
Gastroenteritis (5 years and older)	104	85	150	279	LOW
Undifferentiated Fever (under 5 years)	0	1	6	16	LOW
Undifferentiated Fever (5 years and older)	0	1	4	11	LOW

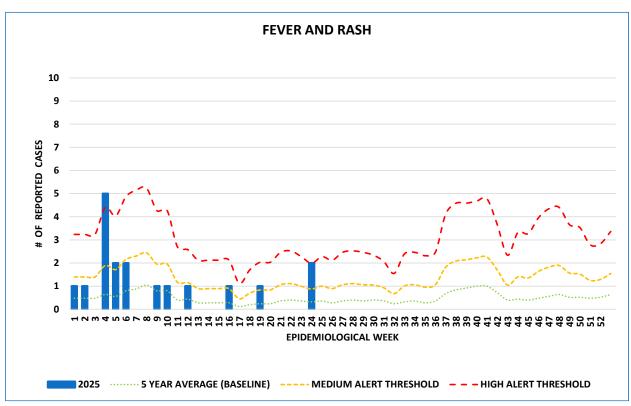
<sup>\*\*</sup>Medium Alert Threshold is set at 1 standard deviation above 5-yr average

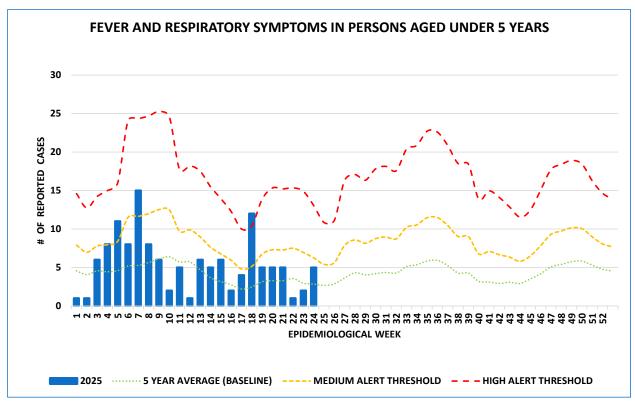
<sup>\*\*</sup> Medium Alert Threshold is set at 1 standard deviation above 5-yr average \*\*\* High Alert Threshold is set at 3 standard deviations above 5-year average

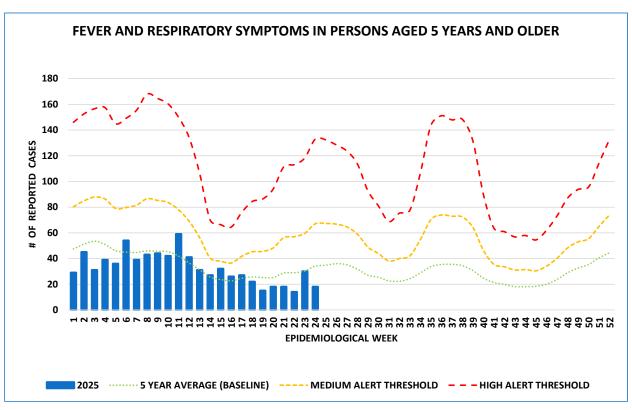


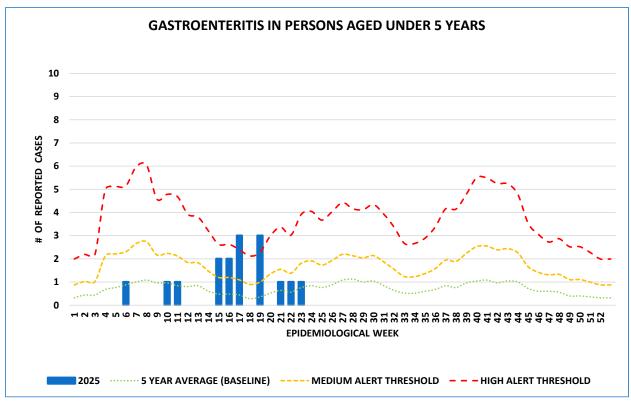


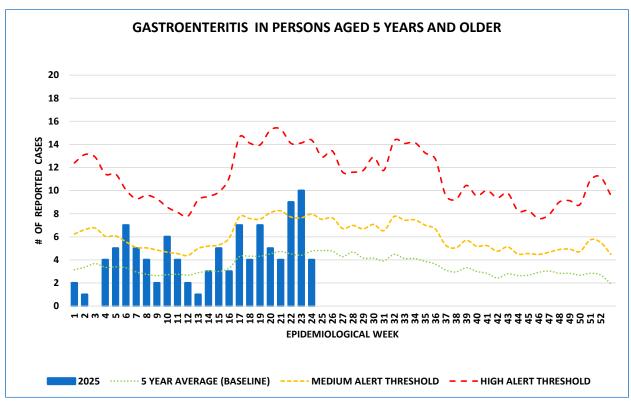


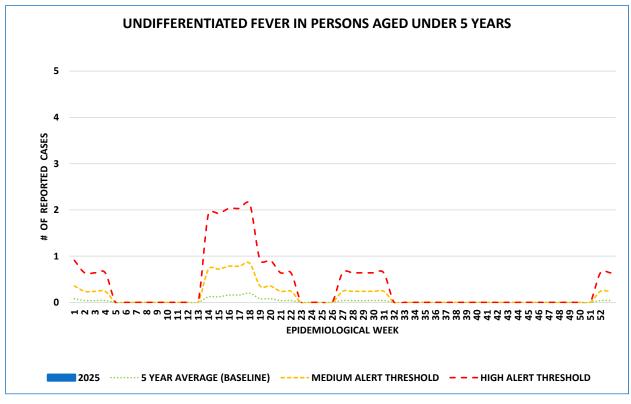


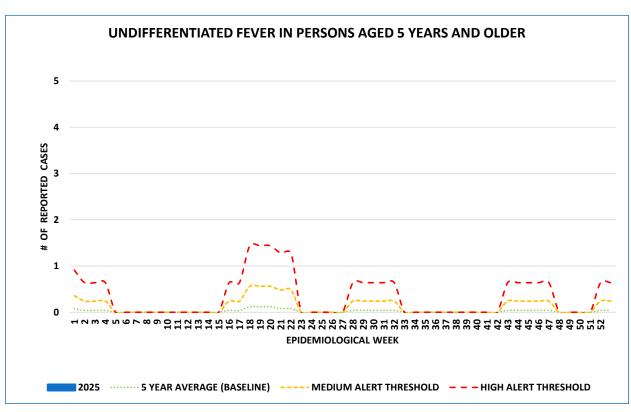










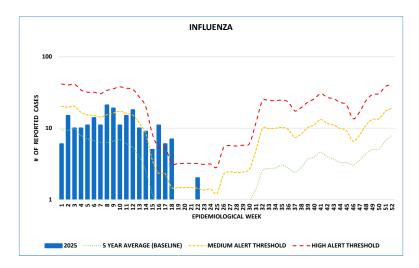


## Conditions of Interest: Influenza, COVID-19, and Severe Acute Respiratory Infection (SARI)

Note: Each condition in this section is displayed using a logarithmic (log) scale. This improves visualization by allowing clearer interpretation of week-to-week changes, especially when case counts, including historical data, vary across a wide range. Surveillance case definitions included accompany each graph.

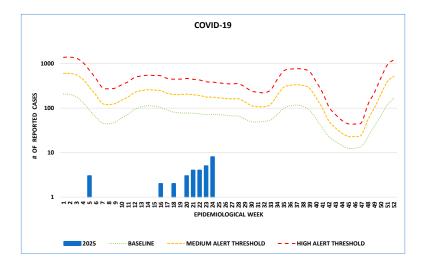
#### Influenza:

Clinical (or suspect): A person with fever, headache, myalgia, and cough Laboratory confirmed: A clinical or suspect case with positive laboratory findings



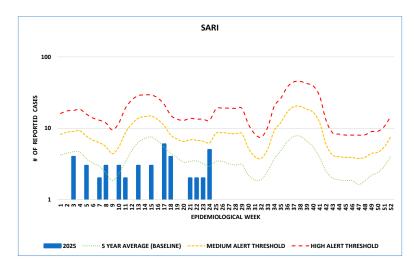
#### COVID-19:

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 ≥38°C and cough, with onset within the last 10 days, and requiring hospitalization.



#### Summary

Influenza activity remained low throughout EWs 21 to 24. After registering 1 case in EW 21 and 2 cases in EW 22, there were no influenza cases reported in EWs 23 or 24. This sustained low activity supports the observation that the seasonal influenza period may have concluded in the preceding weeks.

COVID-19 cases showed a steady upward trend during this period. Weekly counts rose from 1 case in EW 21 to 2 in EW 22, 5 in EW 23, and 8 in EW 24. This rise suggests a possible increase in community transmission.

SARI (Severe Acute Respiratory Infection) activity was stable at low levels for three weeks, followed by an increase in EW 24. There were 2 cases reported each week from EWs 21 to 23, rising to 5 cases in EW 24. This increase may indicate an increase in severe respiratory illness activity.

## Routine Communicable Disease Surveillance (EWs 21-24 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.
Diseases Reportable under the International Health Regulations  Cholera	O	0
Human Influenza (new sub-type)	0	0
Pneumonic Plague	0	0
Poliomyelitis	0	0
Severe Acute Respiratory Syndrome (SARS)	0	0
Yellow Fever Air Borne Diseases		U
Adenoviruses	14	53
COVID-19	39	226
Human Metapneumovirus [hMPV]	48	22
Influenza	224 108	160 36
Respiratory Syncytial Virus [RSV] Tuberculosis - Extrapulmonary	108	36
Tuberculosis - Extrapulmonary Tuberculosis - Pulmonary	1	1
Vaccine Preventable Diseases under the Caribbean Expanded Programme on l	mmunizatio	on
Chicken Pox [Varicella] (clinically confirmed)	7	8
Diphtheria Measles	0	0
Measles Meningitis [due to <i>Haemophilus Influenzae</i> ]	0	0
Meningitis [due to <i>Haemopnius injiuenzae</i> ] Meningitis [due to <i>Streptococcus pneumoniae</i> ]	0	0
Meningococcal Infection [due to Neisseria meningitidis]	0	0
Mumps	0	0
Pertussis [Whooping Cough]	2	2
Pneumonia [due to Haemophilus influenzae]	0	0
Pneumonia [due to <i>Streptococcus pneumoniae</i> ] Rotavirus	9	1
Rotavirus Rubella [Congenital German Measles]	0	0
Rubella [German Measles]	0	0
Tetanus [excluding Neonatal]	0	0
Tetanus Neonatorum	0	0
Vector Borne Diseases		
Chagas Diseases Chikungunya	0	0
Cinkunganya Dengue Fever	0	0
Dengue Haemorrhagic Fever/Shock Syndrome	0	0
Leptospirosis	1	0
Malaria	0	0
Zika Food and Water Borne Pathogens	О	0
rood and water borne Patnogens Campylobacter	15	14
Ciguatera Poisoning (clinically confirmed)	0	0
Cryptosporidium	0	3
E. Coli (pathogenic)	22	25
Glardia	0	2
Hepatitis A Listeria	0	0
Listeria Norovirus	6	6
Salmonella	7	17
Shigella	1	2
Staphylococcus (pathogenic)	0	0
Taxoplasma	0	0
Typhoid and Paratyphoid  Vibrio (excluding Cholera)	0	0
Vibrio (excluding Cholera) Other Diseases		
Viral Encephalitis/Meningitis	0	0
Hepatitis B	2	1
Hepatitis C	4	3
Leprosy (Hansens Disease)	0	0
Meningitis/Encephalitis (not specified) Rabies (in Humans)	3	0
Specific Diseases under Country Surveillance		
Chlamydia	123	120
Gonorrhoea	7	14
Herpes	6	24
Syphilis	3	

# **EPIDEMIOLOGICAL WEEKS 2025**

WEEK	FROM	то
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	то
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