

SURVEILLANCE SUMMARY REPORT 2025:

EPIDEMIOLOGICAL WEEKS 25-28: 15 JUNE 2025 – 12 JULY 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. <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 16 JULY 2025

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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 25-28 included Fever and Neurological (meningitis due to streptococcus pneumoniae), Fever and Respiratory (adenovirus, Bocavirus, common cold, coronavirus OC43, coronavirus "seasonal", COVID-19, human metapneumovirus, influenza, mycoplasma pneumoniae, parainfluenza, strep throat) Gastroenteritis (astrovirus, c.difficile, campylobacter, cryptosporidium, e.coli, scromboid, shigella).

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

During EWs 25-28, there was an alert for Fever and Neurological Symptoms.

Epidemiological Week 25

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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)	4	3	5	11	LOW
Fever and Respiratory Symptoms (5 years and older)	23	35	67	132	LOW
Gastroenteritis (under 5 years)	1	1	2	4	LOW
Gastroenteritis (5 years and older)	7	5	8	13	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%

Epidemiological Week 26

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)	4	3	6	11	LOW
Fever and Respiratory Symptoms (5 years and older)	23	36	67	128	LOW
Gastroenteritis (under 5 years)	1	1	2	4	LOW
Gastroenteritis (5 years and older)	7	5	8	13	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					89.29%

Epidemiological Week 27

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)	0	4	8	16	LOW
Fever and Respiratory Symptoms (5 years and older)	32	35	65	124	LOW
Gastroenteritis (under 5 years)	0	1	2	4	LOW
Gastroenteritis (5 years and older)	5	4	7	12	LOW
Undifferentiated Fever (under 5 years)	0	0	0	1	LOW
Undifferentiated Fever (5 years and older)	0	0	0	0	LOW
% of sentinel sites reporting					89.29%

Epidemiological Week 28

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	0	0	1	3	LOW
Fever and Respiratory Symptoms (under 5 years)	2	4	9	17	LOW
Fever and Respiratory Symptoms (5 years and older)	42	32	59	114	LOW
Gastroenteritis (under 5 years)	0	1	2	4	LOW
Gastroenteritis (5 years and older)	5	5	7	12	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%

4-Week Summary: Epidemiological Weeks 25-28

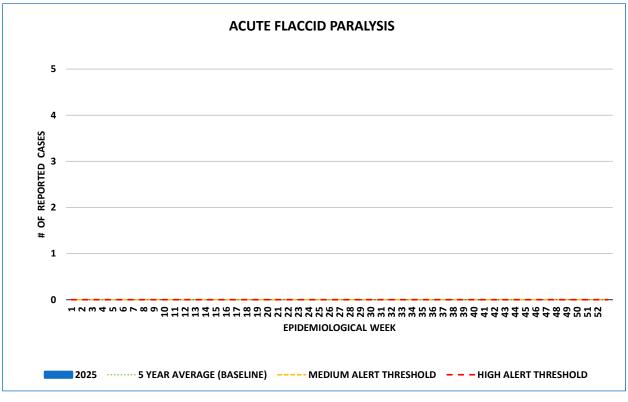
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Syndrome	# of Reported Cases	5-Yr Average	Medium Alert Threshold**	High Alert Threshold***	Alert Level
Acute Flaccid Paralysis	0	0	0	0	LOW
Fever and Haemorrhagic Symptoms	0	0	0	0	LOW
Fever and Neurological Symptoms	1	0	0	0	HIGH
Fever and Rash	0	1	4	9	LOW
Fever and Respiratory Symptoms (under 5 years)	8	14	27	55	LOW
Fever and Respiratory Symptoms (5 years and older)	129	137	258	498	LOW
Gastroenteritis (under 5 years)	1	4	8	16	LOW
Gastroenteritis (5 years and older)	23	19	29	50	LOW
Undifferentiated Fever (under 5 years)	0	0	0	1	LOW
Undifferentiated Fever (5 years and older)	0	0	0	1	LOW

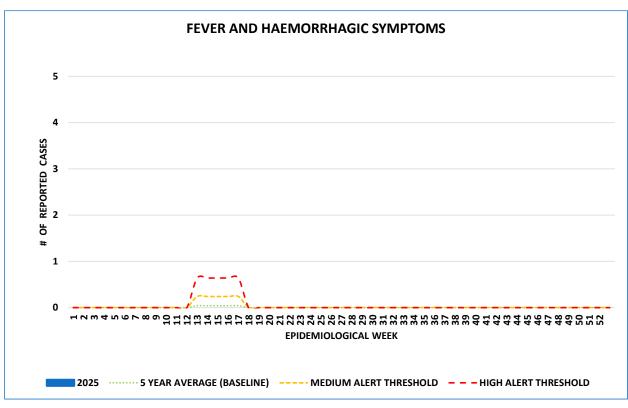
Cumulative Summary: Epidemiological Weeks 1-28

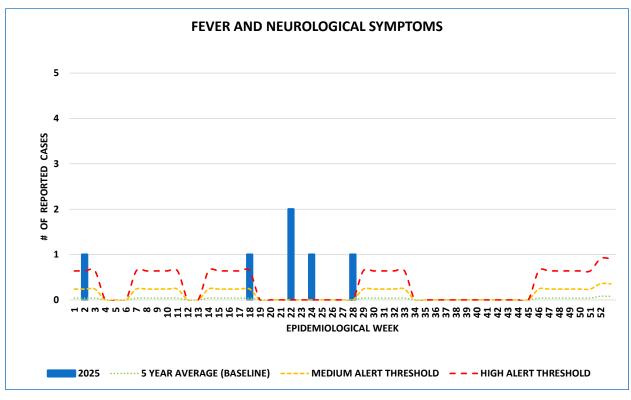
Syndrome	# of Reported Cases	5-Yr Average	Medium Alert Threshold**	High Alert Threshold***	Alert Level
Acute Flaccid Paralysis	0	0	0	0	LOW
Fever and Haemorrhagic Symptoms	0	0	1	3	LOW
Fever and Neurological Symptoms	6	1	3	8	MEDIUM
Fever and Rash	18	13	35	81	LOW
Fever and Respiratory Symptoms (under 5 years)	138	114	227	454	LOW
Fever and Respiratory Symptoms (5 years and older)	909	1017	1832	3461	LOW
Gastroenteritis (under 5 years)	17	20	48	104	LOW
Gastroenteritis (5 years and older)	127	103	179	329	LOW
Undifferentiated Fever (under 5 years)	0	1	7	17	LOW
Undifferentiated Fever (5 years and older)	0	1	4	12	LOW

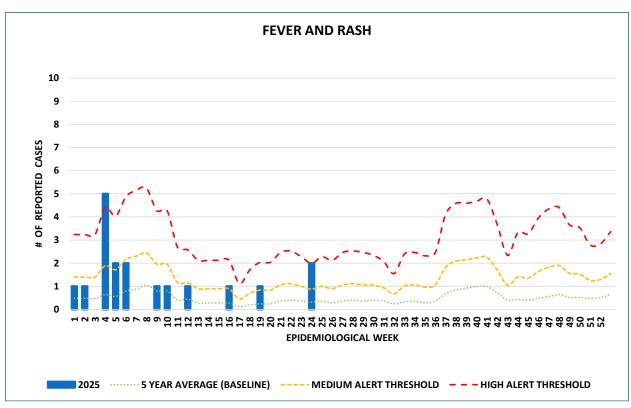
^{**}Medium Alert Threshold is set at 1 standard deviation above 5-yr average

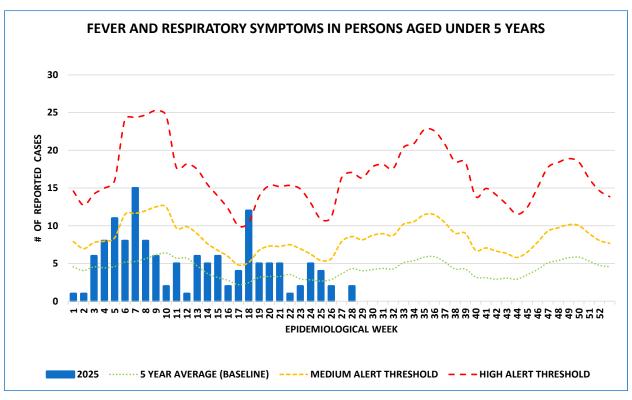
^{**} Medium Alert Threshold is set at 1 standard deviation above 5-yr average *** High Alert Threshold is set at 3 standard deviations above 5-year average

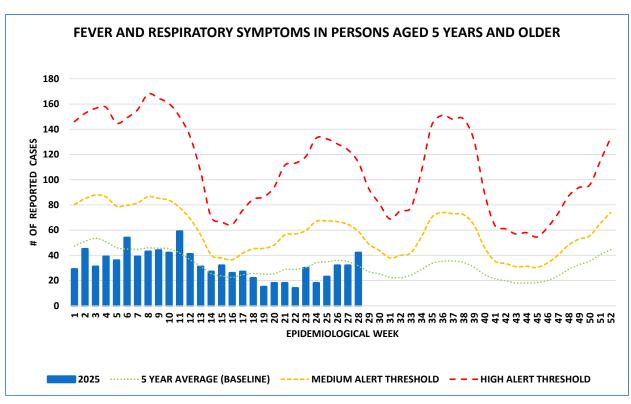


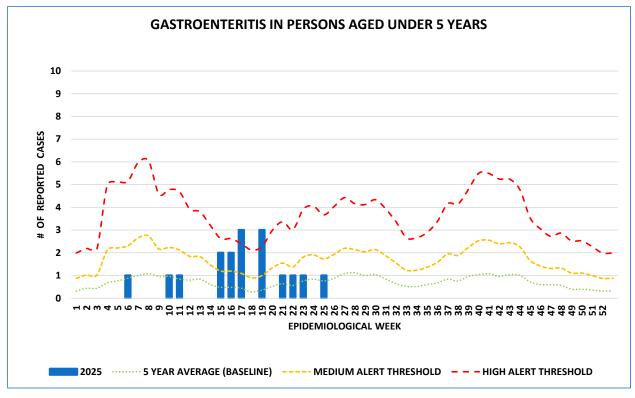


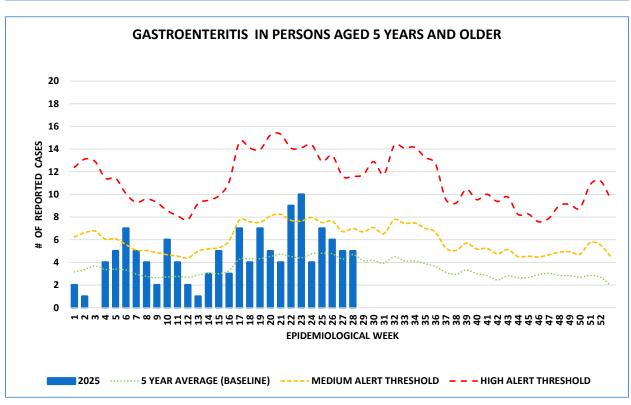


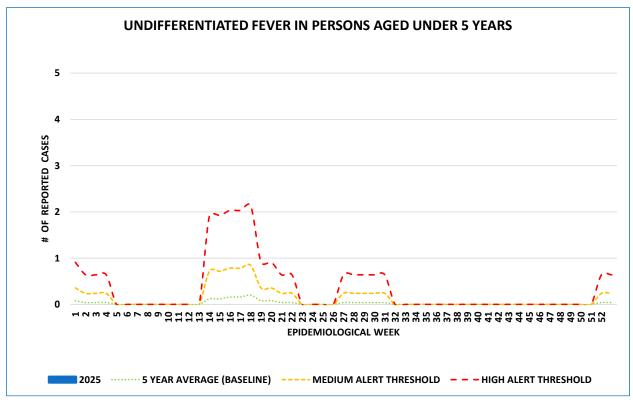


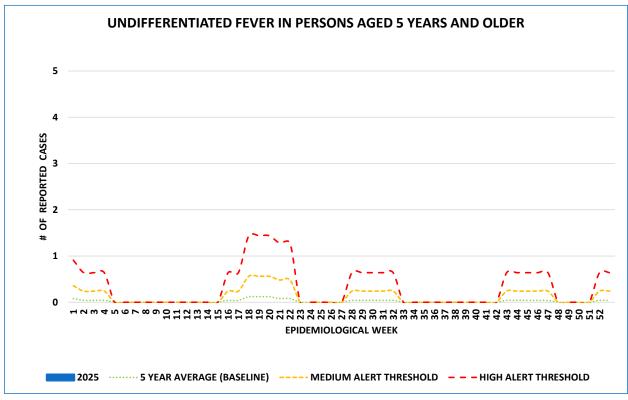












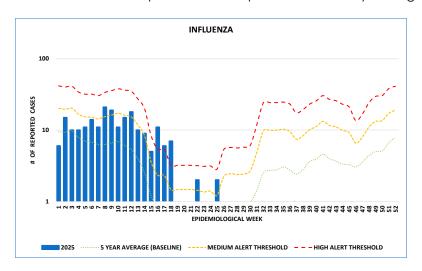
Conditions of Interest:

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.

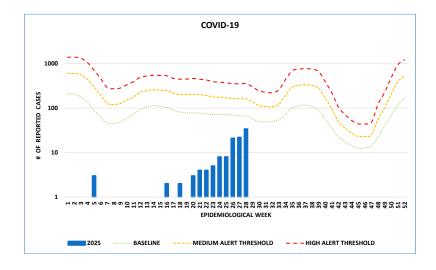
Influenza:

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



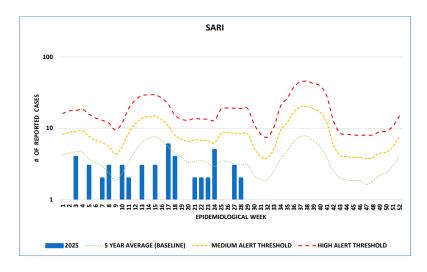
COVID-19:

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 25 to 28. After 2 cases were reported in EW 25, no influenza cases were recorded in EWs 26 or 27. A single case was reported in EW 28. This pattern reinforces the conclusion that the seasonal influenza period has likely ended.

COVID-19 cases increased sharply from EW 25 through 28. Weekly counts rose from 8 cases in EW 25 to 21 in EW 26, followed by 22 cases in EW 27 and 34 cases in EW 28. This marked and sustained increase suggests a resurgence in community transmission.

SARI (Severe Acute Respiratory Infection) activity remained low overall. No cases were reported in EWs 25 or 26, followed by slight increases to 3 cases in EW 27 and 2 cases in EW 28. While counts remain modest, this uptick may reflect increased circulation of respiratory pathogens associated with more severe illness.

Routine Communicable Disease Surveillance (EWs 25-28 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	0	0	
Human Influenza (new sub-type)	0	0	
Pneumonic Plague	0	0	
Pollomyelitis	0	0	
Severe Acute Respiratory Syndrome (SARS)	0	0	
Yellow Fever Air Borne Diseases	8	0	
Adenoviruses	15	55	
COVID-19	124	446	
Human Metapneumovirus [hMPV]	52	22	
Influenza	227 108	164 40	
Respiratory Syncytial Virus [RSV] Tuberculosis - Extrapulmonary	108	90	
Tuberculosis - Extrapulmonary Tuberculosis - Pulmonary	3	1	
Vaccine Preventable Diseases under the Caribbean Expanded Programme on l	mmunizatio	n	
Chicken Pox [Varicella] (clinically confirmed)	7	9	
Diphtheria Measles	0	0	
Measles Meningitis [due to <i>Haemophilus Influenzae</i>]	0	0	
Meningitis [due to <i>Maemophilus Injuemoale</i>]	1	0	
Meningococcal Infection [due to Neisseria meningitidis]	О	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	4	
Rubella [Congenital German Measles]	0	0	
Rubella [German Measles]	0	0	
Tetanus [excluding Neonatal]	0	0	
Tetanus Neonatorum	О	0	
Vector Borne Diseases			
Chagas Disease Chikungunya	0	0	
Dengue Fever	0	0	
Dengue Haemorrhagic Fever/Shock Syndrome	0	0	
Leptospirosis	1	0	
Malaria	0	0	
Zika Food and Water Borne Pathogens	0	0	
Campylobacter	24	17	
Ciguatera Poisoning (clinically confirmed)	0	0	
Cryptosporidium	1	3	
E. Coli (pathogenic)	28	30	
Giardia Hepatitis A	0	2	
Historia	0	0	
Norovirus	6	6	
Salmonella	7	18	
Shigella	2	2	
Staphylococcus (pathogenic)	0	0	
Taxoplasma Typhoid and Paratyphoid	0	0	
Vibrio (excluding Cholera)	0	1	
Other Diseases			
Viral Encephalitis/Meningitis	0	0	
Hepatitis B	2	1	
Hepatitis C	7	3	
Leprosy (Hansens Disease) Meningitis/Encephalitis (not specified)	3	0	
Rabies (in Humans)	0	0	
Specific Diseases under Country Surveillance			
Chlamydia	132	152	
Gonorrhoea	8	19	
Herpes Syphilis	7	28	

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