Victorian Respiratory Surveillance Report

18 April 2025

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About this report

The Victorian Respiratory Surveillance Report summarises the latest surveillance information on COVID-19, influenza and respiratory syncytial virus (RSV) in Victoria. This report provides an overview of the current levels and trends of acute respiratory illness from these conditions in the community. Please see the section on How to use this report for more information.

Measurements of the greatest value for summarising respiratory illness in Victoria are presented in this report. Other systems are also reviewed by the Department of Health to understand patterns of respiratory disease in Victoria which inform the overall summaries presented.

Data are presented as at 16 April 2025 for the week ending 12 April 2025.

Each report reflects the data available at the time the report was prepared. Information may differ from previous reports as new data is received or updated.



Summary

In Victoria, COVID-19 is at low levels of activity. Influenza and RSV notifications have increased over the past month. School holidays may have impacted recent levels of transmission.

COVID-19

CASE TREND

Notifications have decreased



TEST POSITIVITY

The percentage of tests that were positive increased



NOTIFICATIONS LAST 12 WEEKS



Influenza

CASE TREND

Notifications have decreased



TEST POSITIVITY

The percentage of tests that were positive continued to increase



NOTIFICATIONS LAST 12 WEEKS



RSV

CASE TREND

Notifications have decreased



TEST POSITIVITY

The percentage of tests that were positive was stable





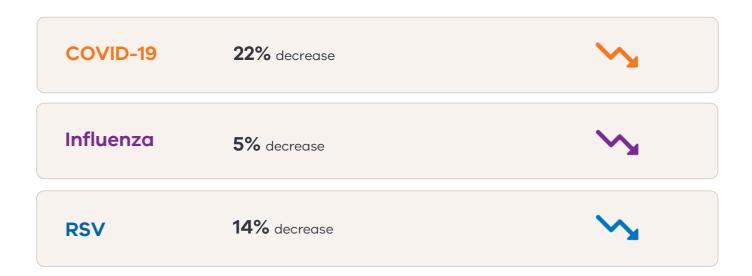
Laboratory surveillance

Case notifications

Laboratory-confirmed cases of COVID-19, influenza and respiratory syncytial virus are notified to the Victorian Department of Health. Notified infections that are diagnosed through laboratory testing are only a subset of the total number of infections in the community. Trends in notifications may be impacted by changes in testing.

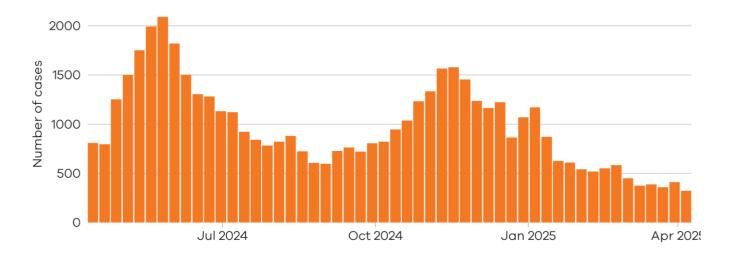
Summary

In the past week, COVID-19 notifications decreased (-21.8%), influenza notifications decreased (-5.5%) and RSV notifications decreased (-13.7%).



COVID-19

Figure 1: COVID-19 notified cases by week, Victoria, 14 April 2024 to 12 April 2025



There were **413** notified COVID-19 cases two weeks ago

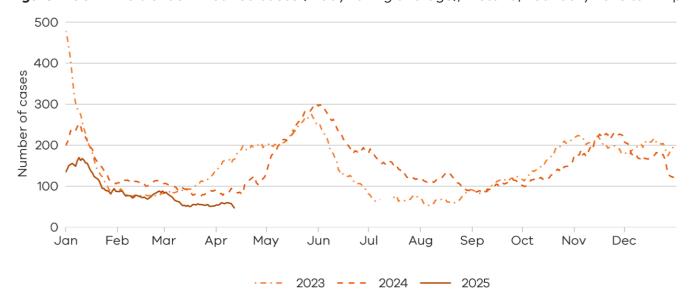
30 Mar 2025 to 5 Apr 2025

There were **323** notified COVID-19 cases last week

6 Apr 2025 to 12 Apr 2025



Figure 2: COVID-19 trends in notified cases (7-day rolling average), Victoria, 1 January 2023 to 12 April 2025



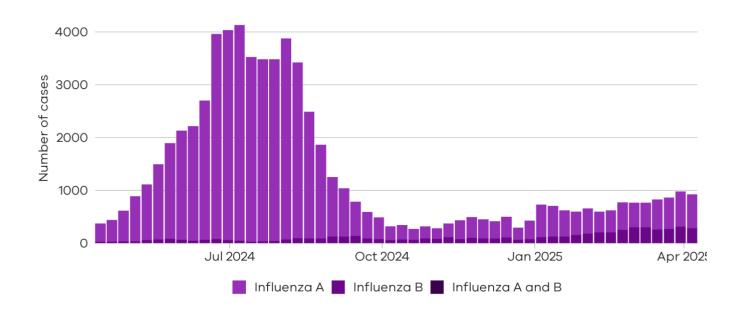
(i)

Notified cases of COVID-19 are slightly lower than at the same time in the previous two years.

Influenza

Influenza notifications presented in this report are reported from a subset of laboratories in Victoria, generally comprising around 85% of total influenza notifications.

Figure 3: Influenza notified cases by week, Victoria, 14 April 2024 to 12 April 2025



There were **668** cases of influenza A notified two weeks ago

30 Mar 2025 to 5 Apr 2025

There were 315 cases of

influenza B notified two

weeks ago

r 2025

There were **283** cases of influenza B notified last week

6 Apr 2025 to 12 Apr 2025

There were **645** cases of influenza A notified last week

6 Apr 2025 to 12 Apr 2025

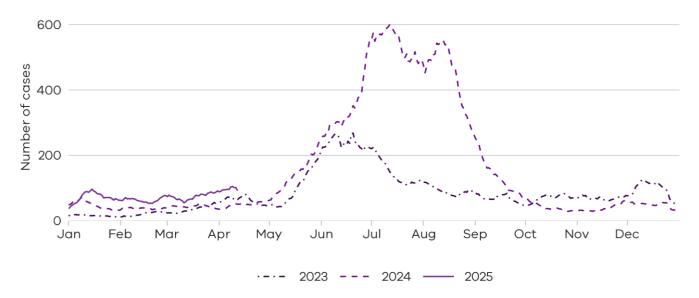
3% decrease

10% decrease

30 Mar 2025 to 5 Apr 2025

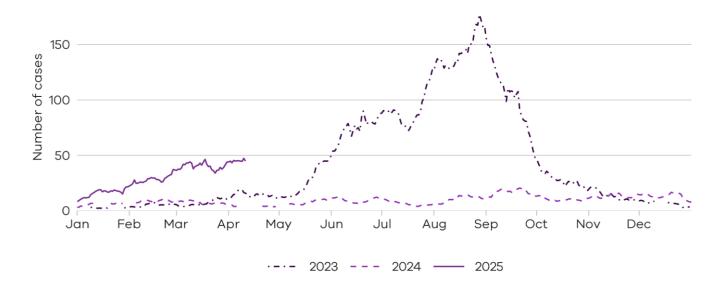
Influenza

Figure 4: Influenza A trends in notified cases (7-day rolling average), Victoria, 1 January 2023 to 12 April 2025



Notified cases of Influenza A are at similar low levels to the same time for the previous two years.

Figure 5: Influenza B trends in notified cases (7-day rolling average), Victoria, 1 January 2023 to 12 April 2025

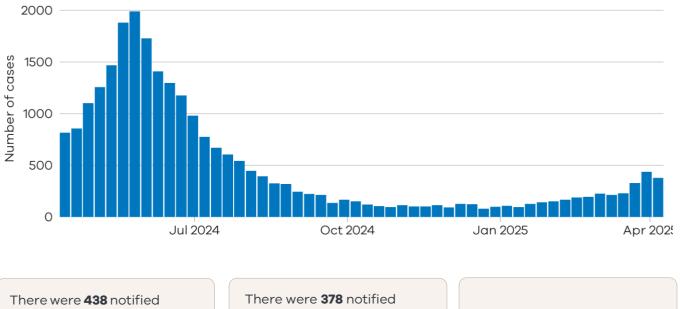


Notified cases of Influenza B are at higher levels than at the same time in the previous two years.

Respiratory Syncytial virus (RSV)

RSV notifications presented in this report are reported from a subset of laboratories in Victoria, generally comprising around 85% of total RSV notifications.

Figure 6: RSV notified cases by week, Victoria, 14 April 2024 to 12 April 2025



RSV cases two weeks ago

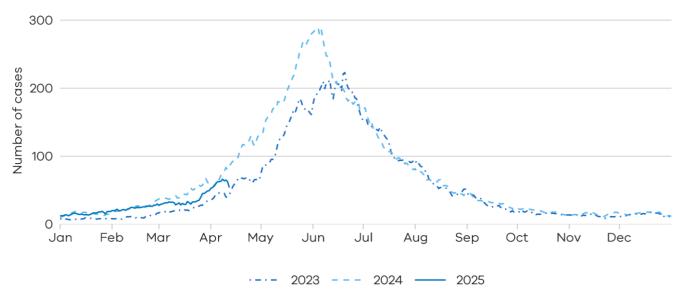
30 Mar 2025 to 5 Apr 2025

RSV cases last week

6 Apr 2025 to 12 Apr 2025



Figure 7: RSV trends in notified cases (7-day rolling average), Victoria, 1 January 2023 to 12 April 2025

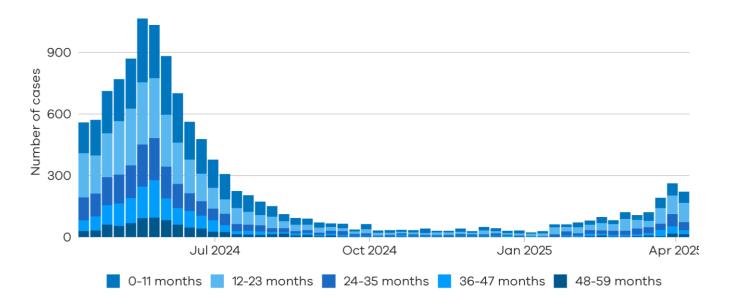


Notified cases of RSV are at similar levels observed at the same time in the previous two years.

Young children and older adults

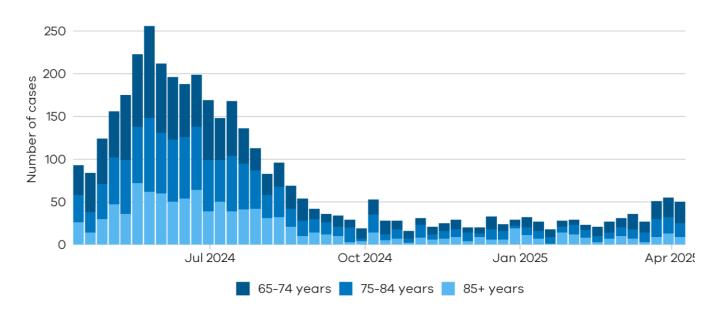
Young children and older adults are at greater risk of severe disease from RSV.

Figure 8: RSV trends in notified cases by week in young children (under 5 years), Victoria, 14 April 2024 to 12 April 2025



i More RSV notified cases were in younger children (infants), a trend which has continued.

Figure 9: RSV trends in notified cases by week in older adults (65+ years), Victoria, 14 April 2024 to 12 April 2025



A similar distribution of RSV notified cases in older adults has remained.

Testing

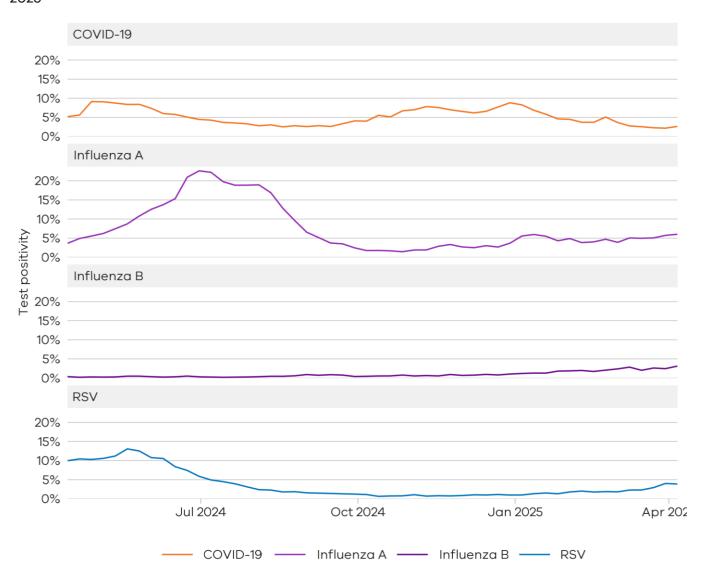
Laboratory testing for respiratory illnesses changes over time. Tracking the percentage of tests with the notifiable condition detected (i.e. test positivity) is a useful measure to understand trends in disease surveillance over time.

Test results presented in this report are from selected laboratories. These include private and hospital laboratories and represent tests completed across Victoria.

Summary

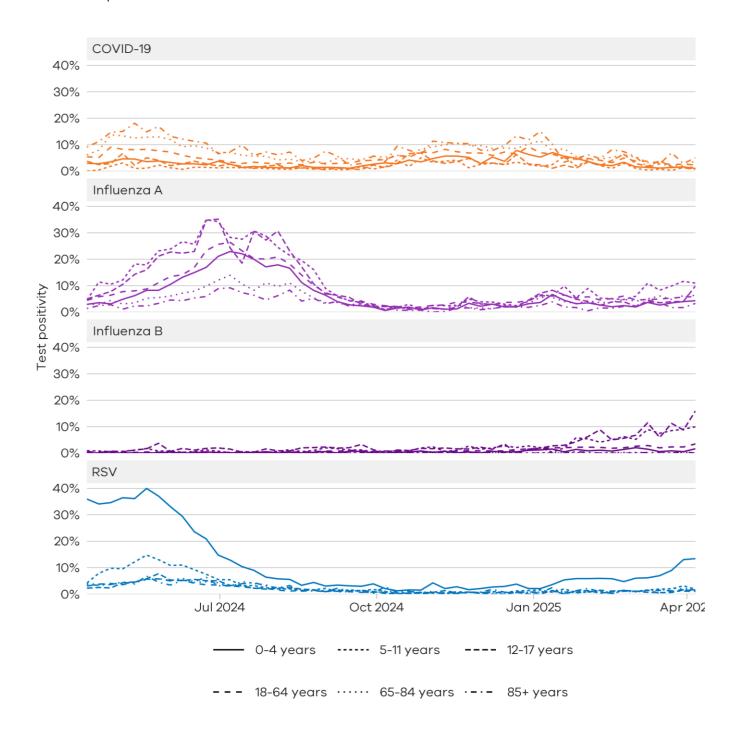
In the past week, the percentage of COVID-19 tests that were positive increased (2.2% to 2.6%), the percentage of influenza tests that were positive increased (4.1% to 4.6%) and the percentage of RSV tests that were positive was stable (4.0% to 3.9%).

Figure 10: Weekly test positivity for COVID-19, Influenza and RSV, Victoria, 14 April 2024 to 12 April 2025



Testing

Figure 11: Weekly test positivity by age groups for COVID-19, Influenza and RSV, Victoria, 14 April 2024 to 12 April 2025



Community surveillance

Respiratory illnesses are not limited to the notifiable conditions presented above. Understanding the overall burden of respiratory illness in the community is useful to understand broader trends in illness over time.

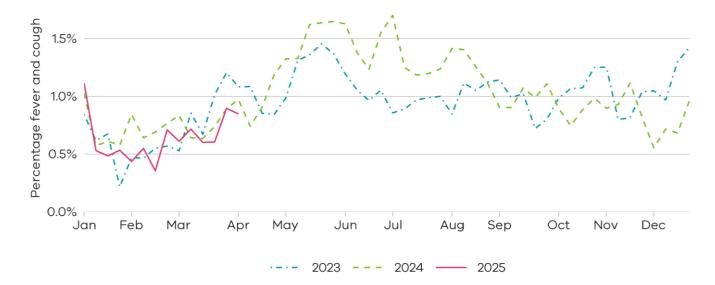
FluTracking

FluTracking is an online surveillance system across Australia, New Zealand, Hong Kong and Fiji. Volunteer participants complete a simple weekly online survey which collects self-reported information on respiratory symptoms. More information about FluTracking and ways to be involved are available here: www.flutracking.net

Summary

In the past week, the percentage of Victorian FluTracking participants reporting respiratory illness (fever and cough) decreased slightly from the previous week.

Figure 12: Proportion of FluTracking participants reporting respiratory illness by week, Victoria, 1 January 2023 to 6 April 2025. Respiratory illness is defined as fever & cough.



(i)

Reported respiratory illness from FluTracking participants was at similar levels to recent years

How to use this report

Data sources

All notified cases in Victoria are recorded in the Victorian Public Health Events
Surveillance System (PHESS). Under the Public Health and Wellbeing Act 2008 and Public Health and Wellbeing Regulations 2019, the Victorian Department of Health is authorised to collect information from doctors and laboratories about diagnoses of certain health-related conditions in Victoria.

The FluTracking surveillance system collects data from volunteer participants in a weekly survey. FluTracking reports are available here: https://info.flutracking.net/reports/australia-reports/

The Victorian Department of Health continually reviews surveillance methods to monitor respiratory disease in Victoria. Measurements included in this report may be updated or removed accordingly.

Definitions

Notified cases: Laboratory-confirmed cases of COVID-19, Influenza, and respiratory syncytial virus are reported according to the CDNA case definitions

https://www.health.gov.au/resources/collection s/cdna-surveillance-case-definitions Where multiple positive test results are received for the same person within 30 days of the initial test result they are counted as a single case.

Rapid antigen test results are not collected by the Victorian Department of Health, however, remain an important tool for individuals to access treatment and protect their community.

Notified cases represent a subset of the total number of infections for these conditions in the community. The number of notified cases is indicative of trends rather than absolute numbers of cases.

Test positivity: Test positivity is the percentage of total tests where the notifiable condition was detected.

Dates: Case notifications are based on the date the notification was first received by the Victorian Department of Health. Test positivity is based on the date of specimen collection.

Weeks: For the purposes of this report, data are aggregated by week, with the week starting Sunday and ending Saturday.

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