Victorian Respiratory Surveillance Report

4 April 2025

Contents

VICTORIA State Government | Department of Health

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 2 April 2025 for the week ending 29 March 2025.

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

Summary

In Victoria, COVID-19 is at low levels of activity whilst influenza and RSV are increasing but remain at low levels of activity.

Indicators of activity are low but slightly increasing for influenza and RSV, which is typical at this time of year. COVID-19 activity has decreased since a peak in December to currently low levels.

COVID-19

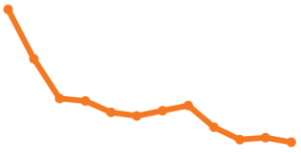
CASE TREND

Notifications have decreased

TEST POSITIVITY

The percentage of tests that were positive continued to decrease

NOTIFICATIONS LAST 12 WEEKS



Influenza

CASE TREND

Notifications have continued to increase

TEST POSITIVITY

The percentage of tests that were positive increased

NOTIFICATIONS LAST 12 WEEKS

RSV

CASE TREND

Notifications have continued to increase

TEST POSITIVITY

The percentage of tests that were positive increased

NOTIFICATIONS LAST 12 WEEKS

Laboratory surveillance

Case notifications

Laboratory-confirmed cases of COVID-19, influenza and RSV 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.

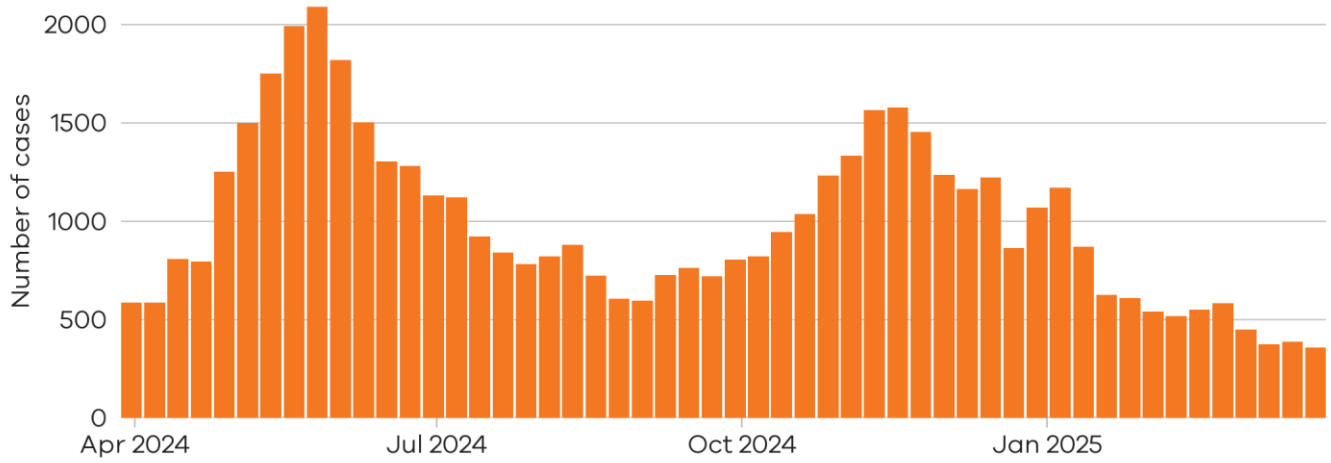
Summary

In the past week, COVID-19 notifications decreased (-7.3%), influenza notifications slightly increased (+4.7%) and RSV notifications increased (+43.7%).

COVID-19	**7%** decrease	↘
Influenza	**5%** increase	↗
RSV	**44%** increase	↗

COVID-19

Figure 1: COVID-19 notified cases by week, Victoria, 31 March 2024 to 29 March 2025



There were **386** notified COVID-19 cases two weeks ago

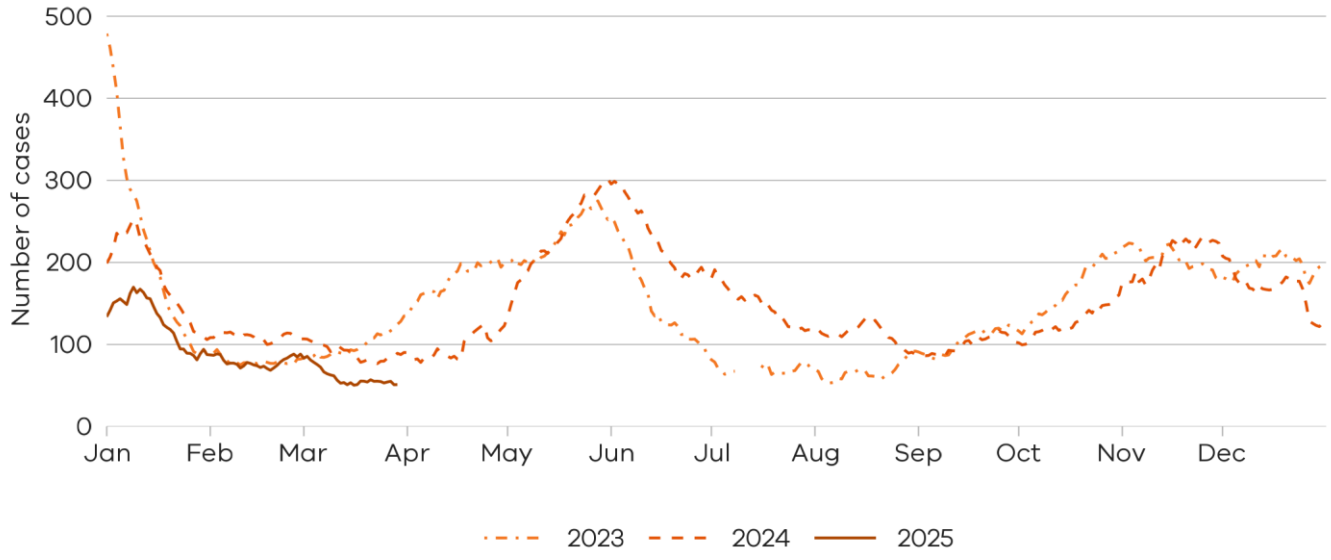
16 Mar 2025 to 22 Mar 2025

There were **358** notified COVID-19 cases last week

23 Mar 2025 to 29 Mar 2025

7% decrease

Figure 2: COVID-19 trends in notified cases (7-day rolling average), Victoria, 1 January 2023 to 29 March 2025

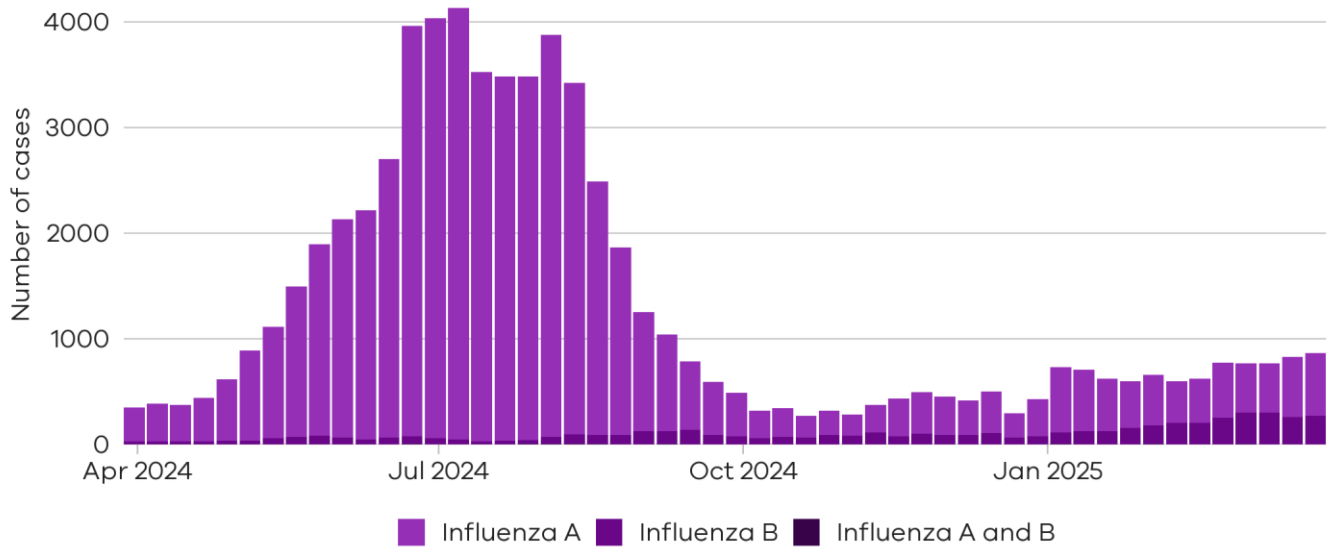


Notified COVID-19 cases are at lower levels compared to the same time in the past two years.

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, 31 March 2024 to 29 March 2025



There were **567** cases of influenza A notified two weeks ago

16 Mar 2025 to 22 Mar 2025

There were **592** cases of influenza A notified last week

23 Mar 2025 to 29 Mar 2025

4% increase

There were **259** cases of influenza B notified two weeks ago

16 Mar 2025 to 22 Mar 2025

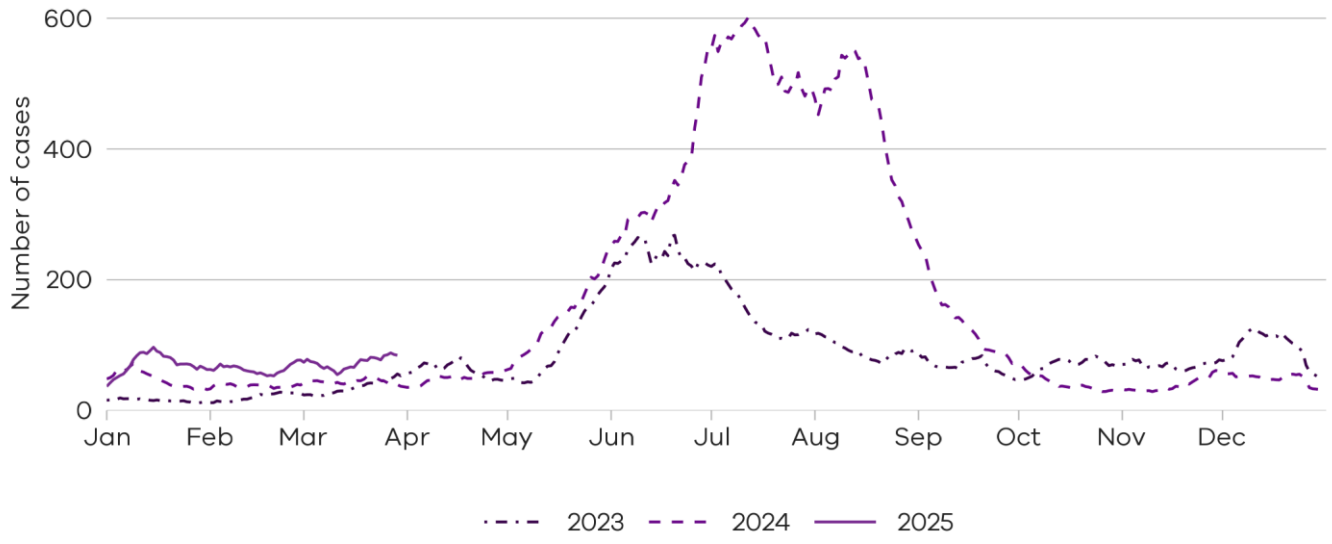
There were **273** cases of influenza B notified last week

23 Mar 2025 to 29 Mar 2025

5% increase

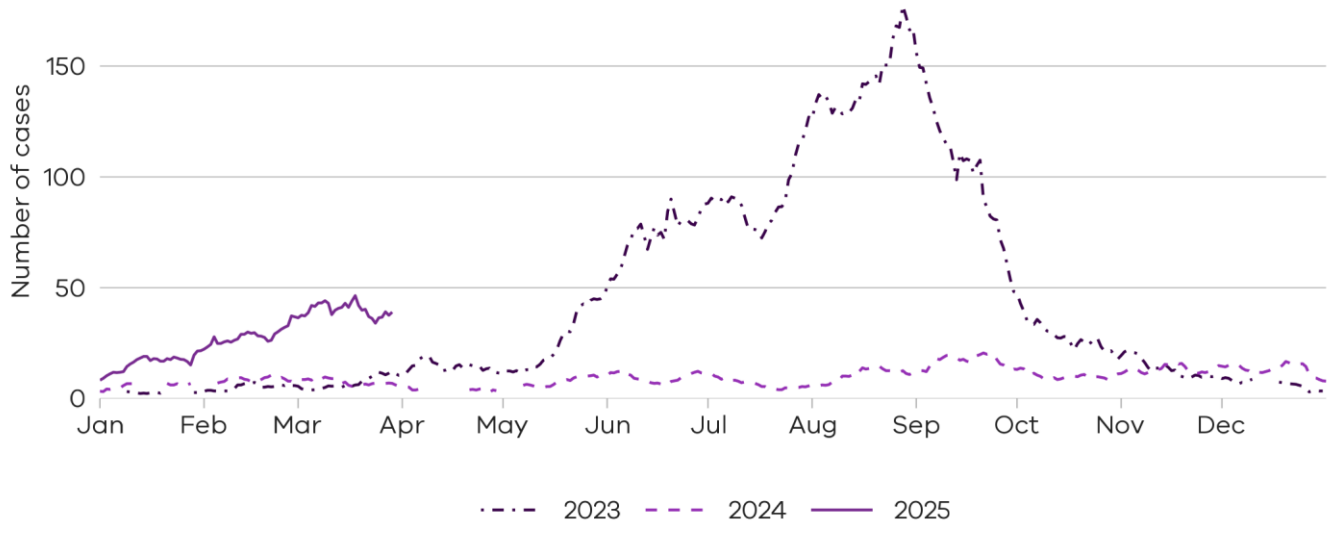
Influenza

Figure 4: Influenza A trends in notified cases (7-day rolling average), Victoria, 1 January 2023 to 29 March 2025



Notified influenza A cases are at slightly higher levels compared to the same time in the past two years.

Figure 5: Influenza B trends in notified cases (7-day rolling average), Victoria, 1 January 2023 to 29 March 2025

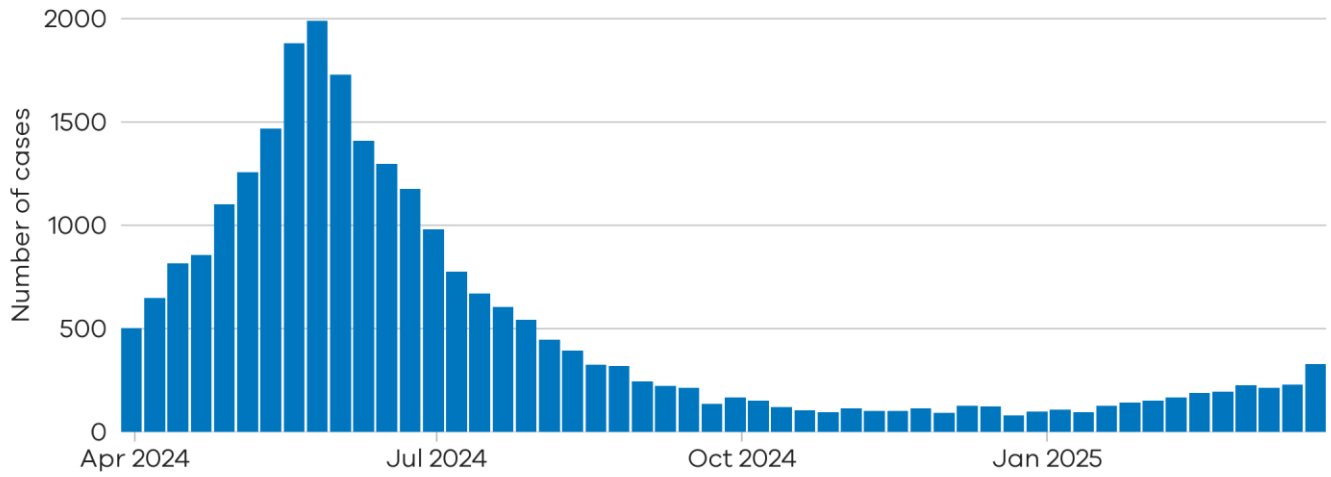


Notified influenza B cases are at higher levels compared to the same time in the past two years.

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, 31 March 2024 to 29 March 2025



There were **229** notified RSV cases two weeks ago

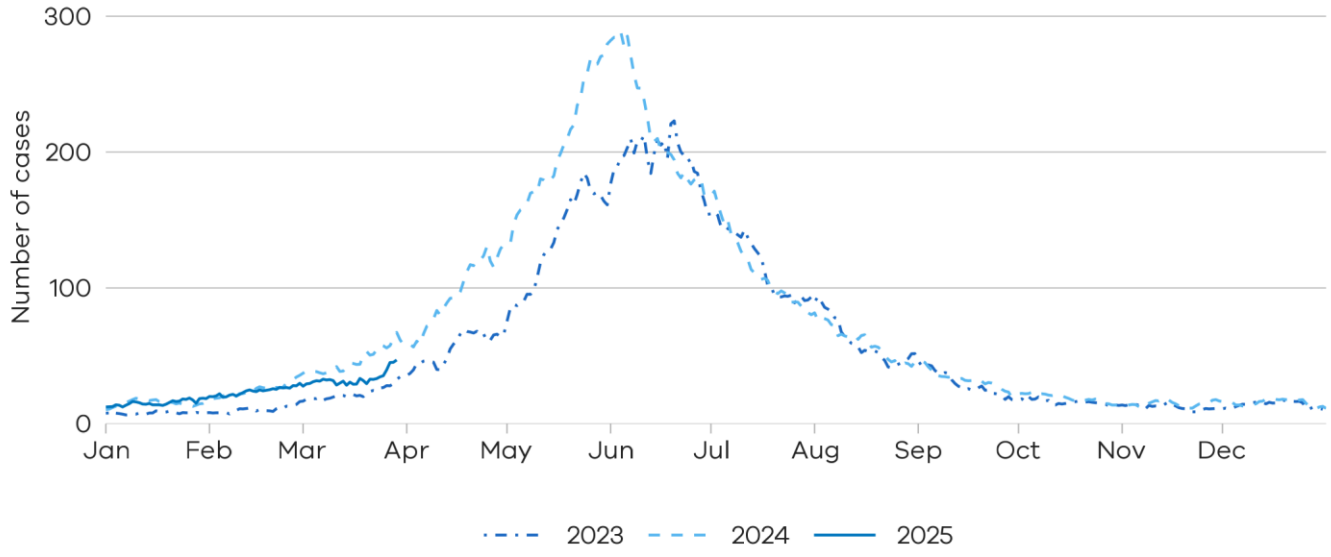
16 Mar 2025 to 22 Mar 2025

There were **329** notified RSV cases last week

23 Mar 2025 to 29 Mar 2025

44% increase

Figure 7: RSV trends in notified cases (7-day rolling average), Victoria, 1 January 2023 to 29 March 2025

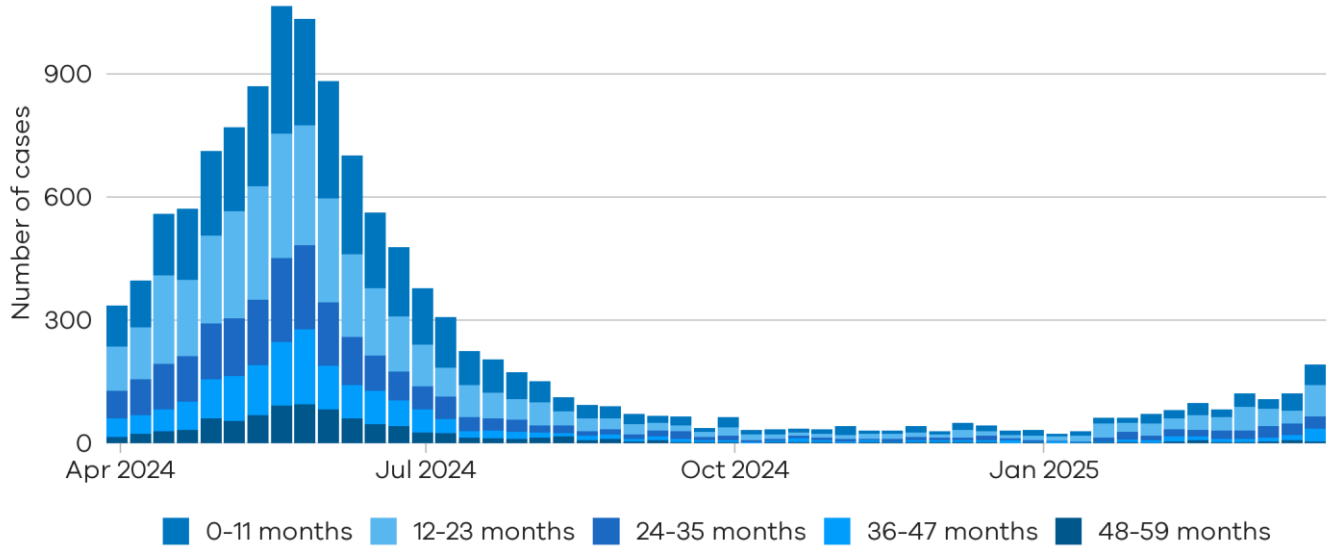


Notified RSV cases are at similar levels compared to the same time in the past two years.

Young children and older adults

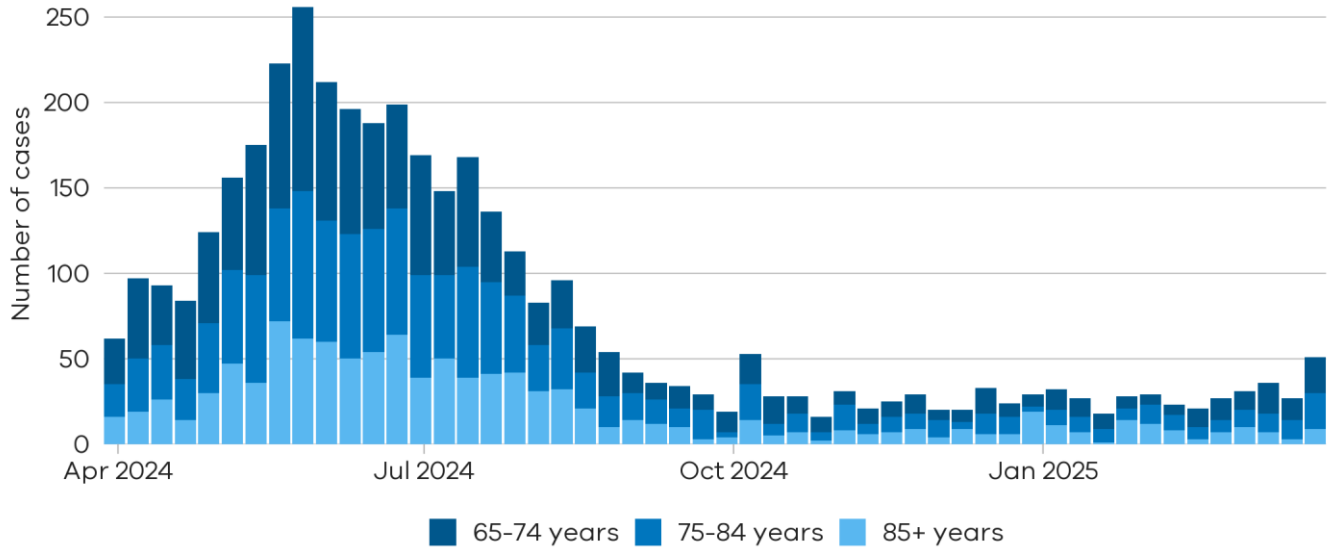
Young children and older adults are at greater risk of severe disease from RSV.

Figure 8: RSV trends in notified cases by week in young children (under 5 years), Victoria, 31 March 2024 to 29 March 2025



Notified cases of RSV in children under 5 years continues to increase.

Figure 9: RSV trends in notified cases by week in older adults (65+ years), Victoria, 31 March 2024 to 29 March 2025



Notified RSV cases have slightly increased in older adults.

Testing

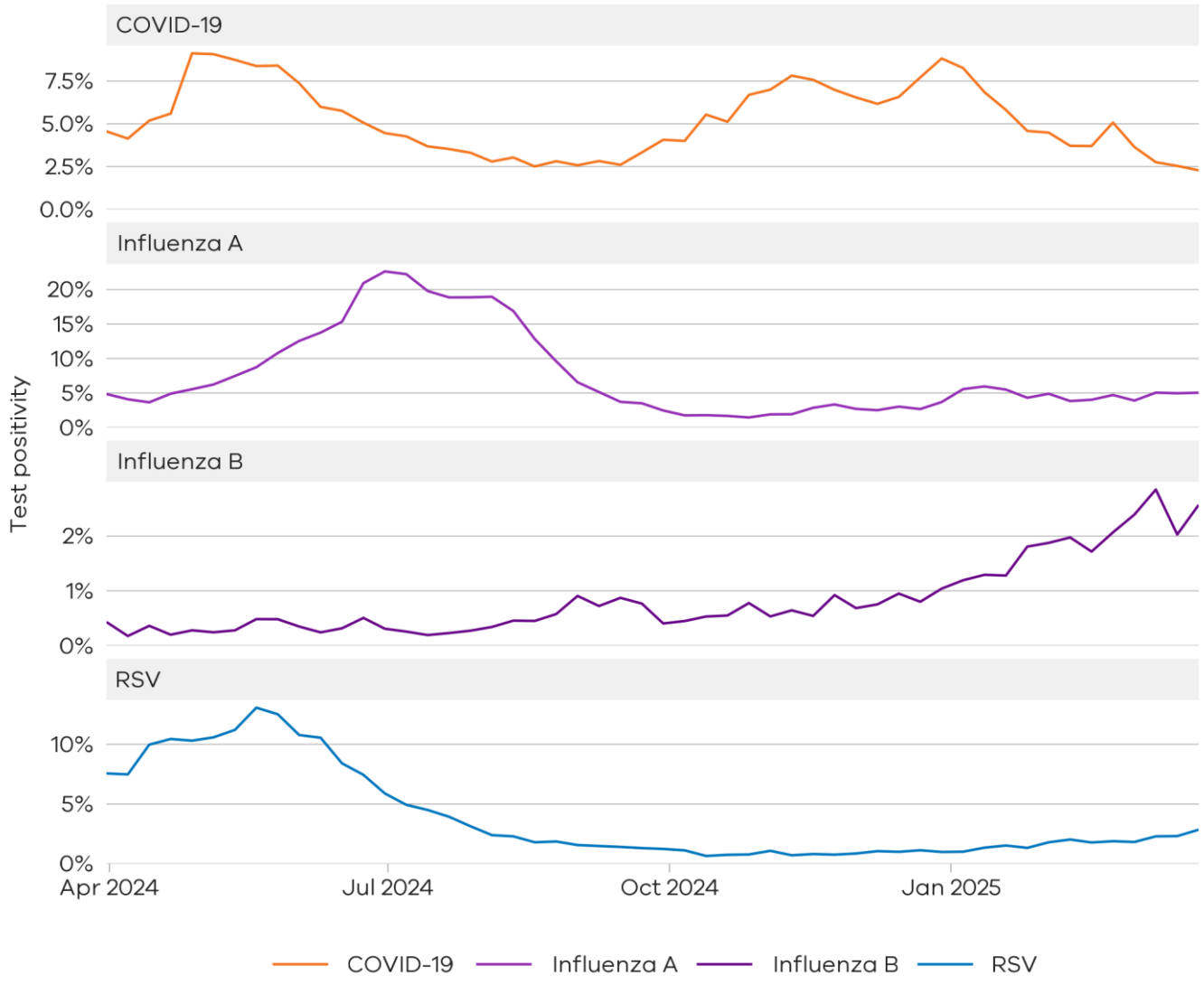
Laboratory testing for respiratory illnesses changes over time. Tracking the percentage of tests with the notifiable condition detected (i.e. test positivity) is a useful measure to understand trends in disease surveillance over time.

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

Summary

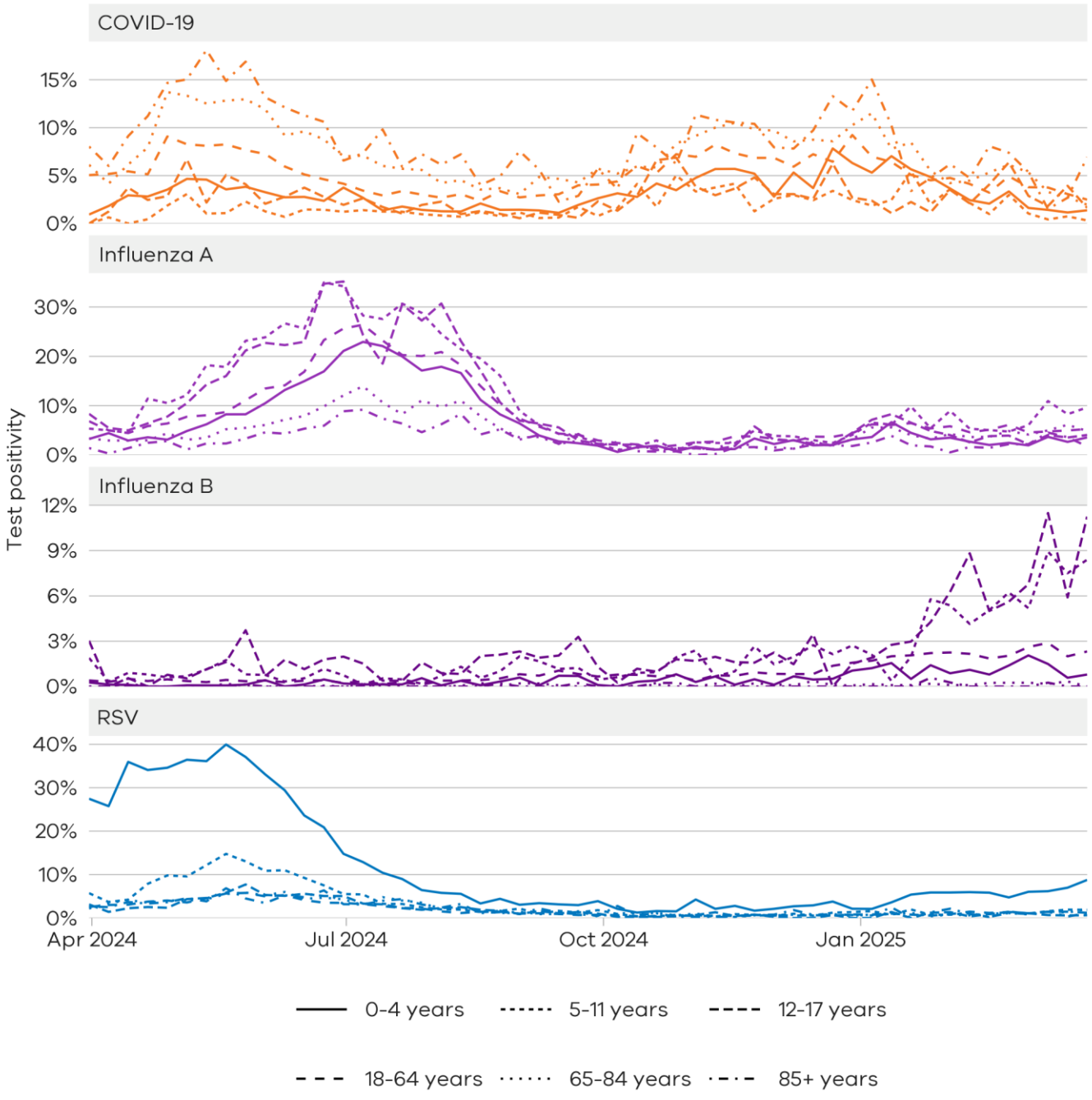
In the past week, the percentage of COVID-19 tests that were positive decreased (2.5% to 2.3%), the percentage of influenza tests that were positive increased (3.5% to 3.8%) and the percentage of RSV tests that were positive increased (2.3% to 2.9%).

Figure 10: Weekly test positivity for COVID-19, Influenza and RSV, Victoria, 31 March 2024 to 29 March 2025



Testing

Figure 11: Weekly test positivity by age groups for COVID-19, Influenza and RSV, Victoria, 31 March 2024 to 29 March 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.

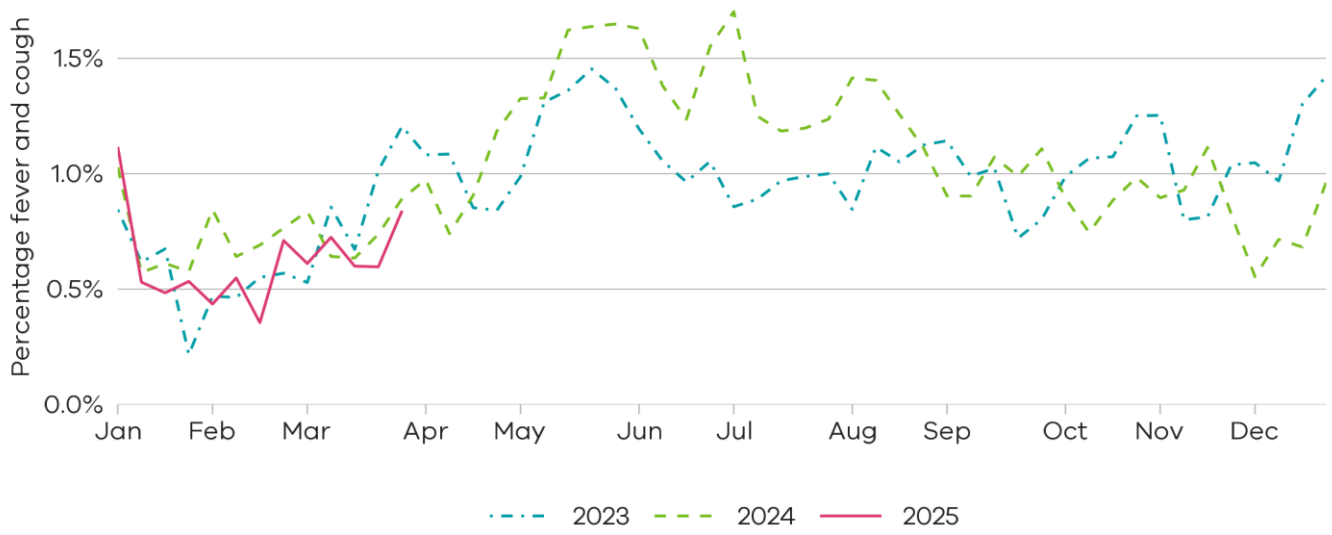
FluTracking

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) increased from the previous week.

Figure 12: Proportion of FluTracking participants reporting respiratory illness by week, Victoria, 1 January 2023 to 29 March 2025. Respiratory illness is defined as fever & cough.



Reported respiratory illness from FluTracking participants is 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/collections/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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