



GOVERNMENT OF BERMUDA
Ministry of Health

SURVEILLANCE SUMMARY REPORT

2025:

EPIDEMIOLOGICAL WEEKS 1-4: 29 DECEMBER 2024 – 25 JANUARY 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 1 FEBRUARY 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 1-4 included Fever and Neurological Symptoms, Fever and Rash (chicken pox), Fever and Respiratory Symptoms (adenovirus, chlamydia pneumoniae, coronavirus "seasonal", human metapneumovirus, human rhinovirus/enterovirus, influenza, parainfluenza, RSV, COVID-19, strep throat), and Gastroenteritis (rotavirus, yersinia enterocolitica).

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

During EWs 1-4, there were alerts for Fever and Neurological Symptoms, and Fever and Rash.

Epidemiological Week 1

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	1	LOW
Fever and Rash	1	0	1	3	LOW
Fever and Respiratory Symptoms (under 5 years)	1	5	8	15	LOW
Fever and Respiratory Symptoms (5 years and older)	29	47	80	146	LOW
Gastroenteritis (under 5 years)	0	0	1	2	LOW
Gastroenteritis (5 years and older)	2	3	6	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					89.29%

Epidemiological Week 2

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	1	0	1	3	LOW
Fever and Respiratory Symptoms (under 5 years)	1	4	7	13	LOW
Fever and Respiratory Symptoms (5 years and older)	45	51	85	153	LOW
Gastroenteritis (under 5 years)	0	0	1	2	LOW
Gastroenteritis (5 years and older)	1	3	7	13	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					89.29%

Epidemiological Week 3

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	1	LOW
Fever and Rash	0	0	1	3	LOW
Fever and Respiratory Symptoms (under 5 years)	6	5	8	14	LOW
Fever and Respiratory Symptoms (5 years and older)	31	54	88	157	LOW
Gastroenteritis (under 5 years)	0	0	1	2	LOW
Gastroenteritis (5 years and older)	0	4	7	13	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 4

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	5	1	2	4	HIGH
Fever and Respiratory Symptoms (under 5 years)	8	4	8	15	MEDIUM
Fever and Respiratory Symptoms (5 years and older)	39	51	86	157	LOW
Gastroenteritis (under 5 years)	0	1	2	5	LOW
Gastroenteritis (5 years and older)	4	3	6	11	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 1-4

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	1	2	MEDIUM
Fever and Rash	7	2	6	14	MEDIUM
Fever and Respiratory Symptoms (under 5 years)	16	18	31	57	LOW
Fever and Respiratory Symptoms (5 years and older)	144	203	340	613	LOW
Gastroenteritis (under 5 years)	0	2	5	11	LOW
Gastroenteritis (5 years and older)	7	14	26	50	LOW
Undifferentiated Fever (under 5 years)	0	0	1	3	LOW
Undifferentiated Fever (5 years and older)	0	0	1	3	LOW

Cumulative Summary: Epidemiological Weeks 1-4

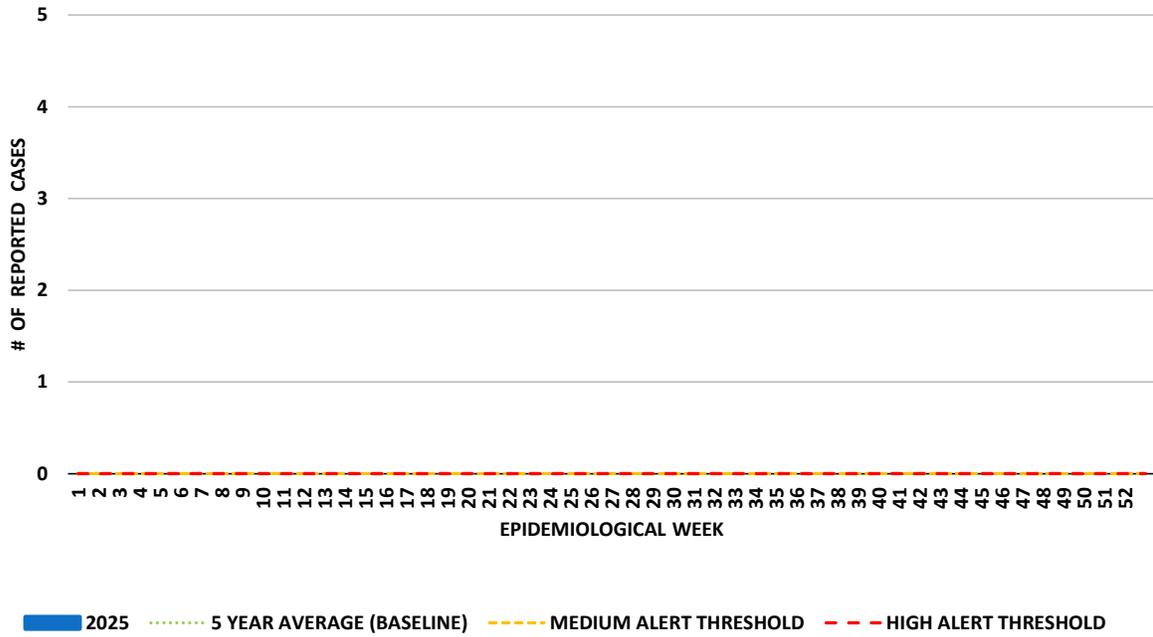
Syndrome	# of Reported Cases	5-Yr Average	Medium Alert Threshold**	High Alert Threshold***	Alert Level
Acute Flaccid Paralysis	0	0	0	0	LOW
Fever and Haemorrhagic Symptoms	0	0	0	0	LOW
Fever and Neurological Symptoms	1	0	1	2	MEDIUM
Fever and Rash	7	2	6	14	MEDIUM
Fever and Respiratory Symptoms (under 5 years)	16	18	31	57	LOW
Fever and Respiratory Symptoms (5 years and older)	144	203	340	613	LOW
Gastroenteritis (under 5 years)	0	2	5	11	LOW
Gastroenteritis (5 years and older)	7	14	26	50	LOW
Undifferentiated Fever (under 5 years)	0	0	1	3	LOW
Undifferentiated Fever (5 years and older)	0	0	1	3	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.

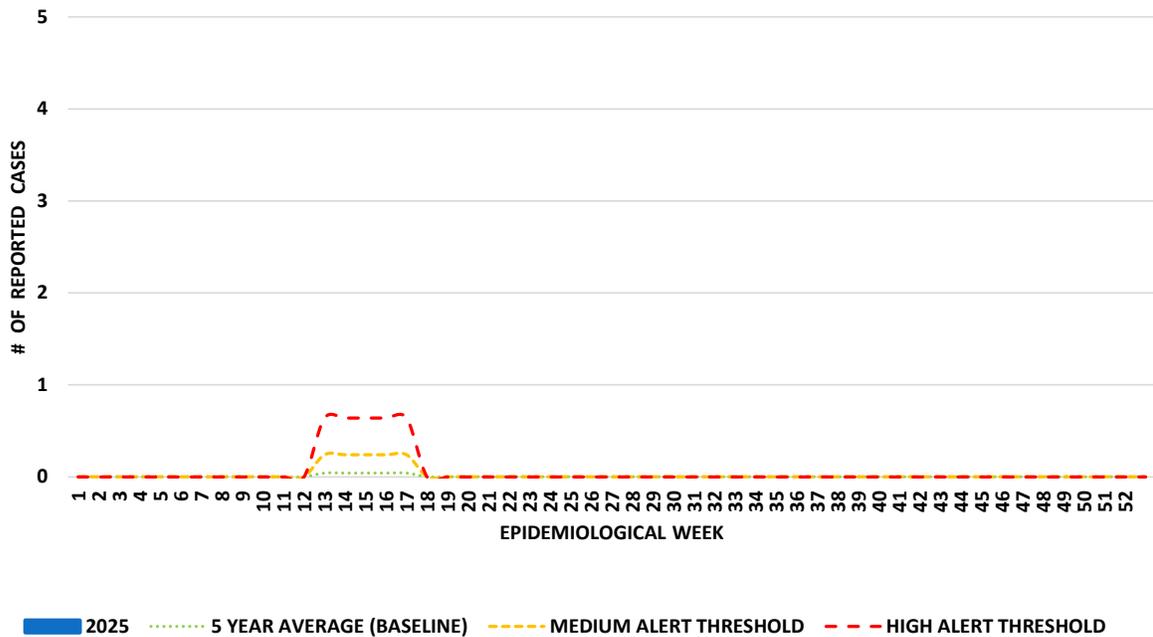
** Medium Alert Threshold is set at 1 standard deviation above 5-yr average

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

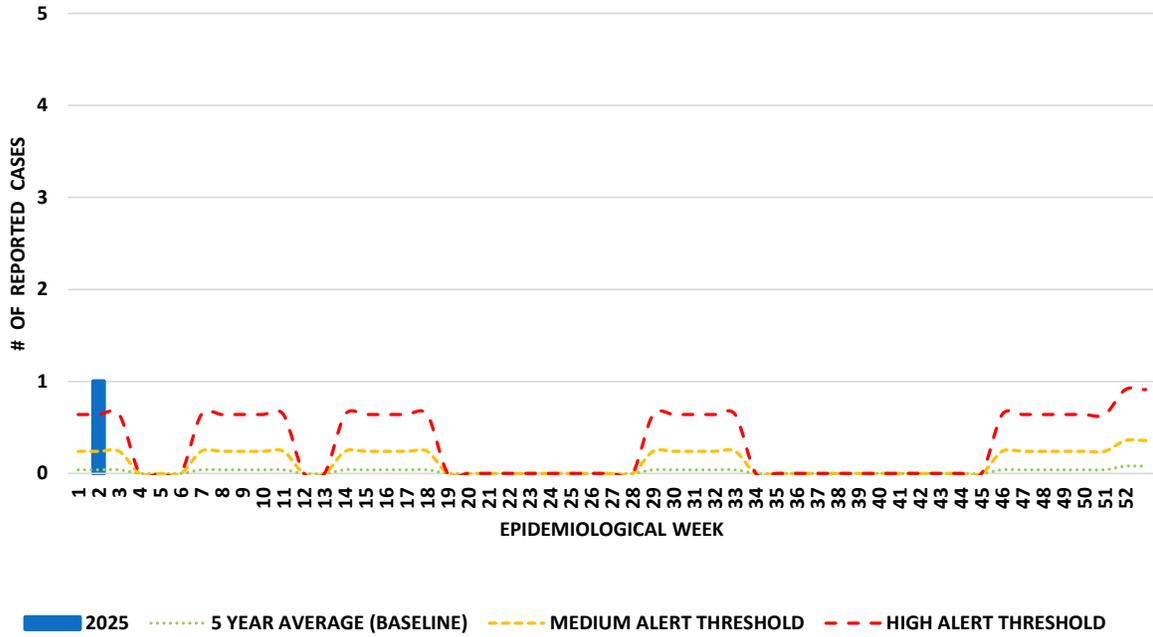
ACUTE FLACCID PARALYSIS



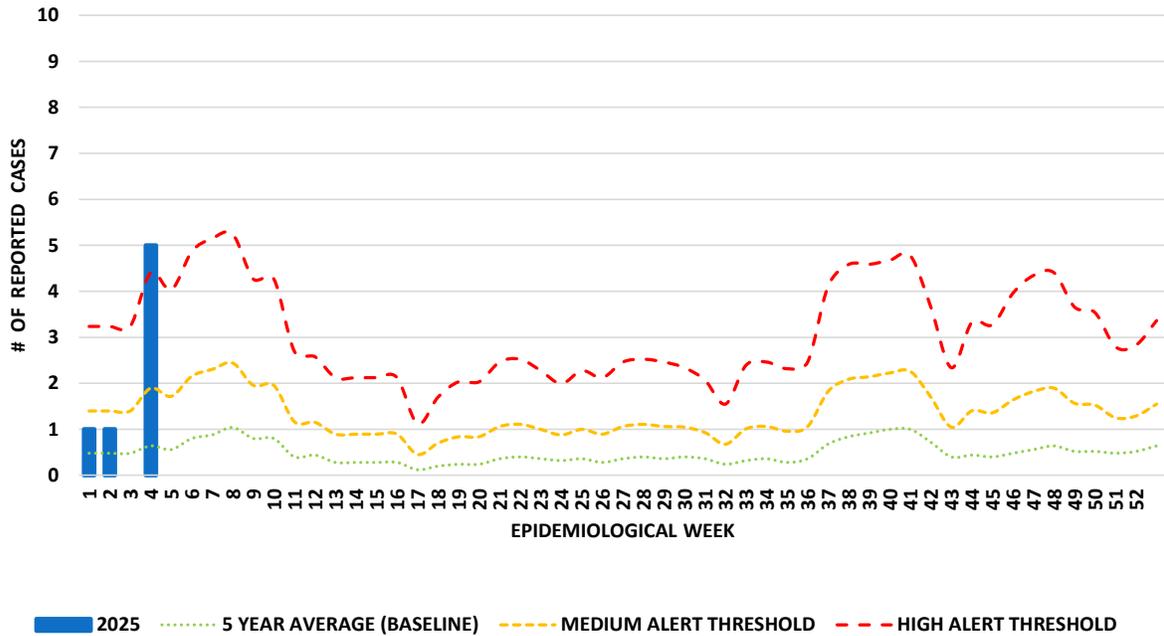
FEVER AND HAEMORRHAGIC SYMPTOMS



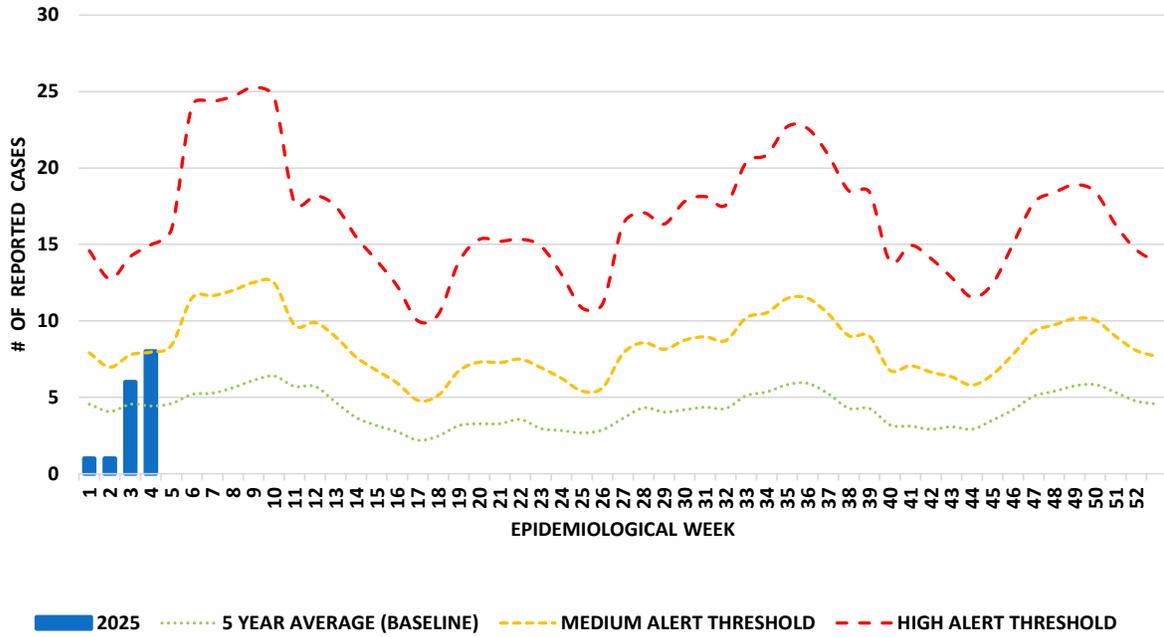
FEVER AND NEUROLOGICAL SYMPTOMS



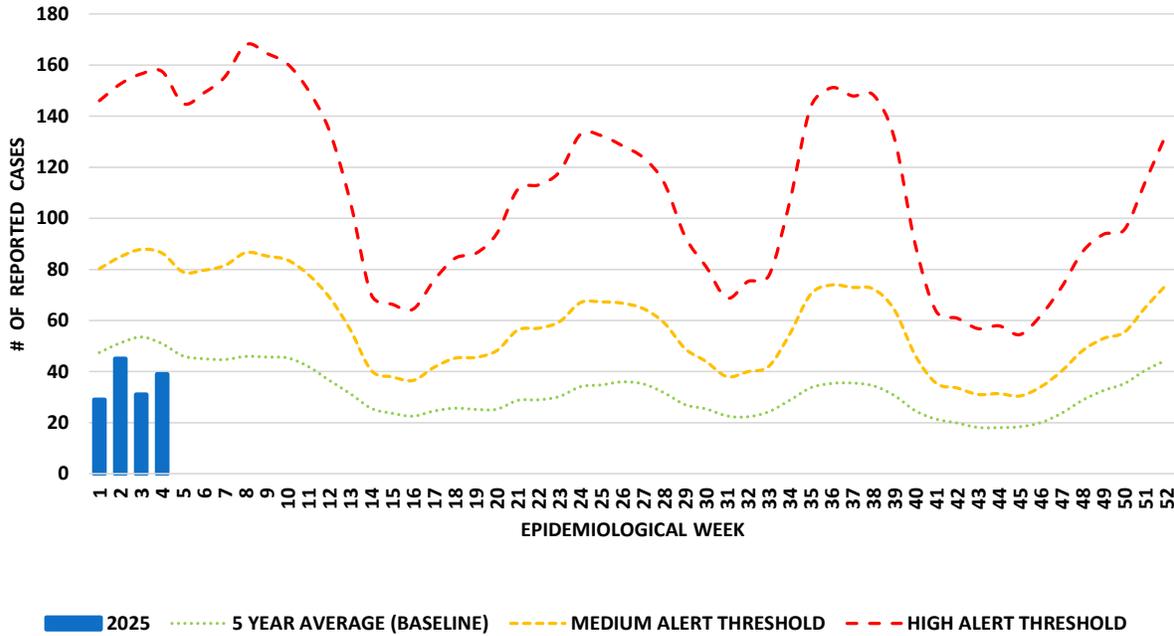
FEVER AND RASH



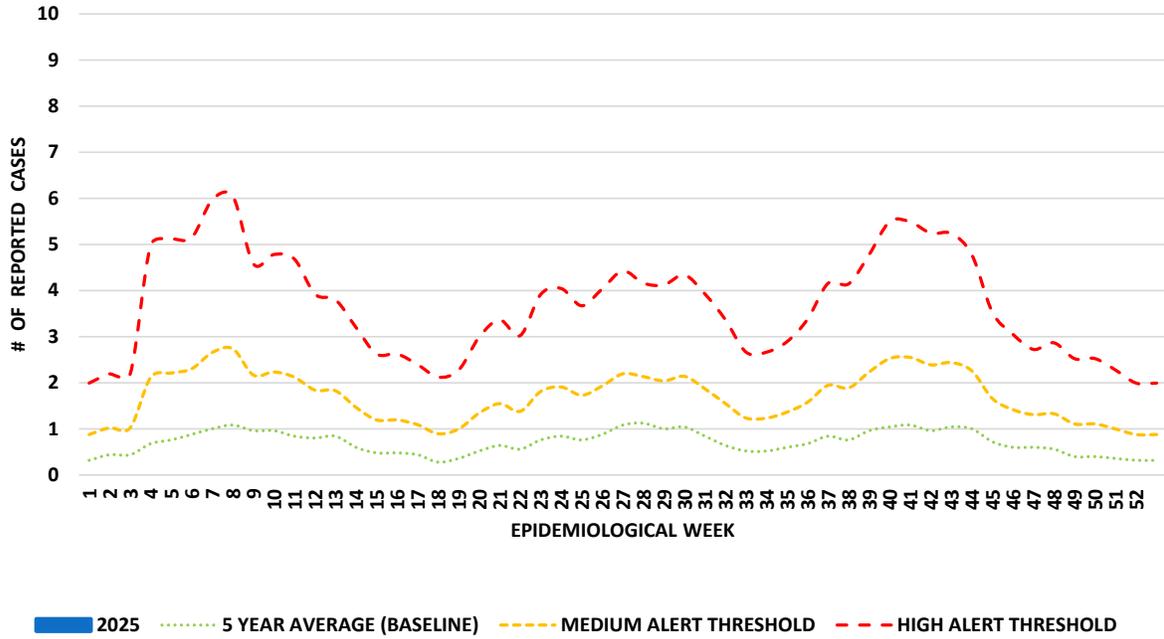
FEVER AND RESPIRATORY SYMPTOMS IN PERSONS AGED UNDER 5 YEARS



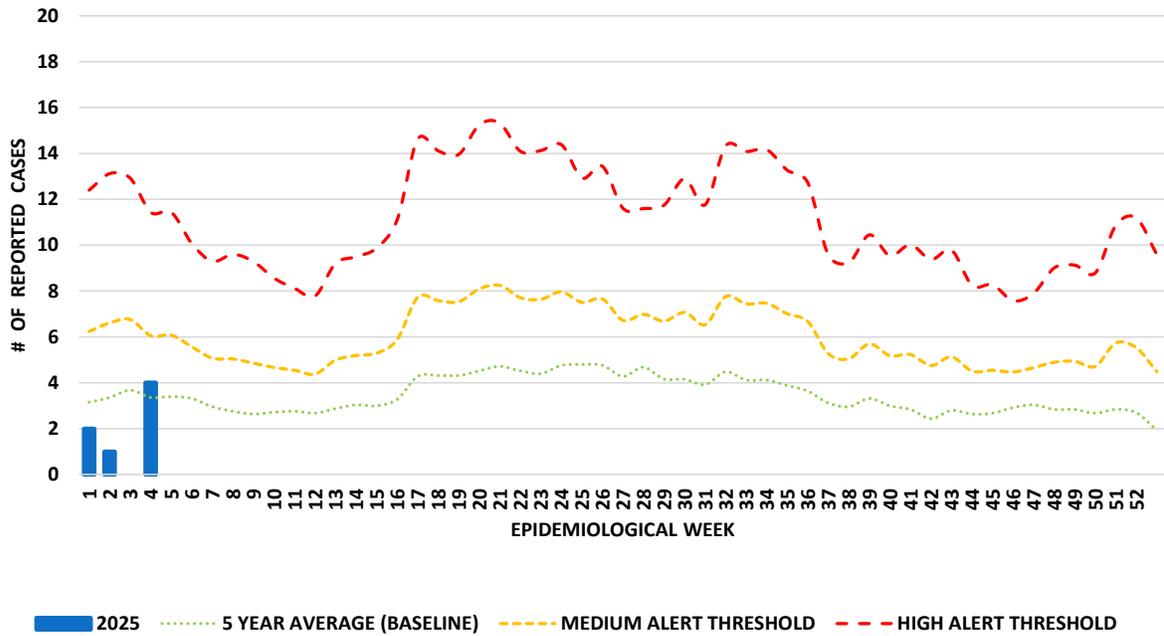
FEVER AND RESPIRATORY SYMPTOMS IN PERSONS AGED 5 YEARS AND OLDER



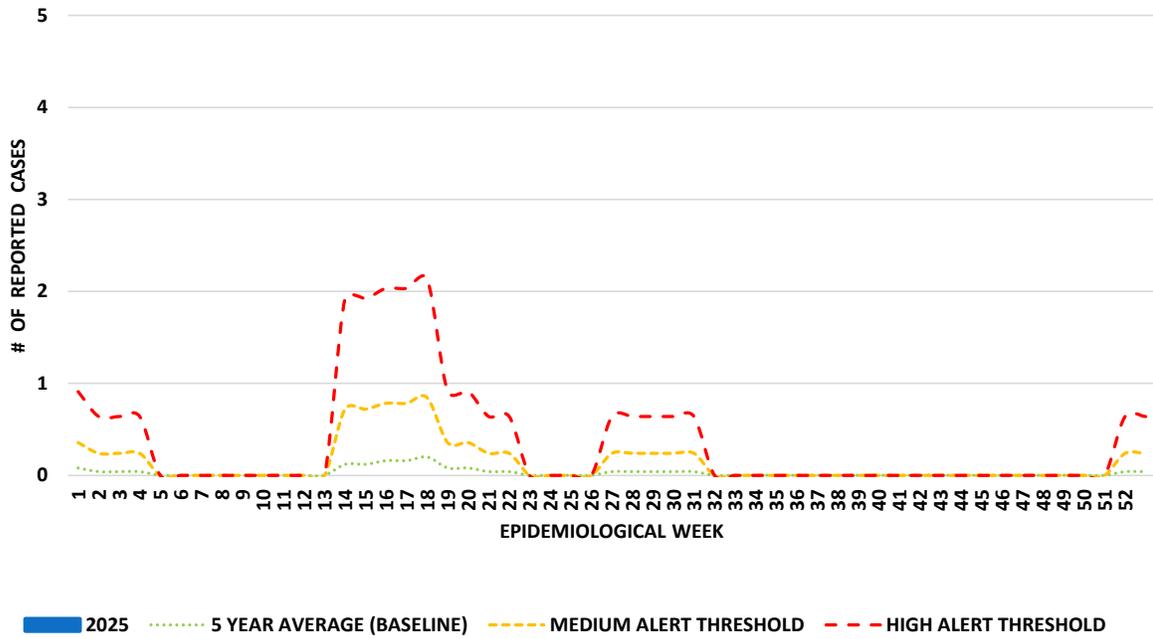
GASTROENTERITIS IN PERSONS AGED UNDER 5 YEARS



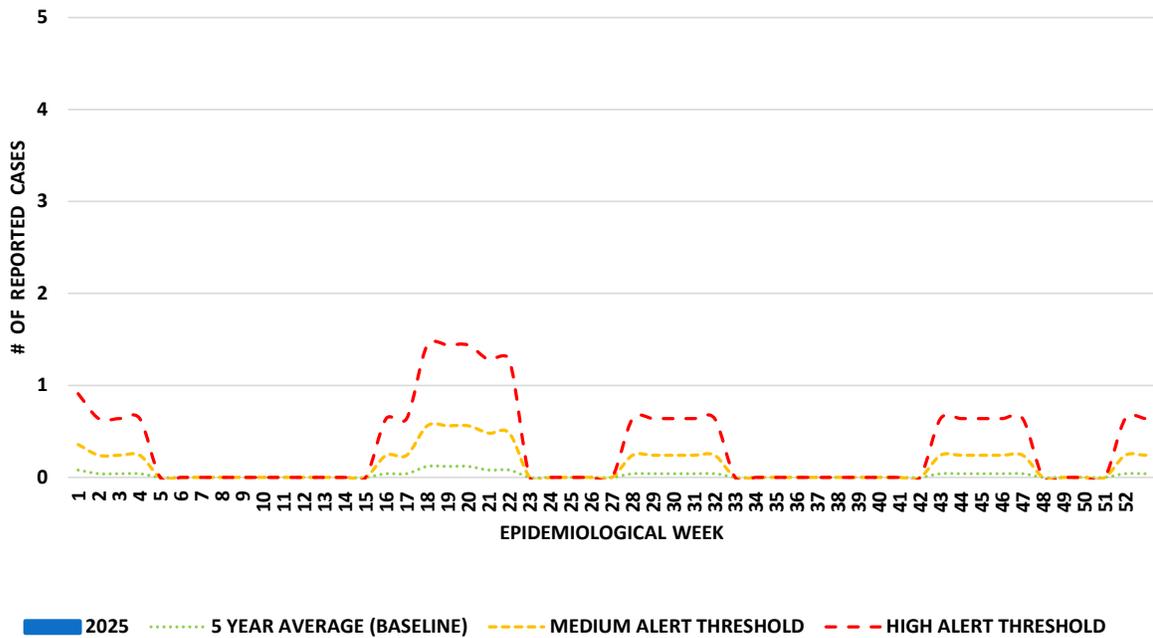
GASTROENTERITIS IN PERSONS AGED 5 YEARS AND OLDER



UNDIFFERENTIATED FEVER IN PERSONS AGED UNDER 5 YEARS



UNDIFFERENTIATED FEVER IN PERSONS AGED 5 YEARS AND OLDER



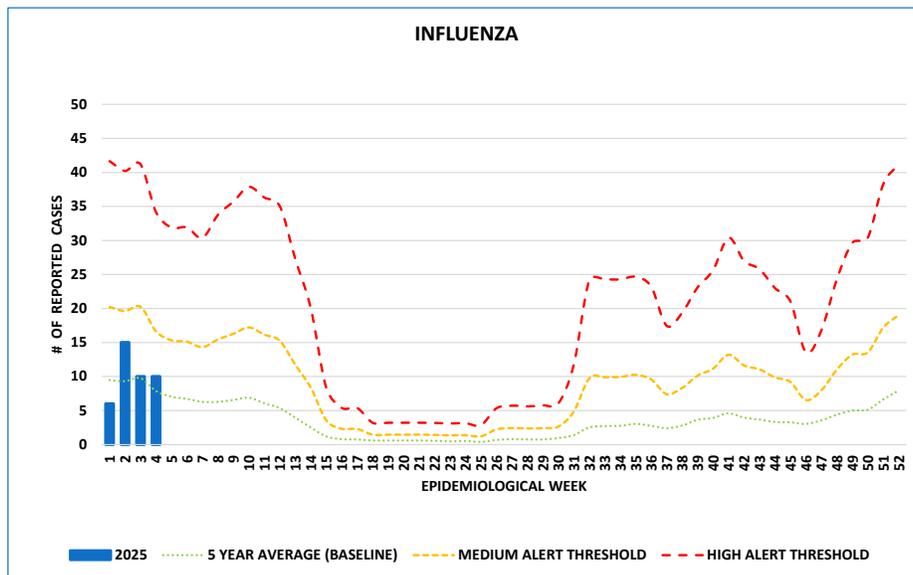
Conditions of Interest: Influenza, COVID-19, and Severe Acute Respiratory Infection (SARI)

Surveillance case definitions included here are as follows:

Influenza:

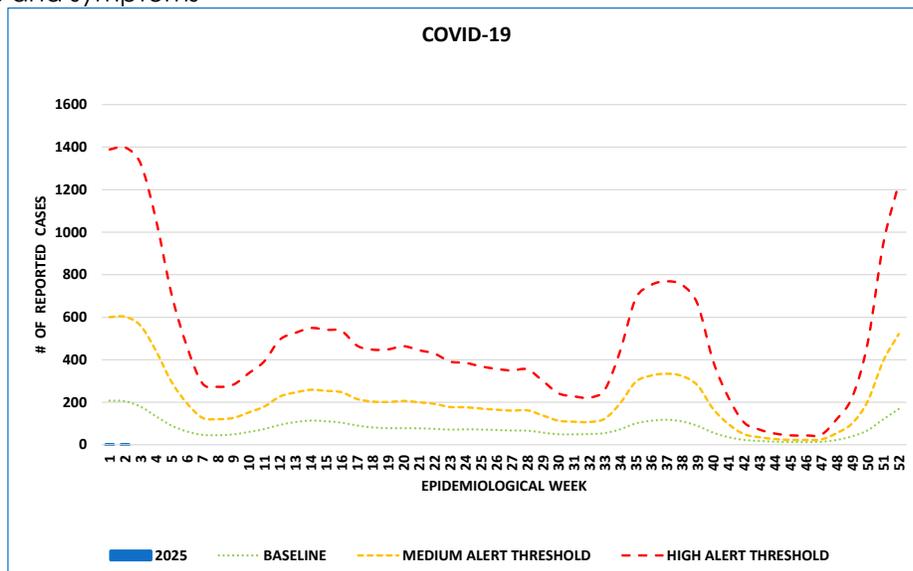
Clinical (or suspect): A person with fever, headache, myalgia, and cough

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



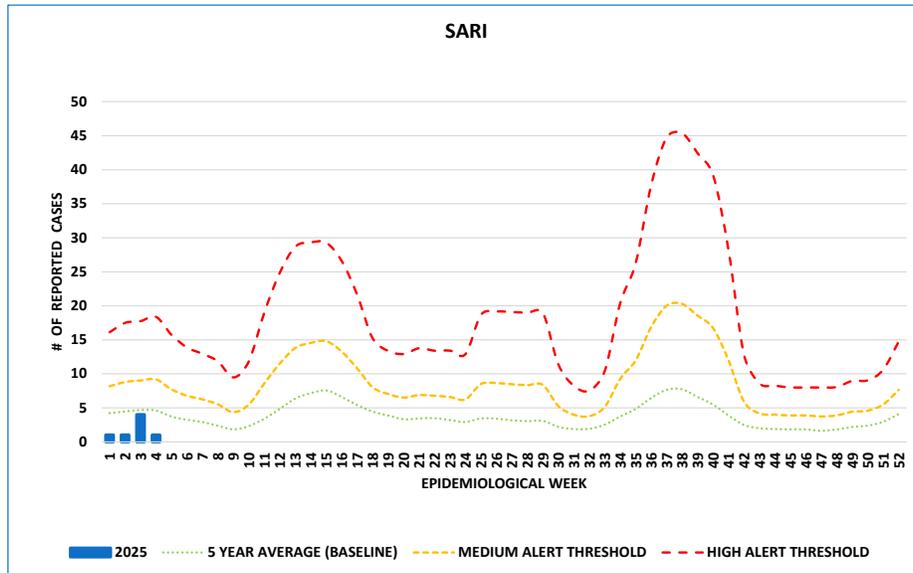
COVID-19:

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

Between EWs 1 and 4 of 2025, influenza activity showed a notable increase, rising from 6 cases in EW 1 to a peak of 15 cases in EW 2, before stabilizing at 10 cases in EWs 3 and 4.

COVID-19 activity remained low and stable during this period, with 1 case reported in each of EWS 1 and 2 and no cases in EWs 3 and 4.

SARI (Severe Acute Respiratory Infections) cases were minimal in most weeks, with 1 case reported in EWS 1, 2, and 4. However, EW3 saw a spike in SARI activity, with 4 cases recorded.

Routine Communicable Disease Surveillance (EWs 1-4, 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
Poliomyelitis	0	0
Severe Acute Respiratory Syndrome (SARS)	0	0
Yellow Fever	0	0
Air Borne Diseases		
Adenoviruses	4	1
COVID-19	2	126
Human Metapneumovirus [hMPV]	7	8
Influenza	42	92
Respiratory Syncytial Virus [RSV]	18	19
Tuberculosis - ExtraPulmonary	0	0
Tuberculosis	0	0
Vaccine Preventable Diseases under the Caribbean Expanded Programme on Immunization		
Chicken Pox [Varicella] (clinically confirmed)	1	4
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]	0	1
Pneumonia [due to <i>Haemophilus influenzae</i>]	0	0
Pneumonia [due to <i>Streptococcus pneumoniae</i>]	0	0
Rotavirus	0	0
Rubella [Congenital German Measles]	0	0
Rubella [German Measles]	0	0
Tetanus [excluding Neonatal]	0	0
Tetanus Neonatorum	0	0
Vector Borne Diseases		
Chagas Disease	0	0
Chikungunya	0	0
Dengue Fever	0	0
Dengue Haemorrhagic Fever/Shock Syndrome	0	0
Leptospirosis	0	0
Malaria	0	0
Zika	0	0
Food and Water Borne Pathogens		
<i>Campylobacter</i>	0	6
Ciguatera Poisoning (clinically confirmed)	0	0
<i>Cryptosporidium</i>	0	2
<i>E. Coll</i> (pathogenic)	0	7
<i>Giardia</i>	0	0
Hepatitis A	0	0
<i>Listeria</i>	0	0
Norovirus	0	4
<i>Salmonella</i>	0	8
<i>Shigella</i>	0	1
<i>Staphylococcus</i> (pathogenic)	0	0
<i>Toxoplasma</i>	0	0
Typhoid and Paratyphoid	0	0
<i>Vibrio</i> (excluding Cholera)	0	0
Other Diseases		
Viral Encephalitis/Meningitis	0	0
Hepatitis B	0	0
Hepatitis C	1	1
Leprosy (Hansens Disease)	0	0
Meningitis/Encephalitis (not specified)	1	0
Rabies (in Humans)	0	0
Specific Diseases under Country Surveillance		
Chlamydia	18	53
Gonorrhoea	1	2
Herpes	2	10
Syphilis	0	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