

US Medical Affairs

2025 TRENDS Report: 2/2/25-2/15/25

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Gastrointestinal (GI)

What is TRENDS showing us:

- Following a surge in Norovirus activity in the Northeast and Midwest, **detections have since stabilized and declined**. While high activity persists, current rates across all regions are consistent with averages over the last three months.
- Campylobacter detections have **risen to high activity** in the **Northeast (3.3%)**, **Midwest (3.2%)**, and **West (3.6%)**.
- *C. difficile* **remains at high activity** in all regions, with marginal downward trends in the **Northeast (12.3%)** and **West (12%)**, but increased detections in the **South (14.1%)** and **Midwest (17.7%)**.
- Enteropathogenic *E. coli* is currently categorized as high activity in the Northeast, South, and West. Only the **South (6.5%) shows a continued upward trend**, while the **Midwest (3%) has declined** overall from high to moderate activity.

What this means for U.S. providers/labs:

- Norovirus remains the predominant pathogen detected across all regions suggesting a need for **increased surveillance** and infection control measures.
- Increased rates of Campylobacter detections and high rates of Enteropathogenic *E. coli* highlights the importance of **monitoring for foodborne illness outbreaks**.
- Stable but high *C. difficile* activity suggests continued vigilance related to **antimicrobial stewardship initiatives** and **infection prevention protocols**.

Respiratory (RP)

What is TRENDS showing us:

- Co-detections continue to reflect stable rates across all regions except the Northeast, which has declined from **20% to 16%** over the past six weeks.
- Seasonal influenza activity **remains very high nationwide**, with Influenza A (both H1-2009 and H3) detections plateauing across all regions. The highest rates are in the **Midwest (15.7% H1-2009, 8.9% H3)** and **Northeast (12.1% H1-2009, 8.2% H3)**, followed by the **South (8.2% H1-2009, 7.8% H3)** and **West (8.4% H1-2009, 8.5% H3)**.
 - The CDC reports that as of Feb 8th, 7.8% of healthcare visits were for respiratory illness, and this flu season is classified as **high severity overall and across all age groups**—the first time since 2017-2018.
 - CDC's Weekly Influenza Surveillance Report: [Weekly US Influenza Surveillance Report: Key Updates for Week 7, ending February 15, 2025](#)
- Respiratory Syncytial Virus (RSV) rates are **stable or slightly declining in every region except the West**, where RSV is now the top respiratory virus detected, increasing from **7% to 14%** over the past six weeks.
- While proportionately lower than Influenza A or RSV, Human Metapneumovirus (hMPV) detections are gradually increasing, particularly in the **West and Midwest**. Detections range from **1.6% (Northeast)** to **3.5% (West)**.

What this means for U.S. providers/labs:

- The 2024-2025 respiratory season remains active, with high levels of acute respiratory illness placing a significant burden on healthcare professionals. **Rapid and accurate pathogen identification is crucial** to managing patient care, reducing unnecessary antibiotic use, and ensuring appropriate antiviral treatment.
- Widespread influenza activity is still straining the healthcare system, requiring **improved efficiency, timely initiation, and proper stewardship in testing workflows** to manage high patient volumes.
- With RSV activity is still rising in the West, this region may **continue to see an increase in correlated healthcare visits**. As the RSV season comes to a close, healthcare providers will be **eager to understand the RSV vaccine's impact** on hospitalizations.
- Human Metapneumovirus (hMPV) detection is rising as expected for this time of year, and **providers may seek guidance based on international data**.