

US Medical Affairs

2025 TRENDS Report: 2/16/25-3/1/25

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Gastrointestinal (GI)

What is TRENDS showing us:

- Norovirus GI/GII **remains at very high activity**, rising from **28.7% to 34.9%** in the **Northeast**, trending down in the West, and remaining stable in the Midwest and South.
- Enteropathogenic/Enterotoxigenic *E. coli* are at **high activity in most regions**, with Enteropathogenic *E. coli* increasing from **2.1% to 5.9%** in the **Northeast**, remaining stable in the West and South, and trending down in the **Midwest (3.9% to 1.7%)**.
- *C. difficile* **remains high overall**, with rates rising in the **West (13.9% to 18.1%)**, remaining stable in the Midwest and South, and declining in the **Northeast (15.4% to 13.3%)**.
- Rotavirus and *Campylobacter* **remain at high to medium activity**, with Rotavirus slightly declining in the Northeast and stable in the Midwest, while *Campylobacter* dropped in the **Northeast (3.1% to 1.3%)** but increased in the **West (3% to 4%)**.
- *Shigella*/EIEC, Enterotoxigenic *E. coli*, and Sapovirus are at **medium activity**. *Shigella*/EIEC jumped from **0.7% to 2.0% in the Northeast**, while Enterotoxigenic *E. coli* and Sapovirus also slightly increased in this region.

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

- Norovirus GI/GII surge in the Northeast calls for **enhanced infection control**, especially in high-risk settings.
- *E. coli* activity emphasizes the need for **strict food safety precautions** and **hygiene education** to reduce transmission.
- High *C. difficile* rates reinforce the importance of **antimicrobial stewardship** and **infection prevention**.
- Rotavirus and *Campylobacter* shifts require continued **monitoring in pediatric and GI cases**.
- Rising *Shigella*/EIEC in the Northeast signals a need for increased awareness and **education on precautions to limit the spread of *Shigella***.

Respiratory (RP)

What is TRENDS showing us:

- Co-detections **remain stable in all regions except the Northeast**, which **continues to exhibit a decline (20% to 13%)** over the past eight weeks.
- **Influenza A activity has declined** over the past two weeks after sustained highs in January and early February, with H1-2009 still at one of the highest rates of detection (**Midwest: 9.8%, South: 6.3%**), and H3 following a similar pattern across all regions.
 - CDC data notes influenza cases and respiratory-related healthcare visits are declining (**5.8% from 7.8%**), while influenza-related mortality **remains stable at 2.8%**.
 - Read more: [Weekly US Influenza Surveillance Report: Key Updates for Week 8, ending February 22, 2025](#)
- Respiratory Syncytial Virus (RSV) rates **remain stable or slightly declining** in the Northeast, South, and Midwest, while the **West** continues to have the **highest RSV detections (12.7%)**.
- Human Rhinovirus/Enterovirus continues to climb detection rates in the **South (17.2%)** while remaining stable in the **West (12%), Midwest (6%), and Northeast (5%)**.
- Human Metapneumovirus (hMPV) slowly continues to increase in the **West (4.8%)** and **Midwest (2.9%)**, with lower but steady detection in the **Northeast (2.0%)**.

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

- The 2024-2025 respiratory season remains active, with **high healthcare demand despite waning Influenza A detections**; lower co-detection rates may result in fewer multiple-pathogen cases, reinforcing the need for rapid identification to guide **appropriate antiviral use** and **reduce unnecessary antibiotic prescriptions**.
- As Influenza A detections decline, **providers may shift focus to other respiratory viruses** (e.g., Human Rhinovirus/Enterovirus) and the potential impact of Avian Influenza (H5N1) on future seasons.
- Human Metapneumovirus (hMPV) detections are **rising as expected** for this stage of the respiratory season and may persist. **Providers may continue to have questions** given international trends from other countries.