

US Medical Affairs 2025 TRENDS Report: 5/18/25-5/31/25

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Gastrointestinal (GI)

What is TRENDS showing us:

- C. difficile remains heightened across all regions, with the Midwest reporting the highest rate at 17%. Detection levels have held steady elsewhere.
- · Norovirus continues with widespread activity nationwide, with no notable changes in detection rates.
- Enteroaggregative *E. coli* (EAEC) **dropped in the Northeast from 5.5% to 2.3%**, reducing it to medium activity. In contrast, rates in the **Midwest doubled from 1.3% to 3%**, boosting it to high activity.
- · Campylobacter maintains high activity in the Northeast, South, and West, with stable detections in recent weeks.
- Rotavirus continues with raised detection rates in the South and West, with no significant shifts in the last reporting period.
- Salmonella increased slightly in the South, pushing it from medium to high activity classification.

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

- High and consistent *C. difficile* and norovirus detection levels across all regions reaffirms the ongoing need for **strong infection prevention** and **regular testing in patients with GI symptoms**.
- Enteropathogenic E. coli (EPEC) remains elevated across all regions, reinforcing the importance of **considering** foodborne illness when evaluating patients with GI issues.
- Fluctuating activity in EAEC, including a recent increase in the Midwest, shows the **value of broad panel testing** to catch emerging or shifting pathogen trends.
- Salmonella is on the rise in the South, which may reflect recent outbreaks and calls for increased awareness and appropriate testing.

Respiratory (RP)

What is TRENDS showing us:

- Rhinovirus (RV)/Enterovirus (EV) remains the most commonly detected pathogen nationwide, with rates above
 19% in all regions. Activity is stable in the South and West but rising in the Midwest and Northeast.
- Parainfluenza Virus 3 (PIV-3) is the **second most detected pathogen**, with stabilized rates in the South and West and continued increases in the Midwest and Northeast (range: 5.6% [Northeast] 8.3% [West]).
- Human Metapneumovirus (hMPV) activity is now declining across all regions, with the lowest rates in the West (2.8%) and highest in the South (6.6%).
- Mycoplasma pneumoniae remains elevated in the West (4.6%), while all other regions report minimal activity (<0.5%).
- Respiratory syncytial virus (RSV) activity is now <1% nationwide. New CDC data shows significant reductions in RSV-related hospitalizations among infants following the introduction of RSV prevention products.
 - Continue reading: <u>Interim Evaluation of Respiratory Syncytial Virus Hospitalization Rates Among Infants and Young Children After Introduction of Respiratory Syncytial Virus Prevention Products United States, October 2024–February 2025</u>

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

- RV detection can help guide clinical management by clarifying the cause of illness, reducing unnecessary antibiotics, and setting expectations for recovery especially in children and those with asthma or COPD.
- PIV-3 usually causes mild symptoms but can lead to serious lower respiratory tract infections and hospitalizations, especially in young children and the elderly. As RSV prevention improves through maternal vaccines and monoclonal antibodies, PIV-3 may account for a larger share of pediatric viral respiratory hospitalizations in the future.
 - · Learn more: The Epidemiology and Burden of Human Parainfluenza Virus Hospitalizations in US Children
- RSV is the leading cause of infant hospitalizations in the U.S., but 2024-2025 rates were significantly lower than prepandemic seasons. This highlights the importance of early implementation of Advisory Committee on Immunization
 Practices (ACIP) recommendations like maternal vaccination and nirsevimab for the upcoming 2025-2026
 season.
 - Read CDC recommendations: Clinical Guidance for RSV Immunizations and Vaccines