World Health Organization

Global respiratory virus activity weekly update
Week 48, ending 30 November 2025
Update No. 556

GLOBAL INFLUENZA SURVEILLANCE AND RESPONSE SYSTEM (**GISRS**)

Co-circulation | Influenza | SARS-CoV-2 | RSV

SUMMARY

Globally, influenza activity was elevated with positivity above 15% in week 48. SARS-CoV-2 activity remained stable and low overall. Influenza predominated in all areas with positivity above 10% in the northern hemisphere temperate and sub-tropical zones and in the tropical zones. [Figures 1a, 1b, 1c and 1d] .

❖ Influenza

Globally, influenza activity continued to increase with influenza A viruses predominant among influenza detections in all zones. [Figure 2]

In the northern hemisphere, influenza percent positivity was elevated (>10%) in countries in Central America and the Caribbean, Tropical South America, Africa, Northern and South-West Europe, and Southern, South-East and Western Asia. Percent positivity was over 30% in countries in Central America and the Caribbean, Tropical South America, Western Africa, Northern and South West Europe and Eastern, Southern, South-East and Western Asia. Increases in activity were observed in countries in North America, Central America and the Caribbean, Western Africa, Eastern, Northern and South West Europe, and Asia. [Figures 3 and 4]

In the southern hemisphere, influenza activity remained low overall although elevated positivity (>10%) was reported in a few countries in Tropical and Temperate South America, Eastern Africa and Oceania; percent positivity was over 30% in single countries in Eastern Africa and South-East Asia. Small increases in activity were observed in Eastern Africa and Oceania. [Figures 3 and 4]

In the zones with elevated positivity, influenza A(H3N2) was predominant in all zones except Central America and the Caribbean and Northern Africa where there was codominance of influenza A(H1N1)pdm09 and A(H3N2). [Figures 5 and 6]

❖ SARS-CoV-2

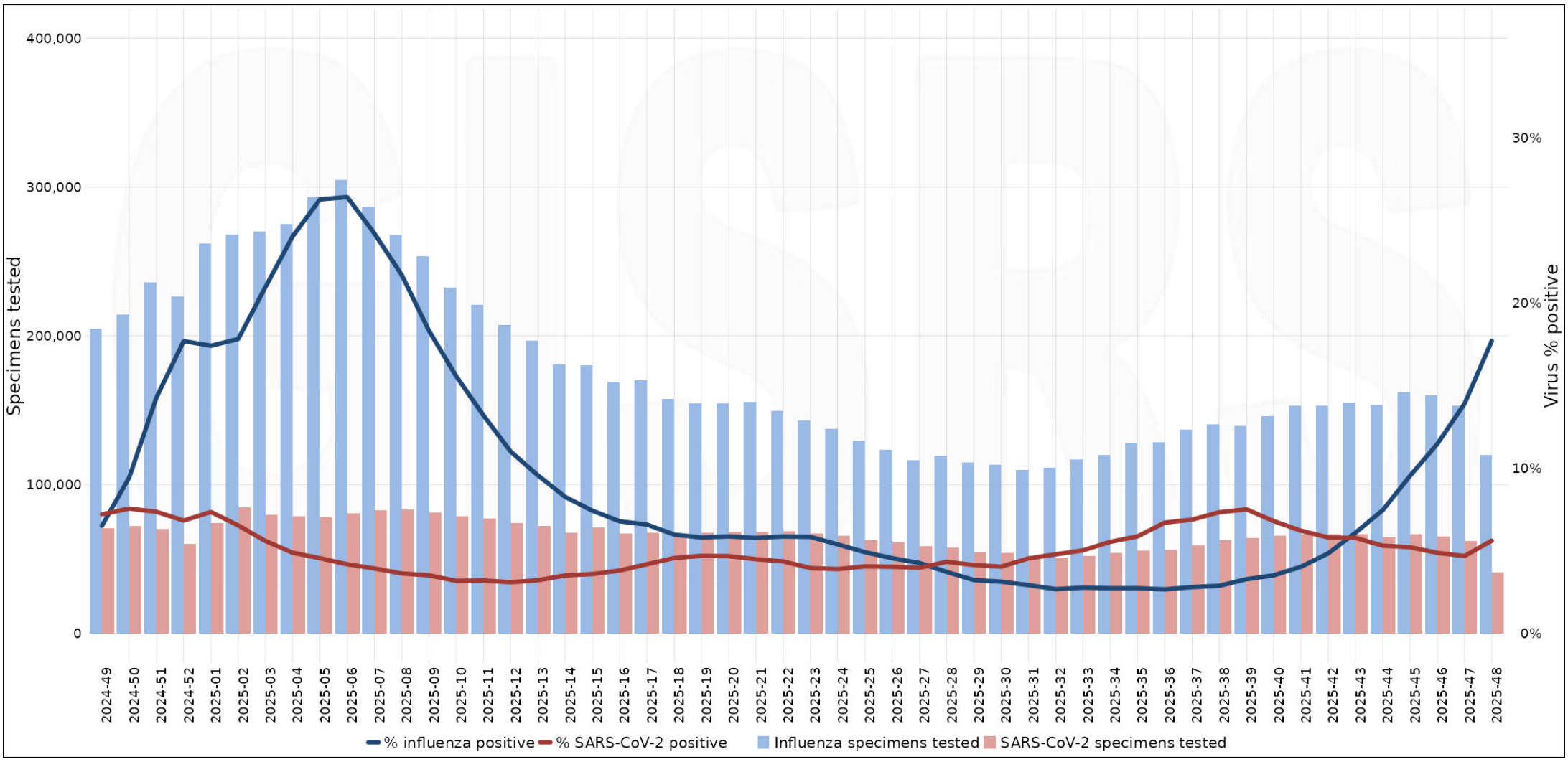
Globally, SARS-CoV-2 positivity remained stable and low, with some countries reporting elevated positivity (>10%) in Central America and the Caribbean, Temperate South America and Europe. Percent positivity was over 30% in a single country in South West Europe. Small increases in activity were reported in single countries in Temperate South America, Northern Europe and Southern Asia. [Figures 7 and 8]

❖ Respiratory Syncytial Virus (RSV)

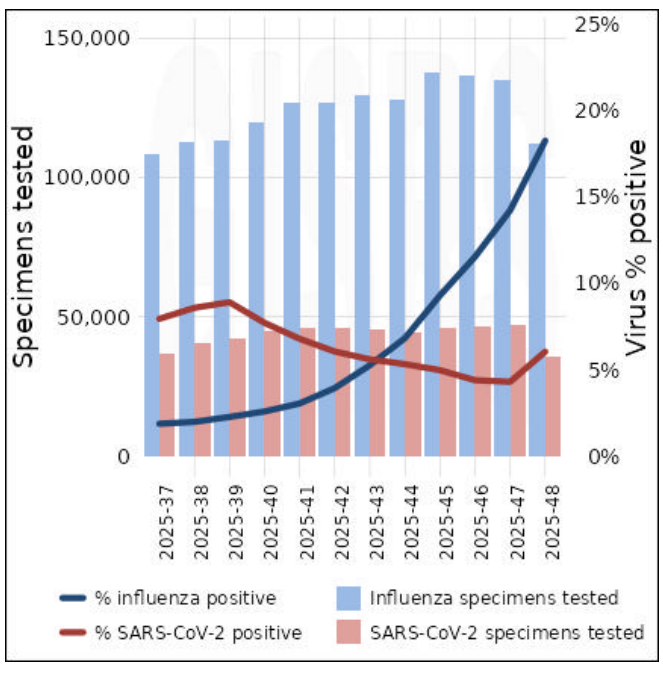
RSV activity was stable and low overall although elevated percent positivity (>10%) was reported in few countries in Central America and the Caribbean and South West Europe. Increases in activity compared to the previous reporting period were reported in few countries in Central America and the Caribbean, South West Europe and Western Asia. [Figures 9 and 10] RSV and influenza activity were both elevated in one country in South West Europe.

Co-circulation of influenza and SARS-CoV-2

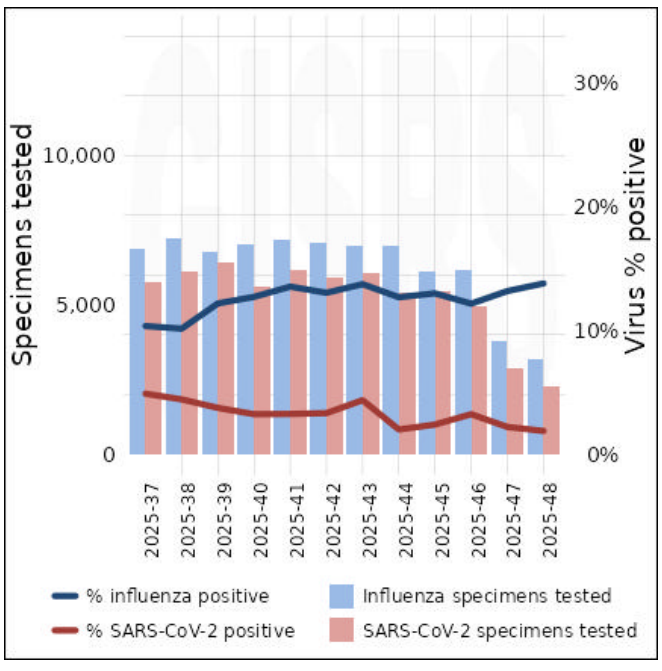
1a) Weekly numbers of influenza and SARS-CoV-2 virus specimens tested and percent positivity at the global level (last 12 months)



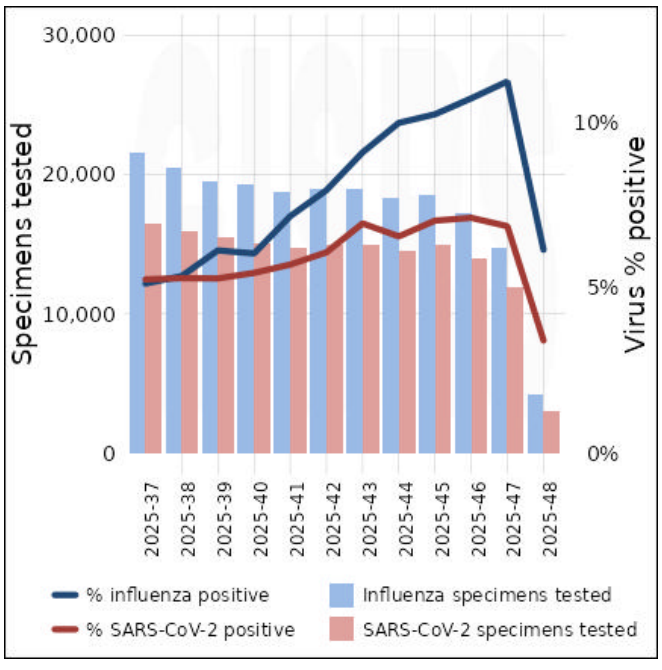
1b) Weekly numbers of influenza and SARS-CoV-2 virus specimens tested and percent positivity in Northern hemisphere temperate and subtropical areas



1c) Weekly numbers of influenza and SARS-CoV-2 virus specimens tested and percent positivity in Tropical areas

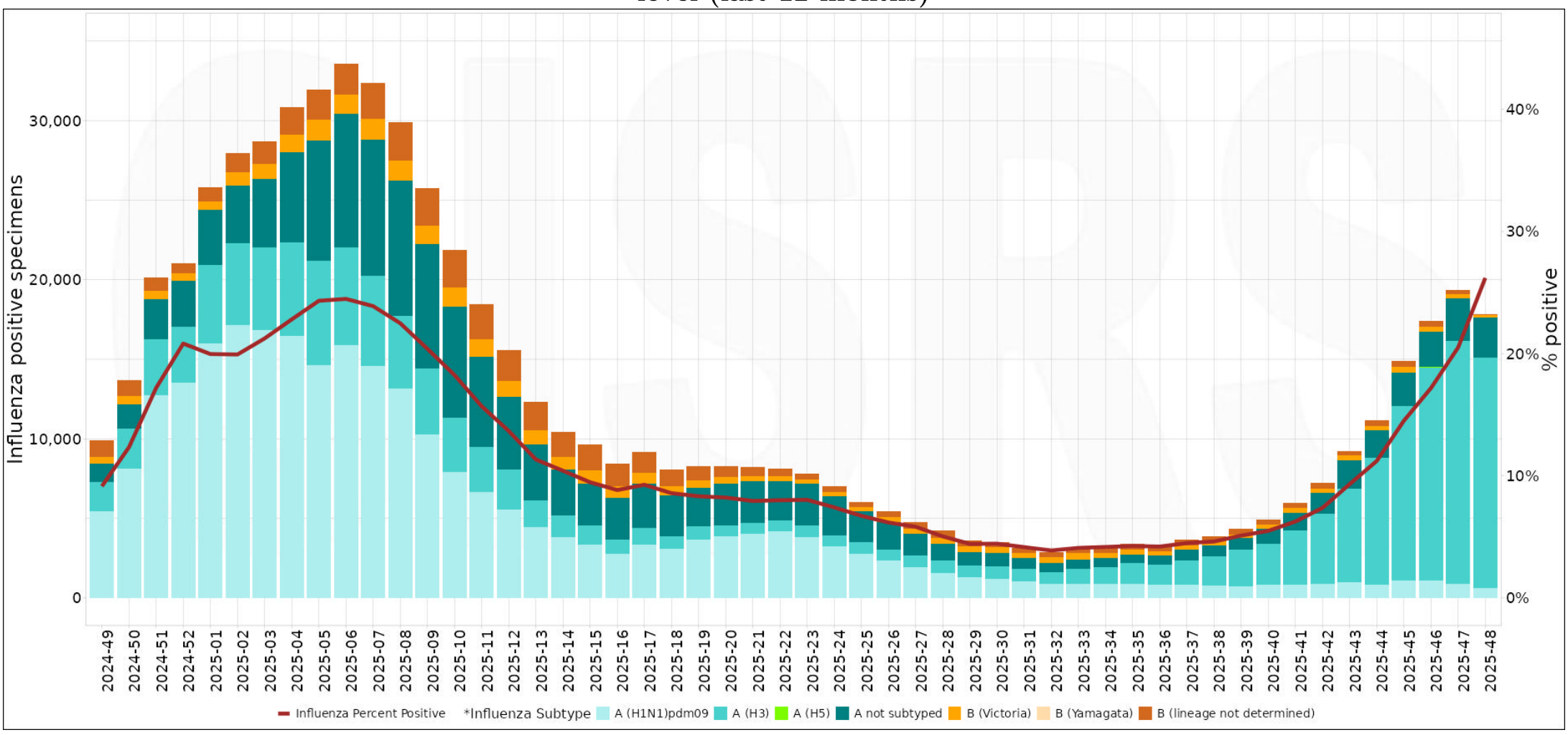


1d) Weekly numbers of influenza and SARS-CoV-2 virus specimens tested and percent positivity in Southern hemisphere temperate and subtropical areas

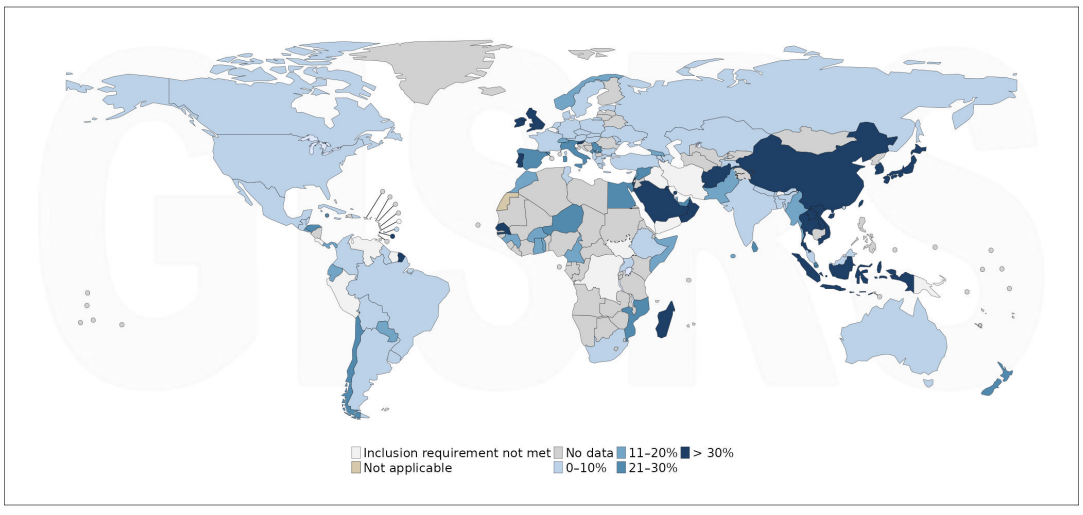


Influenza

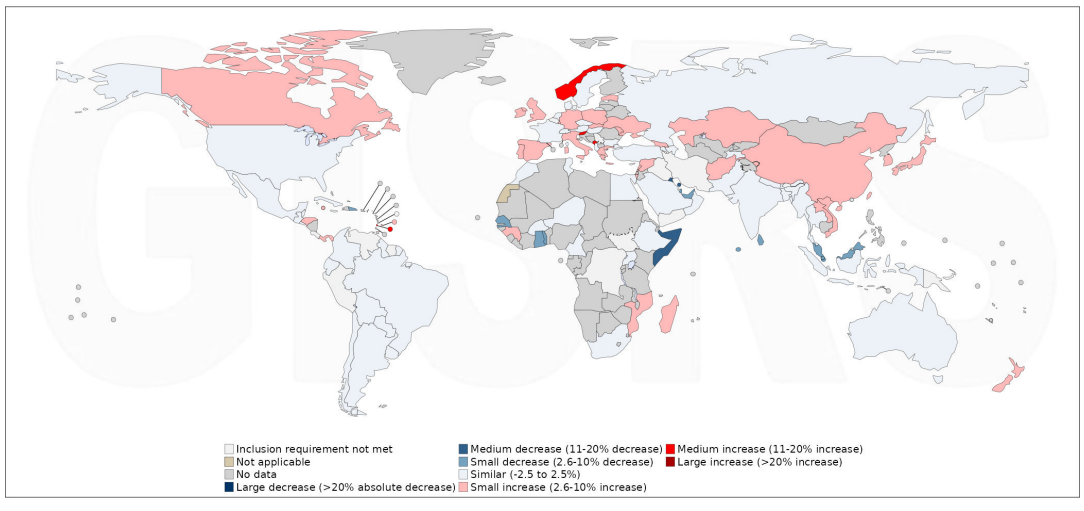
2) Weekly numbers of influenza virus positive specimens by type and subtype and percent positivity at the global level (last 12 months)



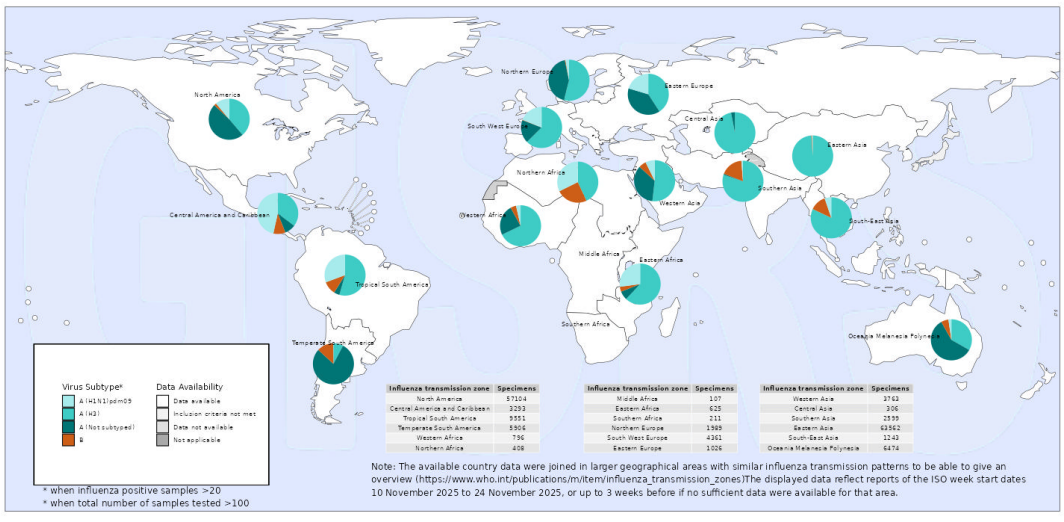
3) Proportions of specimens that tested positive for influenza (year-week: 2025-48)



4) Change in proportions of specimens that tested positive for influenza (year-week: 2025-48)



5) Proportions of influenza virus types and subtypes by influenza transmission zones (year-week: 2025-48)

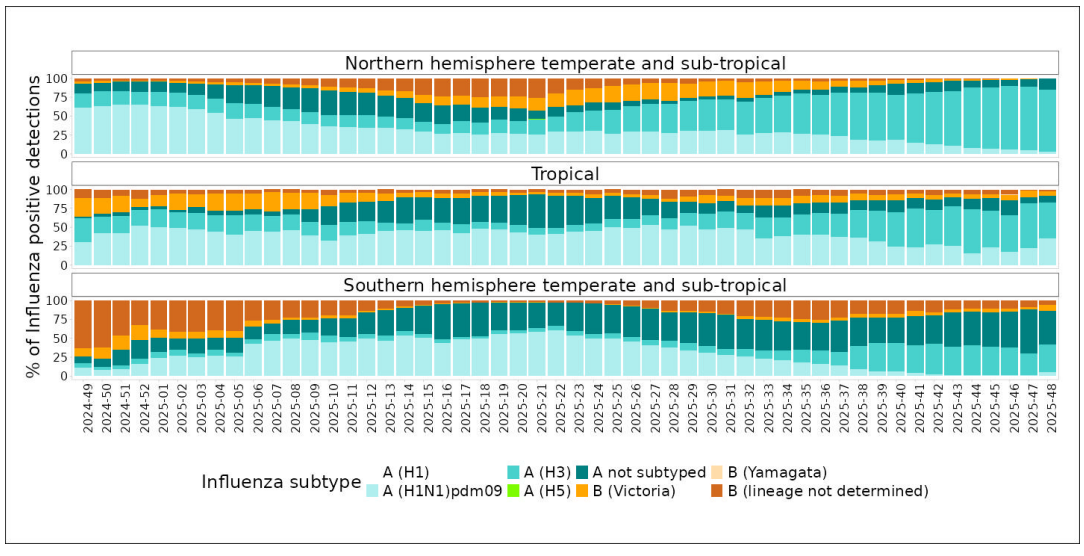


Influenza transmission zone	Specimens
North America	5710
Central America and Caribbean	3293
Tropical South America	9551
Temperate South America	5904
Western Africa	796
Northern Africa	408

Influenza transmission zone	Specimens
Middle Africa	107
Eastern Africa	625
Southern Africa	211
Northern Europe	1565
South West Europe	4361
Eastern Europe	1026

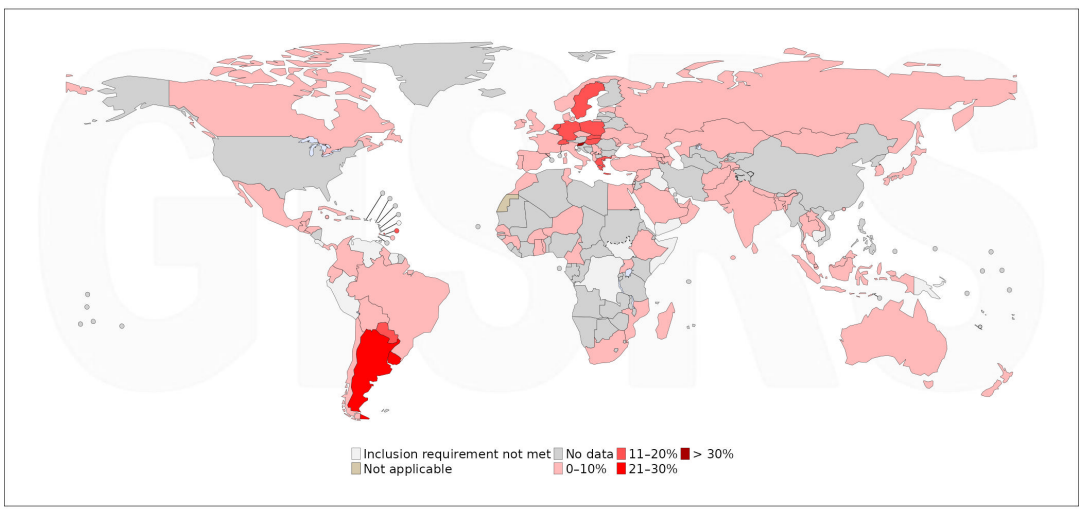
Influenza transmission zone	Specimens
Western Asia	3763
Central Asia	306
Southern Asia	2599
Eastern Asia	63561
South-East Asia	1243
Oceania Melanesia Polynesia	6474

6) Weekly distribution of influenza virus types and subtypes by geographic zone (last 12 months)

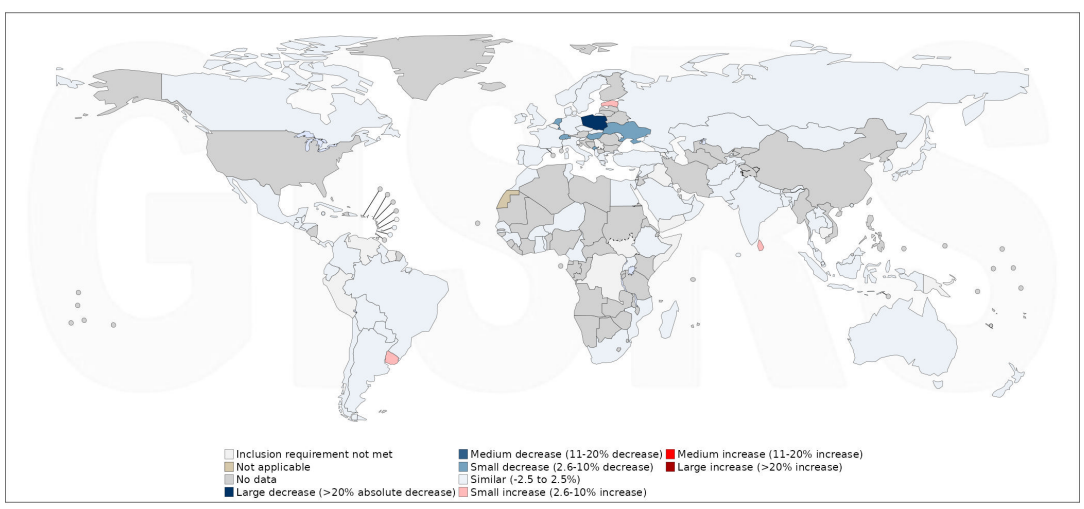


SARS-CoV-2

7) Proportions of specimens that tested positive for SARS-CoV-2 (year-week: 2025-48)

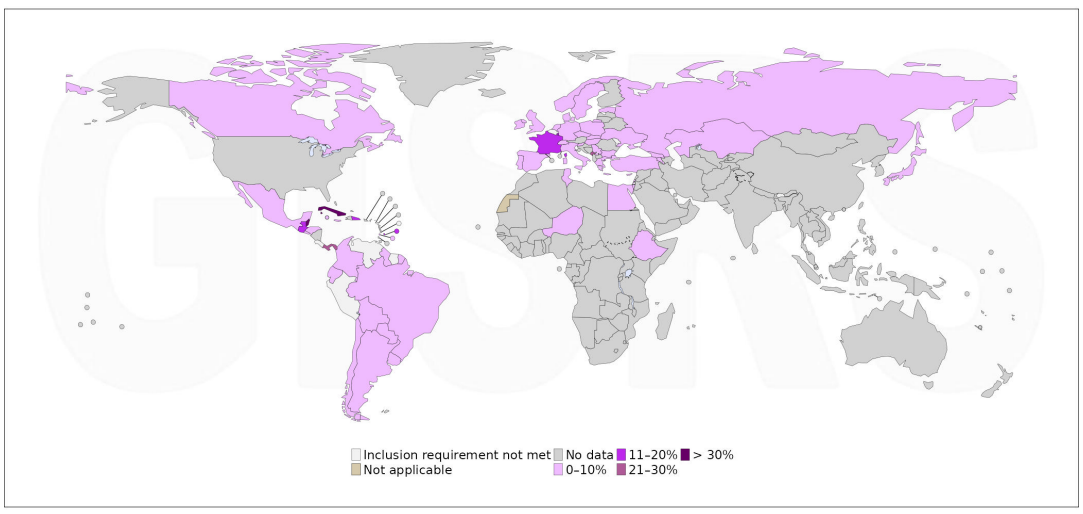


8) Change in proportions of specimens that tested positive for SARS-CoV-2 (year-week: 2025-48)

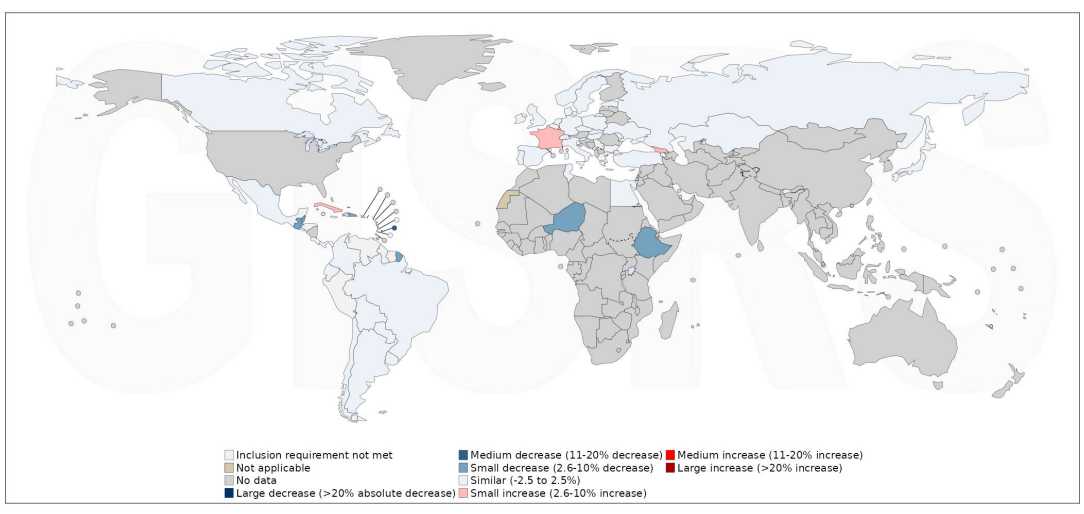


Respiratory syncytial virus

9) Proportions of specimens that tested positive for RSV (year-week: 2025-48)



10) Change in proportions of specimens that tested positive for RSV (year-week: 2025-48)



Additional information

Data and methods

The data presented in this report originates from virologic surveillance conducted by countries, areas, and territories (CATs) and submitted to WHO FluNet through participation or collaboration with the Global Influenza Surveillance and Response System (GISRS). These CATs employ diverse methodologies to monitor respiratory virus activity, which may result in variations between this report and other surveillance summaries published elsewhere.

This report includes virologic data from both **sentinel surveillance and other systematically conducted surveillance**. Due to differences in surveillance strategies, direct comparisons of percent positivity between CATs should be interpreted with caution. The data source used for each CAT was decided jointly corresponding with WHO Regional Offices and the respective reporting entity.

To assess trends, the proportion of specimens tested positive for influenza or SARS-CoV-2 was smoothed over a 3-weeks period. This analysis includes only countries that tested 10 or more specimens in at least two of the three weeks. Weekly changes in the smoothed positivity rate for each virus were calculated as absolute differences from the previous week. These absolute changes were categorized and visualized in the proportion change maps. Analyses stratified by source of surveillance are available through RespiMart.

The influenza transmission zones map is based on data aggregated over a 3-weeks period, moving backward from the current week until a minimum threshold of 100 tested samples is reached within each influenza transmission zone. Pie charts are displayed on the map only if the total percent positivity in a influenza transmission zones map is 20% or higher. All trend analyses are based on ISO 8601 calendar week numbering.

Activity summaries are organized by geographical groupings of CATs. These groupings are intended solely for geographic reference and do not imply uniformity in respiratory virus transmission patterns within each group. It is important to note that specimens tested for influenza, SARS-CoV-2, and RSV may not originate from the same sample sources within surveillance systems.

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Summary was generated by the WHO Global Influenza Programme based on data last updated in RespiMart on December 08 2025 12:13:20 AM UTC