



Victorian Respiratory Surveillance Report

17 October 2025

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About this report

The Victorian Respiratory Surveillance Report summarises the latest surveillance information on COVID-19, influenza and respiratory syncytial virus (RSV) in Victoria. This report provides an overview of the current levels and trends of acute respiratory illness from these conditions in the community. Please see the section on How to use this report for more information.

Measurements of the greatest value for summarising respiratory illness in Victoria are presented in this report. Other systems are also reviewed by the Department of Health to understand patterns of respiratory disease in Victoria which inform the overall summaries presented.

Data are presented as at 15 October 2025 for the week ending 11 October 2025.

Each report reflects the data available at the time the report was prepared. Information may differ from previous reports as new data are received or updated.



Department
of Health

Summary

In Victoria, activity of COVID-19, influenza and RSV has decreased from winter peaks.

Increases in respiratory disease activity are typical during the winter period in Victoria. COVID-19 activity increased in May, peaked in June, and then started to decline. Trends stabilised throughout August then continued to decrease across September and early October, returning to similar levels following waves in previous years. Influenza activity increased in May and peaked in early July. This was followed by a brief decline, with activity stabilising at elevated levels from mid-July to August, before continuing to decline in September and early October. RSV activity also increased in May and peaked in early July, and has continued to steadily decline since the peak.

COVID-19

CASE TREND

Notifications have slightly decreased



TEST POSITIVITY

The percentage of tests that were positive were stable



NOTIFICATIONS LAST 12 WEEKS



Influenza

CASE TREND

Notifications have continued to decrease



TEST POSITIVITY

The percentage of tests that were positive have continued to decrease



NOTIFICATIONS LAST 12 WEEKS



RSV

CASE TREND

Notifications have continued to decrease

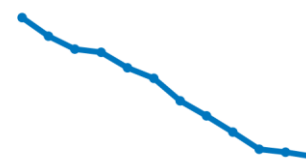


TEST POSITIVITY

The percentage of tests that were positive have continued to slightly decrease



NOTIFICATIONS LAST 12 WEEKS



Laboratory surveillance

Case notifications

Laboratory-confirmed cases of COVID-19, influenza and RSV are notified to the Victorian Department of Health. Notified infections that are diagnosed through laboratory testing are only a subset of the total number of infections in the community. Trends in notifications may be impacted by changes in testing.

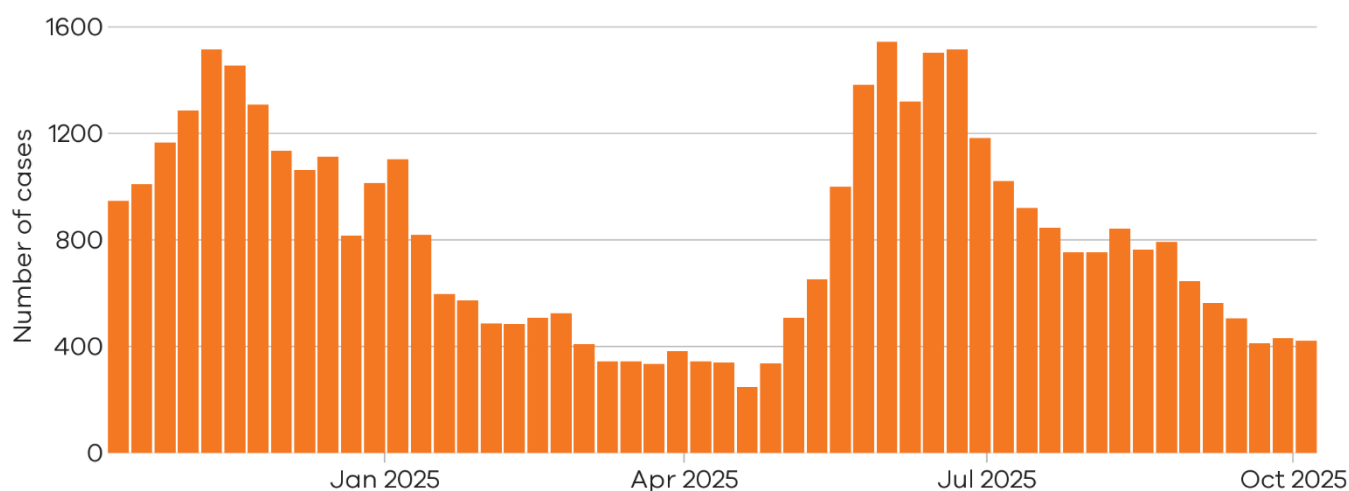
Summary

In the past week, COVID-19 notifications have slightly decreased (-3%), influenza notifications have continued to decrease (-24%) and RSV notifications have continued to decrease (-9%).

COVID-19	3% decrease	
Influenza	24% decrease	
RSV	9% decrease	

COVID-19

Figure 1: COVID-19 notified cases by week, Victoria, 13 October 2024 to 11 October 2025



There were **432** notified COVID-19 cases two weeks ago

28 Sep 2025 to 4 Oct 2025

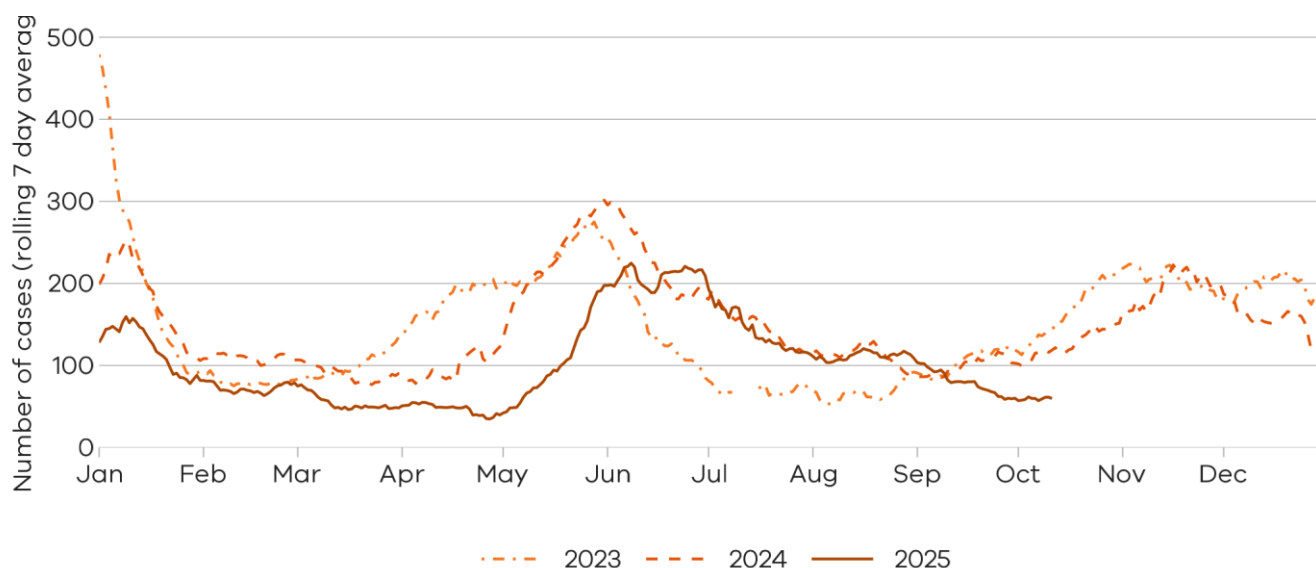
There were **418** notified COVID-19 cases last week

5 Oct 2025 to 11 Oct 2025



3% decrease

Figure 2: COVID-19 trends in notified cases (7-day rolling average), Victoria, 1 January 2023 to 11 October 2025

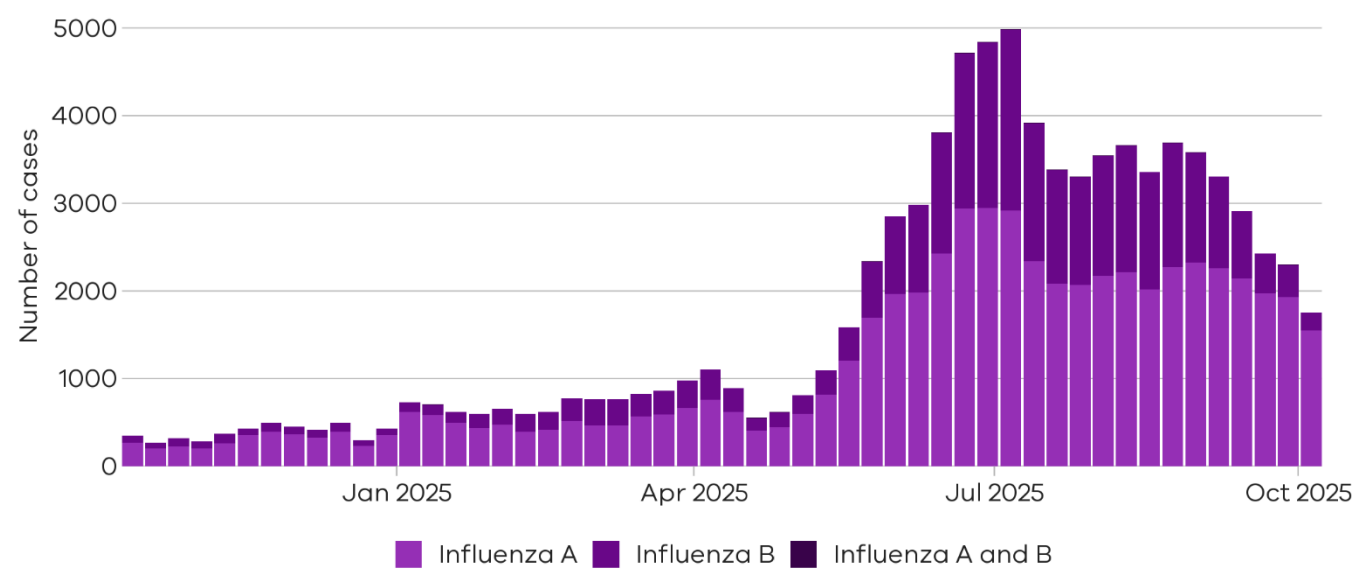


Notified COVID-19 cases are lower compared to the same time in the past two years

Influenza

Influenza notifications presented in this report are reported from a subset of laboratories in Victoria, generally comprising around 85% of total influenza notifications.

Figure 3: Influenza notified cases by week, Victoria, 13 October 2024 to 11 October 2025



There were **1928** cases of influenza A notified two weeks ago

28 Sep 2025 to 4 Oct 2025

There were **1550** cases of influenza A notified last week

5 Oct 2025 to 11 Oct 2025


20% decrease

There were **371** cases of influenza B notified two weeks ago

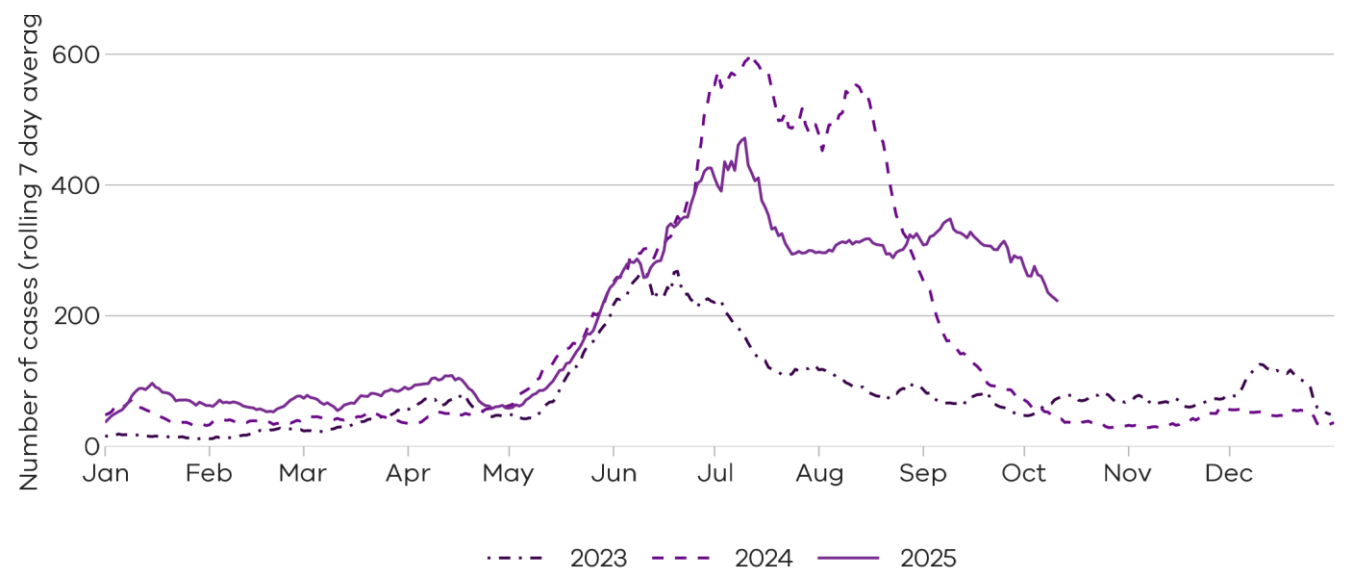
28 Sep 2025 to 4 Oct 2025

There were **203** cases of influenza B notified last week

5 Oct 2025 to 11 Oct 2025

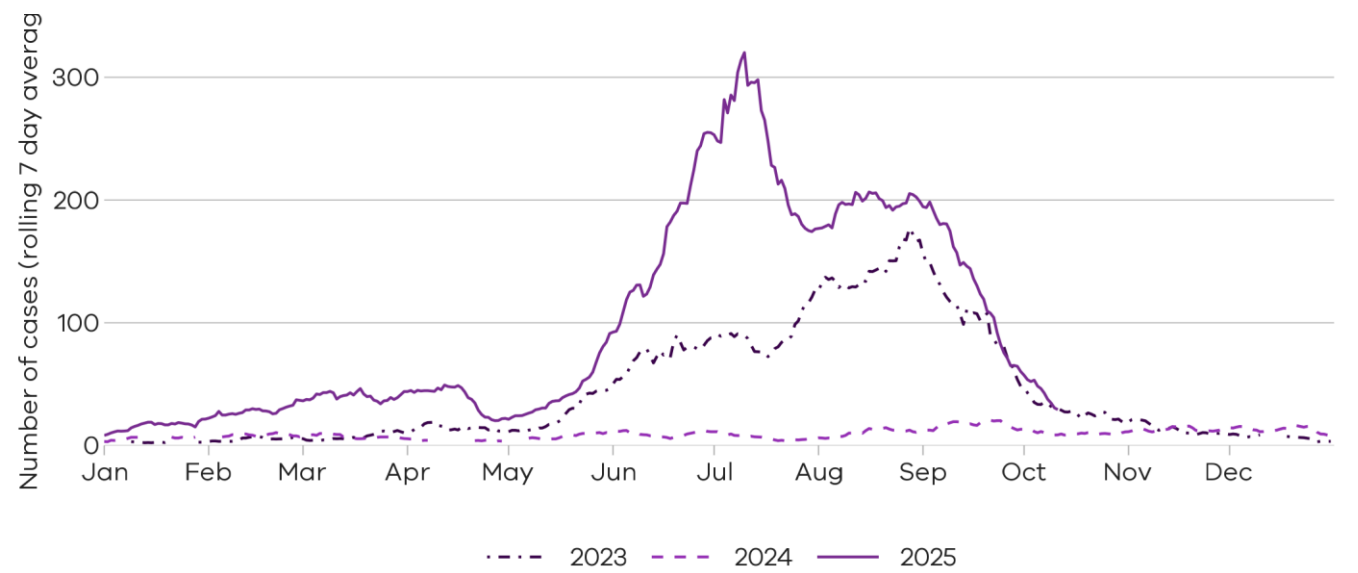

45% decrease

Figure 4: Influenza A trends in notified cases (7-day rolling average), Victoria, 1 January 2023 to 11 October 2025



i Notified influenza A cases are higher compared to the same time in the past two years

Figure 5: Influenza B trends in notified cases (7-day rolling average), Victoria, 1 January 2023 to 11 October 2025

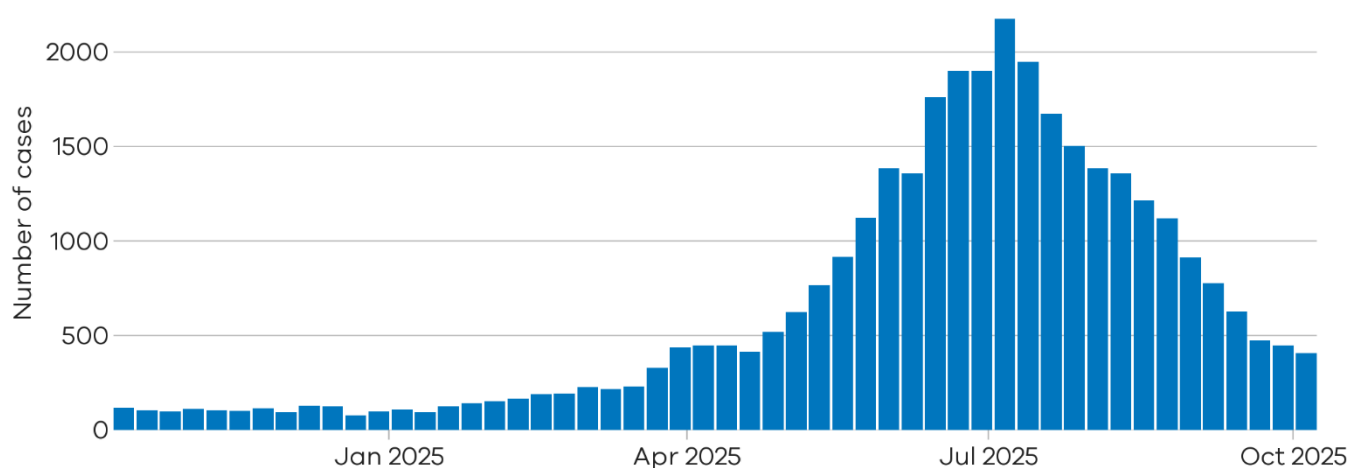


i Notified influenza B cases are similar to the same time two years ago

Respiratory Syncytial virus (RSV)

RSV notifications presented in this report are reported from a subset of laboratories in Victoria, generally comprising around 85% of total RSV notifications.

Figure 6: RSV notified cases by week, Victoria, 13 October 2024 to 11 October 2025



There were **446** notified RSV cases two weeks ago

28 Sep 2025 to 4 Oct 2025

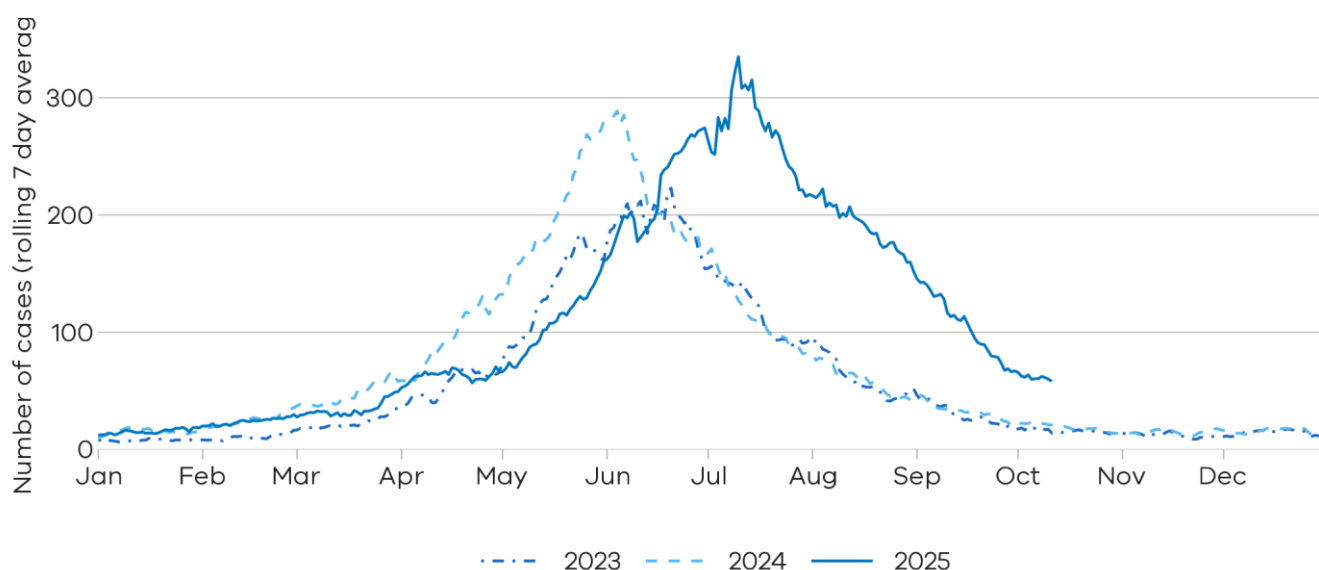
There were **408** notified RSV cases last week

5 Oct 2025 to 11 Oct 2025



9% decrease

Figure 7: RSV trends in notified cases (7-day rolling average), Victoria, 1 January 2023 to 11 October 2025

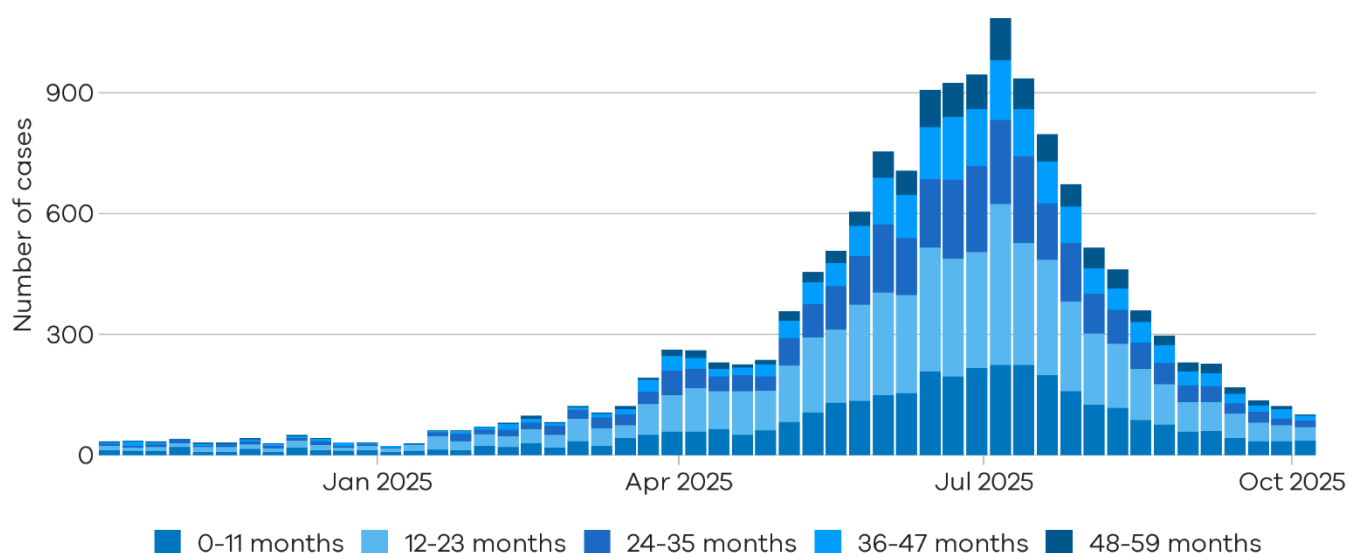


Notified RSV cases are at higher levels compared to the same time in the past two years

Young children and older adults

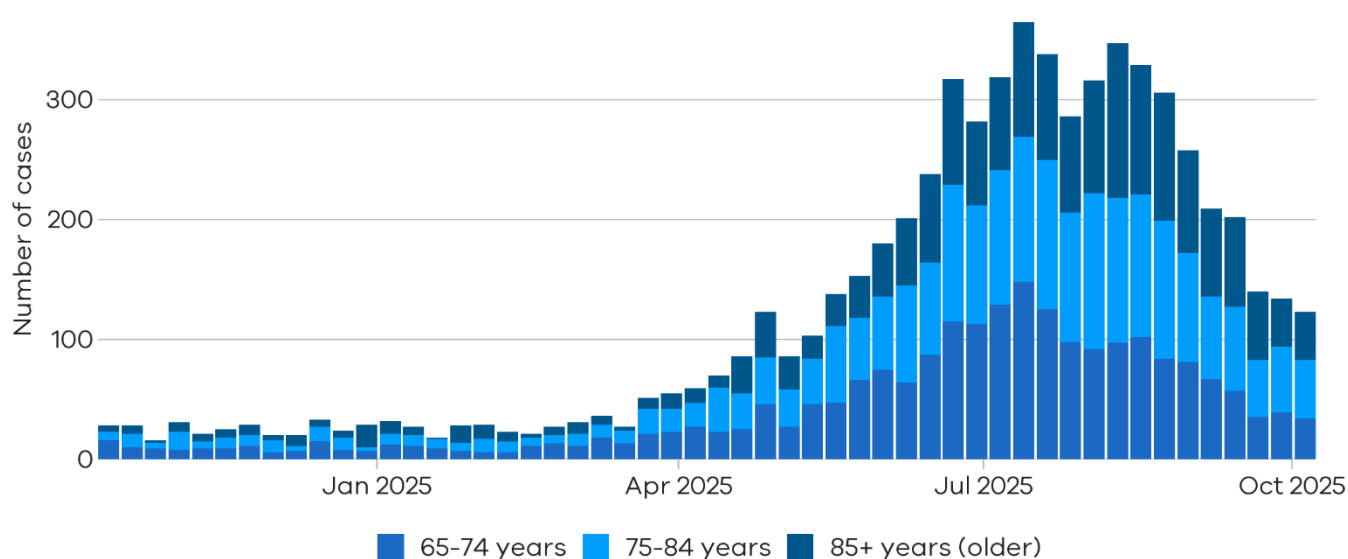
Young children and older adults are at greater risk of severe disease from RSV.

Figure 8: RSV trends in notified cases by week in young children (under 5 years), Victoria, 13 October 2024 to 11 October 2025



Children under 2 years comprise the majority of notified RSV cases in young children

Figure 9: RSV trends in notified cases by week in older adults (65+ years), Victoria, 13 October 2024 to 11 October 2025



Notified RSV cases in adults aged over 65 years have declined in the recent period

Testing

Laboratory testing for respiratory illnesses changes over time. Tracking the percentage of tests with the notifiable condition detected (i.e. test positivity) is a useful measure to understand trends in disease surveillance over time.

Test results presented in this report are from selected laboratories. These include private and hospital laboratories and represent tests completed across Victoria.

Summary

In the past week, the percentage of COVID-19 tests that were positive were stable (2.2% to 2.1%), the percentage of influenza tests that were positive have continued to decrease (7.4% to 6.2%) (influenza A: 12.4% to 11.1%; influenza B: 2.3% to 1.4%), and the percentage of RSV tests that were positive have continued to slightly decrease (3.2% to 2.9%).

Figure 10: Weekly test positivity for COVID-19, influenza and RSV, Victoria, 13 October 2024 to 11 October 2025

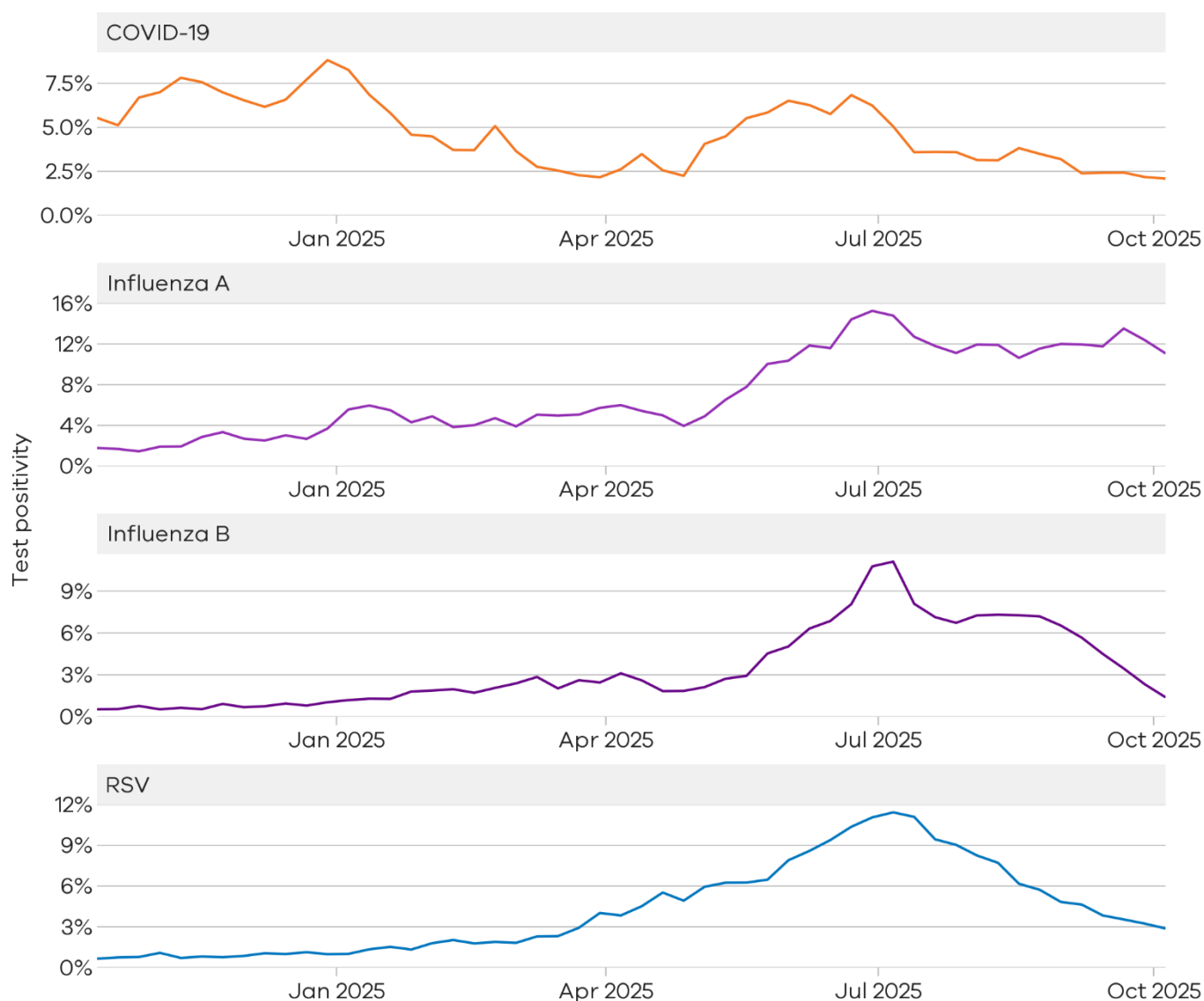
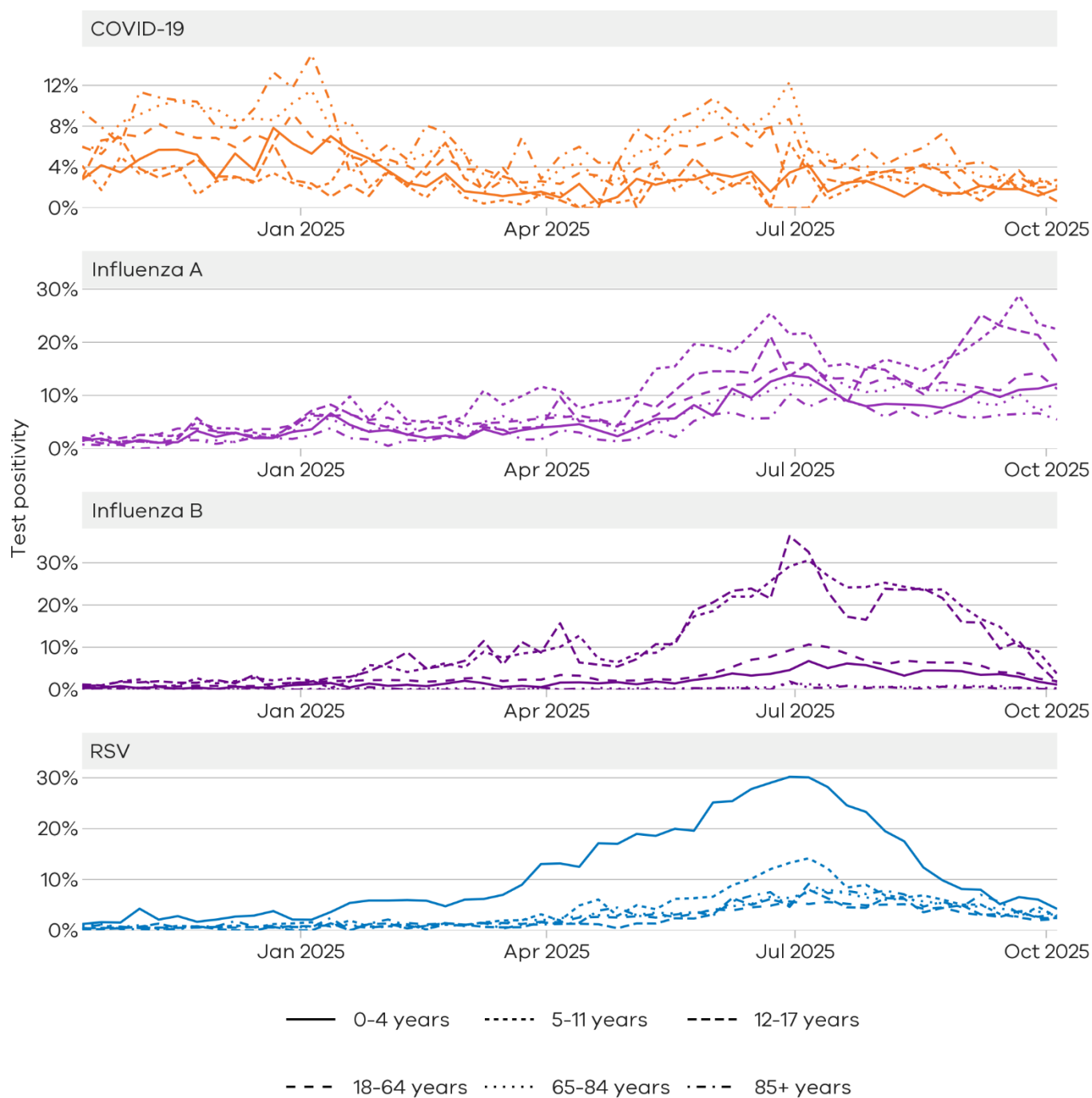


Figure 11: Weekly test positivity by age groups for COVID-19, influenza and RSV, Victoria, 13 October 2024 to 11 October 2025



Community surveillance

Respiratory illnesses are not limited to the notifiable conditions presented above. Understanding the overall burden of respiratory illness in the community is useful to understand broader trends in illness over time.

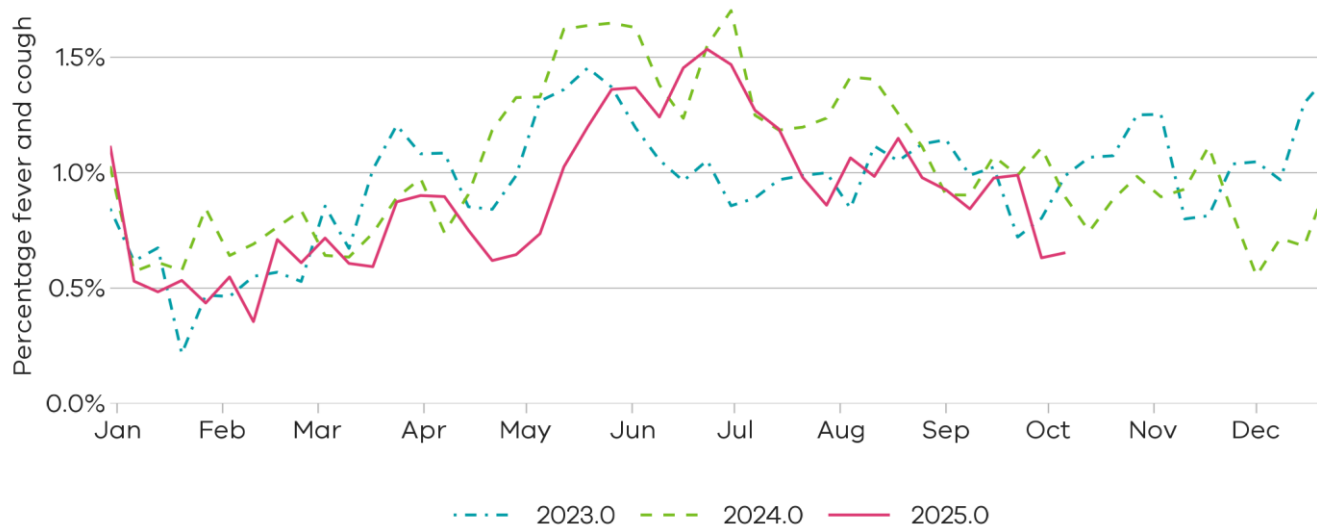
FluTracking

FluTracking is an online surveillance system across Australia, New Zealand, Hong Kong and Fiji. Volunteer participants complete a simple weekly online survey which collects self-reported information on respiratory symptoms. More information about FluTracking and ways to be involved are available here: <https://info.flutracking.net/>

Summary

In the past week, the percentage of Victorian FluTracking participants reporting respiratory illness (fever and cough) were stable from the previous week.

Figure 12: Proportion of FluTracking participants reporting respiratory illness by week, Victoria, 1 January 2023 to 12 October 2025. Respiratory illness is defined as fever & cough.



Reported respiratory illness from FluTracking is at lower levels compared to the past two years

How to use this report

Data sources

All notified cases in Victoria are recorded in the Victorian Public Health Events Surveillance System (PHESS). Under the *Public Health and Wellbeing Act 2008* and *Public Health and Wellbeing Regulations 2019*, the Victorian Department of Health is authorised to collect information from doctors and laboratories about diagnoses of certain health-related conditions in Victoria.

The FluTracking surveillance system collects data from volunteer participants in a weekly survey. FluTracking reports are available here: <https://info.flutracking.net/reports/australia-reports/>

The Victorian Department of Health continually reviews surveillance methods to monitor respiratory disease in Victoria. Measurements included in this report may be updated or removed accordingly.

Definitions

Notified cases: Laboratory-confirmed cases of COVID-19, influenza, and RSV are reported according to the CDNA case definitions <https://www.health.gov.au/resources/collection/s/cdna-surveillance-case-definitions/> Where multiple positive test results are received for the same person within 30 days of the initial test result they are counted as a single case.

Rapid antigen test results are not collected by the Victorian Department of Health, however, remain an important tool for individuals to access treatment and protect their community.

Case notifications are included in the Victorian dataset if the postcode of residence of the case is in Victoria. This does not necessarily reflect where the infection was acquired.

Test positivity: Test positivity is the percentage of total tests where the notifiable condition was detected. This is reported by the date of specimen collection.

Dates: Case notifications are based on the date the notification was first received by the Victorian Department of Health. Test positivity is based on the date of specimen collection.

Weeks: For the purposes of this report, data are aggregated by week, with the week starting Sunday and ending Saturday unless otherwise specified.

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