Victorian Respiratory Surveillance Report

12 December 2025

Contents

VICTORIA State Government | Department of Health

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 10 December 2025 for the week ending 6 December 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.

Summary

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

COVID-19 activity has gradually increased since mid-October, following a period of low activity after the winter peak. Influenza activity remains elevated in Victoria and is higher than typically observed at this time of year. This is likely driven by influenza A/H3N2 which increased in Victoria from July and has continued to circulate through spring and into summer. Trends in recent weeks indicate overall influenza notifications are declining, with A/H3N2 cases currently decreasing in Victoria. RSV activity has returned to typical levels for this time of year, after peaking in early July.

COVID-19

CASE TREND

Notifications have increased

TEST POSITIVITY

The percentage of tests that were positive were stable

NOTIFICATIONS LAST 12 WEEKS

Influenza

CASE TREND

Notifications have slightly decreased

TEST POSITIVITY

The percentage of tests that were positive have decreased

NOTIFICATIONS LAST 12 WEEKS

RSV

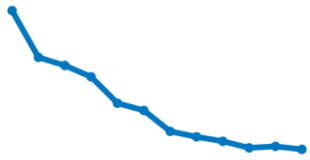
CASE TREND

Notifications have decreased

TEST POSITIVITY

The percentage of tests that were positive have slightly increased

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.

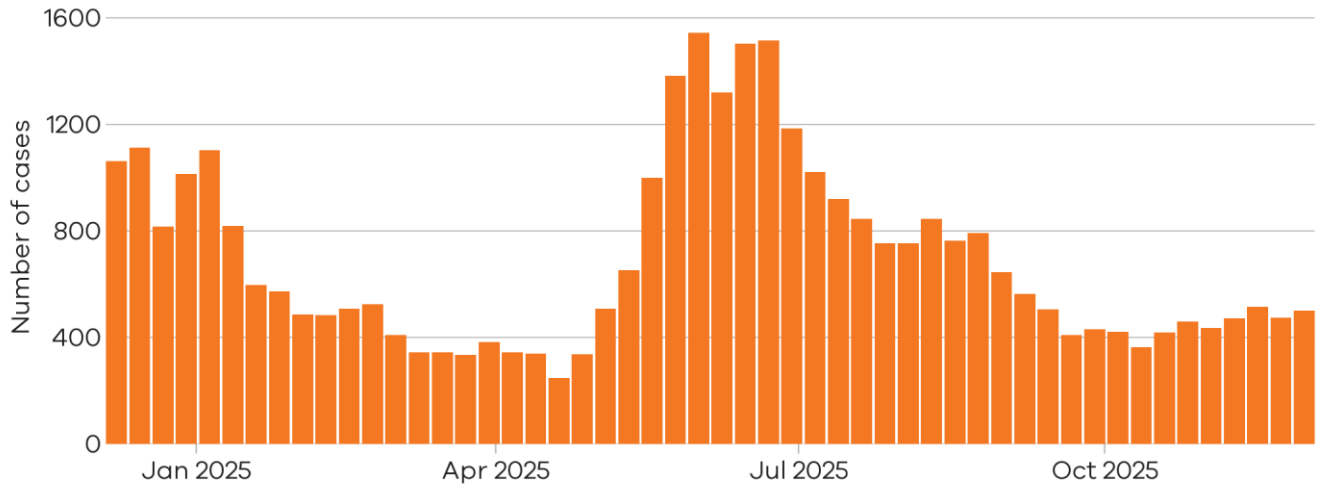
Summary

In the past week, COVID-19 notifications have increased (+6%), influenza notifications have slightly decreased (-4%) and RSV notifications have decreased (-6%).

COVID-19	**6%** increase	↗
Influenza	**4%** decrease	↘
RSV	**6%** decrease	↘

COVID-19

Figure 1: COVID-19 notified cases by week, Victoria, 8 December 2024 to 6 December 2025



There were **473** notified COVID-19 cases two weeks ago

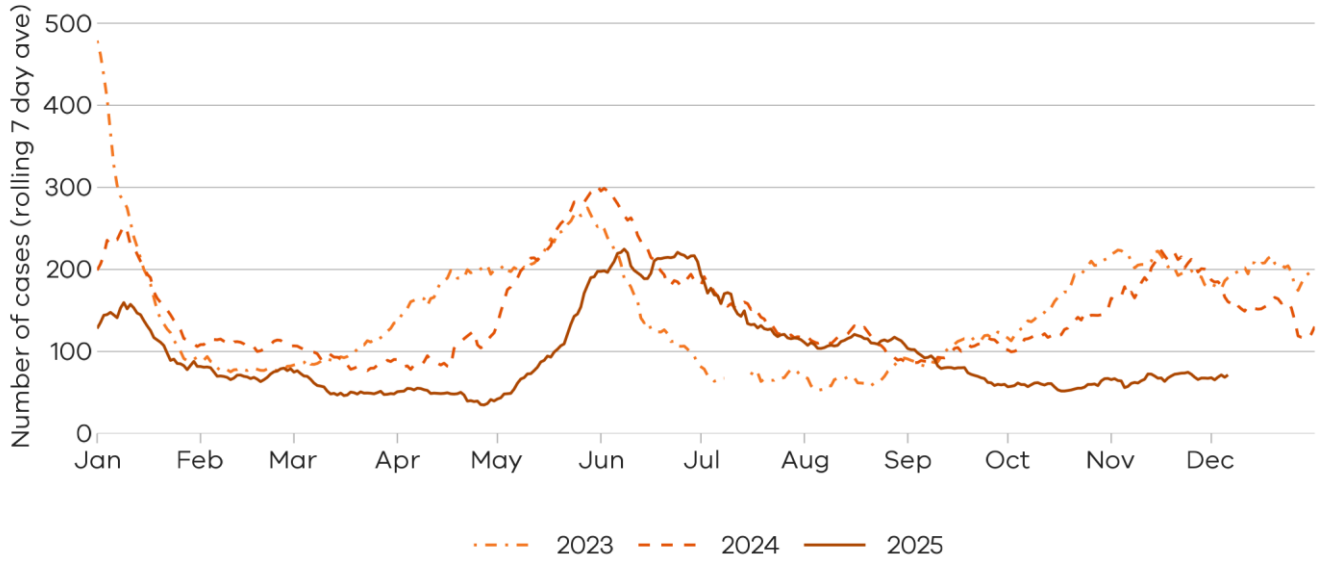
23 Nov 2025 to 29 Nov 2025

There were **500** notified COVID-19 cases last week

30 Nov 2025 to 6 Dec 2025

6% increase

Figure 2: COVID-19 trends in notified cases (7-day rolling average), Victoria, 1 January 2023 to 6 December 2025

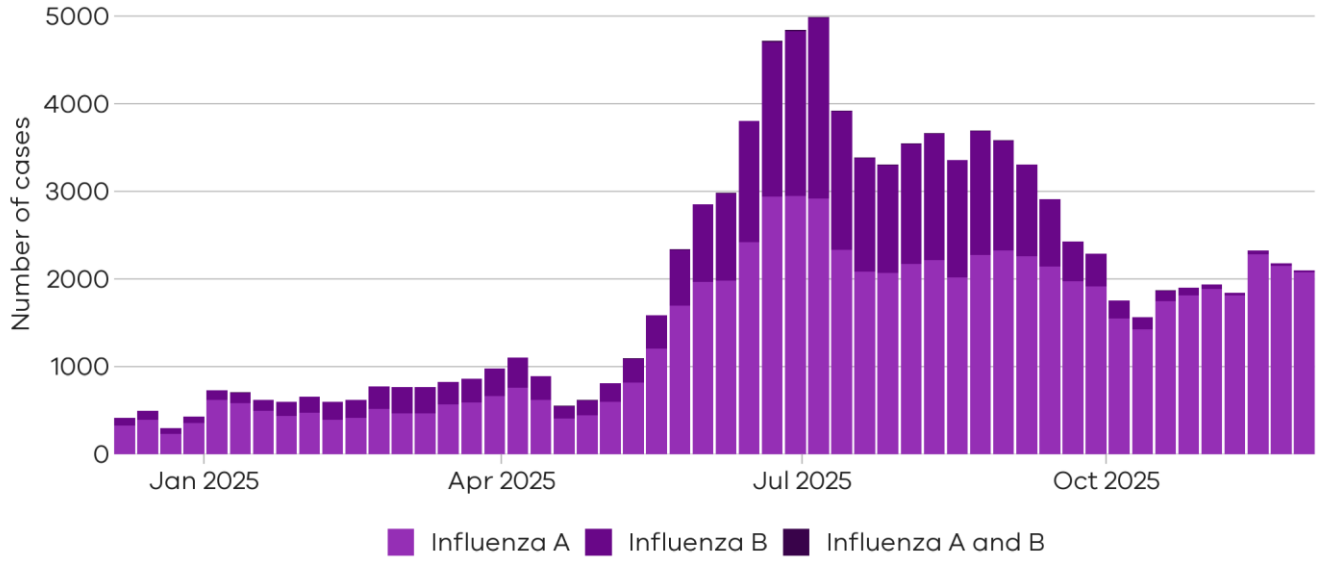


Notified COVID-19 cases are lower than the same time in the past two years

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, 8 December 2024 to 6 December 2025



There were **2148** cases of influenza A notified two weeks ago

23 Nov 2025 to 29 Nov 2025

There were **2073** cases of influenza A notified last week

30 Nov 2025 to 6 Dec 2025

3% decrease

There were **28** cases of influenza B notified two weeks ago

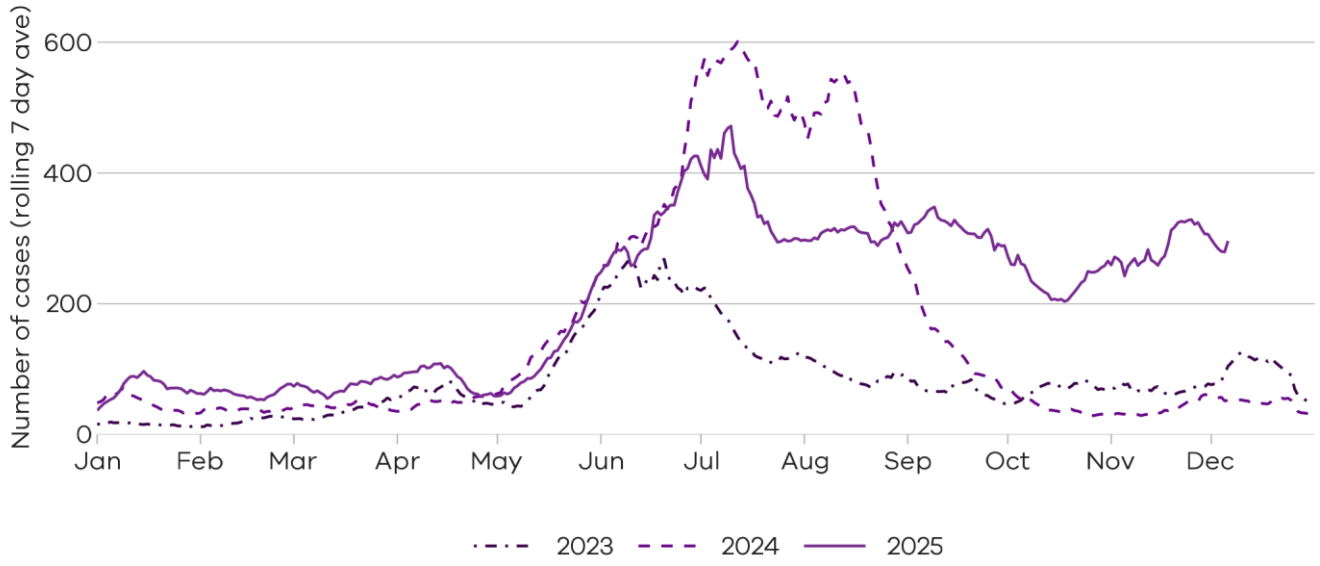
23 Nov 2025 to 29 Nov 2025

There were **22** cases of influenza B notified last week

30 Nov 2025 to 6 Dec 2025

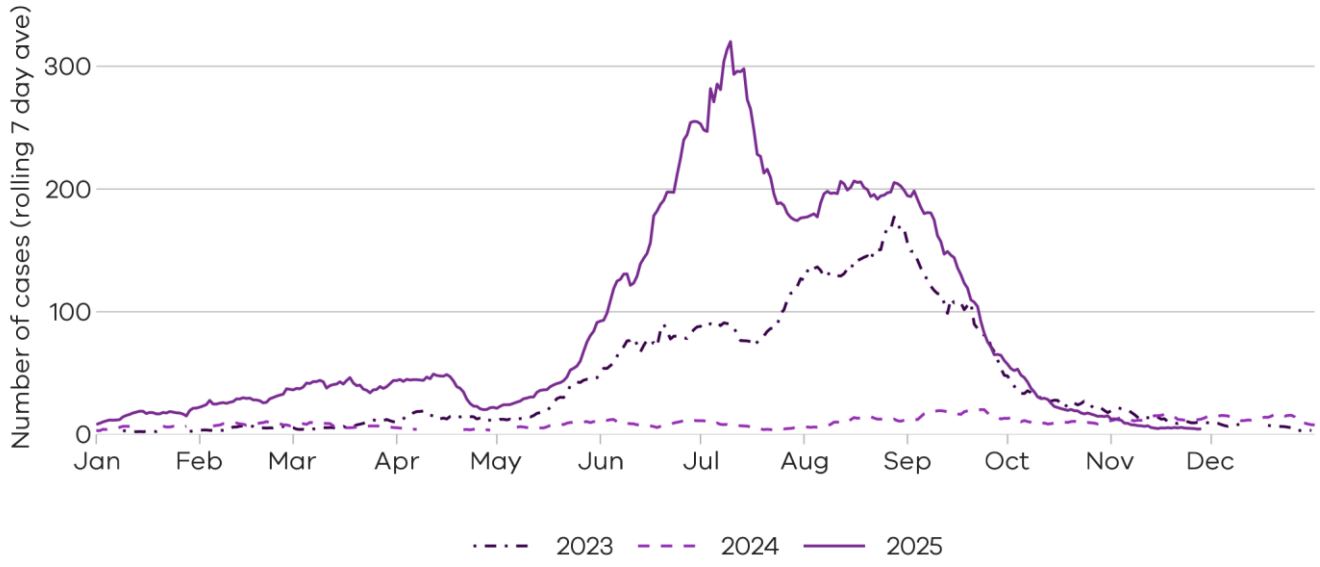
21% decrease

Figure 4: Influenza A trends in notified cases (7-day rolling average), Victoria, 1 January 2023 to 6 December 2025



Notified influenza A cases remain significantly higher than 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 6 December 2025

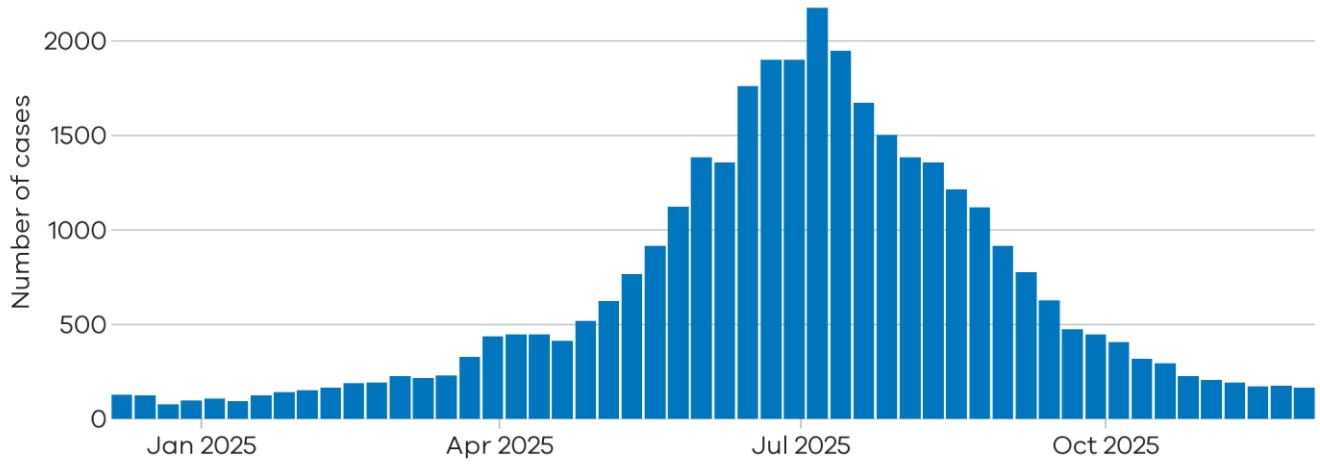


Notified influenza B cases have returned to low levels, similar to levels in the past two years

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, 8 December 2024 to 6 December 2025



There were **176** notified RSV cases two weeks ago

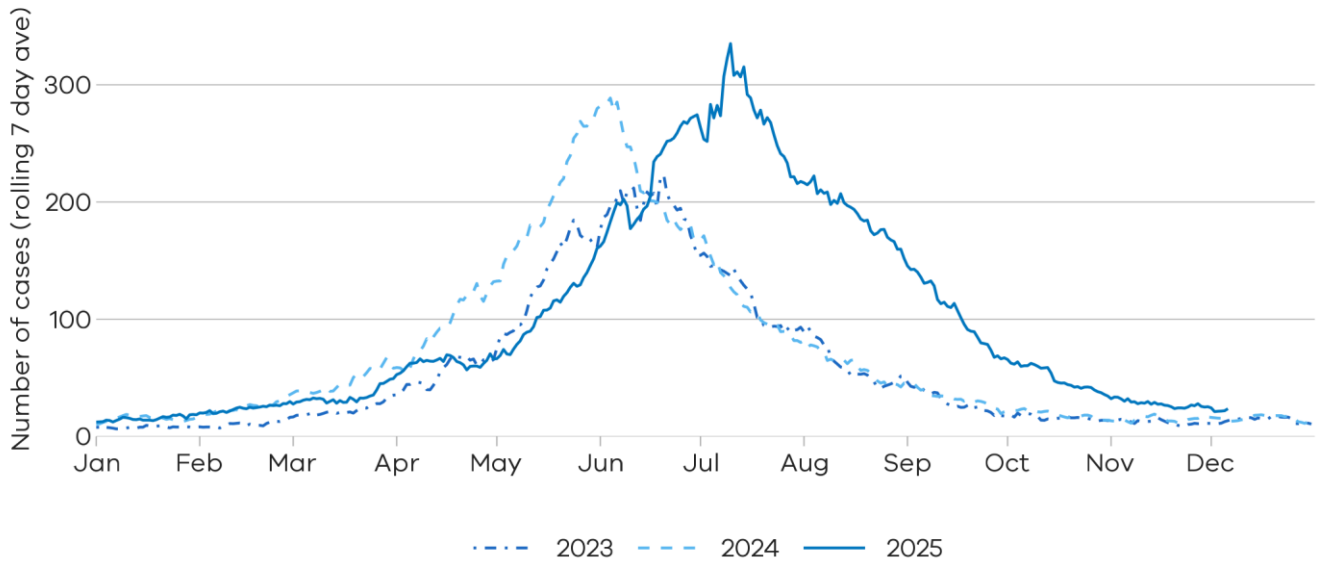
23 Nov 2025 to 29 Nov 2025

There were **166** notified RSV cases last week

30 Nov 2025 to 6 Dec 2025

6% decrease

Figure 7: RSV trends in notified cases (7-day rolling average), Victoria, 1 January 2023 to 6 December 2025

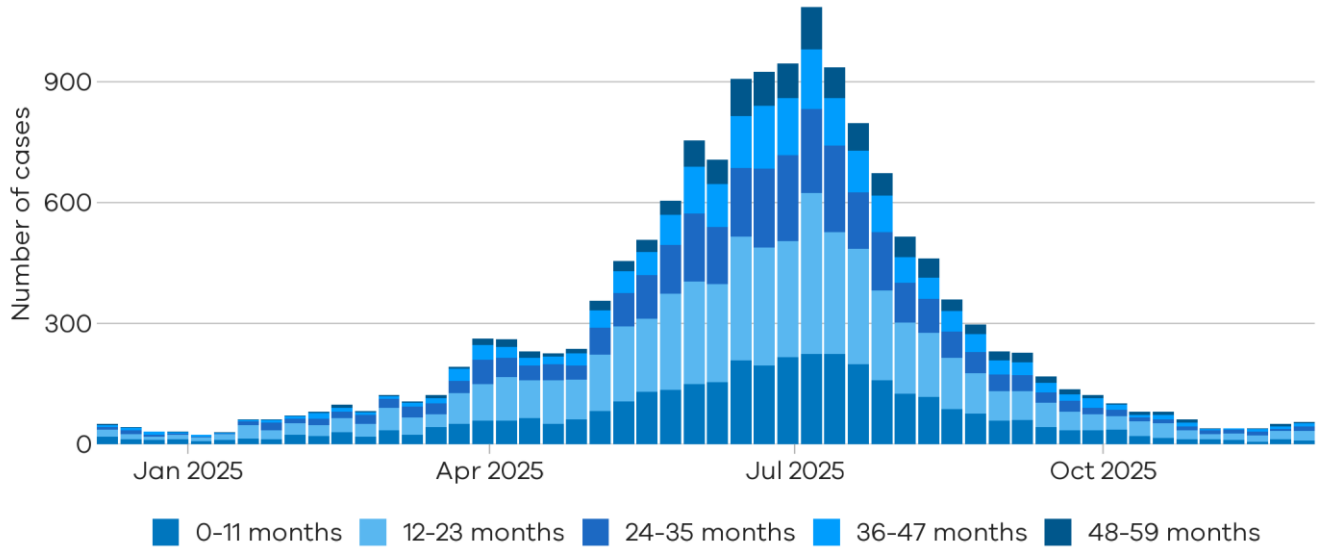


Notified RSV cases have returned to inter-seasonal levels, similar to levels in the past two years

Young children and older adults

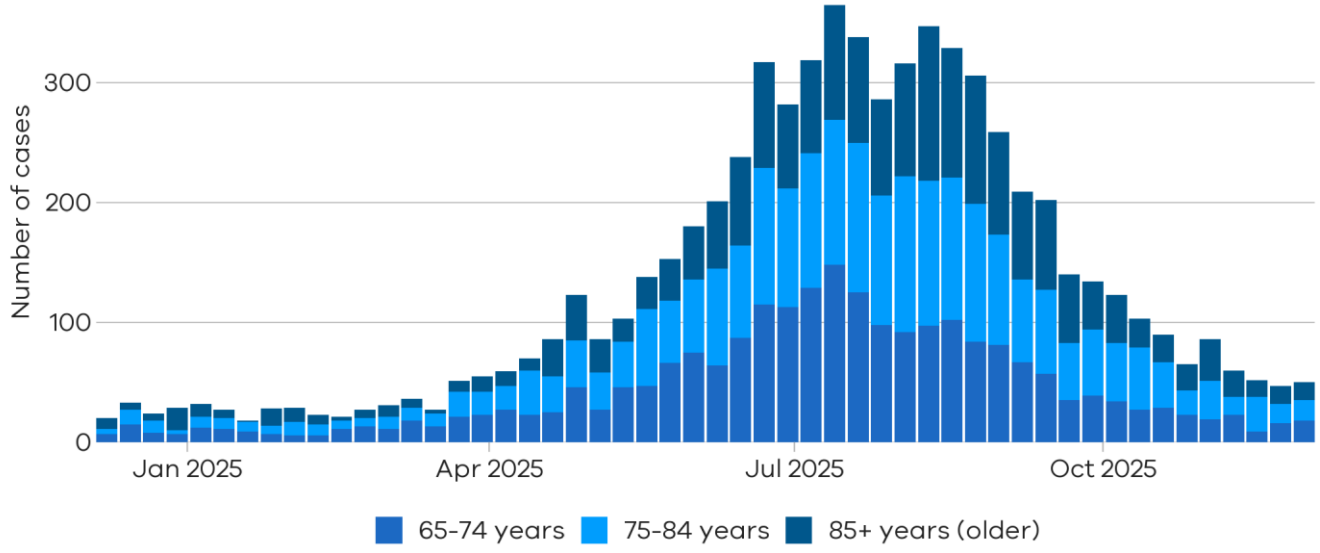
Young children and older adults are at greater risk of severe disease from RSV.

Figure 8: RSV trends in notified cases by week in young children (under 5 years), Victoria, 8 December 2024 to 6 December 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, 8 December 2024 to 6 December 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 (2.4% to 2.5%), the percentage of influenza tests that were positive have decreased (8.0% to 7.3%) (influenza A: 15.7% to 14.5%; influenza B: 0.2% to 0.2%), and the percentage of RSV tests that were positive have slightly increased (1.1% to 1.4%).

Figure 10: Weekly test positivity for COVID-19, influenza and RSV, Victoria, 8 December 2024 to 6 December 2025

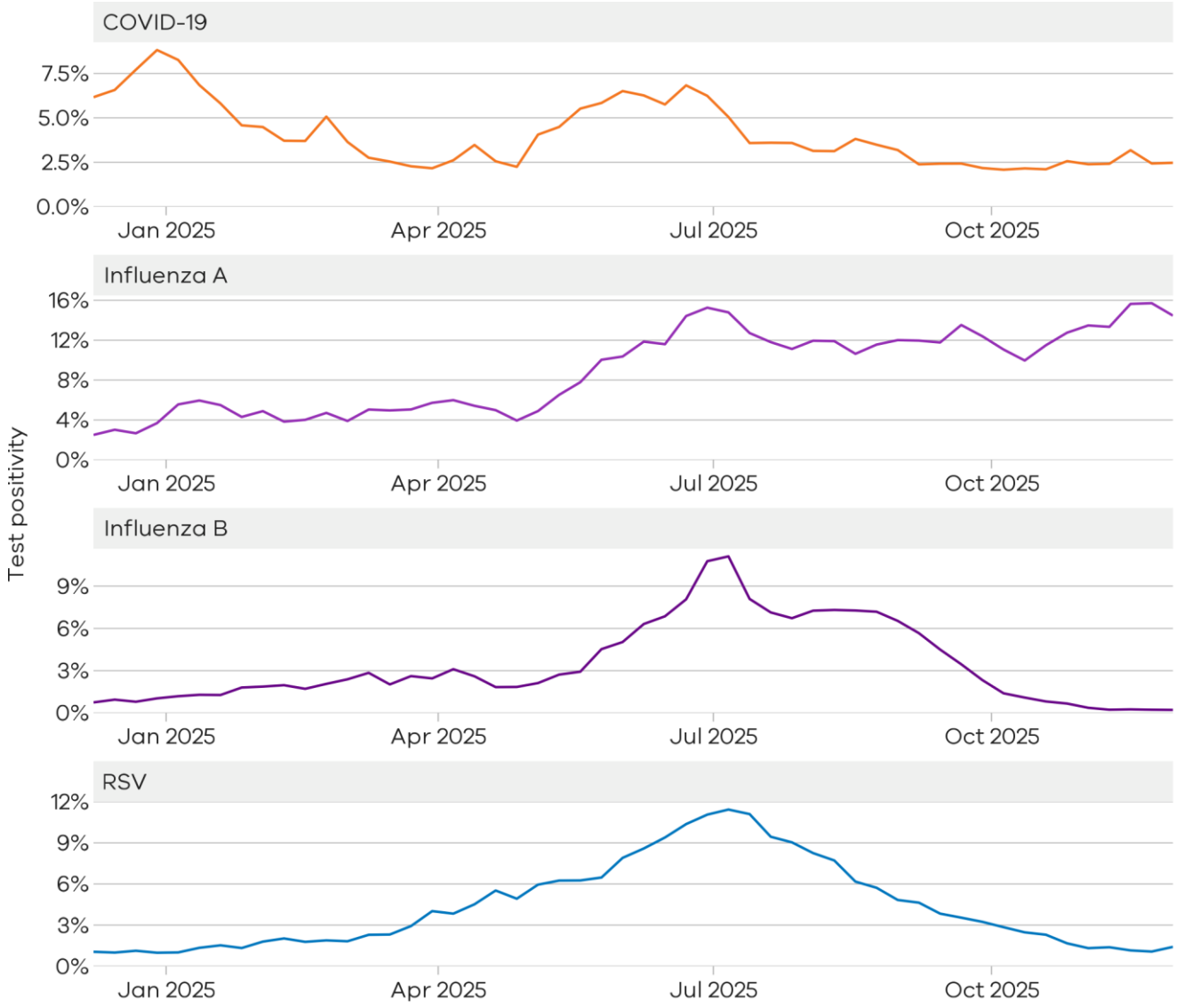
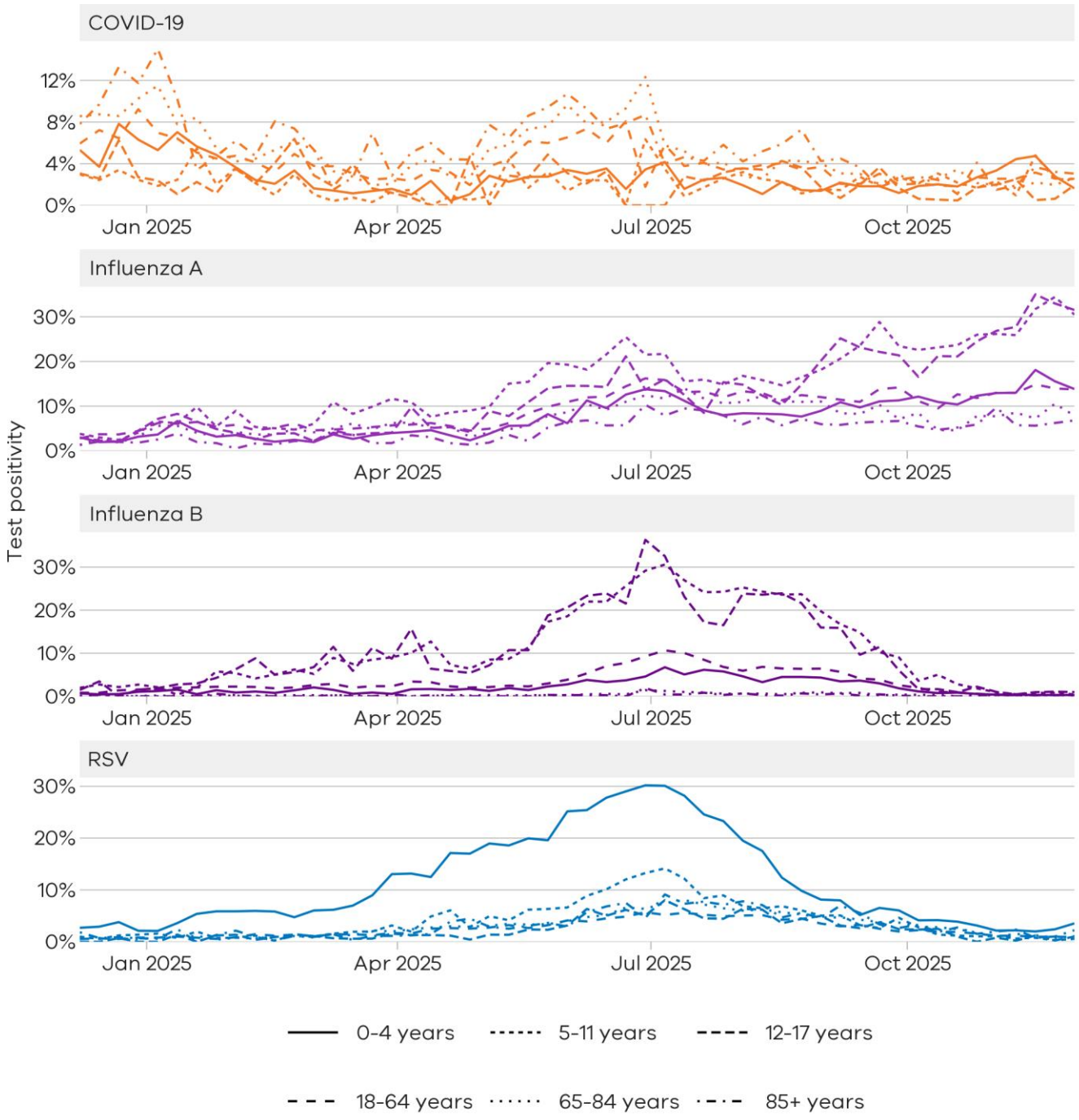


Figure 11: Weekly test positivity by age groups for COVID-19, influenza and RSV, Victoria, 8 December 2024 to 6 December 2025



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.

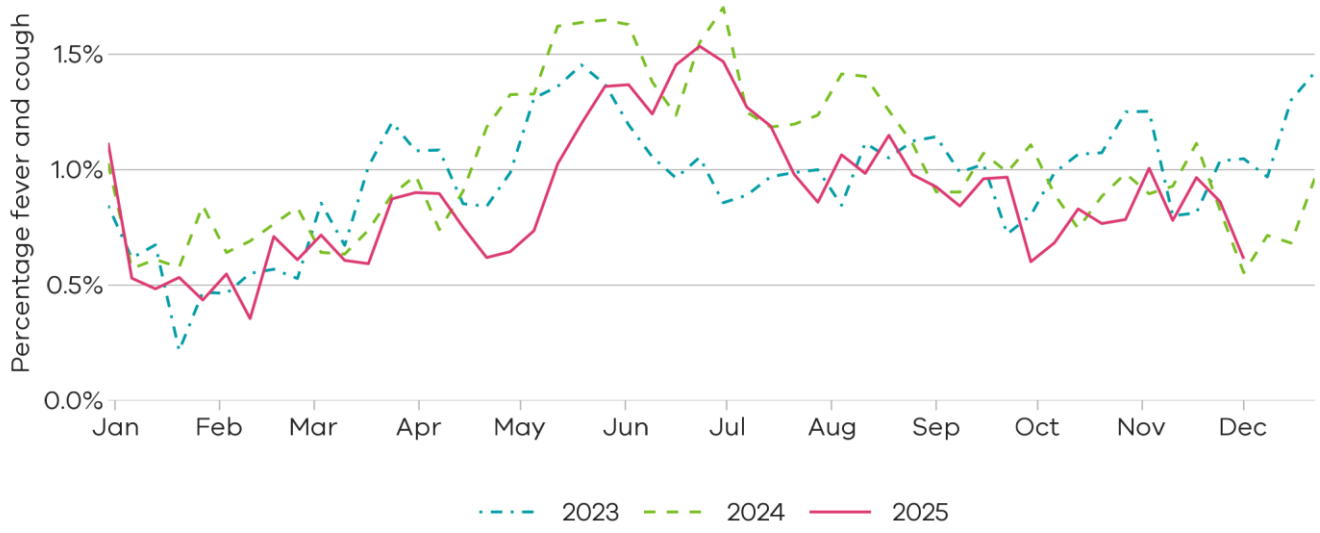
FluTracking

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. Data used in this report are received up to 12:00PM Tuesday. 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) have decreased from the previous week.

Figure 12: Proportion of FluTracking participants reporting respiratory illness by week, Victoria, 1 January 2023 to 7 December 2025. Respiratory illness is defined as fever & cough.



Reported respiratory illness from FluTracking is at similar levels compared to last year

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/collections/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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