



BI-WEEKLY INFLUENZA EPIDEMIOLOGY REPORT

21 AUGUST 2025

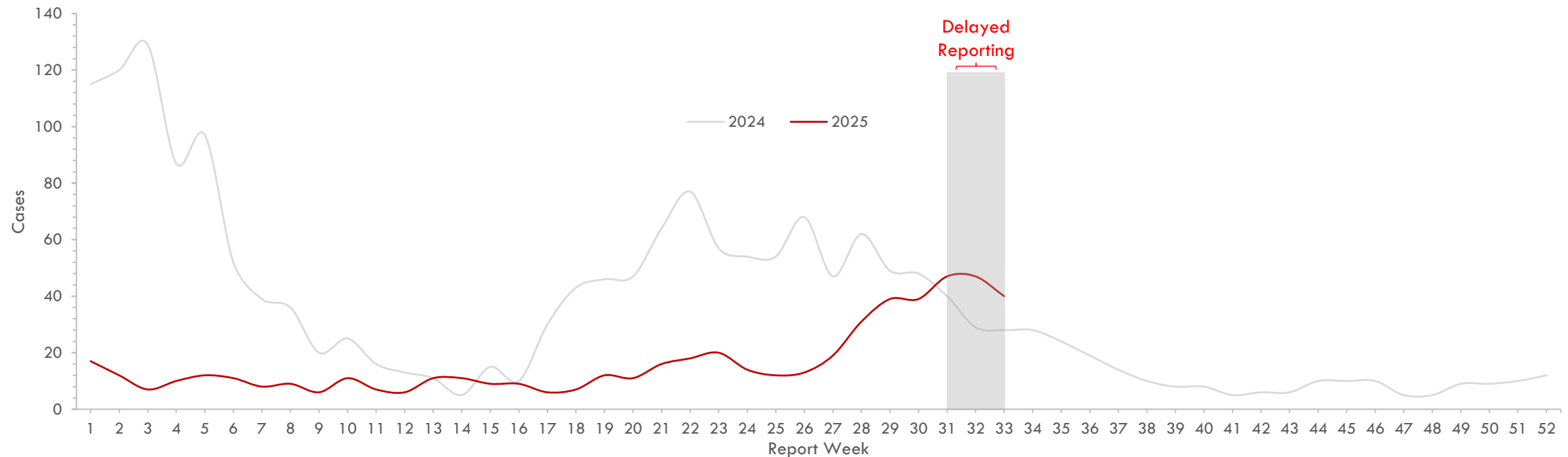


COVID-19 || Special Report

KEY POINTS

- **Figure SR1³** illustrates the number of COVID-19 cases detected by the DPHSS for the year 2024 and 2025.
- COVID-19 has yet to demonstrate predictability in Guam, but in recent weeks DPHSS has observed activity levels that almost aligns with what was seen in 2024.
- This increase in activity has been expected and viral respiratory guidance and prevention measures have been encouraged.
- Although the recent weeks illustrate agreement with trends observed in 2024, consideration for testing behavior differences between years may indicate greater community spread.

Figure SR1. Weekly COVID-19 case detections in Guam, 2024-2025.



Influenza || Nationwide ILI Situation

KEY POINTS

- Jurisdictions nationwide continue to report very minimal influenza-like illness (ILI) activity as of 02 August 2025 (**Figure 1**).
- The low activity has remained consistent since the first week of June 2025.

Figure 1. ILI activity map for MMWR weeks 28-32.¹

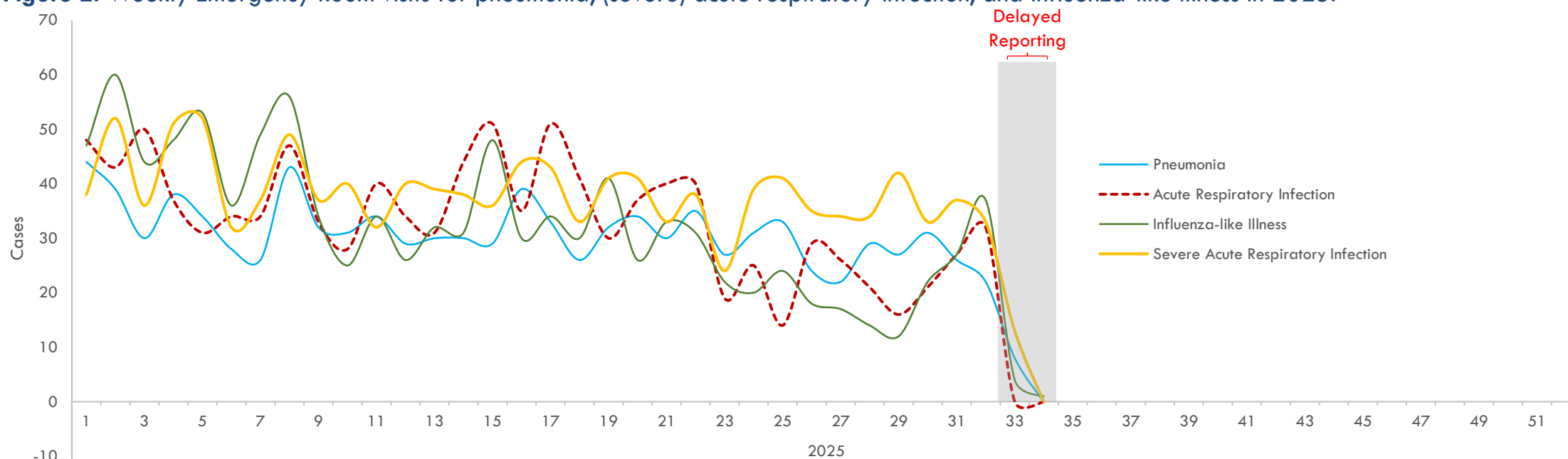


Influenza || Guam Syndromic Surveillance

KEY POINTS

- Pneumonia (PN), severe-/acute respiratory infection (S-/ARI) , and influenza-like illness (ILI), **Figure 2**, are syndromic surveillance indicators that provide an early warning signal for potential viral respiratory illness epidemics (e.g., COVID-19, Influenza, RSV).
- **Figure 2** illustrates encounters at the emergency rooms of GMHA and GRMC.
- As seen in **Figure 2**, weekly reports of each indicator have remained consistent throughout 2025.
- Although these syndromic indicators have been stable throughout the year, there have been more SARI reports throughout the summer.

Figure 2. Weekly Emergency Room visits for pneumonia, (severe) acute respiratory infection, and influenza-like illness in 2025.

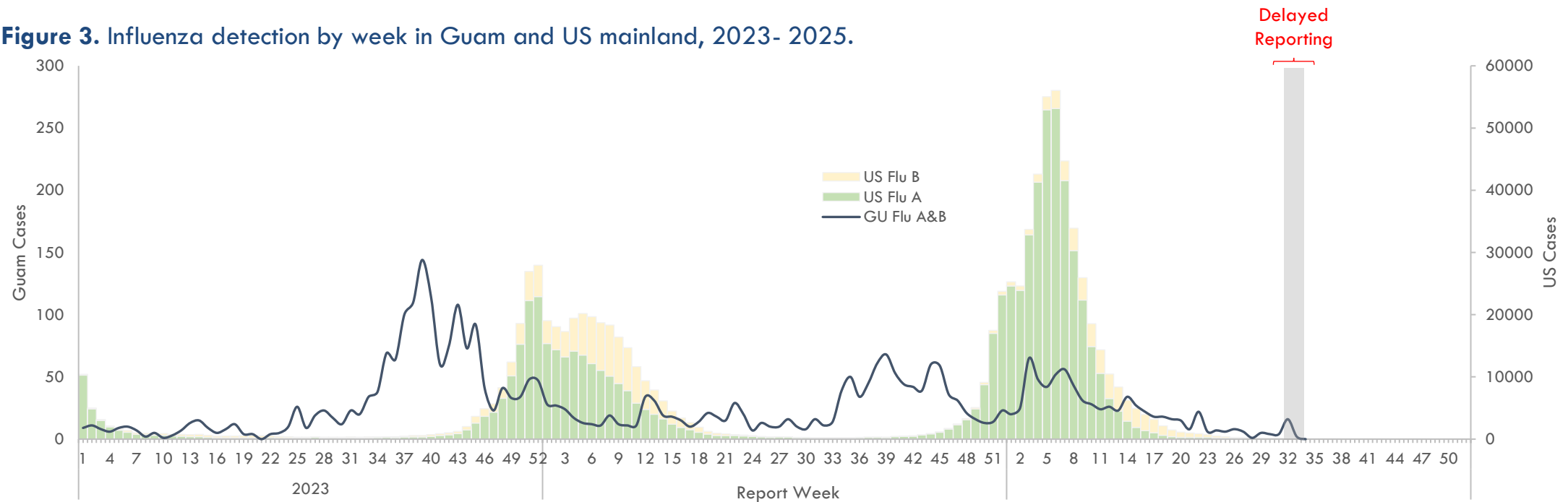


Influenza || Guam vs Nationwide comparison

KEY POINTS

- Guam's influenza season precedes the mainland US (**Figure 3**)²⁻³, however, early 2025 demonstrated a degree of agreement in trends.
- The US mainland has demonstrably emerged from its influenza season.
- However, as seen in **Figure 3**, Guam continues to detect influenza cases, with a notable increase in the past 2 weeks.
- Despite this increase, this trend aligns with what has been observed historically, falling well within the expected range (**Figure 4**).

Figure 3. Influenza detection by week in Guam and US mainland, 2023- 2025.

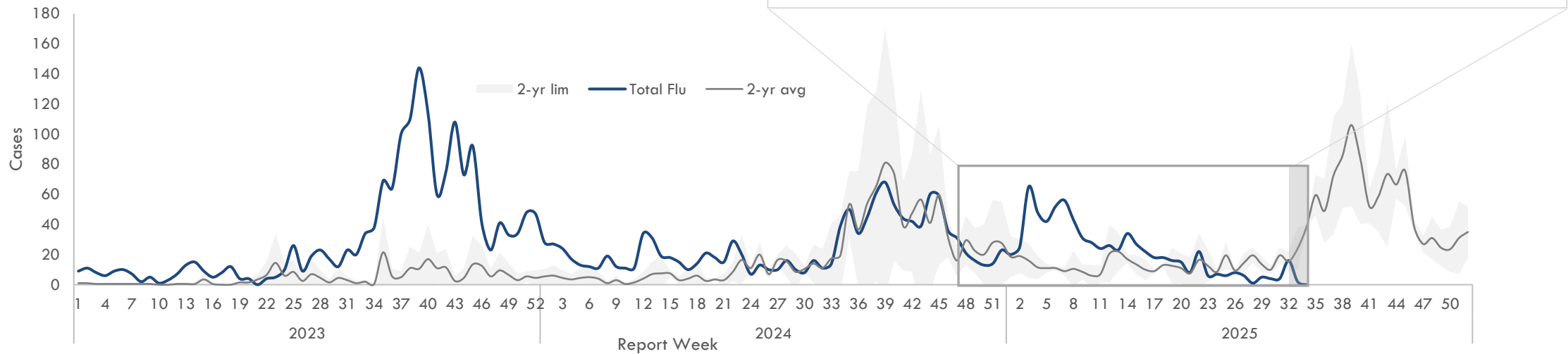


Influenza || Local trend

KEY POINTS

- **Figure 4³** represents all influenza cases by week in Guam from 2023-present, including the 2yr average and bounds.
- Influenza case detection continues to align with the 2yr average.
- From Week 23-31 (June 01-August 02), the number of influenza reports remained below expectations.
- There has been a recent uptick in influenza cases, and its continued rise is expected in the coming weeks.

Figure 4. Influenza detection by week in Guam, 2023-2025.

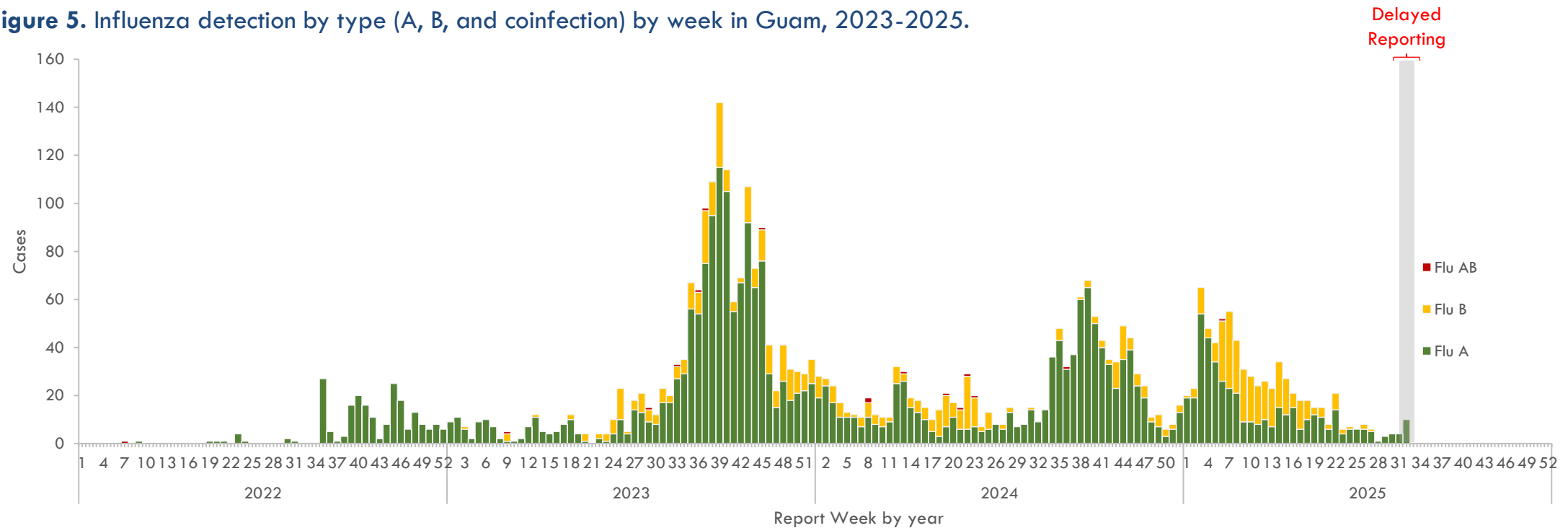


Influenza || Local trend (continued)

KEY POINTS

- Influenza A continues to make up the majority influenza type in circulation (**Figure 5**).³
- Preliminary wastewater surveillance data for Guam also provides supporting evidence that influenza A is the dominant type observed in the community.
- Because Influenza B detection is typically observed around this time, it is anticipated that there would be a shift from Influenza A to B in the coming weeks.

Figure 5. Influenza detection by type (A, B, and coinfection) by week in Guam, 2023-2025.

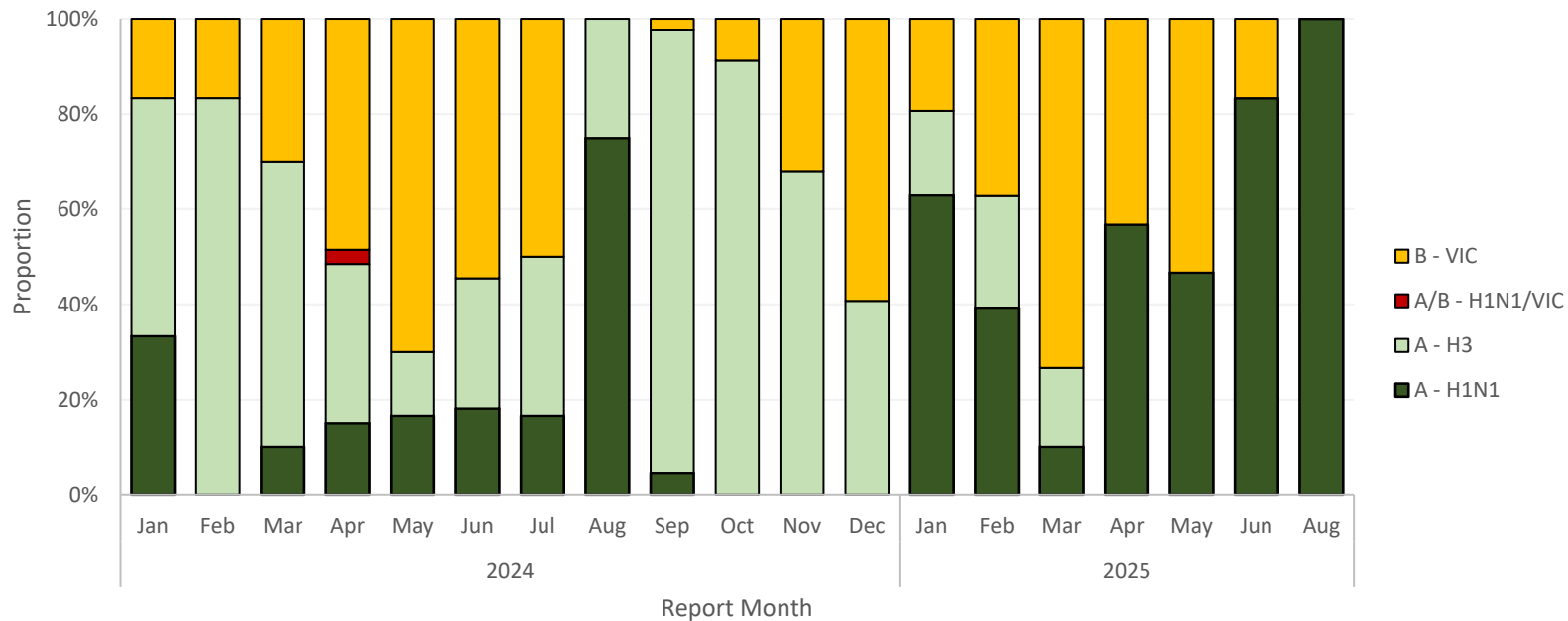


Influenza || Local trend (continued)

KEY POINTS

- Influenza A/H1N1 remained the dominant subtype detected in Guam.
- This closely aligns with August 2024, although the small number of samples subtyped for August warrants encouraged submission to Guam Public Health Laboratory.
- *Note, the figure below presents the date of subtype, not the date of sample collection.*

Figure 6. Proportion of influenza subtype by month in Guam, 2024-2025.



Influenza || Local trend (continued)

KEY POINTS

- Providers are encouraged to submit influenza samples for subtyping by Guam Public Health Laboratory (GPHL).
- GPHL continues to receive antigen characteristic results from the CDC, which determine whether circulating influenza strains in Guam are captured by the virus component used in the influenza vaccine formulations.
- To date, for 2025, GPHL received confirmation of **4** local influenza isolates antigenically characterized and confirmed for being antigenically related to A/WISCONSIN/67/2022-LIKE (H1N1)pdm09 virus.
 - This reference virus component is used in the 2024-2025 northern hemisphere and 2025 southern hemisphere cell-based influenza-vaccine formulations.⁵

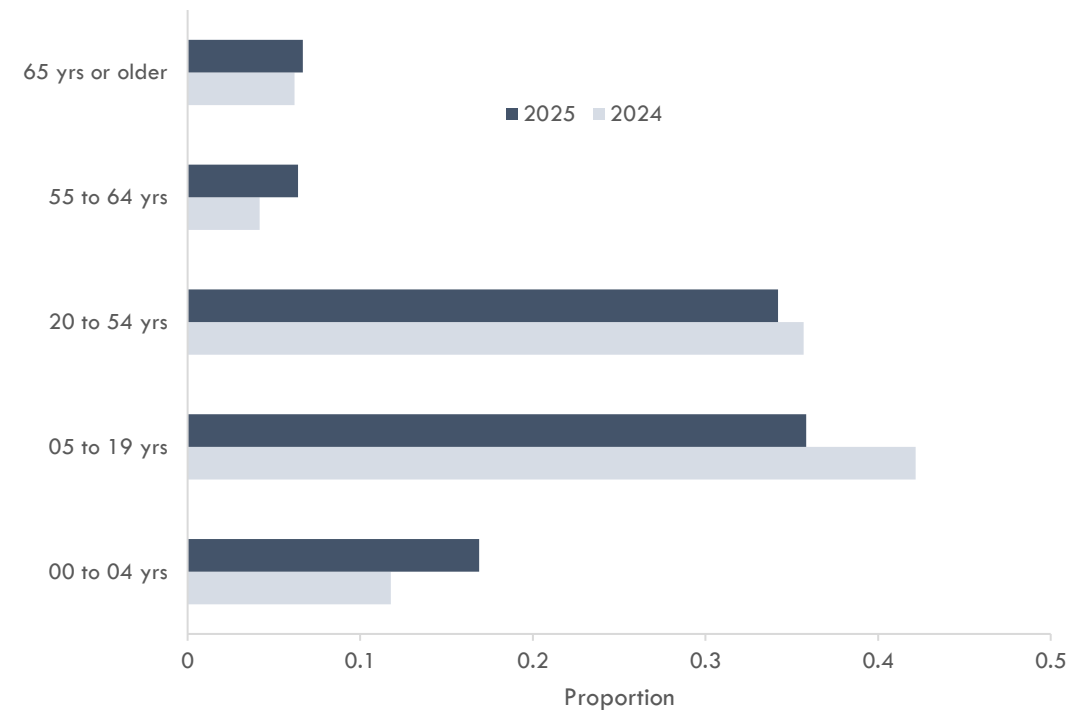


Influenza || Local trend (continued)

KEY POINTS

- Majority of those reported with influenza consist of the school-age children (05 to 19 years) and those ages 19 to 54 years) (**Figure 7**).³
- The proportion of age groups remains relatively consistent between 2024 and 2025.
- Hospitalizations associated with influenza continue to remain minimal based off on NHSN hospital respiratory data reporting.

Figure 7. Proportion of age groups diagnosed with influenza in Guam, 2024 and 2025.



Additional Information



Scan the QR Code to visit
the [Guam Communicable Disease Dashboard](#).

For additional information or for general inquiries, please
contact dphss.surveillance@dphss.guam.gov.



Surveillance data are compiled by one or more of the following members of the Surveillance team: Angelika Argao, Aaron Arizala.
Influenza viral characteristics are provided by one or more of the following Guam Public Health Laboratory team: Raven Aguon, Keno Hsueh, Michael O'Mallan, Alan Mallari, Anne Marie Santos.

