WEEKLY INFLUENZA EPIDEMIOLOGY REPORT

26 NOVEMBER 2025

Guam Department of Public Health and Social Services
Division of Public Health || Office of Epidemiology and Research
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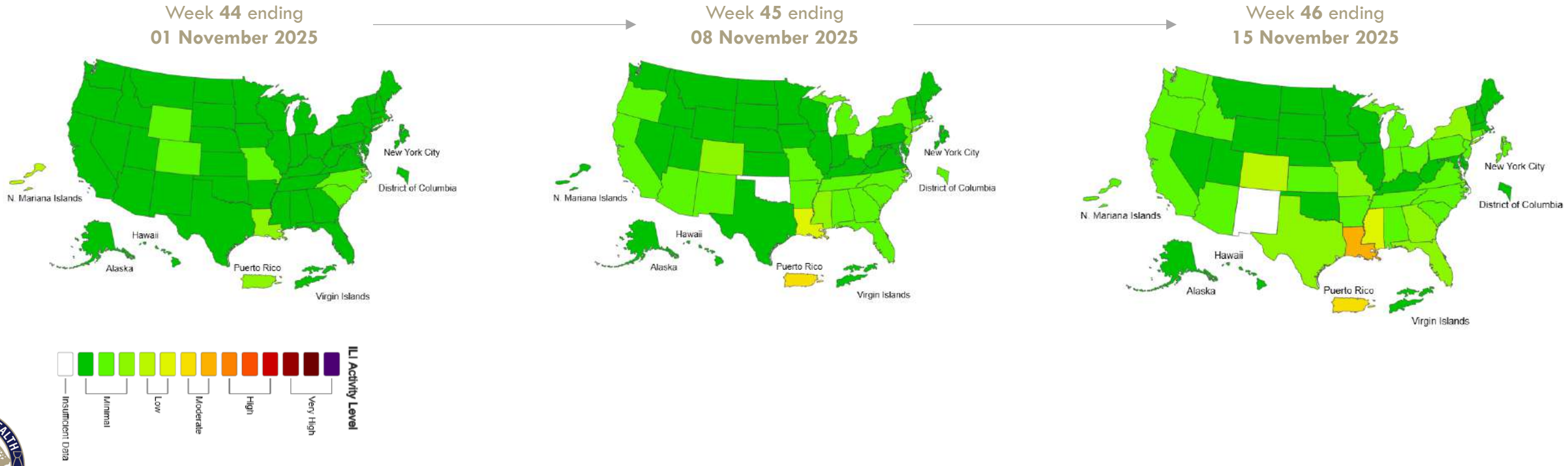
Influenza || Nationwide ILI Situation

KEY POINTS

- The CDC reinitiated production of their weekly ILINet reports as of Friday, 14 NOV 2025.
- Majority of jurisdictions nationwide continue to detect minimal influenza-like illness (ILI) activity (**Figure 1**).
- However, ILI-activity is beginning to increase, with Louisiana and Puerto Rico reporting moderate levels.

Figure 1. ILI activity map for MMWR weeks 44-46.[1]



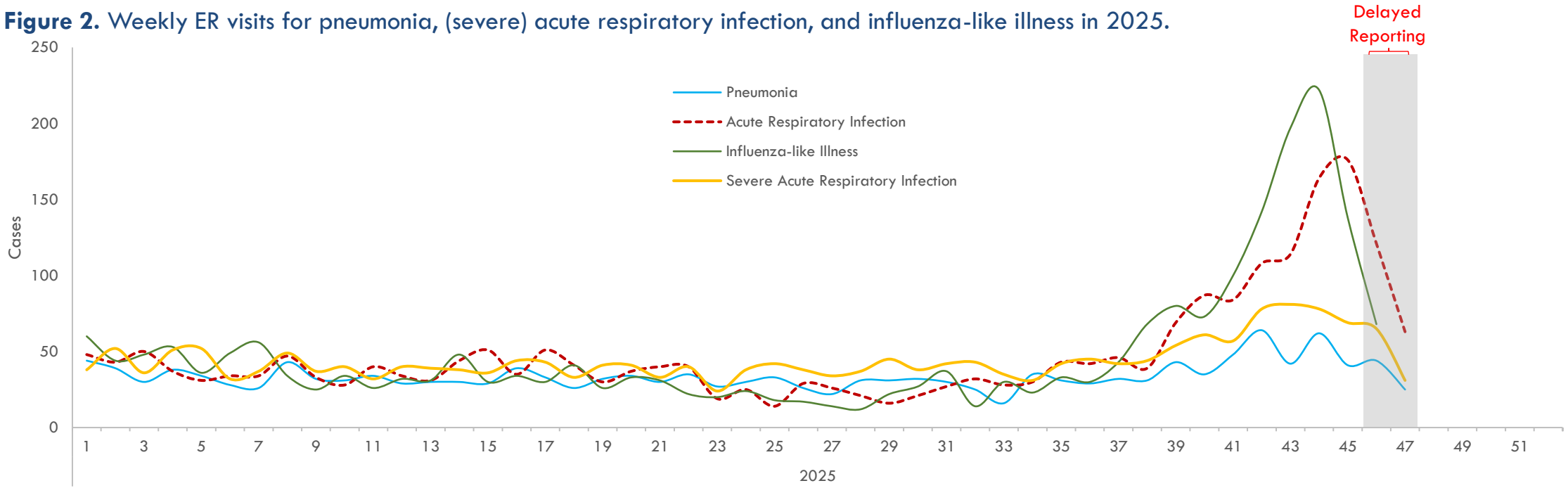
[1]Outpatient respiratory illness activity map determined by data reported to ILINet (CDC)

Influenza || Guam Syndromic Surveillance

KEY POINTS

- Pneumonia, severe-/acute respiratory infection, and influenza-like illness, encounters at the ER of GMHA and GRMC are represented in **Figure 2.**
- Weekly reports of each indicator have demonstrated a steady increase beginning mid-September, followed by a marked rise towards late-October.
- The most recent week was characterized by reduced visits to the ER for PN, S/ARI, and ILI, suggesting Guam is emerging from the worst of this season.

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

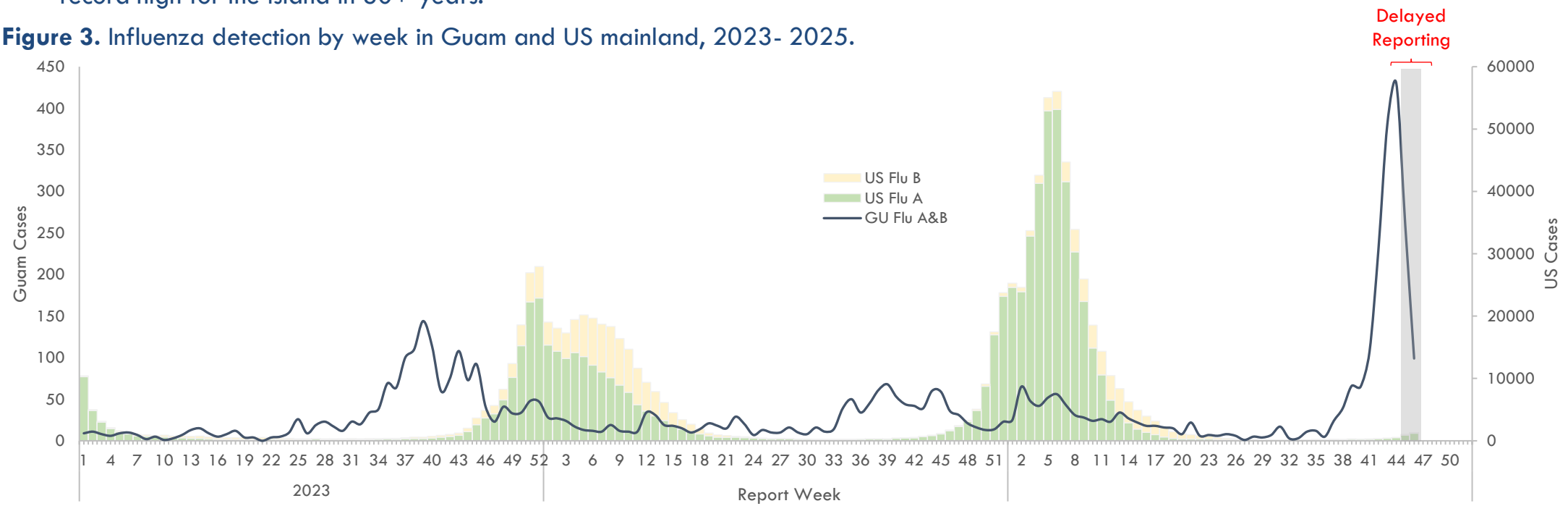


Influenza || Guam vs Nationwide comparison

KEY POINTS

- Guam has detected a sharp increase in influenza reports for the month of October, with 107 cases in week ending October 18, 230 cases reported in week ending October 25, and 383 cases in week ending November 01.
- Guam's peak week (week ending Nov 08) of 431 cases marked a record high for the island in 30+ years.
- Recent data illustrates emergence from the worst of this season, with only 99 cases reported week ending November 22.
- Conversely, the mainland US is starting to see a rise in influenza.

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



[2]CDC Influenza Results by Clinical Laboratories, National Summary; [3]Guam Communicable Disease Dashboard

Influenza || Local trend

KEY POINTS

- **Figure 4**[3] represents all influenza cases by week in Guam from 2023-present, including the 2yr average and bounds.
- As illustrated, this recent surge of influenza occurred much later than what has been observed in previous years.
- Indication of waning has been detected; however, continued monitoring is required to confirm emergence from this season.

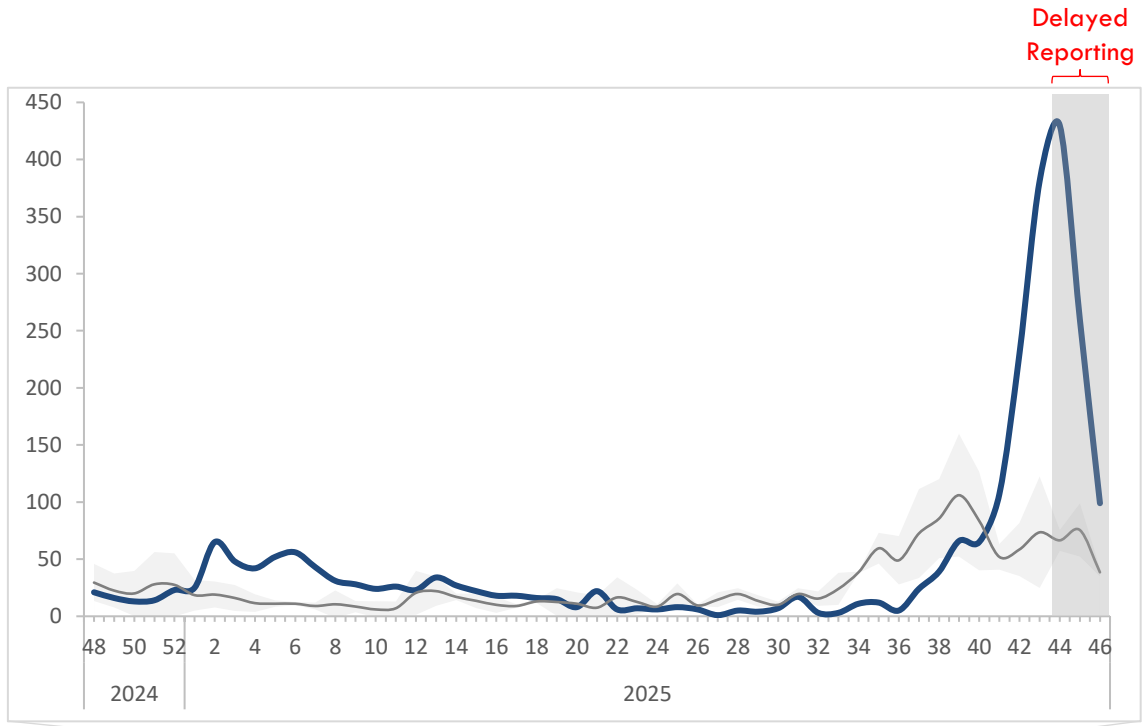
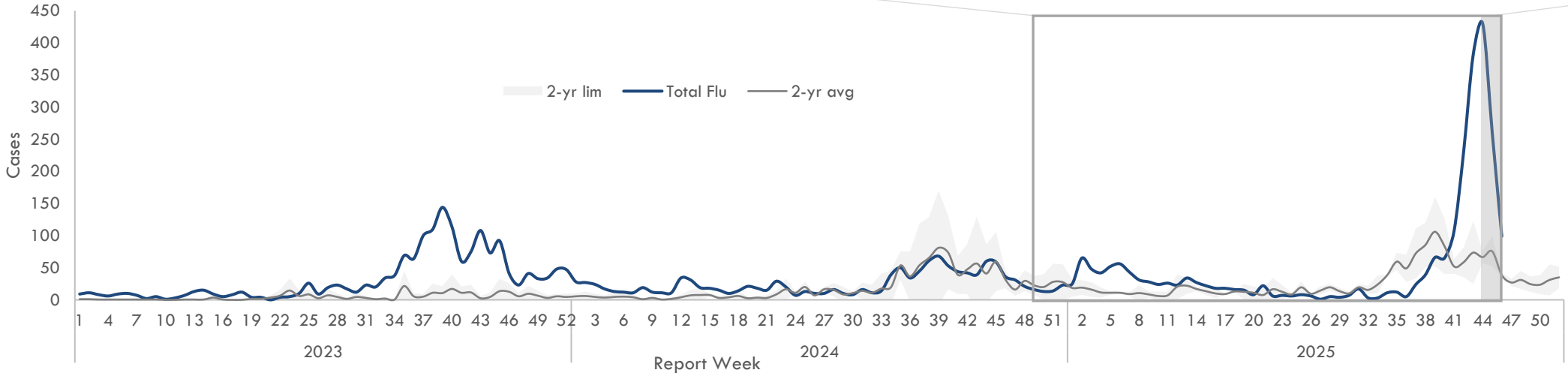


Figure 4. Influenza detection by week in Guam, 2023-2025.



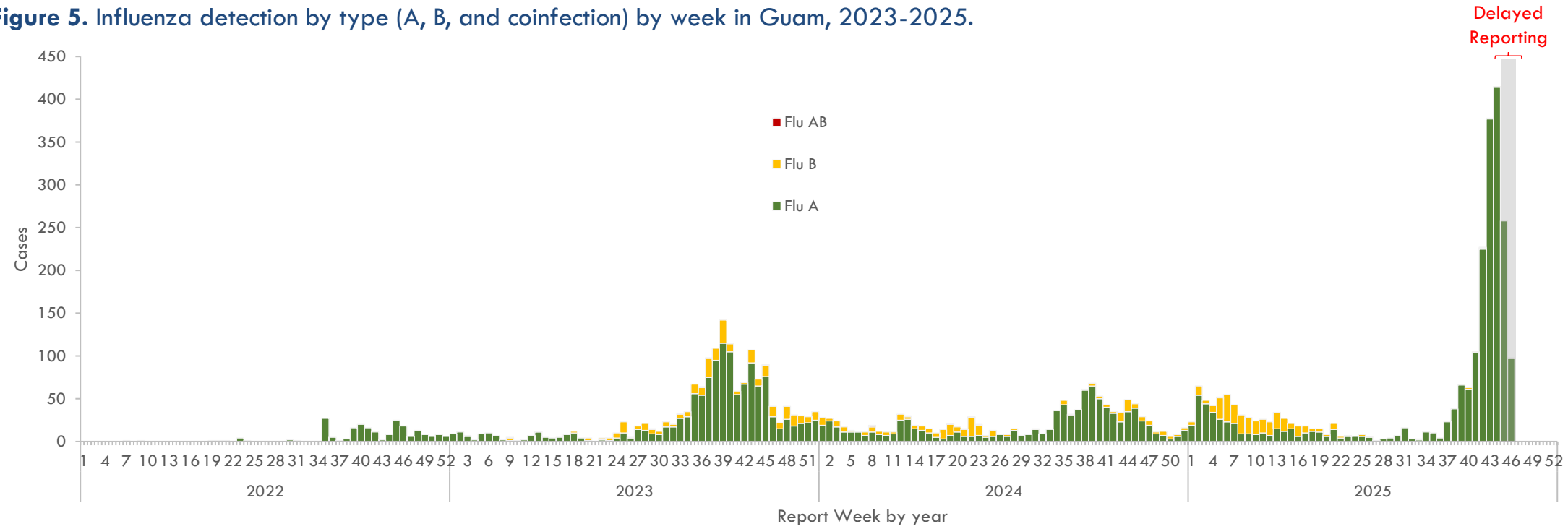
[3]Guam Communicable Disease Dashboard

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. Influenza B has not been detected via wastewater in the past 3 months.

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



[3]Guam Communicable Disease Dashboard

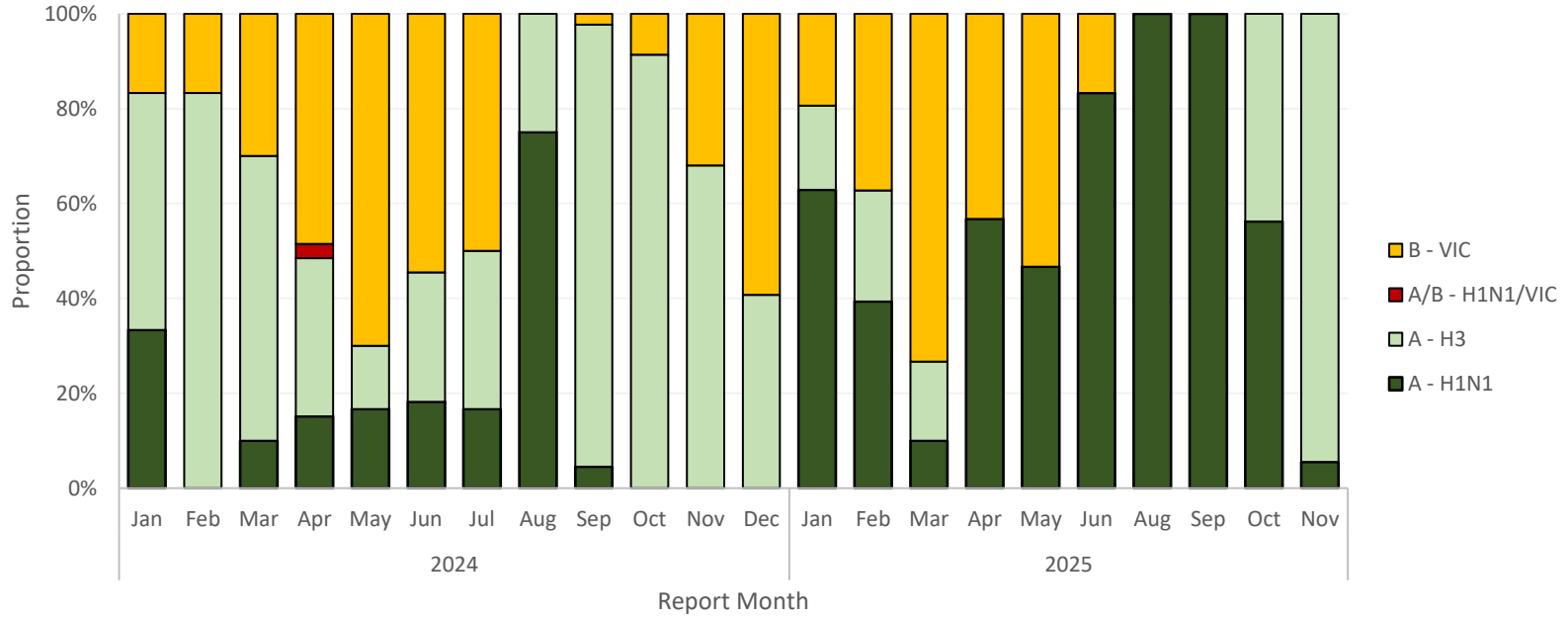
Influenza || Local trend (continued)

KEY POINTS

- There has been a significant shift in subtype from October to November, with Influenza A/H3 now being the dominant subtype detected in Guam, *confirming what has been detected in wastewater surveillance data.*
- This now agrees with what has been reported in October and November 2024, with the dominant subtype being H3.
- *Note, the figure below presents the date of subtype, not the date of sample collection. The number of samples subtyped for September 2024 are also small.*

Providers are encouraged to submit influenza samples for further subtyping to Guam Public Health Laboratory

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



[4]Data provided by the Guam Public Health Laboratory

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]

[5]Recommended composition of influenza virus vaccines, WHO

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 20 to 54 years) (**Figure 7**).[3]
- The proportion of age groups remains relatively consistent between 2024 and 2025.
- **Figure 8** further stratifies school-age children by class, highlighting the Kindergarten to elementary age children as most susceptible.
- New hospital admissions have been steady in the past 3 weeks, and occurred mostly in adults ages 65 or older.

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

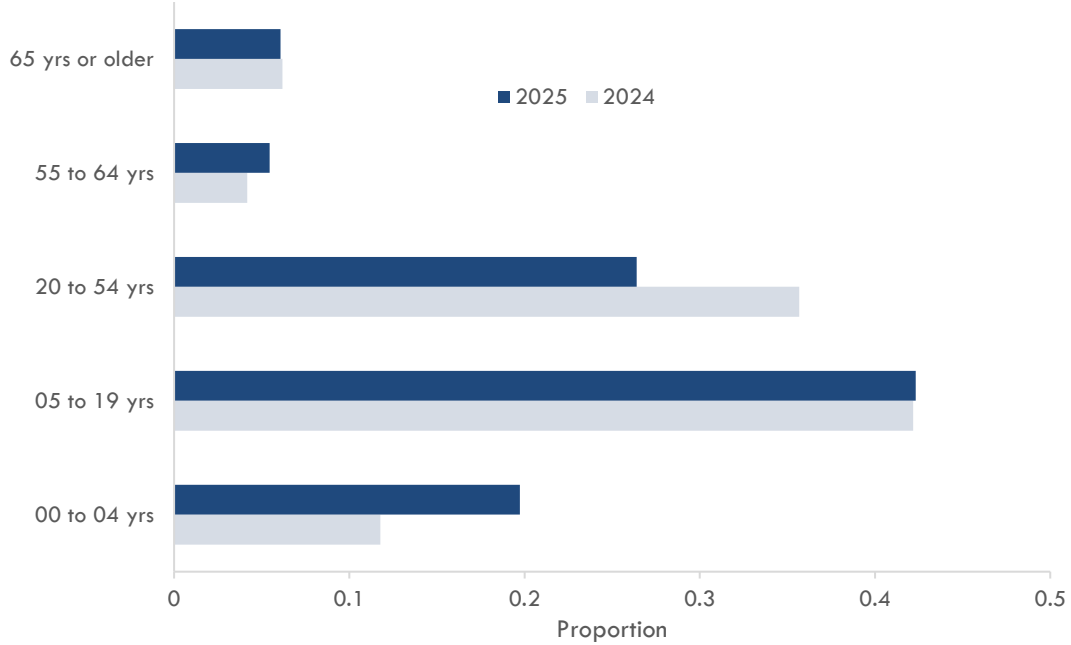
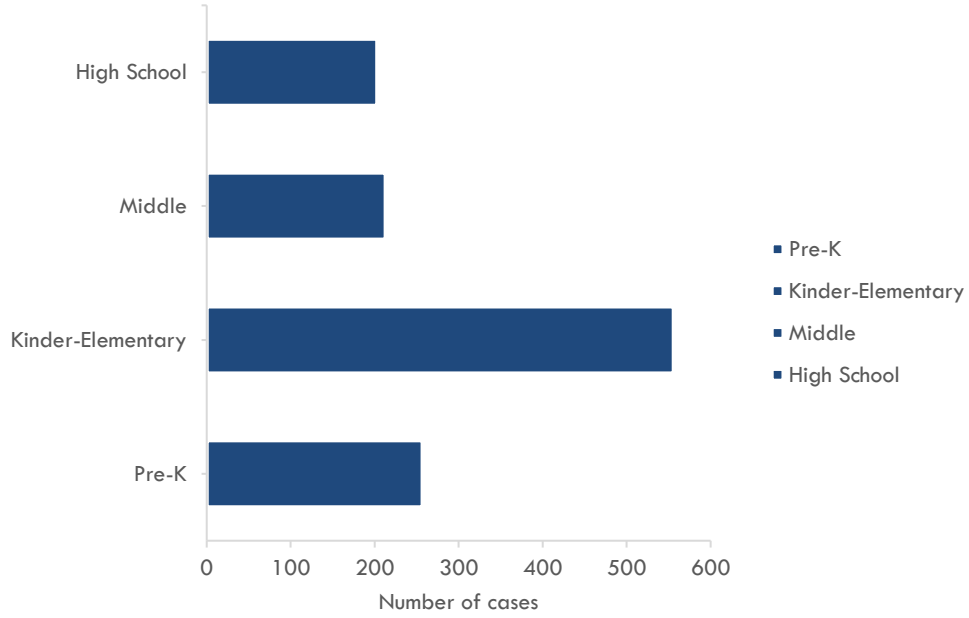


Figure 8. Number of school-age children diagnosed with influenza in Guam, by class, 2025.



[3]Guam Communicable Disease Dashboard

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.