

Seasonal influenza in Wales 2019/20 Annual Report

Summary

The season

The 2019/20 influenza season in Wales was shorter, but more intense compared to the 2018/19 season. Surveillance indicators of circulation in the community began to increase from early December and by week 50 had exceeded the threshold to indicate seasonally expected levels of influenza circulation. The weekly sentinel GP consultation rate for patients with influenza-like illness (ILI) symptoms peaked two weeks later at 37.1 per 100,000 practice population. In total, the sentinel GP ILI consultation rate was above the threshold for seasonal activity for eight weeks, including five weeks at medium intensity.

There were fewer cases confirmed in A&E departments, hospital wards and intensive care units than in 2018/19 at 904, 694, and 59 respectively. There was also a smaller number of outbreaks confirmed as influenza reported to Public Health Wales, 26 in total before SARS-CoV2 began circulating, the majority of which were in care homes. Surveillance indicators of influenza in hospital patients first exceeded the baseline threshold and peaked at a similar time and intensity level to surveillance indicators in the community.

Influenza A(H1N1)pdm09 and A(H3N2) co-circulated throughout the 2019/20 season, with few influenza B detections. Genetic characterisation of influenza viruses from confirmed cases suggested that most A(H3N2) viruses sequenced in Wales fell into the 3C.3a clade and antigenically matched the 2019/20 seasonal influenza vaccine strain, however, the genetic variability in the 3C.2a1b viruses increased, Few A(H1N1)pdm09 viruses were sequenced in Wales this year, however increasing genetic variability was observed.

Care should be taken when comparing indicators for the 2019/20 influenza season to previous seasons due to the COVID-19 pandemic effecting Wales from March onwards. Testing in hospitals increased for all respiratory pathogens in weeks 11 and 12 before testing capacity was exceeded and fewer hospital patients received a full respiratory screen. There was an increase in the number of ARI outbreaks reported in care homes from week 12 onwards, most of which were reported as COVID-19.

Vaccination uptake

More individuals in at-risk and recommended groups received influenza vaccination last season than ever before. In total, 876,062 people were recorded in general practice as being vaccinated, representing 28% of the population of Wales. The true number is likely to be higher as occupational and school-based vaccinations may not be included in this figure. In those aged 65 years and older, 69.4% were vaccinated (469,497 individuals), the highest ever uptake in this group. Uptake for clinical risk groups remained stable at 44.1% (197,481 individuals) this season, following a downward trend over several years. Uptake was highest in those with diabetes (58.8%) and lowest in those who are morbidly obese (34.8%).

All children aged two to 10 years were eligible for influenza vaccination again this year, 202,019 of whom were vaccinated. Uptake in two and three year olds increased to 50.7% and in four to 10 year olds remained stable at 69.9%. Coverage of influenza vaccination in pregnant women was the highest ever at

78.5%, as estimated in an annual point of delivery (post-natal) survey. In front-line NHS staff uptake increased to 58.9%, as it had in nine of the previous 10 years, to reach the highest ever uptake.

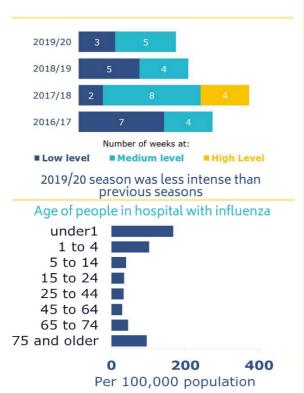
Vaccine effectiveness

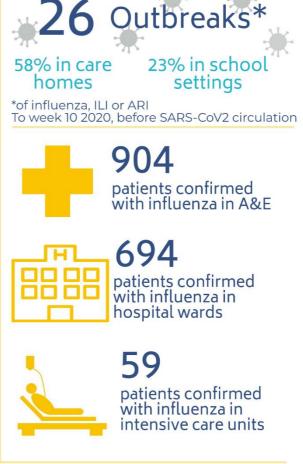
The provisional end of season estimate for overall effectiveness was 42.7% (95% CI 27.8% to 54.5%) against any laboratory-confirmed influenza for 2019/20 seasonal influenza vaccines in the UK. Against influenza A(H1N1)pdm09 specifically effectiveness was 53.5% (95% CI 20.1% to 72.9%), against influenza A(H3N2) it was 31.2% (95% CI 10.3% to 47.2%).

This is the second season that an adjuvanted inactivated trivalent influenza vaccine was available in the United Kingdom and recommended for patients aged 65 years and older, vaccine effectiveness within this group was estimated to be 16.2% (95% CI: -58.7%, 55.7%) against any influenza type. This is the first season that a cell based quadrivalent vaccine was licenced for use in 18 to 64 year olds in clinical risk groups, vaccine effectiveness in this group was 63.9% (95% CI: 26.9 %, 82.2%). Effectiveness of the Live Attenuated Intranasal Vaccine spray was estimated to be 45.4% (95% CI: 12.6%, 65.9%) in two to 17 year olds.

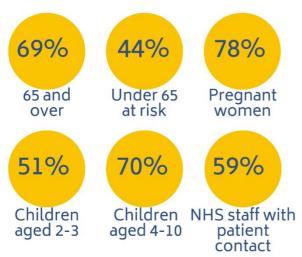
INFLUENZA SEASON IN WALES 2019/20

Dominant types of influenza A(H1N1) & A(H3N2)





Influenza vaccine uptake





The total number of people immunised against influenza is increasing each year



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Key Findings

- During 2019/20 there were similar levels of influenza activity compared to the previous flu season. At eight weeks, the season was shorter than average (15 weeks) and peaked above the threshold for medium intensity levels for five weeks.
 - From week 40 2019 to week 15 2020, 1,657 patients were confirmed to have influenza in hospitals, 904 of whom were tested in accident and emergency departments and 59 of whom were in intensive care units.
 - A total of 26 outbreaks of ILI or acute respiratory illness (ARI) were reported between week 40 and week 10 (before SARS-CoV2 began circulating in Wales), with 58% of the outbreaks in residential homes, 23% in school settings, 12% in hospitals and 7% in other settings.
 - During the influenza season all-cause mortality exceed expected levels during week 1 2020. The highest levels of excess mortality since reporting began was observed from week 13 as SARS-CoV2 began circulating.
- Overall, influenza A(H3N2) was the dominant influenza virus, followed by influenza A(H1N1)pdm09. Small numbers of influenza B were also detected throughout the season.
- As at April 2020, 117 influenza A viruses had undergone genetic characterisation by whole genome sequencing (WGS), most A(H3N2) viruses sequenced in Wales fell into the 3C.3a clade. At the same time, the 3C.2a1b viruses also continued not only to circulate but also to increase in their genetic variability. Northern hemisphere influenza vaccines for 2019/20 were recommended to contain an A/Brisbane/02/2018 (H1N1)pdm09-like virus and an A/Kansas/14/2017 (H3N2)-like virus.
- The provisional end of season vaccine effectiveness estimate against laboratory confirmed influenza, was 42.7% (95% CI 27.8% to 54.5%). Estimated effectiveness of the new QIVc vaccine in the 18 to 64 age group was 63.9% (95% CI 26.9% to 82.2%) compared to 38.9% (95%CI -4.5% to 64.3%) for QIVe. The overall adjusted vaccine effectiveness for LAIV in those two to 17 years of age was 45.4% (95% CI 12.6% to 65.9%).
- The antiviral prescribing rate peaked at peaked at 3.2 prescriptions per 100,000 practice population during week 50 2019, lower than the 2018/19 peak of 5.5 prescriptions per 100,000 practice population. During the 2019/20 season in the UK, most viruses were fully susceptible and only small numbers of viruses were detected with reduced sensitivity to oseltamivir or zanamivir.
- During 2019/20 uptake of influenza vaccine in the eligible population increased in most groups compared to last season; however uptake in people aged six months to 64 years in a clinical risk group and older children immunised in school remained stable.
 - Influenza vaccine uptake in those aged 65 years and older in Wales was 69.4% (n=469,497), compared to 68.3% (n=457,200) last season and is the highest ever uptake in this age group.

- Uptake of influenza vaccine in people aged six months to 64 years in a clinical risk group was 44.1% (n=197,481), which is stable compared to 44.1% (n=192,352) last season, although lower than in previous seasons when morbidly obsese patients were not included in the clinical risk group measure. This is the second time this group has included those who are morbidly obese and not otherwise at risk. Uptake among clinical risk groups was highest in patients with diabetes (58.8%) and lowest in the morbidly obese (34.8%).
- Uptake of influenza vaccine in pregnant women was 78.5% (95% CI 74.2%-82.3%) (measured in an annual survey of women in major maternity units who gave birth during January 2019), an increase from 74.2% (95% CI 69.7% to 78.3%) last year and above the 75% vaccination target set by Welsh Government.
- Uptake of influenza vaccine in people younger than 65 years and recorded as being a carer (including carers who are also in a clinical risk group) was 48.0% (n=16,589).
- O Uptake of influenza vaccine in children aged two and three years, mainly immunised in general practices, was 50.7% (n=34,504) compared to 49.4% (n=34,541) in 2018/19.
- O Uptake of influenza vaccine in children aged four to 10 years, immunised in schools, was 69.9% (n=165,575), which is stable compared to 69.9% (n=174,525) in 2018/19.
- Uptake in NHS Wales staff with direct patient contact was 58.9% (n=36,190), compared to 55.5% (n=33,653) last season. Uptake in all NHS staff was 56.0% (n=50,649) during 2019/20, an increase compared to 53.4% (n=47,061) during 2018/19.
- The total number of individuals in Wales who were immunised against influenza was 876,062 for 2019/20, compared to an estimated 868,688 last season, based on Read codes in their general practice record. This represents 28% of the estimated total population of Wales.
- Community pharmacies across Wales administered 64,085 influenza vaccinations through the NHS community pharmacy influenza service in 2019/20, an increase from 53,883 in 2018/19. This is an estimated 8.3% of all immunisations given to those aged 65 years and older and people aged six months to 64 years in a clinical risk group.

1. Background

1.1 Influenza and influenza-like illness surveillance indicators

Public Health Wales monitors and reports on influenza activity in Wales throughout the year using a number of indicators. Historically, the main indicator of influenza activity in Wales and in other UK countries has been the weekly rate of consultations in general practices for influenza-like illness (ILI), per 100,000 practice population. The general practice (GP) consultation rate for ILI in Wales is calculated using data provided from a network of sentinel practices, through Audit+ GP software. The sentinel GP network in Wales has provided data used for monitoring influenza activity since 1986, firstly using a paper based system and since 2009 using Audit+, an automated computer based data collection tool. The threshold at which the sentinel GP ILI consultation rate suggests that the influenza season has started is calculated using the Moving Epidemic Method (MEM). This method also produces thresholds to indicate medium, high and very high intensities of activity. In Wales, all influenza seasons from 2010/11 onwards are used to provide a historical comparison for MEM analysis.

More recently, a range of indicators from both primary and secondary care have been used in order to provide a wider picture of the burden of influenza and other seasonal respiratory illnesses. During 2019/20, the following influenza surveillance indicators were monitored each week in Wales:

Primary care and community indicators

- GP consultations for ILI
- Sentinel GP virological surveillance to confirm influenza virus infection
- Respiratory related consultations with Out of Hours primary care doctors
- Influenza related calls to NHS Direct Wales

Secondary care indicators

- Respiratory diagnostic test data for all hospital and non-sentinel GP patients
- Respiratory diagnostic data for patients attending an A&E, medical assessment, or urgent care unit
- Respiratory diagnostic test data for patients in intensive care units

Indicators from other settings

• Outbreaks of ILI and other ARI in institutional settings e.g. hospitals, care homes, schools and nurseries, reported to Public Health Wales Health Protection Teams.

In addition, genetic characterisation of influenza viruses from sentinel GP samples and a proportion of hospital patients is carried out throughout the season using Whole Genome Sequencing (WGS).

1.2 Influenza immunisation

The aim of annual immunisation against influenza is to protect individuals at increased risk and communities from influenza, prevent spread within family, care and community settings and minimise the health impact of influenza on the population of Wales, and contribute to the reduction of antimicrobial resistance by preventing secondary bacterial infections [1].

In Wales in 2019/20, influenza immunisation was again offered free of charge to all people aged 65 years and older, people aged between six months and 64 years in clinical risk groups (chronic respiratory disease, chronic heart disease, chronic renal disease, chronic liver disease, chronic neurological conditions, diabetes mellitus, immunosuppression, asplenia/ dysfunction of the spleen, and adults who are category III obese (have a BMI of 40 or greater), all pregnant women, and residents of long-stay care homes. Vaccination was also offered to those who were a main carer for an elderly or disabled person whose welfare may be at risk if the carer fell ill, third sector carers, staff working in all adult residential care homes and nursing care homes, domiciliary carers (became eligible mid-season), members of voluntary organisations providing planned emergency first aid and community first responder scheme members [1].

In addition, influenza immunisation was also recommended for all other health and social care workers who are in direct contact with patients or service users. Care home staff with regular client contact and domiciliary carers may access free NHS flu vaccination via a community pharmacy but employing organisations are responsible for arranging immunisation of frontline health and social care workers in other settings.

The Welsh Government influenza immunisation uptake target was 75% for people aged 65 years and over, 55% for those aged between six months and 64 years in clinical risk groups and 60% for NHS Wales staff with direct patient contact [1].

The childhood influenza vaccination programme using live attenuated influenza vaccine (LAIV) nasal spray (Fluenz Tetra®) once again included children aged two to 10 years old (age on 31 August 2019) [1]. This is the second year that all primary school aged children have been eligible for LAIV following a five year roll out of the programme, completed one year ahead of schedule.

In most health boards influenza immunisations were delivered to the two and three year old age groups through general practices. Since the 2016/17 influenza season, three year olds in nursery classes attached to primary schools in Cwm Taf Morgannwg University Health Board (UHB) have been offered LAIV immunisation through school nursing services, in addition to being able to receive the vaccine through general practice. Vaccination for the primary school year groups (four to 10 year olds) was delivered by the school nursing services across Wales.

Public Health Wales monitor influenza immunisation uptake rates in general practices and report them weekly to GPs and health boards throughout the seasonal campaign and produce end of season influenza immunisation coverage statistics at a national, health board and local authority level. Immunisation statistics contained in this report record coverage in Welsh residents who are registered

with a GP in Wales as at 29th March 2020 and therefore are not a measure of all those who have been immunised during the course of the immunisation campaign, excluding those no longer registered.

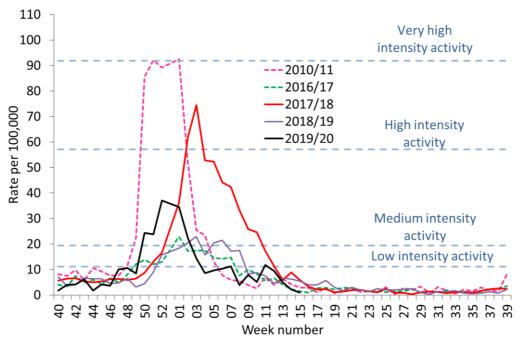
2. Influenza Surveillance in 2019/20

2.1 Community indicators - GP consultations for influenza-like illness (ILI)

A low intensity (or baseline) threshold level of 11.1 ILI consultations per 100,000 population was used as one of the indicators that influenza may be circulating in the community at low levels calculated using the Moving Epidemic Method (MEM) [2]. The sentinel GP ILI thresholds, for medium, high and very high intensity activity in the community were 19.4, 57.1 and 91.9 per 100,000 consultations respectively. Due to a technical issue affecting data submitted from sentinel practices utilising a specific brand of GP software, consultation rates for ILI in were calculated using a subset of data from 20 practices during week 47 2019 to week 03 2020. Due to this technical issue it was not possible to calculate the cumulative sentinel GP ILI rate for the whole 2019/20 season and provide a breakdown by age groups as has been done in previous reports.

The ILI baseline threshold level for low level activity was first exceeded in sentinel practices during week 50 of 2019 when levels went straight to medium intensity (Figure 2.1.1); this along with an increase in laboratory confirmed cases of influenza in the community, an increase in the number of confirmed cases of influenza in hospitals and the proportion of samples testing positive for influenza indicated the start of the influenza season in Wales. The sentinel GP ILI consultation rate returned to low levels in week 03 2020 and to baseline levels in week 04 2020. Activity also reached the low level threshold for short periods during weeks 07 and 11 of 2020. The peak sentinel GP ILI consultation rate was 37.1 per 100,000 practice population, during week 52 2019.

Figure 2.1.1. Public Health Wales sentinel GP weekly consultation rate for influenza-like illness $2019/20^1$



¹Due to a technical issue affecting data submitted from sentinel practices utilising a specific brand of GP software, consultation rates for ILI in were calculated using a subset of data from 20 practices during week 47 2019 to week 03 2020.

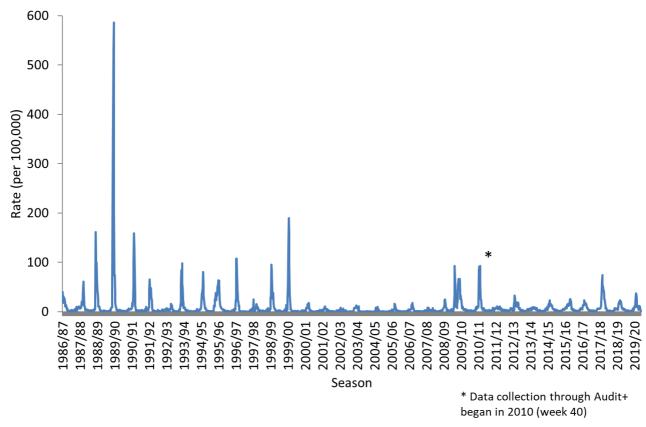
The sentinel GP consultation rate for ILI was above the threshold for low (baseline) intensity activity for a total of eight weeks in 2019/20, compared to nine weeks in 2018/19 (Table 2.1.1). Five of the eight weeks were above medium intensity levels of activity, compared to four weeks observed above medium intensity in 2018/19 (Table 2.1.1 and Figure 2.1.1).

Table 2.1.1. Comparison of sentinel GP consultation rates from 2012/13 to 2019/20

			In	ıfluenza Seasoı	n			
	2012/13	2013/14	2014/15	2015/16	2016/17	2017/18	2018/19	2019/20
Start of season (week of year)	50	Threshold to indicate low	50	1	49	51	52	50
Weeks sentinel GP ILI consultation rate above baseline threshold (n)	14	level activity not exceeded	13	14	11	14	9	8
Weeks sentinel GP ILI consultation rate above medium activity levels (n)	Not available*	Not available*	2	7	4	12	4	5
Weeks sentinel GP ILI consultation rate above high activity levels (n)	Not available*	Not available*	0	0	0	4	0	0
Peak sentinel GP ILI consultation rate	33.0	8.8	23.2	25.8	22.8	74.5	22.9	37.1

^{*}Medium and high intensity thresholds were introduced in 2014/15.

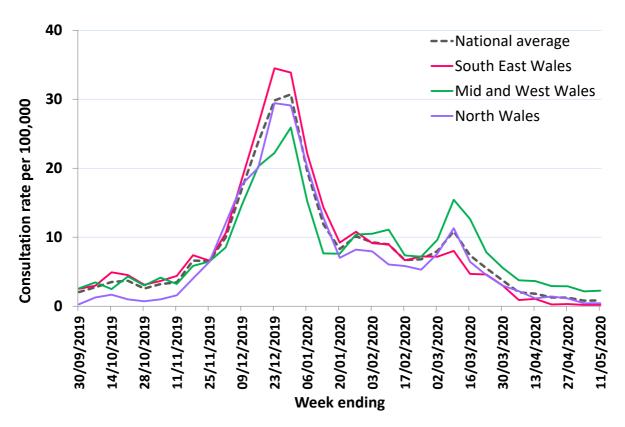
Figure 2.1.2. Public Health Wales sentinel GP weekly consultation rate for influenza-like illness 1986 to 2020



Regional differences in timing and intensity of the influenza season were assessed using data from all practices in Wales provided through Audit+ (Figure 2.1.3). Due to a technical issue affecting data submitted from sentinel practices utilising a specific brand of GP software, consultation rates for ILI were calculated using a subset of data from all practices during week 47 2019 to week 03 2020. GP ILI consultation rates followed a similar pattern in all regions.

- In South East Wales (Aneurin Bevan UHB, Cardiff and Vale UHB and Cwm Taf Morgannwg UHB areas), the peak in ILI consultation rate was seen during week 52 (ending 29th December), at 34.5 per 100,000 practice population.
- In Mid and West Wales (Swansea Bay UHB and Hywel Dda UHB areas, and Powys THB area) the peak in ILI consultation rate was seen during week 01 (ending 5th January), at 25.9 per 100,000 practice population.
- In North Wales (Betsi Cadwaladr UHB area) the peak in ILI consultation rate was seen during week 52 (ending 29th December), at 29.4 per 100,000 practice population.

Figure 2.1.3. Weekly consultation rates for influenza-like illness in regions of Wales, data from all available practices submitted through Audit+, compared to the national average, 2019/20



2.2 Community indicators - Virological surveillance in the community

Between 2019 week 40 and 2020 week 15 (30th September 2019 to 6th April 2020), there were 1,206 samples collected for virological testing by general practices in Wales. From this total, 336 samples were submitted by 26 sentinel GPs, a mean of 13 samples per participating practice. This is the third year that all sentinel GPs were asked to collect surveillance samples for an expanded number of clinical conditions, which include ARI, acute bronchitis, and bronchiolitis, in addition to ILI. Of the samples collected, 205 were clinically diagnosed with ILI (61.0%), 94 with ARI (28.0%) and eight with acute bronchitis (2.4%). No patients with samples collected were diagnosed with bronchiolitis and information was missing for 29 samples (8.6%).

Of the 336 patient samples submitted, 99.4% (n=334) were tested. Of these, 17.4% (n=58) were positive for influenza. Of the samples testing positive for influenza, 77.6% (n=45) were influenza A(H3), 19.0% (n=11) were due to influenza A(H1N1) and two were influenza B (3.4%).

Surveillance samples are routinely tested for: influenza, RSV, adenovirus, *Mycoplasma pneumoniae*, rhinovirus, parainfluenza, human metapneumovirus, human bocavirus, seasonal coronaviruses, enterovirus D-68 and other enteroviruses. One or more other causes of seasonal respiratory infection were detected in 34.1% (n=114) of samples, and 49.7% (n=166) were negative for all routinely tested pathogens.

Sample submissions by sentinel GPs peaked in week 11 of 2020 (week ending 15th March 2020, 35 patient samples) (Figure 2.2.1). Influenza was first detected in sentinel samples during 2019 week 44, and was last detected in 2020 week 11. Throughout this time it was detected weekly in smaller numbers. The number of influenza positive samples peaked during 2019 week 50 and 51 (11 positive samples in both weeks, of those 19 were positive for influenza A(H3) and three were positive for influenza A(H1N1)).

Influenza A(H1N1) was first detected during 2019 week 45 (one patient sample) and was detected sporadically in small numbers until week 11 2020. Influenza A(H3) was first detected in 2019 week 44 and was detected in most weeks until week 07 2020. Two influenza B positive samples were confirmed, one in 2019 week 50 and one in 2020 week 08.

Figure 2.2.1. Results from Public Health Wales GP sentinel virological surveillance for influenza and other seasonal causes of respiratory illness by Week, 2019/20. The sentinel GP ILI consultation rate per 100,000 is also included.

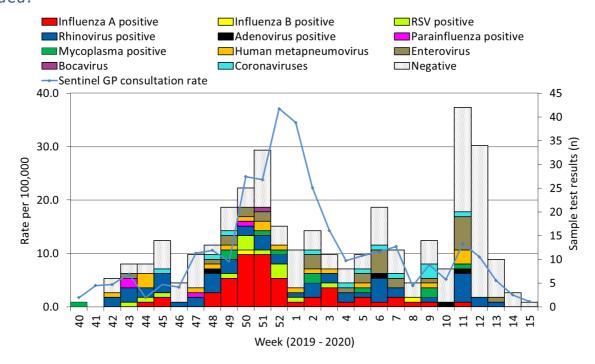


Table 2.2.1. Samples from sentinel GP patients with influenza-like symptoms testing positive for influenza and other respiratory pathogens between 2019 week 40 and 2020 week 15 by age group^{1,2}

Age Group	Sample	es Tested	All Ir	nfluenza	0	ther	Negative		
Age Gloup	n	%	n	%	n	%	n	%	
Under 1	1	0.3%	0	0.0%	0	0.0%	1	0.6%	
1 to 4	9	2.7%	4	6.9%	5	4.4%	1	0.6%	
5 to 9	12	3.6%	3	5.2%	3	2.6%	6	3.6%	
10 to 14	18	5.4%	6	10.3%	4	3.5%	8	4.8%	
15 to 24	51	15.3%	9	15.5%	20	17.5%	22	13.3%	
25 to 34	43	12.9%	10	17.2%	17	14.9%	17	10.2%	
35 to 44	59	17.7%	6	10.3%	14	12.3%	40	24.1%	
45 to 64	94	28.1%	16	27.6%	26	22.8%	52	31.3%	
65 to 74	26	7.8%	3	5.2%	16	14.0%	8	4.8%	
75 and older	21	6.3%	1	1.7%	9	7.9%	11	6.6%	
Total	334	100%	58	100%	114	100%	166	100%	

¹ There were 30 samples from sentinel GP patients which tested positive for two respiratory pathogens and four samples which tested positive for three respiratory pathogens. Of these, four samples from sentinel GP patients tested positive for influenza and one or more additional seasonal respiratory pathogens.

Of all symptomatic patients who visited a sentinel practice and were tested for seasonal respiratory pathogens between week 40 2019 and week 15 2020, 28.1% were aged 45 to 64 years (Table 2.2.1), the median age of patients tested was 39 years. Of the sentinel GP patients testing positive for influenza, 27.6% were aged 45 to 64 years, and the median patient age was 29 years.

2.3 Hospital indicators - Virological surveillance

From 2019 week 40 to 2020 week 15, there were 22,044 samples collected and tested by Public Health Wales Microbiology services from 10,772 hospital patients presenting with symptoms of respiratory infection (Table 2.3.1). In addition to existing PCR diagnostic services, during 2018-19 a rapid test service for influenza was rolled out in most health boards. During the 2019-20 season, this service was expanded and was available across all health boards. The rapid service was intended to help guide patient pathways and improve timeliness of decisions on continuation of antiviral treatments. Samples collected could be tested using one of three systems, differing in their abilities to provide influenza sub-type information and to detect non-influenza pathogens.

Two of the systems used were PCR screens for influenza, RSV, adenovirus, *Mycoplasma pneumoniae*, rhinovirus, enterovirus, parainfluenza, human metapneumovirus, and seasonal coronavirus, and where possible, influenza A results are subtyped. The third system in use only screened for influenza A, influenza B and RSV, and influenza A results are not subtyped. Patients may have more than one sample collected for an episode of respiratory illness and these samples could be tested using different test systems; patients who only had one sample collected and tested using the third platform are not included in the denominator for the number of patients screened for other pathogens included in respiratory surveillance.

² Surveillance samples are routinely tested for: influenza, RSV, adenovirus, *Mycoplasma pneumoniae*, rhinovirus, parainfluenza, human metapneumovirus, human bocavirus, seasonal coronaviruses, enterovirus D-68 and other enteroviruses.

Of the 10,772 testing episodes in hospital patients that had a sample collected from a hospital setting, all were tested for influenza and RSV, with 94.0% (10,128/10,772) tested for all respiratory pathogens and 6.0% (n=644/10,772) tested for influenza and RSV only.

The weekly number of patients tested for seasonal respiratory illness peaked during week 52 of 2019 (week ending 29th December 2019, n=789). Of the samples from patients in hospital, 50.5% (n=5,434) were collected from patients in general inpatient and outpatient wards, 39.8% (n=4,282) were collected from patients attending A&E settings or urgent care wards and 9.8% (n=1,056) were collected from patients admitted to an intensive care ward.

Of the hospital patients tested, 15.4% (n=1,657) were confirmed with influenza, of whom 94.7% (n=1,569) had influenza A only, 85 patients had influenza B only and three had dual infections of both influenza A and influenza B (Table 2.3.1). Of the samples testing positive for influenza A, 67.3% (n=1,059) were influenza A(H3N2), 15.8% (n=248) were influenza A(H1N1)pdm09 and 16.9% (n=265) were untyped.

The most commonly detected non-influenza respiratory pathogens were rhinovirus (14.9%, 1,511/10,128) and RSV (11.3%, 1,217/10,772).

Other detected causes of respiratory infection included: human metapneumovirus (5.6%, 562/10,128), seasonal coronavirus (5.3%, 533/10,128), adenovirus (5.0%, 508/10,128), parainfluenza (3.2%, 319/10,128), enterovirus (3.2%, 324/10,128), and *Mycoplasma pneumoniae* (1.5%, 153/10,128). Fiftyfour percent (5,478/10,128) of patients tested for all nine routinely screened pathogens were negative, and from the patients that were only tested for influenza and RSV, 33.2% (214/644) were negative for both pathogens.

Table 2.3.1. Results from patients tested for influenza and RSV in Wales between 2019 week 40 and 2020 week 15, by sample location^{2,3}

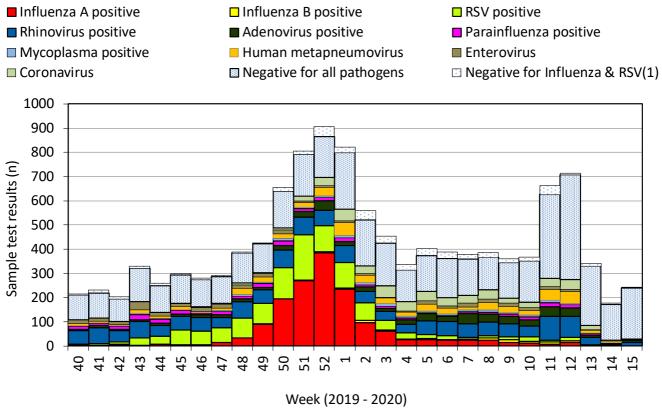
Cample Lesation	Sample	s tested	Influ	uenza A	Infl	uenza B	I	RSV	Ne	gative ¹
Sample Location	n	%	n	%	n	%	n	%	n	%
Sentinel Practice	334	2.6%	56	3.0%	2	1.8%	13	1.0%	166	2.7%
Non-sentinel Practice	872	6.7%	142	7.7%	14	12.6%	45	3.4%	406	6.5%
Total Community Samples	1206	9.3%	198	10.7%	16	14.4%	58	4.3%	572	9.2%
Hospital - General	5434	41.7%	656	35.5%	40	36.0%	717	53.6%	2363	37.9%
Hospital - A&E	4282	32.8%	857	46.3%	48	43.2%	397	29.7%	2067	33.1%
Hospital - ITU	1056	8.1%	59	3.2%	0	0.0%	103	7.7%	650	10.4%
Total Hospital Samples	10772	82.6%	1572	85.0%	88	79.3%	1217	91.0%	5080	81.4%
Other / Unknown locations	1059	8.1%	79	4.3%	7	6.3%	63	4.7%	588	9.4%
Total	13037	100%	1849	100%	111	100%	1338	100%	6240	100%

¹This measure represents the number of samples negative for all pathogens routinely tested for. A small proportion of samples included have only been tested for influenza and RSV.

²Samples positive and negative will not add up to total screens as some individuals tested positive for more than one pathogen.

³Surveillance samples tested using a full PCR test are routinely tested for: influenza, RSV, adenovirus, *Mycoplasma pneumoniae*, rhinovirus, enterovirus, parainfluenza and human metapneumovirus.

Figure 2.3.1. Results from respiratory tests carried out on samples from patients in hospitals in Wales by Week, 2019/20



¹ A small proportion of samples have only been tested for influenza and RSV.

Low numbers of influenza cases were confirmed from week 40 to week 46 2019 (Figure 2.3.1). The number of samples testing positive for influenza began to increase from 2019 week 47, and the proportion of samples tested which were positive for influenza reached levels consistent with seasonal circulation in week 48. Influenza positivity in hospital samples exceeded 9% (the threshold suggestive of seasonal circulation) from 2019 week 48 and remained above this level through 2020 week 04. The proportion of samples testing positive for influenza peaked in week 52 (n=388/789, 49.2% positivity). The peak week for sample test positivity for RSV was week 51 of 2019 (week ending 22 December 2019, 188/678, 27.7%).

Table 2.3.2. Patient samples from all hospital locations testing positive for influenza and RSV between 2019 week 40 and 2020 week 15 by age group^{2,3}

Age Group	Sample	es tested	All II	nfluenza		RSV	Neg	ative ¹
	n	%	n	%	n	%	n	%
Under 1	1239	11.5%	62	3.7%	430	35.3%	297	6.4%
1 to 4	1061	9.9%	161	9.7%	206	16.9%	159	3.4%
5 to 9	405	3.8%	93	5.6%	36	3.0%	115	2.5%
10 to 14	227	2.1%	66	4.0%	17	1.4%	77	1.7%
15 to 24	585	5.4%	143	8.6%	28	2.3%	240	5.2%
25 to 34	832	7.7%	196	11.8%	43	3.5%	327	7.0%
35 to 44	661	6.1%	114	6.9%	34	2.8%	314	6.8%
45 to 64	2087	19.4%	286	17.3%	130	10.7%	1144	24.6%
65 to 74	1516	14.1%	200	12.1%	119	9.8%	835	18.0%
75 and older	2157	20.0%	336	20.3%	174	14.3%	1140	24.5%
Total	10770	100%	1657	100%	1217	100%	4648	100%

¹This measure represents the number of samples negative for all pathogens routinely tested for. A small proportion of samples included have only been tested for influenza and RSV.

Table 2.3.3a. Patients testing positive for influenza in Wales, between 2019 week 40 and 2020 week 15, by hospital location and age group

Age Group		In & Out t Wards	_	t Care & Wards	ICU	Wards
	n	%	n	%	n	%
Under 1	49	7.1%	10	1.1%	3	5.1%
1 to 4	112	16.1%	48	5.3%	1	1.7%
5 to 9	65	9.4%	27	3.0%	1	1.7%
10 to 14	46	6.6%	19	2.1%	1	1.7%
15 to 24	38	5.5%	103	11.4%	2	3.4%
25 to 34	50	7.2%	145	16.0%	1	1.7%
35 to 44	32	4.6%	78	8.6%	4	6.8%
45 to 64	82	11.8%	182	20.1%	22	37.3%
65 to 74	76	11.0%	112	12.4%	12	20.3%
75 and older	144	20.7%	180	19.9%	12	20.3%
Total	694	100%	904	100%	59	100%

²Samples positive and negative will not add up to total screens as some individuals tested positive for more than one pathogen. There are two samples from patients with unknown age.

³Samples are routinely tested for: influenza, RSV, adenovirus, *Mycoplasma pneumoniae*, rhinovirus, enterovirus, parainfluenza and human metapneumovirus.

Table 2.3.3b. Patients testing positive for RSV in Wales, between 2019 week 40 and 2020 week 15, by hospital location and age group

Age Group		In & Out t Wards		t Care & Wards	ICU	ICU Wards		
	n	%	n	%	n	%		
Under 1	310	43.2%	75	18.9%	45	43.7%		
1 to 4	159	22.2%	42	10.6%	5	4.9%		
5 to 9	29	4.0%	5	1.3%	2	1.9%		
10 to 14	10	1.4%	6	1.5%	1	1.0%		
15 to 24	7	1.0%	17	4.3%	4	3.9%		
25 to 34	13	1.8%	28	7.1%	2	1.9%		
35 to 44	9	1.3%	24	6.0%	1	1.0%		
45 to 64	50	7.0%	69	17.4%	11	10.7%		
65 to 74	45	6.3%	55	13.9%	19	18.4%		
75 and older	85	11.9%	76	19.1%	13	12.6%		
Total	717	100%	397	100%	103	100%		

Of all the symptomatic patients in hospitals who were tested for seasonal respiratory pathogens between 2019 week 40 and 2020 week 15, 20.0% were aged 75 or older and 19.4% were 45 to 64 years (Table 2.3.2), the median age of patients tested was 50 years.

For those testing positive for influenza, 20.3% were aged 75 years and older and 17.3% were aged 45 to 64 years; the median patient age was 44 years. The median age of patients testing positive for RSV was 40 months, 35.3% of all these patients were younger than 12 months of age, 16.9% were aged one to four years, and 14.3% were 75 years and older (Table 2.3.2).

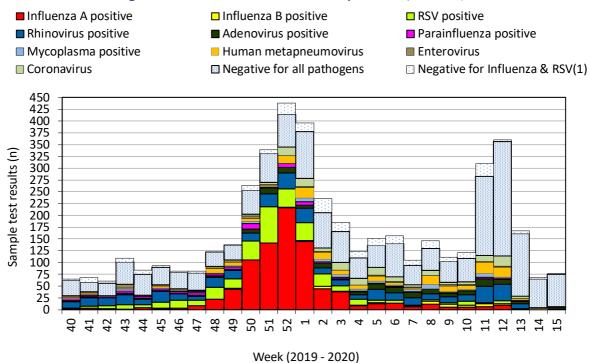
Patients who were aged 75 years and older accounted for the highest proportion of confirmed influenza cases in general inpatient and outpatient hospital wards (20.7%). Patients who were aged 75 years and older and patients aged 45 to 64 years of age accounted for the highest proportion of confirmed influenza cases in patients attending an accident & emergency or urgent care ward (19.9% and 20.1% respectively). Patients aged 45 to 64 years account for the highest proportion of confirmed influenza cases in those who were tested while in an intensive care ward (37.3%). (Table 2.3.3a).

Children who were aged under one year and children aged one to four years accounted for the highest proportion of confirmed cases of RSV in general hospital wards (43.2% and 22.2% respectively). Adults aged 75 and older, as well as children aged under one accounted for the highest proportion of confirmed RSV cases in patients attending an A&E or urgent care ward (19.1% and 18.9% respectively). Children aged under one, adults aged 65 to 74 years and 75 years or older accounted for the highest proportion of confirmed RSV cases in patients who were tested while in an intensive care hospital ward (43.7%, 18.4% and 12.6% respectively) (Table 2.3.3b).

2.4 Hospital indicators - patients in accident and emergency departments

During the period 2019 week 40 to 2020 week 15, 4,282 patients attending an accident & emergency or urgent care ward (A&E ward) with symptoms of an acute respiratory infection had samples collected and were tested. Of the 4,282 patients attending an A&E ward that had a sample collected, all were tested for influenza and RSV, 90.0% (n=3,856/4,282) were tested for all respiratory pathogens included for surveillance purposes and 10.0% (n=426/4,282) were only tested for influenza and RSV.

Figure 2.4.1. Results from respiratory tests carried out on samples from patients in A&E or urgent care units in Wales by Week, 2019/20



¹ A small proportion of samples included have only been tested for influenza and RSV.

Influenza was first detected in patients attending A&E wards from 2019 week 40 (week ending 6th October 2019), and was detected every week through to 2020 week 12. The peak in influenza positive samples was 2019 week 52 (week ending 29 December 2019; 392 patient samples; 143 influenza A(H3), 22 influenza A(H1N1), 51 influenza A not subtyped) and 1 influenza B.

From the A&E patients tested, 21.1% (n=904) were confirmed with influenza, of whom 94.7% (n=856) were positive for influenza A only, 47 patients had influenza B only, and one had dual infections of both influenza A and influenza B. Subtyping of influenza A positive samples breaks down as follows: 65.5% (n=561) were influenza A(H3), 15.4% (n=132) were influenza A(H1N1), and 91.1% (n=164) were not subtyped.

The most commonly detected non-influenza respiratory pathogens from the A&E patients tested were rhinovirus (12.6%, n= 485/3,856), RSV (9.3%, n=397/4,282), human metapneumovirus (5.7% n= 218/3,856) and seasonal coronavirus (4.6%, n=179/3,856). Other detected causes of respiratory

infection included: adenovirus (4.5%, n=172/3,856), parainfluenza (2.5%, n=97/3,856), *Mycoplasma pneumoniae* (2.1%, n=79/3,856) and enterovirus (1.6%, n=60/3,856). Fourty-six percent of the 3,856 A&E patient samples receiving a full PCR screen tested negative for all nine pathogens, and from the patients that were only tested for influenza and RSV, 68.5% (292/426) were negative for both pathogens.

Table 2.4.1. Samples from patients in A&E testing positive for influenza and RSV between 2019 week 40 and 2020 week 15 by age group^{2,3}

Ago Croup	Sample	ples Tested II		uenza A	Influ	uenza B		RSV	Neg	ative ¹
Age Group	n	%	n	%	n	%	n	%	n	%
Under 1	187	4.4%	9	1.1%	1	2.1%	75	18.9%	29	1.4%
1 to 4	209	4.9%	47	5.5%	1	2.1%	42	10.6%	32	1.5%
5 to 9	78	1.8%	24	2.8%	4	0.0%	5	1.3%	22	1.1%
10 to 14	45	1.1%	17	2.0%	2	0.0%	6	1.5%	13	0.6%
15 to 24	330	7.7%	94	11.0%	9	0.0%	17	4.3%	133	6.4%
25 to 34	465	10.9%	126	14.7%	19	39.6%	28	7.1%	191	9.2%
35 to 44	355	8.3%	74	8.6%	4	0.0%	24	6.0%	171	8.3%
45 to 64	991	23.1%	177	20.7%	5	10.4%	69	17.4%	567	27.4%
65 to 74	658	15.4%	111	13.0%	1	2.1%	55	13.9%	382	18.5%
75 and older	964	22.5%	178	20.8%	2	0.0%	76	19.1%	527	25.5%
Total	4282	100%	857	100%	48	0%	397	100%	2067	100%

¹ This measure represents the number of samples negative for all pathogens routinely tested for. A small proportion of samples included have only been tested for influenza and RSV.

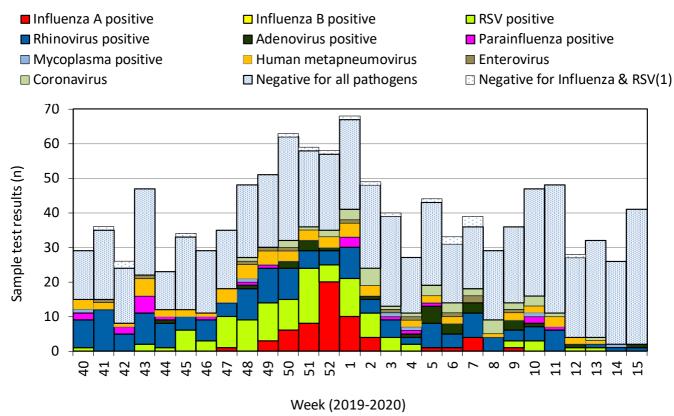
² Samples positive and negative will not add up to total screens as some individuals tested positive for more than one pathogen.

³ Samples are routinely tested for: influenza, RSV, adenovirus, *Mycoplasma pneumoniae*, rhinovirus, enterovirus, parainfluenza and human metapneumovirus.

2.5 Hospital indicators - patients in intensive care units

During the period 2019 week 40 to 2020 week 1,056 samples were collected from patients in an intensive care setting with symptoms of an acute respiratory infection. Of the 1,056 patients in an intensive care unit that had a sample collected, all were tested for influenza and RSV, with 97.9% (n=1,034/1,056) tested for all respiratory pathogens included for surveillance purposes and 2.1% (n=22/1,056) tested for influenza and RSV only.

Figure 2.5.1. Results from respiratory tests carried out on samples from patients in intensive care units in Wales by Week, 2019/20



¹ A small proportion of samples included have only been tested for influenza and RSV.

Influenza was first detected in ICU settings in 2019 week 47, and was detected sporadically up to 2020 week 09. The peak in influenza A(H3) positive samples from patients in an intensive care ward was 2019 week 52 (week ending 29 December 2019; 53 patient samples; 12 influenza A(H3), four influenza A(H1N1); which aligns with the overall peak in influenza positive samples (Figure 2.5.1).

Of the ICU patients tested, 5.6% (n=59) were confirmed with influenza, of whom all were confirmed with influenza A. Subtyping of influenza A positive samples breaks down as follows: 64.4% (n=38) were influenza A(H3), 18.6% (n=11) were influenza A(H1N1) and 17.0% (n=10) were not subtyped.

The most commonly detected non-influenza respiratory pathogens, from the ICU patients tested, were rhinovirus (14.5%, n = 150/1,034), RSV (9.8%, n = 103/1,056) and human metapneumovirus (5.9% n = 103/1,034), RSV (9.8%, n = 103/1,056)

61/1,034). Other detected causes of respiratory infection included: seasonal coronaviruses (3.4%, n=35/1,034), adenovirus (2.6%, n=27/1,034), parainfluenza (2.1%, n=22/1,034), enterovirus (1.2%, n=12/1,034) and *Mycoplasma pneumoniae* (0.6%, n=6/1,034). Sixty-one percent (n=633/1,034) of ICU patient samples screened for all nine pathogens tested negative, and from the ICU patients that were only tested for influenza and RSV, 77.3% (n=17/22) were negative for both pathogens (Table 2.5.1).

Table 2.5.1. Samples from patients in ICU/HDU testing positive for influenza and RSV between 2019 week 40 and 2020 week 15 by age group²

Ago Croup	Samples Tested		Influ	ienza A	Influ	uenza B		RSV	Negative ¹ n % 122 18.8% 2 0.3% 3 0.5% 3 0.5% 12 1.8% 34 5.2% 33 5.1% 184 28.4% 132 20.3% 124 19.1%	
Age Group	n	%	n	%	n	%	n	%	n	%
Under 1	218	20.7%	3	5.1%	0	0.0%	45	43.7%	122	18.8%
1 to 4	25	2.4%	1	1.7%	0	0.0%	5	4.9%	2	0.3%
5 to 9	14	1.3%	1	1.7%	0	0.0%	2	1.9%	3	0.5%
10 to 14	7	0.7%	1	1.7%	0	0.0%	1	1.0%	3	0.5%
15 to 24	25	2.4%	2	3.4%	0	0.0%	4	3.9%	12	1.8%
25 to 34	50	4.7%	1	1.7%	0	0.0%	2	1.9%	34	5.2%
35 to 44	58	5.5%	4	6.8%	0	0.0%	1	1.0%	33	5.1%
45 to 64	276	26.2%	22	37.3%	0	0.0%	11	10.7%	184	28.4%
65 to 74	203	19.2%	12	20.3%	0	0.0%	19	18.4%	132	20.3%
75 and older	179	17.0%	12	20.3%	0	0.0%	13	12.6%	124	19.1%
Total	1055	100%	59	100%	0	0%	103	100%	649	100%

¹ This measure represents the number of samples negative for all pathogens routinely tested for. A small proportion of samples included have only been tested for influenza and RSV.

2.6 Outbreaks of influenza, ILI or acute respiratory illness

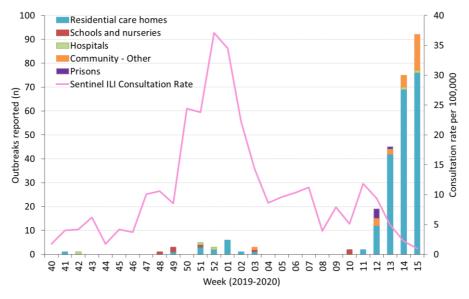
During the 2019/20 influenza season in Wales there were 259 outbreaks of influenza, ILI or acute respiratory illness (ARI) reported to Public Health Wales Health Protection Teams (Figure 2.6.1), compared to 62 reported outbreaks during the 2018/19 season. Outbreaks were reported from 2019 week 41 to 2020 week 15. Influenza A was laboratory confirmed in 4% of the outbreaks reported this season; eight A(H3), one A(H1) and one A(untyped). Of the other 249 outbreaks, 161 were SARS-CoV2 and 88 had no respiratory test result. Eighty-three percent (n=216) of the outbreaks were reported from residential homes, 10% (n=26) were reported from other community settings, 3% (n=7) were reported from school or nursery settings, 2% (n=5) were reported from hospital and 2% (n=5) were reported from prisons. Fifty-nine percent (n=153) of the outbreaks reported occurred in South East Wales (covering Aneurin Bevan UHB, Cardiff and Vale UHB and Cwm Taf Morgannwg UHB areas), 24% (n=62) of the outbreaks occurred in Mid and West Wales (covering Swansea Bay UHB, Hywel Dda UHB and Powys THB), and 17% (n=44) of the outbreaks were reported from North Wales (covering Betsi Cadwaladr UHB). The number of outbreaks reported in hospitals may be underestimated as reporting mechanisms have recently changed.

Twenty-six outbreaks of ILI or acute respiratory illness (ARI) were reported between week 40 and week 10 (before SARS-CoV2 began circulating in Wales), with 58% of the outbreaks in residential homes, 27%

² Samples are routinely tested for: influenza, RSV, adenovirus, *Mycoplasma pneumoniae*, rhinovirus, enterovirus, parainfluenza and human metapneumovirus.

in school settings, 12% in hospitals and 4% were in other settings. Influenza was confirmed in 38% of the outbreaks.

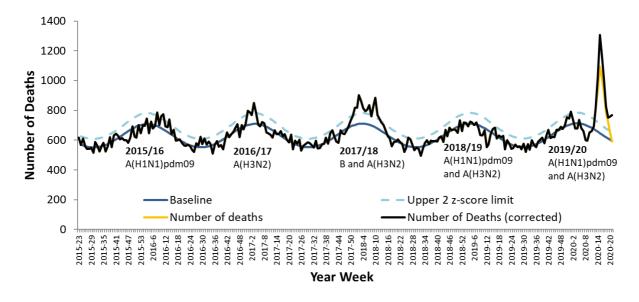
Figure 2.6.1. Outbreaks of acute respiratory illness reported to Public Health Wales Health Protection Team during the 2019/20 season, and sentinel GP ILI consultation rate per 100,000



2.7 Excess mortality during the influenza season

Surveillance of weekly all-cause mortality in Wales during 2019/20 was carried out using the EuroMoMo method by Public Health England [3]. In Wales, during the influenza season significant excess mortality was seen during week 01 2020 at an all Wales level. Due to the COVID-19 pandemic excess mortality was also seen from week 13. This is the highest excess mortality seen in Wales since this analysis began.

Figure 2.7.1. Excess winter mortality, Wales; 2014-2020



3. Influenza virus characterisation, vaccine effectiveness and antivirals

3.1 Laboratory characterisation of influenza viruses

During the 2019/20 influenza season, whole genome characterisation of 117 influenza A viruses was performed. Relatively low viral loads were a problem for influenza B samples which meant successful sequencing could not be performed.

The sequencing demonstrated that high rates of genetic variability were ongoing, certainly for the H3N2 viruses with evidence of the co-circulation of at least four distinct clades. Most H3N2 viruses sequenced in Wales fell into the 3C.3a clade and antigenically matched the 2019/20 seasonal influenza vaccine strain A/Kansas/14/2017 however, the 3C.2a1b viruses also continued not only to circulate but also to increase in their genetic variability with viruses containing key mutations at two sites, T131K that dominated during the 2018/19 season and viruses with T135K. The latter viruses also demonstrated increased genetic variability with some viruses accruing additional mutations. This was to the extent that the T135K viruses were subdivided into A and B subgroups.

There was clear evidence from the genetic sequencing from Wales that every described clade was present in the population. This was reflected globally and directly impacted on the vaccine selection choice for the H3N2 component with the decision delayed until March 2020. Whilst 3C.3a viruses dominated 2019/20 and the 3C.2a1b -T135K viruses dominated 2018/19 the final decision was to choose a 3C2a1b-T131K virus from the B subclade A/HongKong/45/2019, due in part to antigenic discrepancy with the current vaccines, background population immunity and growing global incidence.

Although only 12 H1N1pdm09 viruses were sequenced in Wales this year, again increasing genetic variability was observed, reflecting what was reported globally. Whilst most viruses remain antigenically matched to the vaccine virus A/Brisbane/02/2018, some reported globally with mutations (notable at site N156K) were demonstrating reduced neutralisation to antibodies raised to the vaccine in ferret serum.

In Wales, the viruses circulating belonged to the 6B.1A5 clade with the majority belonging to the 6B.1A5A subclade characterised by the mutations S183P and N129D, the vaccine virus strain for the 2020/21 season A/Hawaii/70/2019 is genetically similar to this subclade. Four viruses belonged to the emerging 6B.1a5B subclade with a mutation E235D.

3.2 Effectiveness of the 2019/20 seasonal influenza vaccine in the UK

During 2019/20 (for the second season) an adjuvanted trivalent vaccine (aTIV) was available for use in those aged 65 years and older. A new high dose trivalent vaccine (TIV-HD) was also available for this age group, although it was not recommended for use in NHS Wales due to the higher list price. For the first time this season a newly licensed cell grown quadrivalent adjuvanted vaccine (QIVc) was available for those eligible aged over 9 years in addition to the standard egg cultured quadrivalent influenza vaccine (QIVe) that is licensed for under 65 year olds.

Provisional end of season estimates of influenza vaccine effectiveness against laboratory confirmed influenza in the UK were published in the PHE annual report [3]. Estimated overall adjusted vaccine effectiveness for the 2019/20 season measured using a test-negative case control design was 42.7% (95% CI 27.8% to 54.5%). At 53.5% (95% CI 20.1% to 72.9%) effectiveness was estimated to be higher against influenza A(H1N1)pdm09 compared to A(H3), 31.2% (95% CI 10.3% to 47.2%).

The estimated effectiveness of the new QIVc vaccine in the 18 to 64 year age group was 63.9% (95% CI 26.9% to 82.2%) compared to 38.9% (95%CI -4.5% to 64.3%) for QIVe. The overall adjusted vaccine effectiveness for LAIV in those two to 17 years of age was 45.4% (95% CI 12.6% to 65.9%). The effectiveness of aTIV in those aged 65+ was 16.2% (95% CI: -58.7%, 55.7%) compared to 22.7% (95%CI: -38.5%, 56.9%) for any vaccine in this age group.

Data published in March 2020 contained information from six vaccine effectiveness studies carried out in 10 European countries, including the United Kingdom. Estimates of overall effectiveness against laboratory confirmed influenza varied from 29% to 61%, depending on study country [4].

3.3 Antiviral prescribing rates and virus sensitivity

The GP prescribing rate of oseltamivir in Wales was measured using data collected through Audit+ on coded prescriptions in general practice. Prescribing of influenza antivirals in general practice was authorised under the Selected List Scheme (SLS) in the period 6th December 2019 to 2nd April 2020. Prescribing rates followed a similar trend to the sentinel GP consultation rate for ILI. Due to a technical issue affecting data submitted from sentinel practices utilising a specific brand of GP software, consultation rates for ILI and antiviral prescribing rates were calculated using a subset of data from 20 practices during week 47 2019 to week 03 2020. The rate peaked at 3.2 prescriptions per 100,000 practice population during week 50 2019 (week ending 15th December, Figure 3.3.1), which was two weeks before the peak for ILI consultations in sentinel practices. Using the subset of sentinel practices, the peak in prescribing rate during 2019/20 was lower than the 2018/19 peak prescribing rate in Wales (Table 3.3.1). However, comparisons should be made with caution as prescribing patterns may differ between practices. During the 2019/20 season in the UK, most viruses were fully susceptible and only small numbers of viruses were detected with reduced sensitivity to oseltamivir or zanamivir [3].

No evidence of mutations that confer antiviral resistance to any of the neuraminidase inhibitors was found in the viruses sequenced in Wales during 2019/20. Additionally, the whole genome sequencing allows for analysis for mutations that might give rise to the new class of antiviral treatment the endonuclease inhibitor Baloxavir – none were found.

Figure 3.3.1. Prescribing rate for oseltamivir per 100,000 practice population in Wales from 2018 week 40 to 2020 week 15 (arrows indicate when antiviral licensing triggers were issued, in line with NICE guidance)

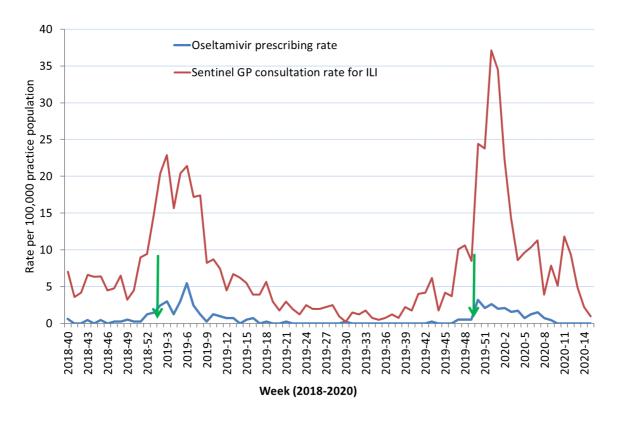


Table 3.3.1. Peak sentinel GP consultation rates for ILI per 100,000 practice population and peak all Wales prescribing rates per 100,000 for influenza seasons from 2010/11 to 2019/20

Influenza Season	Peak sentinel GP ILI consultation rate	Peak all Wales GP oseltamivir prescribing rate
2010/11	92.2	12.4
2011/12	10.4	1.0
2012/13	33.0	0.8
2013/14	8.8	0.2
2014/15	23.2	3.0
2015/16	25.8	1.1
2016/17	22.8	3.4
2017/18	74.5	9.5
2018/19	22.9	5.5
2019/20	37.1	3.2

4. Influenza immunisation in Wales 2019/20

4.1 Data collection

4.1.1 Primary Care data

Data on influenza immunisation for the 2019/20 campaign were collected directly from GP IT systems using the Audit+ Data Quality System. Audit+ interrogates GP systems using specified Read codes and automatically relays the relevant anonymous aggregate data to a central database on a weekly basis. This provides the information required to monitor uptake of influenza immunisation in Wales, whilst minimising impact on GPs. Data were collected on immunisations given and recorded on GP systems between 1st September 2019 and 31st March 2020.

If data from individual General Practices were not received for a particular week, the most recent submission of data from the relevant practice was identified and used. This report is based on data submitted from all 405 practices in Wales.

Data were collected on immunisations given to those aged 65 years and older, those aged between six months and 64 years recorded as belonging to one or more clinical risk group (in total and by specific risk group) and children aged two to three years (age on 31st August 2019). Immunisation uptake figures for pregnant women calculated from practice data represent the proportion of women whose practice records contained Read codes associated with pregnancy at any point during September 2019 to January 2020 who had received an influenza vaccine since 1st September 2019. Risk categories were based on the Read and SNOMED code groups defined in the PRIMIS Seasonal Influenza Vaccine Uptake Reporting Specification for 2019/20 [5].

4.1.2 Point of delivery survey data of coverage in pregnant women

During January 2020 a survey was conducted with Heads of Midwifery and midwifery colleagues in all Welsh health boards of how many women delivering in the major maternity units recalled being offered influenza immunisation, and how many recalled receiving it [6]. During the five-day period, information was collected from 413 women giving birth. This is the sixth year the point of delivery survey has been conducted across maternity units in Wales.

4.1.3 Nursery, Reception class to School Year 6 classes (children aged four to 10 years) data

Data on uptake of Live Attenuated Influenza Vaccine (LAIV) in schoolchildren in reception class and in school years 1 to 6 (children aged four to 10 years of age as at 31st August 2019) were manually submitted by health board Immunisation Coordinators on a fortnightly basis throughout the campaign through an online data reporting survey hosted on SmartSurvey. Uptake figures represent the proportion of children that received LAIV at a school immunisation session. Data on uptake of LAIV in three year old children in nursery classes in Cwm Taf Morgannwg UHB were also manually submitted by the health board Immunisation Coordinator throughout the campaign as part of a nursery school based influenza immunisation programme. Children not attending school and children who were vaccinated in primary care are not included in the data used to calculate uptake in these age groups to avoid double counting of children recorded as vaccinated in both school and general practice datasets.

4.1.4 NHS staff data

Immunisation uptake data for NHS staff employed by health boards and trusts were provided on a monthly basis from October 2019 to March 2020 by health board and trust occupational health departments. Denominator data were sourced at the start of the campaign from health boards and trusts using Electronic Staff Record (ESR) staff groupings. In Wales all NHS staff are offered influenza immunisation, however the approach to offering influenza immunisation to staff not normally considered to have direct patient contact may vary between health boards and trusts. Data provided relates to immunisations given to all staff and staff with direct patient contact which are calculated by aggregating data for ESR staff-groups which would normally have direct contact with patients.

4.1.5 Pharmacy data

Immunisations given in community pharmacies are recorded in the NECAF (National Electronic Claim and Audit Forms) data system. This is an anonymised dataset that provides information on location and health board of the pharmacy; age and eligibility of the patient and date of vaccination. This data provides a more detailed breakdown of carers, however accurate equivalent denominators are not currently available, so it is not possible to calculate uptake. A number of pharmacy vaccinations may also be recorded in general practice systems, so it is not possible to add the number of pharmacy vaccinations to the number of general practice vaccinations as some patients may be double-counted.

4.2 Influenza immunisation uptake

4.2.1 Uptake in children

Of a total 68,022 children aged two and three years old (as at 31 August 2019), 50.7% (n=34,504) were immunised against influenza in general practice between 1st Sept 2019 and 31st March 2020. The number of immunisations given to children aged two and three years old in general practice decreased by 37 in 2019/20 compared to 2018/19. Uptake in two and three year olds varied by health board, ranging from 46.2% (Cardiff and Vale UHB) to 53.9% (Aneurin Bevan UHB). Uptake in three year olds (52.1%) was higher compared to uptake in two year olds (49.3%) (Table 4.2.1).

Table 4.2.1. Uptake of influenza immunisation in general practice in children aged two and three years by health board, Wales, 2019/20¹

Health Board	C	Children aged 2 year	'S	Ch	Children aged 3 years				
Health Board	Immunised (n)	Denominator (n)	Uptake (%)	Immunised (n)	Denominator (n)	Uptake (%)	Uptake (%)		
Aneurin Bevan UHB	3590	6748	53.2	3754	6874	54.6	53.9		
Betsi Cadwaladr UHB	3671	7153	51.3	3862	7299	52.9	52.1		
Cardiff and Vale UHB	2528	5580	45.3	2817	6000	47.0	46.2		
Cwm Taf UHB	2164	5090	42.5	3078	5291	58.2	50.5		
Hywel Dda UHB	1834	3682	49.8	1813	3841	47.2	48.5		
Powys Teaching HB	641	1243	51.6	688	1268	54.3	52.9		
Swansea Bay UHB	2012	3857	52.2	2052	4096	50.1	51.1		
Wales	16440	33353	49.3	18064	34669	52.1	50.7		

¹Children aged three years from Cwm Taf Morgannwg UHB were offered influenza immunisation in nurseries attached to primary schools. Data presented in Table 4.2.1 are provided by general practices and it is likely information for a small proportion of children immunised in nursery sessions in Cwm Taf Morgannwg UHB was not entered in to GP records. As a result, uptake presented here for three year olds in Cwm Taf Morgannwg UHB is likely to underestimate true uptake (see Table 4.2.2 for further information).

In Cwm Taf Morgannwg UHB, LAIV was offered to children aged three years old in nursery classes attached to primary schools. Uptake in this group of children was 66.3% (Table 4.2.2), an increase from 66.1% in 2018/19 in this same age group. Of a total of 5,291 three year old children registered with a GP in Cwm Taf Morgannwg UHB, 2,775 (52.4%) were recorded in the nursery school data.

Table 4.2.2. Uptake of influenza immunisation in children aged three years in nursery classes in Cwm Taf Morgannwg UHB, 2019/20

Health Board	Schools	Children aged 3 years (Nursery classes)					
	targeted (n)	Immunised (n)	Denominator (n)	Uptake (%)			
Cwm Taf UHB	177	1840	2775	66.3			

LAIV was offered in 1,354 schools in Wales to children in reception class, and School Years 1 to 6. Of the 236,924 eligible children who were aged four to 10 years on 31st August 2019, 69.9% (165,575) were immunised against influenza. This remained stable compared to 69.9% in 2018/19 in eligible children immunised in schools. Uptake ranged by HB from 66.9% (Cardiff and Vale UHB) to 76.0% (Powys Teaching HB) (Table 4.2.3).

Uptake in school reception classes (children four to five years of age) decreased to 71.7% (23,312/32,535) from 72.1% in the same age group last year. Uptake varied by HB, ranging from 68.2% (Aneurin Bevan UHB) to 77.1% (Powys Teaching HB) (Table 4.2.4).

Uptake in School Year 1 (children five to six years of age) decreased to 71.6% (23,382/32,646) from 71.8% in the same age group last year. Uptake varied by HB, ranging from 69.2% (Betsi Cadwaladr UHB) to 77.1% (Powys Teaching HB) (Table 4.2.4).

Uptake in School Year 2 (children six to seven years of age) increased to 71.5% (23,971/33,532) from 71.2% in the same age group last year. Uptake varied by HB, ranging from 68.8% (Betsi Cadwaladr UHB) to 76.5% (Swansea Bay UHB) (Table 4.2.4).

Uptake in School Year 3 (children seven to eight years of age) decreased to 69.9% (24,209/34,649) from 70.8% in the same age group last year. Uptake varied by HB, ranging from 66.0% (Cardiff and Vale UHB) to 75.2% (Swansea Bay UHB) (Table 4.2.4).

Uptake in School Year 4 (children eight to nine years of age) increased to 69.6% (24,528/35,249) from 68.7% in the same age group last year. Uptake varied by HB, ranging from 65.4% (Cardiff and Vale UHB) to 75.1% (Swansea Bay UHB) (Table 4.2.4).

Uptake in School Year 5 (children nine to 10 years of age) decreased to 68.0% (23,318/34,306) from 68.1% in the same age group last year. Uptake varied by HB, ranging from 63.8% (Betsi Cadwaladr UHB) to 72.6% (Cwm Taf Morgannwg UHB) (Table 4.2.4).

Uptake in School Year 6 (children 10 to 11 years of age) increased to 67.2% (22,855/34,007) from 66.6% in the same age group last year. Uptake varied by HB, ranging from 61.6% (Cardiff and Vale UHB) to 86.5% (Powys Teaching HB) (Table 4.2.4).

Table 4.2.3. Uptake of influenza immunisation in all eligible school children by health board, Wales, 2019/20

Health Board	Schools	All children aged 4 to 10 years					
nealth board	targeted (n)	Immunised (n)	Denominator (n)	Uptake (%)			
Aneurin Bevan UHB	205	33392	49093	68.0			
Betsi Cadwaladr UHB	389	36515	54266	67.3			
Cardiff and Vale UHB	150	23518	35143	66.9			
Cwm Taf UHB	177	23413	31738	73.8			
Hywel Dda UHB	206	20193	28375	71.2			
Powys Teaching HB	86	7157	9423	76.0			
Swansea Bay UHB	141	21387	28886	74.0			
Wales	1354	165575	236924	69.9			

Table 4.2.4. Uptake of influenza immunisation in school children aged four to ten years by health board, Wales, 2019/20

		School children aged:							
Health Board	Schools	4 years	5 years	6 years	7 years	8 years	9 years	10 years	
	targeted (n)	Uptake (%)	Uptake (%)	Uptake (%)	Uptake (%)	Uptake (%)	Uptake (%)	Uptake (%)	
Aneurin Bevan UHB	205	68.2	69.5	69.4	67.9	68.0	67.2	65.9	
Betsi Cadwaladr UHB	389	71.9	69.2	68.8	68.1	66.3	63.8	63.5	
Cardiff and Vale UHB	150	69.9	69.8	69.1	66.0	65.4	66.9	61.6	
Cwm Taf UHB	177	74.2	75.1	75.4	73.9	73.7	72.6	71.5	
Hywel Dda UHB	206	71.7	73.9	72.3	70.3	72.3	69.9	67.9	
Powys Teaching HB	86	77.1	77.1	76.2	73.1	72.4	69.4	86.5	
Swansea Bay UHB	141	74.8	74.1	76.5	75.2	75.1	71.1	71.6	
Wales	1354	71.7	71.6	71.5	69.9	69.6	68.0	67.2	

Uptake in children at risk aged two to three years was 58.8% and ranged by health board from 56.6% (Cardiff and Vale UHB) to 66.3% (Powys THB). Uptake in children at risk aged four to 10 years was 51.8% and ranged by health board from 19.1% (Cardiff and Vale UHB) to 63.9% (Aneurin Bevan UHB). The proportion of children in a risk group vaccinated aged four to 10 years may be higher as some vaccinations given in school sessions will not be recorded on the child's General Practice record. Uptake in children at risk aged 11 to 17 years was 35.0% and ranged by health board from 29.9% (Hywel Dda UHB) to 37.9% (Cardiff and Vale UHB) (Table 4.2.5).

Table 4.2.5. Uptake of influenza immunisation in children aged two to seventeen with a risk condition by health board, Wales, $2019/20^{1,2,3}$

Health Board	Chile	Children aged 2-3 years			Children aged 4-10 years			Children aged 11-17 years		
	Immunised	Denominator	Uptake	Immunised	Denominator	Uptake	Immunised	Denominator	Uptake	
	(n)	(n)	(%)	(n)	(n)	(%)	(n)	(n)	(%)	
Aneurin Bevan UHB	272	461	59.0	2238	3501	63.9	1577	4239	37.2	
Betsi Cadwaladr UHB	269	449	59.9	2180	3798	57.4	1765	4836	36.5	
Cardiff and Vale UHB	206	364	56.6	585	3061	19.1	1381	3644	37.9	
Cwm Taf UHB	222	389	57.1	1755	2861	61.3	1085	3400	31.9	
Hywel Dda UHB	132	225	58.7	939	1802	52.1	759	2539	29.9	
Powys Teaching HB	59	89	66.3	335	659	50.8	313	992	31.6	
Swansea Bay UHB	149	251	59.4	1110	1952	56.9	939	2719	34.5	
Wales	1309	2228	58.8	9142	17634	51.8	7819	22369	35.0	

¹Age as at 31/08/2019.

² Data from Audit+

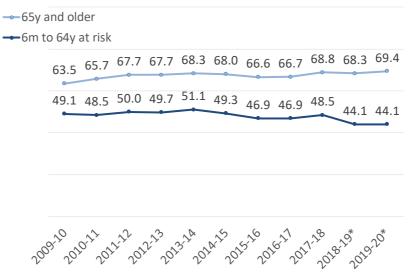
³All children aged four to 10 years are eligible for immunisation through school vaccination sessions. Data presented here for four to 10 year olds in clinical risk groups show the numbers of patients at clinical risk, whose GP record contains appropriate influenza vaccination Read codes; and is likely to underestimate true uptake in the group.

4.2.2 Uptake in those aged 65 years and older and aged six months to 64 years in clinical risk groups

Uptake of influenza vaccine in those aged 65 years and older was 69.4%, an increase compared to 68.3% in the 2018/19 season (Figure 4.2.1). Of all influenza immunisations given to those aged 65 years and over, 90% were delivered by the week ending 1st December 2019 (Figure 4.2.2). Uptake varied by HB from 64.8% (Hywel Dda UHB) to 71.4% (Betsi Cadwaladr UHB), (Table 4.2.6, Figure 4.2.3) and ranged by Local Authority (LA) area from 59.2% (Ceredigion) to 74.5% (Monmouthshire) (Appendix Table A1). For patients aged 65 years or older, 10.4% were recorded as having declined immunisation, compared to 11.6% in the 2018/19 season. No HB or LA area achieved the 75% target.

Uptake in those aged six months to 64 years in a clinical risk group was 44.1%, the same as 2018/19 (Figure 4.2.1). Of all immunisations given to those aged six months to 64 years in clinical risk groups, 90% were delivered by the week ending 5th January 2020 (Figure 4.2.2). Uptake ranged by HB from 40.2% (Hywel Dda UHB) to 46.9% (Betsi Cadwaladr UHB) (Table 4.2.6, Figure 4.2.4) and by LA area from 37.5% (Ceredigion) to 54.0% (Monmouthshire) (Appendix Table A1). The proportion of all people aged six months to 64 years recorded in one or more clinical risk categories was 17.3% (an increase from 16.8% in 2018/19). Of those aged six months to 64 years a clinical risk group, 9.6% were recorded as having declined immunisation, compared to 9.7% in 2018/19. No HB or LA met the 55% target.

Figure 4.2.1. Annual trends in influenza immunisation uptake (%) in those aged 65 years and over and in those aged six months to 64 years in clinical risk groups, Wales, 2009/10 - 2019/20



^{*}Data for those aged six months to 64 years at risk includes those morbidly obese not otherwise at risk. Prior to 2018/19 this group were not included in the overall uptake figures for this category.

Figure 4.2.2. Weekly trend in uptake of influenza vaccine in patients aged 65 years and over and in those aged six months to 64 years in clinical risk groups, Wales, 2018/19 and 2019/20

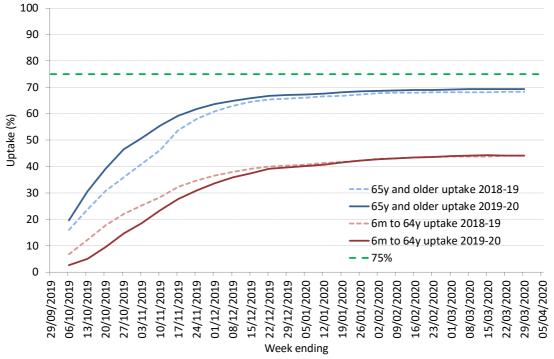


Table 4.2.6. Trends in uptake (%) of influenza immunisation in health boards, Wales, 2016/17 - 2019/20

Health Board	Uptake in patients aged 65y and older (%)				Uptake in patients younger than 65y at risk (%)			
	2016/17	2017/18	2018/19	2019/20	2016/17	2017/18	2018/19 ¹	2019/20 ¹
Aneurin Bevan UHB	68.1	69.8	69.7	70.8	49.7	50.8	46.9	46.5
Betsi Cadwaladr UHB	68.7	70.6	71.0	71.4	49.3	51.6	47.9	46.9
Cardiff and Vale UHB	69.0	71.0	69.9	71.2	48.3	49.0	44.0	43.8
Cwm Taf Morgannwg / Cwm Taf UHB	64.9	67.7	67.1	68.9	45.2	46.8	40.0	40.3
Hywel Dda UHB	63.4	65.0	62.9	64.8	42.3	42.9	38.1	40.2
Powys Teaching UHB	63.9	66.3	65.5	67.1	46.0	47.9	43.1	44.3
Swansea Bay / ABM UHB	65.0	68.2	68.1	68.1	43.7	46.7	43.0	44.0
Wales	66.7	68.8	68.3	69.4	46.9	48.5	44.1	44.1

¹Data for those aged six months to 64 years at risk includes those morbidly obese not otherwise at risk. Prior to 2018/19 this group were not included in the overall uptake figures for this category.

Figure 4.2.3. Uptake of influenza immunisation in health boards in Wales in patients aged 65 years and over, 2016/17 - 2019/20

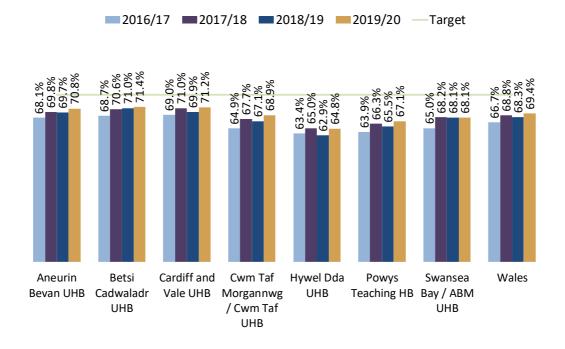
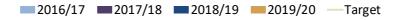
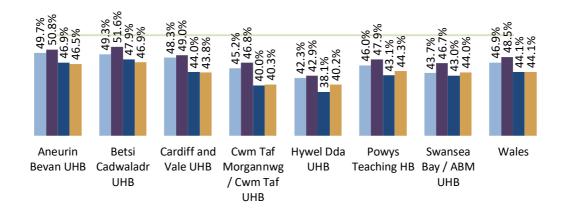


Figure 4.2.4. Uptake of influenza immunisation in health boards in Wales in patients aged six months to 64 years in clinical risk groups, 2016/17 - 2019/20

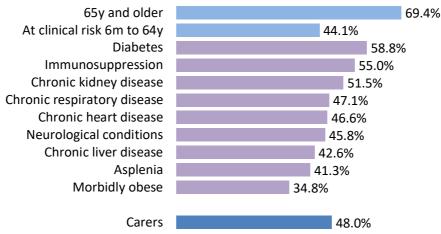




4.2.3 Immunisation uptake by risk group

Vaccine uptake in those aged six months to 64 years in a clinical risk group (including morbidly obese adults not otherwise at risk) was 44.1%. Many people will have more than one clinical risk, for example, a patient may suffer from both diabetes and chronic heart disease, therefore the same patient may be represented in the uptake figures for more than one risk group. However, a patient will only be counted once in the overall total uptake figure of 44.1% for those aged six months to 64 years in a clinical risk group, irrespective of how many clinical risk conditions they suffer from. Numbers of individuals coded as being in each clinical risk group can be found in appendix Table A2.

Figure 4.2.5. Influenza immunisation uptake rates in patients aged 65 years and over and six months to 64 years at risk, by individual risk group, Wales, 2019/20



- Chronic heart disease was recorded in 2.7% of patients aged six months to 64 years, of whom 46.6% were immunised against influenza (Figure 4.2.5, Appendix Table A2). Uptake by HB ranged from 42.7% (Hywel Dda UHB) to 50.5% (Aneurin Bevan UHB).
- Chronic respiratory disease was recorded in 7.9% of patients aged six months to 64 years, of whom 47.1% were immunised against influenza (Figure 4.2.5, Appendix Table A2), ranging by HB from 43.2% (Hywel Dda UHB) to 49.6% (Aneurin Bevan UHB). At Wales level, 57.7% of those with COPD were immunised against influenza, whilst 46.5% of those with asthma and 49.9% of those with non-asthma non-COPD respiratory were immunised against influenza.
- Chronic kidney disease was recorded in 0.6% of patients aged six months to 64 years, of whom 51.5% were immunised against influenza (Figure 4.2.5, Appendix Table A2), ranging by HB from 46.3% (Hywel Dda UHB) to 55.6% (Betsi Cadwaladr UHB).
- Diabetes was recorded in 3.4% of patients aged six months to 64 years, of whom 58.8% were immunised against influenza (Figure 4.2.5, Appendix Table A2), ranging by HB from 54.5% (Hywel Dda UHB) to 60.5% (Aneurin Bevan UHB and Cardiff & Vale UHB).
- Immunosuppression due to disease or treatment was recorded in 1.0% of patients aged six months to 64 years, of whom 55.0% were immunised against influenza (Figure 4.2.5, Appendix Table A2), ranging by HB from 47.1% (Cwm Taf Morgannwg UHB) to 60.2% (Betsi Cadwaladr UHB).

- Chronic liver disease was recorded in 0.4% of patients aged six months to 64 years, of whom 42.6% were immunised against influenza (Figure 4.2.5, Appendix Table A2), ranging by HB from 40.0% (Hywel Dda UHB) to 46.2% (Powys Teaching HB).
- Chronic neurological conditions (including stroke and TIA) were recorded in 1.4% of patients aged six months to 64 years, of whom 45.8% were immunised against influenza (Figure 4.2.5, Appendix Table A2), ranging by HB from 41.7% (Hywel Dda UHB) to 48.8% (Betsi Cadwaladr UHB).
- Morbidly obese was recorded in 3.2% of patients aged six months to 64 years, of whom 34.8% were immunised against influenza (Figure 4.2.5, Appendix Table A2). Uptake ranged by HB from 29.5% (Cwm Taf Morgannwg UHB) to 38.4% (Betsi Cadwaladr UHB). For those aged 18 to 64 years, 34.9% were immunised against influenza.
- Being asplenic (or having a dysfunctional spleen) was recorded in 0.5% of patients aged six months to 64 years, of whom 41.3% were immunised against influenza (Figure 4.2.5, Appendix Table A2), ranging by HB from 38.5% (Cwm Taf Morgannwg UHB) to 44.7% (Betsi Cadwaladr UHB).
- A total of 34,577 people aged six months to 64 years were recorded as being a carer (including carers who are also in a clinical risk group), of whom 48.0% were immunised against influenza (Figure 4.2.5, Appendix Table A4). These figures only include those who have identified themselves as a carer to their GP, and have been coded appropriately in the GP records; the true denominator for carers is likely to be higher. Uptake ranged by HB from 42.7% (Hywel Dda UHB) to 53.1% (Aneurin Bevan UHB).

4.2.4 Uptake in pregnant women

Coverage of influenza vaccination in pregnant women was measured using two methods:

- 1. A five-day survey carried out with health board midwifery services in major maternity units across Wales, ascertaining self-reported vaccination status for the women delivering during the survey period. Ascertainment of pregnancy status is more robust using this method. However, the survey does not capture information on women whose pregnancies ended with outcomes other than a birth in a major maternity unit.
- 2. Weekly collections of data from GPs using Audit+. This method provides timely data on immunisations given to pregnant women, however ascertaining pregnancy status using Read codes in GP data systems can be problematic and results in underestimation of uptake in this group.

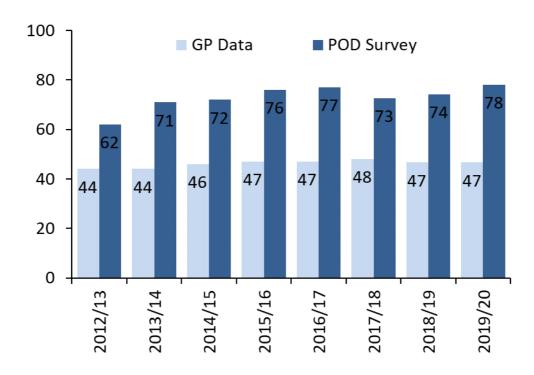
From 1st September 2019 to 31st January 2020, 26,080 women were coded in General Practice with Read codes associated with pregnancy. Out of these women, 2,995 (11.5%) had an existing risk (as defined by the CMO letter [1]), the remainder (23,085) did not have another identified clinical risk (Appendix Table A3). Uptake of influenza vaccination in all pregnant women, measured using GP data was 47.4% and ranged by HB from 43.4% (Cwm Taf Morgannwg UHB) to 58.7% (Powys THB). Uptake in pregnant women with another existing risk condition was 60.6% and ranged by HB from 53.3% (Swansea Bay UHB) to 70.5% (Powys THB). Uptake in pregnant women without another existing risk condition was 46.0%, and ranged by HB from 41.5% (Cwm Taf Morgannwg UHB) to 57.0% (Powys THB).

The point of delivery (POD) survey included 413 women giving birth during a five-day period in January 2020 [6]. Data were submitted by all health boards in Wales. Uptake of influenza immunisation recalled in this group was 78.5% (95% CI 74.2%-82.3%), an increase compared to 74.2% (95% CI 69.7%-78.3%) last year and above the 75% vaccination target set by Welsh Government. Uptake increased in four HBs (Cardiff and Vale UHB, Cwm Taf Morgannwg UHB, Hywel Dda UHB and Powys THB) compared to the 2018/19 survey, and decreased in the remaining three HBs [6]. The survey also found that 96.9% of the women could recall being offered influenza immunisation, an increase of 3.6 from 93.3% last year (Table 4.2.7 and Figure 4.2.8). The estimates using GP data are uniformly lower than those estimated using the survey at the point of delivery (Figure 4.2.6).

Table 4.2.7. Number of women offered influenza vaccine during pregnancy, Wales, 2019/20 (Data source: 2019/20 point of delivery survey)

Women offered influ	enza vaccinatior	n while pregnant
	n	%
Yes	400	96.9
No	8	1.9
Not sure/missing	5	1.2
Total	413	100

Figure 4.2.6. Uptake (%) of influenza vaccination in pregnant women by data source, Wales, 2012/13-2019/20



Although there may be problems with ascertainment of the percentage uptake, data provided by GPs on uptake in pregnancy are still useful in estimating and monitoring the number of pregnant women in

Wales who have received influenza vaccination each season. During the 2019/20 winter, 12,292 women whose GP record contained Read codes relating to pregnancy were recorded as having received influenza vaccination. This is a decrease from the 2018/19 total of 12,591 women vaccinated.

4.2.5 Estimated numbers of individuals immunised in Wales in 2019/20

The estimated total number of individuals recorded by their general practice as immunised against influenza was 876,062 as at 31st March 2020, based on Read coded data reported from all practices in Wales for 2019/20. This represents an estimated 28% of the population of Wales.

This includes 469,497 individuals aged 65 years and over, 197,481 aged six months to 64 years in a clinical risk group, 12,434 pregnant women, 34,504 children aged two and three years and 16,589 carers. Vaccinated individuals are ascertained using Read codes which correspond to eligibility criteria [5].

The remaining 145,557 immunisations were likely received by:

- Patients aged younger than 65 years who did not have Read codes attached to their GP records
 which are recommended for use in surveillance of influenza immunisation uptake in risk groups
 who were regarded as at risk by GPs based on clinical judgement.
- Those in long-stay residential homes who are not aged 65 years or older, and not in a clinical risk group.
- Patients immunised by other service providers, for example occupational health departments and school nursing services, whose GPs were notified and whose records were updated with appropriate vaccination Read codes.

The estimated total of 876,062 individuals immunised in 2019/20 is an increase on the estimated 868,688 individuals immunised during the 2018/19 influenza immunisation campaign. These estimates are based on data recorded by general practices, the actual number of individuals immunised against influenza in Wales will be higher as not all immunisations given by other service providers will be recorded in general practice databases. In addition, the extent to which immunisations given in community pharmacies are recorded using Read codes in GP patient databases is unknown; these vaccinations may be under-reported in uptake figures calculated using GP data.

4.2.6 Uptake in NHS staff in Wales

All health boards and NHS trusts in Wales provided NHS staff immunisation uptake data. Uptake in staff groups expected to have direct patient contact was 58.9% (n=36,190) (Table 4.2.8). Uptake in staff with direct patient contact ranged by organisation from 41.3% (Welsh Ambulance Service NHS Trust) to 67.8% (Public Health Wales NHS Trust). Uptake in staff groups ranged from 40.3% (Estates and Ancillary) to 66.8% (Allied Health Professionals) (Table 4.2.9).

There were a total of 90,459 NHS health board or trust staff reported under the care of NHS Occupational Health departments in Wales and offered influenza vaccination, of whom 56.0% (n=50,649) were immunised during 2019/20, an increase of 2.6 from 53.4% in 2018/19. Uptake has now increased in nine of the ten years since 2009/10 (11.6%). Uptake in all staff ranged by organisation from 42.2%

(Welsh Ambulance Service NHS Trust) to 64.2% (Public Health Wales NHS Trust). Eight health boards and NHS Trusts showed an increase in uptake compared to the previous season (Figure 4.2.7 and Figure 4.2.8).

In four HBs (Aneurin Bevan UHB, Cardiff and Vale UHB, Cwm Taf Morgannwg UHB and Powys Teaching HB) and in two NHS Trusts (Public Health Wales NHS Trust and Velindre NHS Trust), uptake of influenza vaccination in staff with direct patient contact exceeded the Welsh Government target of 60% (Table 4.2.8).

Table 4.2.8. Uptake of influenza immunisation in NHS staff in Wales, 2019/20

		Total Staff		Staff with	direct patient c	ontact ¹
Health Board/Trust	Immunised	Denominator	Uptake	Immunised	Denominator	Uptake
	(n)	(n)	(%)	(n)	(n)	(%)
Aneurin Bevan UHB	8076	13382	60.3	5654	9133	61.9
Betsi Cadwaladr UHB	10068	18036	55.8	7275	12700	57.3
Cardiff and Vale UHB	8738	15098	57.9	6886	10829	63.6
Cwm Taf Morgannwg UHB	6767	11742	57.6	4926	7800	63.2
Hywel Dda UHB	4713	9881	47.7	3404	6895	49.4
Powys Teaching HB	1290	2239	57.6	883	1374	64.3
Swansea Bay UHB	7269	12962	56.1	5247	8942	58.7
Velindre NHS Trust	912	1495	61.0	492	747	65.9
Welsh Ambulance Service NHS Trust	1520	3606	42.2	925	2241	41.3
Public Health Wales NHS Trust	1296	2018	64.2	498	734	67.8
Wales	50649	90459	56.0	36190	61395	58.9

¹ Combined figures for: Additional Prof Scientific and Technical, Additional Clinical Services, Allied Health Professions, Medical and Dental, Nursing & Midwifery Registered staff groups.

Figure 4.2.7. Uptake of influenza immunisation in NHS staff with direct patient contact in Wales, 2016/17 - 2019/20

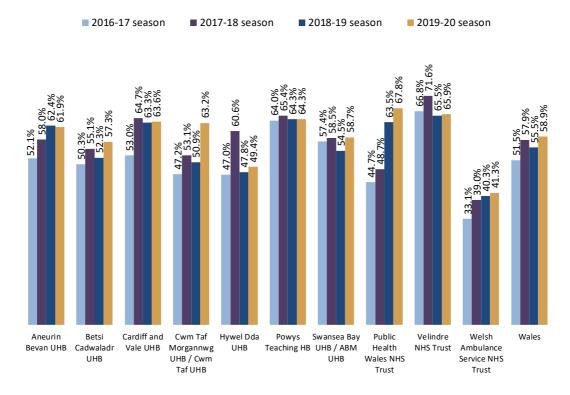


Figure 4.2.8. Number of influenza immunisations in Welsh Health Board & NHS Trust staff with direct patient contact – seasonal comparison 2018/19 and 2019/20.

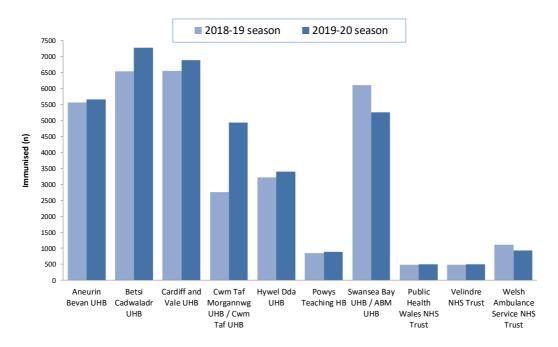


Table 4.2.9. Uptake of influenza immunisation in NHS staff groups, Wales, 2019/20

		Staff	
ESR staff group	Immunised	Denominator	Uptake
	(n)	(n)	(%)
Additional Clinical Services	9279	17036	54.5
Additional Prof Scientific and Technical	1870	3433	54.5
Administrative and Clerical	8858	16298	54.4
Allied Health Professionals	3619	5415	66.8
Estates and Ancillary	3314	8230	40.3
Healthcare Scientists	894	1887	47.4
Medical and Dental	4408	7010	62.9
Nursing & Midwifery Registered	15591	25526	61.1

4.2.7 Immunisations given in community pharmacies

A total of 64,085 people were immunised against influenza in community pharmacies in Wales, as at 31st March 2020. The highest number of influenza immunisations given in this setting was in Betsi Cadwaladr UHB (22.5%) whilst the lowest number was in Powys Teaching HB (3.7%) (Table 4.2.10).

The majority of influenza immunisations given in community pharmacies were given to individuals aged 65 years and older (56.6%); whilst 29.7% of immunisations were given to those in one or more risk group (Table 4.2.11). Of the influenza immunisations given to those in a risk group, the majority were given to individuals with chronic respiratory disease (50.1%) and individuals with diabetes (21.5%) (Table 4.2.12).

Table 4.2.10. Number of influenza immunisations given in community pharmacies in Wales, by health board, 2019/20

Health board	Immur	nised
неанн воага	(n)	(%)
Aneurin Bevan UHB	10223	21.3
Betsi Cadwaladr UHB	14396	17.4
Cardiff and Vale UHB	9163	21.5
Cwm Taf Morgannwg UHB	9873	15.3
Hywel Dda UHB	9796	8.1
Powys Teaching HB	2378	13.0
Swansea Bay UHB	8256	3.5
Wales	64085	100.0

Figure 4.2.9. Proportion of influenza immunisations given in community pharmacies in Wales, by age-group distribution 2019/20

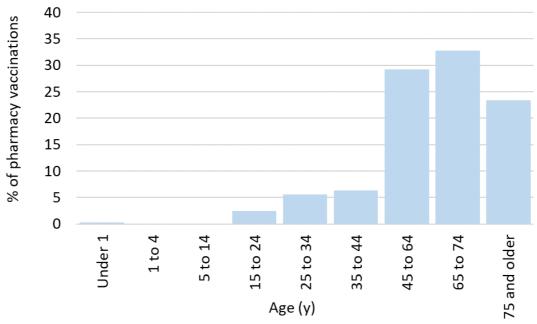


Table 4.2.11. Number of influenza immunisations given in community pharmacies, by eligibility group, 2019/20

	Immu	inised in pharmacies	Total recorded as	% of total vaccinations
Eligibility	_	% of total pharmacy	vaccinated in general	given through
	n	influenza vaccinations	practice databases (n) ¹	pharmacies ¹
Aged 65 or over	36254	56.6	469497	7.7
Risk group	19037	29.7	197481	9.6
Carer ²	3096	4.8	16589	18.7
Pregnancy	1115	1.7	12434	9.0
Care home staff	2844	4.4	-	-
Other ³	1739	2.7	-	-
Total	64085	100.0		

¹ Completeness of reporting of pharmacy vaccinations to general practices and consistency of coding for pharmacy vaccinations in general practice databases are unknown. Due to this, the total number of individuals vaccinated may be an underestimate.

² Includes informal unpaid and voluntary sector unpaid carers.

³ Includes individuals who are categorised as: Community First Responder; Designated First Aider; Domiciliary carers; Household contact of immunocompromised; Not in a risk group; People living in long-stay residential care homes or other long-stay care facilities; Third Sector Carer; Other (as specified in PGD).

Table 4.2.12. Number of influenza immunisations given in community pharmacies, by risk group, 2019/20

	Imm	unised in pharmacies	Total recorded as	% of total vaccinations
Risk group	n	% of total pharmacy influenza vaccinations	vaccinated in general practice databases (n) ¹	given through pharmacies ¹
Asplenia or splenic dysfunction	105	0.6	4980	2.1
Chronic Heart Disease	1919	10.1	32131	6.0
Chronic Kidney Disease	252	1.3	7427	3.4
Chronic Liver Disease	140	0.7	4528	3.1
Chronic Neurological Disease	892	4.7	16679	5.3
Chronic Respiratory Disease	9543	50.1	97013	9.8
Diabetes	4095	21.5	52497	7.8
Immuno-suppressed	1914	10.1	14383	13.3
Morbidly obese adults	177	0.9	29109	0.6
Total	19037	100.0	197481	9.6

¹Completeness of reporting of pharmacy vaccinations to general practices and consistency of coding for pharmacy vaccinations in general practice databases are unknown. Due to this the total number of individuals vaccinated may be an underestimate.

5. Conclusions

Although it was shorter in duration that the 2018/19 influenza seasons, the 2019/20 season still presented a substantial burden of disease to the population of Wales and additional pressures to health care services in Wales. Co-circulation of influenza A(H1) and influenza A(H3) viruses; and the absence of significant influenza B activity demonstrates the year-on-year variability in patterns virus circulation.

The continuation of rapid influenza testing for those attending hospital highlights the burden of influenza for hospital attendances, with more than 900 confirmed cases in Emergency Department. During the peak week for confirmed case in EDs, more than half of those tested were positive for influenza.

Once again this season, more patients than ever at risk or in eligible groups were vaccinated against influenza, although due to the expanding nature of the eligible groups, this was not reflected in increaser percentage uptake. The roll-out of the childhood flu programme is complete for all primary school ages and uptake remains high in the school-aged groups.

Vaccine effectiveness studies from the UK show that the 2019/20 flu vaccine showed significant effectiveness against influenza A(H3) and influenza A(H1). The genetic variation and continued divergence of influenza A(H3N2) virus clades continues to pose challenges to vaccine effectiveness, with potential for limited cross-protection against circulating clades.

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 5845E00479294/\$File/Seasonal Flu LQD Specification 2019%20v%2011.2%20SCT.pdf

Further information on influenza and influenza immunisation can be found using the links below:

Information for Health Professionals on influenza immunisation (NHS Wales only):

http://howis.wales.nhs.uk/sites3/page.cfm?orgid=474&pid=54871

Information on influenza:

http://www.wales.nhs.uk/sites3/page.cfm?orgId=457&pid=27522

General information on influenza immunisation in Wales:

http://www.wales.nhs.uk/sites3/page.cfm?orgid=457&pid=25480

Influenza surveillance in Wales:

http://www.wales.nhs.uk/sites3/page.cfm?orgid=457&pid=27922

7. Information about this report

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Public Health Wales Vaccine Preventable Disease Programme and Communicable Disease Surveillance Centre. Seasonal Influenza in Wales - 2019/20, October 2020. Cardiff: Public Health Wales.

8. Appendix A: Influenza immunisation data tables Table A1. Uptake of influenza immunisation in Wales 2019/20.

	Patients	aged 65y and o	older	Patients a	ged 6m to 64y	at risk
Local Authority	Immunised	Denominator	Uptake	Immunised	Denominator	Uptake
	(n)	(n)	(%)	(n)	(n)	(%)
Aneurin Bevan UHB						
Blaenau Gwent LA	9,615	14,353	67.0	5,089	11,479	44.3
Caerphilly LA	25,457	36,969	68.9	12,064	27,213	44.3
Monmouthshire LA	18,798	25,230	74.5	7,148	13,238	54.0
Newport LA	19,347	27,104	71.4	10,228	21,692	47.2
Torfaen LA	14,135	19,651	71.9	6,938	15,640	44.4
Health Board Total	87,352	123,307	70.8	41,467	89,262	46.5
Betsi Cadwaladr UHB						
Anglesey LA	12,427	17,073	72.8	4,647	9,321	49.9
Conwy LA	21,703	31,138	69.7	6,832	15,020	45.5
Denbighshire LA	17,061	24,654	69.2	6,389	14,322	44.6
Flintshire LA	23,937	32,257	74.2	10,217	20,842	49.0
Gwynedd LA	19,288	28,087	68.7	7,345	16,009	45.9
Wrexham LA	21,961	29,868	73.5	9,534	20,282	47.0
Health Board Total	116,377	163,077	71.4	44,964	95,796	46.9
Cardiff and Vale UHB						
Cardiff LA	39,116	55,128	71.0	22,108	50,009	44.2
Vale of Glamorgan LA	19,654	27,393	71.7	7,279	17,009	42.8
Health Board Total	58,770	82,521	71.2	29,387	67,018	43.8
Cwm Taf Morgannwg UHB						
Bridgend LA	23,324	32,618	71.5	9,812	23,738	41.3
Merthyr Tydfil LA	7,678	11,313	67.9	3,824	9,366	40.8
Rhondda Cynon Taff LA	33,619	49,895	67.4	14,805	37,426	39.6
Health Board Total	64,621	93,826	68.9	28,441	70,530	40.3
<u>Hywel Dda UHB</u>						
Carmarthenshire LA	28,156	42,513	66.2	10,149	25,106	40.4
Ceredigion LA	13,663	23,082	59.2	4,152	11,068	37.5
Pembrokeshire LA	20,710	30,836	67.2	6,879	16,485	41.7
Health Board Total	62,529	96,431	64.8	21,180	52,659	40.2
Powys Teaching HB	25,222	37,587	67.1	7,867	17,764	44.3
rowys reaching hib	25,222	37,367	07.1	7,607	17,704	77.3
Swansea Bay UHB						
Neath Port Talbot LA	20,319	29,698	68.4	9,451	20,847	45.3
Swansea LA	34,307	50,492	67.9	14,724	34,142	43.1
Health Board Total	54,626	80,190	68.1	24,175	54,989	44.0
Wales Total	469,497	676,939	69.4	197,481	448,018	44.1
				•		

Table A2. Uptake of influenza immunisation in those aged six months to 64 years with one or more clinical risk (by risk category) in Wales 2019/20.

vvales 2019/20.																	
	Total patients	С	hronic	heart diseas	e	Chro	onic res	piratory dise	ase	Cl	nronic	kidney disea	ise	Diabetes			
Local Authority	aged 6m to 64y	Wit	:h	Immunised	Uptake	With con		Immunised	Uptake	Wit		Immunised	Uptake	Wit		Immunised	Uptake
		condit	tion	(n)	(%)	(n)	(%)	(n)	(%)	condit	tion	(n)	(%)	condit	tion	(n)	(%)
Aneurin Bevan UHB																	
Blaenau Gwent LA	57,536	1,765	3.1	841	47.6	5,066	8.8	2,489	49.1	406	0.7	206	50.7	2,485	4.3	1,400	56.3
Caerphilly LA	151,874	4,167	2.7	2,039	48.9	11,568	7.6	5,617	48.6	722	0.5	372	51.5	5,841	3.8	3,582	61.3
Monmouthshire LA	77,228	2,188	2.8	1,227	56.1	6,020	7.8	3,450	57.3	451	0.6	275	61.0	2,434	3.2	1,573	64.6
Newport LA	132,775	3,088	2.3	1,551	50.2	9,368	7.1	4,788	51.1	638	0.5	351	55.0	4,900	3.7	2,944	60.1
Torfaen LA	77,135	2,377	3.1	1,196	50.3	7,767	10.1	3,391	43.7	357	0.5	210	58.8	2,942	3.8	1,753	59.6
Health Board Total	496,548	13,585	2.7	6,854	50.5	39,789	8.0	19,735	49.6	2,574	0.5	1,414	54.9	18,602	3.7	11,252	60.5
Betsi Cadwaladr UHB																	
Anglesey LA	48,985	1,219	2.5	651	53.4	4,650	9.5	2,382	51.2	262	0.5	151	57.6	1,782	3.6	1,104	62.0
Conwy LA	86,418	2,340	2.7	1,135	48.5	7,020	8.1	3,409	48.6	531	0.6	272	51.2	2,886	3.3	1,661	57.6
Denbighshire LA	78,831	2,302	2.9	1,089	47.3	6,821	8.7	3,206	47.0	449	0.6	247	55.0	2,772	3.5	1,559	56.2
Flintshire LA	122,238	3,146	2.6	1,659	52.7	9,806	8.0	4,988	50.9	685	0.6	395	57.7	4,051	3.3	2,553	63.0
Gwynedd LA	99,995	2,133	2.1	1,014	47.5	7,944	7.9	3,784	47.6	519	0.5	290	55.9	2,853	2.9	1,717	60.2
Wrexham LA	118,790	3,095	2.6	1,547	50.0	9,555	8.0	4,770	49.9	656	0.6	371	56.6	3,831	3.2	2,362	61.7
Health Board Total	555,257	14,235	2.6	7,095	49.8	45,796	8.2	22,539	49.2	3,102	0.6	1,726	55.6	18,175	3.3	10,956	60.3
Cardiff and Vale UHB																	
Cardiff LA	339,667	7,019	2.1	3,076	43.8	23,874	7.0	11,180	46.8	1,348	0.4	681	50.5	10,211	3.0	6,229	61.0
Vale of Glamorgan LA	103,579	2,608	2.5	1,174	45.0	8,025	7.7	3,580	44.6	475	0.5	230	48.4	3,189	3.1	1,878	58.9
Health Board Total	443,246	9,627	2.2	4,250	44.1	31,899	7.2	14,760	46.3	1,823	0.4	911	50.0	13,400	3.0	8,107	60.5
Cwm Taf Morgannwg UHB																	
Bridgend LA	127,372	4,103	3.2	1,788	43.6	10,710	8.4	4,748	44.3	951	0.7	474	49.8	4,842	3.8	2,739	56.6
Merthyr Tydfil LA	50,149	1,500	3.0	630	42.0	4,121	8.2	1,960	47.6	299	0.6	138	46.2	2,010	4.0	1,137	56.6
Rhondda Cynon Taff LA	204,927	5,559	2.7	2,430	43.7	16,584	8.1	7,331	44.2	1,366	0.7	611	44.7	7,801	3.8	4,365	56.0
Health Board Total	382,448	11,162	2.9	4,848	43.4	31,415	8.2	14,039	44.7	2,616	0.7	1,223	46.8	14,653	3.8	8,241	56.2
Hywel Dda UHB																	
Carmarthenshire LA	139,160	4,129	3.0	1,766	42.8	11,419	8.2	4,949	43.3	846	0.6	392	46.3	5,012	3.6	2,748	54.8
Ceredigion LA	70,233	1,887	2.7	762	40.4	5,018	7.1	1,994	39.7	354	0.5	163	46.0	2,100	3.0	1,096	52.2
Pembrokeshire LA	90,629	2,665	2.9	1,176	44.1	7,483	8.3	3,393	45.3	552	0.6	256	46.4	3,144	3.5	1,746	55.5
Health Board Total	300,022	8,681	2.9	3,704	42.7	23,920	8.0	10,336	43.2	1,752	0.6	811	46.3	10,256	3.4	5,590	54.5
Powys Teaching HB	102,206	3,043	3.0	1,388	45.6	8,160	8.0	3,822	46.8	647	0.6	348	53.8	3,174	3.1	1,870	58.9
Swansea Bay UHB																	
Neath Port Talbot LA	109,770	3,352	3.1	1,618	48.3	9,180	8.4	4,358	47.5	946	0.9	529	55.9	4,317	3.9	2,531	58.6
Swansea LA	205,673	5,285	2.6	2,374	44.9	15,896	7.7	7,424	46.7	955	0.5	465	48.7	6,775	3.3	3,950	58.3
Health Board Total	315,443	8,637	2.7	3,992	46.2	25,076	7.9	11,782	47.0	1,901	0.6	994	52.3	11,092		6,481	58.4
	323,443	0,007	,	J,332		23,070	,.,	11,702	-7.10	1,501	0.0	337	32.3	11,032	5.5	0,701	55.4
Wales Total	2,595,170	68,970	2.7	32.131	46.6	206,055	7.9	97.013	47.1	14,415	0.6	7.427	51.5	89,352	3.4	52.497	58.8
	2,333,270	30,370	,	32,131	-10.0	_00,033	,.,	37,013	77.12	,-25	0.0	,,,	32.3	33,332	J7	32,437	30.0

Table A2 (cont). Uptake of influenza immunisation in those aged six months to 64 years with one or more clinical risk (by risk category) in Wales 2019/20.

category) in waics	Total patients	1	mmur	no-supressior	ı	(hronic	liver disease		N	eurolo	gical condition	ons		Mor	bidly obese		Aspl	enia/ sp	lenic dysfun	ıction
Local Authority	aged 6m to 64y	Witl	h	Immunised	Uptake	With con	dition	Immunised	Uptake	Wit	:h	Immunised	Uptake	Wit	:h	Immunised	Uptake	With co	ndition	Immunised	Uptake
	aged offi to 04y	condit	ion	(n)	(%)	(n)	(%)	(n)	(%)	condi	tion	(n)	(%)	condi	tion	(n)	(%)	(n)	(%)	(n)	(%)
Aneurin Bevan UHB																					
Blaenau Gwent LA	57,536	743	1.3	422	56.8	306	0.5	140	45.8	883	1.5	398	45.1	2,514	4.4	869	34.6	259	0.5	99	38.2
Caerphilly LA	151,874	1,574	1.0	888	56.4	592	0.4	250	42.2	2,169	1.4	996	45.9	6,192	4.1	2,062	33.3	677	0.4	279	41.2
Monmouthshire LA	77,228	866	1.1	554	64.0	280	0.4	132	47.1	1,079	1.4	600	55.6	2,316	3.0	1,055	45.6	439	0.6	227	51.7
Newport LA	132,775	1,387	1.0	785	56.6	504	0.4	214	42.5	1,644	1.2	773	47.0	4,431	3.3	1,639	37.0	554	0.4	232	41.9
Torfaen LA	77,135	1,018	1.3	637	62.6	356	0.5	169	47.5	1,216	1.6	609	50.1	2,991	3.9	1,159	38.7	424	0.5	206	48.6
Health Board Total	496,548	5,588	1.1	3,286	58.8	2,038	0.4	905	44.4	6,991	1.4	3,376	48.3	18,444	3.7	6,784	36.8	2,353	0.5	1,043	44.3
Betsi Cadwaladr UHB																					
Anglesey LA	48,985	621	1.3	407	65.5	205	0.4	104	50.7	764	1.6	404	52.9	1,689	3.4	717	42.5	229	0.5	123	53.7
Conwy LA	86,418	912	1.1	519	56.9	414	0.5	177	42.8	1,240	1.4	574	46.3	2,429	2.8	864	35.6	464	0.5	197	42.5
Denbighshire LA	78,831	951	1.2	544	57.2	360	0.5	151	41.9	1,218	1.5	564	46.3	2,400	3.0	881	36.7	408	0.5	172	42.2
Flintshire LA	122,238	1,384	1.1	863	62.4	523	0.4	253	48.4	1,536	1.3	802	52.2	3,620	3.0	1,433	39.6	584	0.5	277	47.4
Gwynedd LA	99,995	1,060	1.1	671	63.3	377	0.4	162	43.0	1,146	1.1	542	47.3	2,580	2.6	978	37.9	435	0.4	170	39.1
Wrexham LA	118,790	1,169	1.0	669	57.2	512	0.4	213	41.6	1,447	1.2	699	48.3	3,891	3.3	1,498	38.5	569	0.5	264	46.4
Health Board Total	555,257	6,097	1.1	3,673	60.2	2,391	0.4	1,060	44.3	7,351	1.3	3,585	48.8	16,609	3.0	6,371	38.4	2,689	0.5	1,203	44.7
Cardiff and Vale UHB																					
Cardiff LA	339,667	3,045	0.9	1,621	53.2	1,081	0.3	447	41.4	3,763	1.1	1,681	44.7	7,939	2.3	2,841	35.8	1,624	0.5	638	39.3
Vale of Glamorgan LA	103,579	1,025	1.0	557	54.3	308	0.3	133	43.2	1,402	1.4	638	45.5	2,822	2.7	981	34.8	537	0.5	207	38.5
Health Board Total	443,246	4,070	0.9	2,178	53.5	1,389	0.3	580	41.8	5,165	1.2	2,319	44.9	10,761	2.4	3,822	35.5	2,161	0.5	845	39.1
Cwm Taf Morgannwg UHB																					
Bridgend LA	127,372	996	0.8	500	50.2	506	0.4	217	42.9	2,088	1.6	929	44.5	4,593	3.6	1,482	32.3	569	0.4	213	37.4
Merthyr Tydfil LA	50,149	463	0.9	193	41.7	237	0.5	91	38.4	784	1.6	327	41.7	2,071	4.1	630	30.4	181	0.4	66	36.5
Rhondda Cynon Taff LA	204,927	2,014	1.0	944	46.9	973	0.5	383	39.4	2,996	1.5	1,203	40.2	8,161	4.0	2,264	27.7	839	0.4	332	39.6
Health Board Total	382,448	3,473	0.9	1,637	47.1	1,716	0.4	691	40.3	5,868	1.5	2,459	41.9	14,825	3.9	4,376	29.5	1,589	0.4	611	38.5
Hywel Dda UHB																					
Carmarthenshire LA	139,160	1,392	1.0	718	51.6	530	0.4	204	38.5	2,257	1.6	960	42.5	4,731	3.4	1,514	32.0	582	0.4	228	39.2
Ceredigion LA	70,233	648	0.9	313	48.3	270	0.4	96	35.6	943	1.3	365	38.7	1,828	2.6	529	28.9	344	0.5	113	32.8
Pembrokeshire LA	90,629	1,136	1.3	628	55.3	526	0.6	231	43.9	1,460	1.6	620	42.5	2,920	3.2	920	31.5	476	0.5	188	39.5
Health Board Total	300,022	3,176	1.1	1,659	52.2	1,326	0.4	531	40.0	4,660	1.6	1,945	41.7	9,479	3.2	2,963	31.3	1,402	0.5	529	37.7
Powys Teaching HB	102,206	1,166	1.1	665	57.0	333	0.3	154	46.2	1,631	1.6	780	47.8	2,892	2.8	1,022	35.3	555	0.5	215	38.7
Swansea Bay UHB										. ===		252									
Neath Port Talbot LA	109,770	890	0.8	503	56.5	487	0.4	225	46.2	1,795	1.6	868	48.4	4,519	4.1	1,744	38.6	437	0.4	193	44.2
Swansea LA	205,673	1,683	0.8	782	46.5	942	0.5	382	40.6	2,930	1.4	1,347	46.0	6,088	3.0	2,027	33.3	873	0.4	341	39.1
Health Board Total	315,443	2,573	0.8	1,285	49.9	1,429	0.5	607	42.5	4,725	1.5	2,215	46.9	10,607	3.4	3,771	35.6	1,310	0.4	534	40.8
Wales Total	2 EQE 170	26,143	1.0	14,383	55.0	10,622	0.4	4,528	12.6	36,391	1.4	16,679	45.8	83,617	2.2	29,109	24.0	12,059	0.5	4,980	41.3
vvales IUlai	2,595,170	20,143	1.0	14,383	33.U	10,622	0.4	4,528	42.0	30,391	1.4	10,079	45.8	03,01/	3.2	29,109	34.8	12,059	0.5	4,980	41.3

Table A3. Uptake of influenza immunisation in pregnant women, with breakdown for those who have another clinical risk condition in Wales 2019/20.

	Pregnant w	omen with clin	ical risk	Pregnant wo	omen without cli	nical risk	Total pregnant women			
Local Authority	Immunised	Denominator	Uptake	Immunised	Denominator	Uptake	Immunised	Denominator	Uptake	
	(n)	(n)	(%)	(n)	(n)	(%)	(n)	(n)	(%)	
Aneurin Bevan UHB										
Blaenau Gwent LA	55	103	53.4	190	607	31.3	245	710	34.5	
Caerphilly LA	75	129	58.1	463	1,024	45.2	538	1,153	46.7	
Monmouthshire LA	57	89	64.0	392	692	56.6	449	781	57.5	
Newport LA	123	199	61.8	755	1,744	43.3	878	1,943	45.2	
Torfaen LA	63	105	60.0	303	676	44.8	366	781	46.9	
Health Board Total	373	625	59.7	2,103	4,743	44.3	2,476	5,368	46.1	
Betsi Cadwaladr UHB										
Anglesey LA	51	80	63.8	265	542	48.9	316	622	50.8	
Conwy LA	74	119	62.2	399	871	45.8	473	990	47.8	
Denbighshire LA	69	106	65.1	434	899	48.3	503	1,005	50.0	
Flintshire LA	106	158	67.1	617	1,221	50.5	723	1,379	52.4	
Gwynedd LA	91	138	65.9	545	1,061	51.4	636	1,199	53.0	
Wrexham LA	96	145	66.2	525	1,255	41.8	621	1,400	44.4	
Health Board Total	487	746	65.3	2,785	5,849	47.6	3,272	6,595	49.6	
Cardiff and Vale UHB										
Cardiff LA	220	345	63.8	1,431	3,103	46.1	1,651	3,448	47.9	
Vale of Glamorgan LA	78	137	56.9	529	1,084	48.8	607	1,221	49.7	
Health Board Total	298	482	61.8	1,960	4,187	46.8	2,258	4,669	48.4	
Cwm Taf Morgannwg UHB										
Bridgend LA	117	206	56.8	504	1,252	40.3	621	1,458	42.6	
Merthyr Tydfil LA	29	56	51.8	174	375	46.4	203	431	47.1	
Rhondda Cynon Taff LA	103	172	59.9	638	1,543	41.3	741	1,715	43.2	
Health Board Total	249	434	57.4	1,316	3,170	41.5	1,565	3,604	43.4	
<u>Hywel Dda UHB</u>										
Carmarthenshire LA	86	142	60.6	462	973	47.5	548	1,115	49.1	
Ceredigion LA	38	71	53.5	198	452	43.8	236	523	45.1	
Pembrokeshire LA	66	126	52.4	328	811	40.4	394	937	42.0	
Health Board Total	190	339	56.0	988	2,236	44.2	1,178	2,575	45.7	
Powys Teaching HB	91	129	70.5	512	898	57.0	603	1,027	58.7	
Swansea Bay UHB										
Neath Port Talbot LA	32	69	46.4	228	494	46.2	260	563	46.2	
Swansea LA	96	171	56.1	726	1,508	48.1	822	1,679	49.0	
Health Board Total	128	240	53.3	954	2,002	47.7	1,082	2,242	48.3	
Wales Total	1,816	2,995	60.6	10,618	23,085	46.0	12,434	26,080	47.7	

Table A4. Uptake of influenza immunisation in those aged six months to 64 years and recorded as being a carer in Wales 2019/20.

		Total carers	
Local Authority	Immunised	Denominator	Uptake
	(n)	(n)	(%)
Aneurin Bevan UHB			
Blaenau Gwent LA	260	504	51.6
Caerphilly LA	785	1,462	53.7
Monmouthshire LA	898	1,505	59.7
Newport LA	763	1,663	45.9
Torfaen LA	677	1,232	55.0
Health Board Total	3,383	6,366	53.1
Betsi Cadwaladr UHB			
Anglesey LA	564	1,028	54.9
Conwy LA	681	1,400	48.6
Denbighshire LA	704	1,589	44.3
Flintshire LA	939	2,037	46.1
Gwynedd LA	747	1,436	52.0
Wrexham LA	1,045	2,154	48.5
Health Board Total	4,680	9,644	48.5
Cardiff and Vale UHB			
Cardiff LA	1,164	2,517	46.2
Vale of Glamorgan LA	589	1,358	43.4
Health Board Total	1,753	3,875	45.2
Cwm Taf Morgannwg UHB			
Bridgend LA	652	1,338	48.7
Merthyr Tydfil LA	223	414	53.9
Rhondda Cynon Taff LA	1,026	2,223	46.2
Health Board Total	1,901	3,975	47.8
<u>Hywel Dda UHB</u>			
Carmarthenshire LA	1,155	2,386	48.4
Ceredigion LA	488	1,260	38.7
Pembrokeshire LA	818	2,115	38.7
Health Board Total	2,461	5,761	42.7
Powys Teaching HB	709	1,316	53.9
Swansea Bay UHB			
Neath Port Talbot LA	684	1,155	59.2
Swansea LA	1,018	2,485	41.0
Health Board Total	1,702	3,640	46.8
	46 - 22		46.0
Wales Total	16,589	34,577	48.0

Table A5. Uptake of influenza immunisation, through general practice, in children aged two and three years in Wales 2019/20.

	T	wo year olds		Three year olds					
Local Authority	Immunised	Denominator	Uptake	Immunised	Denominator	Uptake			
	(n)	(n)	(%)	(n)	(n)	(%)			
Aneurin Bevan UHB									
Blaenau Gwent LA	399	720	55.4	440	754	58.4			
Caerphilly LA	1,040	2,031	51.2	1,050	2,113	49.7			
Monmouthshire LA	586	918	63.8	574	941	61.0			
Newport LA	1,001	2,004	50.0	1,115	2,008	55.5			
Torfaen LA	564	1,075	52.5	575	1,058	54.3			
Health Board Total	3,590	6,748	53.2	3,754	6,874	54.6			
Betsi Cadwaladr UHB									
Anglesey LA	422	653	64.6	453	693	65.4			
Conwy LA	399	1,037	38.5	496	1,091	45.5			
Denbighshire LA	437	1,021	42.8	552	1,081	51.1			
Flintshire LA	977	1,617	60.4	931	1,573	59.2			
Gwynedd LA	657	1,202	54.7	688	1,274	54.0			
Wrexham LA	779	1,623	48.0	742	1,587	46.8			
Health Board Total	3,671	7,153	51.3	3,862	7,299	52.9			
Cardiff and Vale UHB									
Cardiff LA	1,836	4,135	44.4	2,145	4,561	47.0			
Vale of Glamorgan LA	692	1,445	47.9	672	1,439	46.7			
Health Board Total	2,528	5,580	45.3	2,817	6,000	47.0			
Cwm Taf Morgannwg UHB									
Bridgend LA	770	1,697	45.4	829	1,779	46.6			
Merthyr Tydfil LA	284	731	38.9	460	697	66.0			
Rhondda Cynon Taff LA	1,110	2,662	41.7	1,789	2,815	63.6			
Health Board Total	2,164	5,090	42.5	3,078	5,291	58.2			
Hywel Dda UHB									
Carmarthenshire LA	973	1,840	52.9	939	1,863	50.4			
Ceredigion LA	301	685	43.9	334	776	43.0			
Pembrokeshire LA	560	1,157	48.4	540	1,202	44.9			
Health Board Total	1,834	3,682	49.8	1,813	3,841	47.2			
Powys Teaching HB	641	1,243	51.6	688	1,268	54.3			
Curanças Pay III II									
Swansea Bay UHB	734	1 //22	E1 6	794	1 500	E2 6			
Neath Port Talbot LA Swansea LA		1,423	51.6		1,509	52.6 48.6			
	1,278	2,434	52.5	1,258	2,587				
Health Board Total	2,012	3,857	52.2	2,052	4,096	50.1			
Wales Total	16,440	33,353	49.3	18,064	34,669	52.1			

Appendix B: Additional and health board level influenza surveillance data

Table B1. General inpatient and outpatient hospital ward patients providing samples for respiratory screen testing, with numbers testing positive for influenza, RSV and other pathogens, Wales 2019/20, by health board.

etsi Cadwaladr UHB Cardiff & Vale UHB Cwm Taf Morgannwg UHB	All scr	All screens		Influenza A		Influenza B		RSV		Negative ¹	
nearth board	n	%	n	%	n	%	n	%	n	%	
Aneurin Bevan UHB	543	10.0	107	16.3	4	10.0	73	10.18	263	11.1	
Betsi Cadwaladr UHB	878	16.2	126	19.2	8	20.0	155	21.62	360	15.2	
Cardiff & Vale UHB	2662	49.0	251	38.3	22	55.0	333	46.44	1121	47.4	
Cwm Taf Morgannwg UHB	358	6.6	38	5.8	5	12.5	68	9.48	129	5.5	
Hywel Dda UHB	592	10.9	90	13.7	0	0.0	73	10.18	269	11.4	
Powys Teaching HB	5	0.1	0	0.0	0	0.0	0	0.00	5	0.2	
Swansea Bay UHB	396	7.3	44	6.7	1	2.5	15	2.09	216	9.1	
Wales	5434	100.0	656	100.0	40	100.0	717	100.0	2363	100.0	

Table B2. Accident and Emergency ward patients providing samples for respiratory screen testing, with numbers testing positive for influenza, RSV and other pathogens, Wales 2019/20, by health board.

Health Board	All scr	eens	Influ	enza A	Influ	uenza B	R	SV	Neg	gative ¹
	n	%	n	%	n	%	n	%	n	%
Aneurin Bevan UHB	549	12.8	136	15.9	6	12.5	26	6.55	360	17.4
Betsi Cadwaladr UHB	972	22.7	207	24.2	11	22.9	133	33.50	444	21.5
Cardiff & Vale UHB	1047	24.5	179	20.9	16	33.3	43	10.83	578	28.0
Cwm Taf Morgannwg UHB	442	10.3	116	13.5	4	8.3	44	11.08	169	8.2
Hywel Dda UHB	632	14.8	93	10.9	4	8.3	35	8.82	349	16.9
Powys Teaching HB	0	0.0	0	0.0	0	0.0	0	0.00	0	0.0
Swansea Bay UHB	640	14.9	126	14.7	7	14.6	116	29.22	167	8.1
Wales	4282	100.0	857	100.0	48	100.0	397	100.0	2067	100.0

Table B3. ICU/ HDU ward patients providing samples for respiratory screen testing, with numbers testing positive for influenza, RSV and other pathogens, Wales 2019/20, by health board.

Health Board	All scr	eens	Inf	luenza A	Influ	ienza B		RSV	N	egative ¹
Health board	n	%	n	%	n	%	n	%	n	%
Aneurin Bevan UHB	122	11.6	14	23.7	0	0.0	22	21.36	62	9.5
Betsi Cadwaladr UHB	137	13.0	9	15.3	0	0.0	9	8.74	93	14.3
Cardiff & Vale UHB	331	31.3	11	18.6	0	0.0	42	40.78	188	28.9
Cwm Taf Morgannwg UHB	60	5.7	8	13.6	0	0.0	7	6.80	32	4.9
Hywel Dda UHB	168	15.9	5	8.5	0	0.0	12	11.65	111	17.1
Powys Teaching HB	0	0.0	0	0.0	0	0.0	0	0.00	0	0.0
Swansea Bay UHB	238	22.5	12	20.3	0	0.0	11	10.68	164	25.2
Wales	1056	100.0	59	100.0	0	0.0	103	100.0	650	100.0

Table B4. Numbers of patients tested and confirmed with influenza, by location of patient at time of sampling in 2019/20, by age group.

Sample Location	Under 1	1 to 4	5 to 9	10 to 14	15 to 24	25 to 34	35 to 44	45 to 64	65 to 74	75 and older
Sentinel surveillance practices	0	4	3	6	9	10	6	16	3	0
Non-sentinel practices	2	6	10	16	23	31	21	32	5	9
A&E Wards	10	47	27	19	103	145	77	182	113	180
Other Hospital Wards	47	112	64	46	38	50	31	83	75	146
Intensive care wards	5	1	1	1	2	1	5	21	11	10
Unknown location	3	15	8	6	10	6	5	16	9	12

Table B5. Numbers of patients tested and confirmed with RSV, by location of patient at time of sampling in 2019/20, by age group.

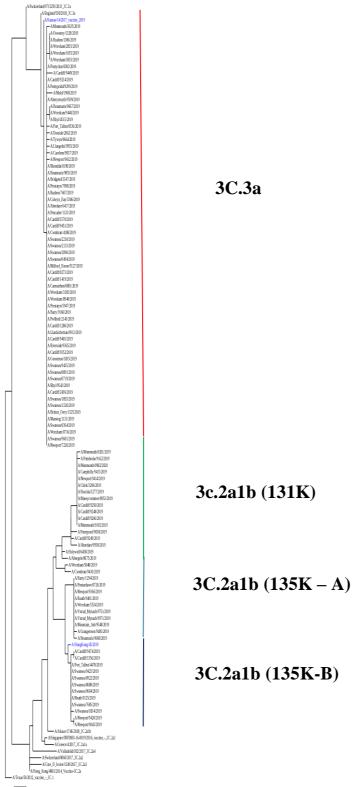
Sample Location	Under 1	1 to 4	5 to 9	10 to 14	15 to 24	25 to 34	35 to 44	45 to 64	65 to 74	75 and older
Sentinel surveillance practices	0	0	1	0	1	1	2	4	2	2
Non-sentinel practices	3	8	1	3	2	6	4	9	4	5
A&E Wards	75	42	5	6	17	28	24	69	55	75
Other Hospital Wards	308	159	29	10	7	13	9	50	46	86
Intensive care wards	46	5	2	1	4	2	1	11	18	13
Unknown location	32	7	2	2	5	2	1	7	2	3

Table B6. Numbers of patients providing samples for respiratory screen testing, by location of patient at time of sampling in 2019/20, by age group.

Sample Location	Under 1	1 to 4	5 to 9	10 to 14	15 to 24	25 to 34	35 to 44	45 to 64	65 to 74	75 and older
Sentinel surveillance practices	0	13	7	11	33	29	25	52	24	11
Non-sentinel practices	17	49	33	38	72	77	75	104	30	30
A&E Wards	231	249	69	42	223	315	204	470	315	473
Other Hospital Wards	867	926	247	117	114	176	113	358	293	506
Intensive care wards	125	31	15	6	16	19	29	98	76	60
Unknown location	99	94	34	32	38	51	29	94	37	55

Appendix C: Phylogenetic trees of influenza A viruses during the 2019/20 season

Figure C1. Phylogenetic tree showing full haemagglutinin sequence relationship of H3N2 influenza A viruses detected from across Wales 2019/20. Vaccine strains in blue.



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Figure C2. Phylogenetic tree showing full haemagglutinin sequence relationship of H3N2 influenza A viruses detected from across Wales 2019/20. Vaccine strains in blue

