

U.S. Medical Affairs

2025 Trends Insights Report: 10/5/25-10/18/25

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Gastrointestinal (GI)

What is the data showing us:

- *C. difficile* detections **remain high in all regions**, but are decreasing in comparison to 3-month averages everywhere except the **West (18.3% vs. 14.1% for 3-month average)**.
- Norovirus GI/GII is also **high across all regions** and is now above 3-month averages. The **West reflects the highest activity (16.7%)**, followed by the **South (13.5%)**, **North (11.6%)**, and the **Midwest (9.4%)**.
- Enteropathogenic *E. coli* (EPEC) and Enteragggregative *E. coli* (EAEC) rates are **decreasing in all regions** compared to 3-month averages. **While detection rates are declining, these organisms are categorized as high activity (>3%)**.
- Other GI pathogens: Shigella/Enteroinvasive *E. coli* (EIEC) detections have increased in the Northeast (**3.4% vs. 2.3% 3-month average**), meanwhile, other regions show low activity (**<1%**). *Campylobacter* detections are **>3% in all regions but the North**, where rates have dropped from a 3-month average (**4.5%→2.9%**). *Salmonella* has remained high (**5.4%**) in the **South**, while rates in all other regions are close to **2%**.

What this means for U.S. providers/labs:

- *C. difficile* remains high across all regions, but it's important to note that **a positive result does not indicate an active infection**. A positive result **could be an indication of colonization**. Therefore, **a positive result should be interpreted alongside clinical symptoms and other factors**.
- Norovirus and *E. coli* (EPEC, EAEC, ETEC) continue to drive GI illness across regions, demonstrating the importance of **rapid pathogen identification** to optimize treatment and reduce unnecessary antibiotics prescription.
- *Campylobacter* and *Salmonella* detections highlight **ongoing foodborne transmission risks**, particularly with *Salmonella* rising above baseline in the South and linked to recent outbreaks.

Respiratory (RP)

What is the data showing us:

- Human Rhinovirus (RV)/Enterovirus (EV) are the **leading cause of respiratory infections nationwide** based on detection rates, but have been **slightly decreasing in all regions** for the past 2 weeks – **Northeast (22.8%→20.2%)**, **South (23.9%→22.7%)**, **Midwest (20.7%→20.2%)**, and **West (25.7%→23.1%)**.
- SARS-CoV-2 detections are **dropping in all regions except for the West**, where they have increased from **4.1% to 4.8%**. (**Northeast: 3.4%→2.9%**, **South: 2.6%→1.9%**, **Midwest: 2.2%→1.8%**).
- Parainfluenza Viruses 1 (PIV-1) and 2 (PIV-2) are showing **medium activity in all regions**. PIV-2 saw an increase from **2.1% to 3.1% in the West**, which can be considered **high activity (threshold 3%)**.
- Respiratory Syncytial Virus (RSV) rates in the **South** have increased from **2.2% to 2.3%** in the past 2 weeks. RSV is now exhibiting **medium activity**, an uptick from rates of less than **1%** observed in September. RSV rates are **low in all other regions**.

What this means for U.S. providers/labs:

- The highest respiratory pathogen detection is attributable to RV/EV, even with rates slightly dropping over the past 2 weeks. Overall, there were fewer RV/EVs detected in October compared to September, which **may have been caused by students heading back to school**. **Reinforcing preventative measures such as hand hygiene and respiratory etiquette is key**.
- SARS-CoV-2 detections continue their downward trend since September, now at medium activity nationwide, with the West being the only region maintaining high activity levels.
- It is not uncommon for Parainfluenza virus rates to increase in the fall. **For those patients with negative RSV or rhinovirus results and stridor, barking cough, or bronchiolitis, consider Parainfluenza viruses**.
- The rising rate of RSV in the South **may indicate that other regions may experience more RSV in the coming weeks**. Due to the risk to pediatrics and high-risk adults, **vigilance is needed** as RSV season approaches.
 - Read CDC recommendations here: [Respiratory Syncytial Virus \(RSV\) Immunizations](#)