

May 2026 / ISSUE 301

OXFORD-RCGP RSC DIRECTOR'S MESSAGE



YOUR WEEKLY UPDATE FROM PROF. SIMON DE LUSIGNAN,
DIRECTOR OF THE OXFORD-RCGP RSC

Summer Bugs - Rethinking Seasonal Infection Trends

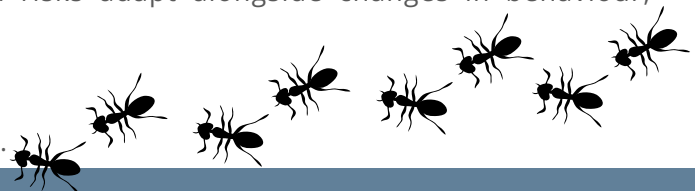
While warmer weather may signal the end of the traditional “winter illness” season, recent surveillance trends suggest that infectious disease patterns are becoming less predictable by the calendar alone. As our issue highlights, respiratory infections in younger children continue to present at comparatively high levels well into spring, while warmer conditions and increased outdoor activity are also contributing to a seasonal rise in infected insect bites across several regions.

The persistence of upper respiratory tract infections in children aged 0–5 years serves as a reminder that many common pathogens circulate year-round. Developing immune systems, close-contact environments, and varying awareness of infection prevention measures all continue to influence transmission in this age group. Although public awareness surrounding infection control improved significantly during the pandemic, the current data demonstrates the importance of maintaining those principles beyond periods of acute national concern.

At the same time, the recent increase in infected insect bites illustrates how behavioural and environmental changes can shape clinical presentations during summer months. Bank holiday travel, school half-term activities, and longer periods outdoors may all contribute to shifting patterns of exposure, alongside the effects of warmer temperatures themselves. Regional variation also continues to provide useful insight into how local conditions influence demand on services.

Taken together, these trends reinforce the importance of ongoing surveillance throughout the year. Seasonal pressures in primary care are evolving rather than disappearing, and maintaining awareness of emerging patterns remains essential to supporting timely diagnosis, patient advice, and preventative messaging. Whether managing persistent viral illness or the complications of summer exposure, clinicians continue to play a key role in recognising how infection risks adapt alongside changes in behaviour, environment, and season.

Our GPs have written a report on URTI and infected insect bites in our Sampling is Informing section of the newsletter.



A message from the Royal College of General Practitioners

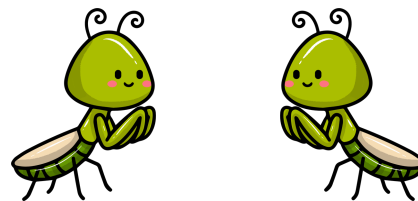
Research Ready

Research Ready® is a quality assurance programme for all research-active UK GP practices. It is designed in line with the [UK Research Governance Framework's](#) legal, ethical, professional, and patient safety requirements. The programme serves to provide information, support, guidance and accreditation to practices in research; both to assist with meeting the requirements above, and with considering and conducting research.

Research Ready® gives access to training and support for the whole practice team to upskill them to engage with research. It can be used by all practice staff, both clinical and non-clinical (GPs, nurses, practice management, administrators).

If you would like to know more about Research Ready, please contact The Royal College of General Practitioners, or visit this [link](#).

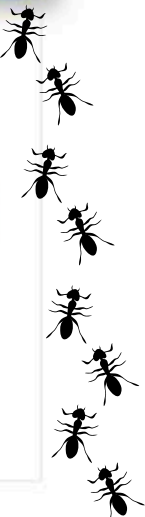
Available sampling pathways



RSC Virology & Serology Sampling Pathways 2026-27

Commissioned by UKHSA

LabReach In-Practice Swabbing AVAILABLE - NEW!	Serology In-Practice Sampling AVAILABLE
<ul style="list-style-type: none">✓ Latest Pathway (from Dec 2025)👤 All age groups eligible📄 Swab MUST be taken within 7 days of onset of symptoms📦 Swab kits supplied directly to practices🌿 Tested for Flu A/B, Covid and RSV💷 £12.50 per valid sample received by the laboratory	<ul style="list-style-type: none">✓ Established Pathway⚠️ Paediatric sampling priority (under 18s) Adult sampling capacity currently full📦 Sample kits supplied directly to practices🩸 Practice collects the blood sample💷 Tiered remuneration by age bands: 0-8 years old : £30 9-17 years old : £15 (previously £11) 18 years and above: £5.50



Interested in joining or learning more?
Contact the Practice Liaison Team: practiceenquiries@phc.ox.ac.uk to get started

It's not too late to sign up for one or more of our sampling pathways. Contact our Practice Liaison Team today to learn more.

Sampling Is Informing

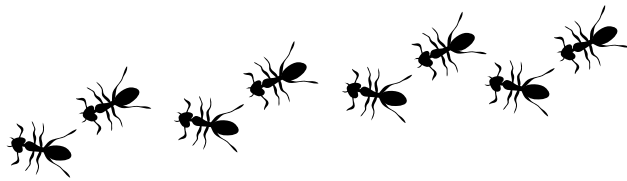
Welcome to the newest segment of our weekly newsletter

Infected Insect Bites

With the summer weather comes more time spent outdoors, and the increasing possibility of insect bites. In contrast to the virus surveillance graphs, insect bites therefore tend to increase with summer.

There's a particularly high peak seen recently in the Midlands & East, with a smaller peak in the North of England. This may reflect the types of insects found in these parts of the country, but it also coincided with the early May Bank Holiday, with more opportunity for holidays and travel.

It will be interesting to see if there are further spikes following the second May Bank Holiday last weekend, particularly as it also coincides with school half-term holidays, and additionally whether the heatwave has had a bearing on the number of cases we see in clinic.



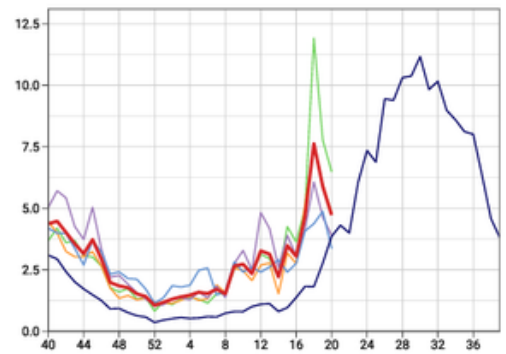
URTI

While we are all melting in the current heatwave, we can still note that the higher rates of URTI in the 0–5 year age groups continue well into Spring, compared with older age brackets (5 years and up).

It's likely that the developing immune systems of very young children, alongside less general awareness of infection prevention measures, play a part in this discrepancy, as understanding the principles of transmission — particularly after such a recent pandemic — is key to controlling exposure and protecting ourselves.

It also underscores the persistence of pathogens and viruses all year through, and the importance of continuing surveillance through the summer months too, as there are plenty of infections affecting the population throughout the year.

Infected Insect Bites
Weekly incidence (per 100,000 all ages) by region for 2025/26 compared with 5 year average



■ All ages ■ <1yr ■ 5-14yrs ■ 65+yrs
■ 5 Year Avg ■ 1-4yrs ■ 15-64yrs

Upper Respiratory Tract Infections (URTI)
Weekly incidence (per 100,000 all ages) by age band for 2025/26 compared with 5 year average

