



Epidemiological Surveillance of Respiratory Infections

Weekly overview

Week 11/2023 (13/3/2023 – 19/3/2023)

Influenza-like Illness

- a decrease was observed in the community compared to the previous week, in all age groups

SARS-CoV2 virus - COVID-19 infection

- test positivity showed a decrease compared to the previous week
- the number of COVID-19 admissions showed a decrease compared to the previous week (23% decrease compared to the average weekly number of new admissions during the previous 4 weeks)
- the number of new intubations showed a decrease compared to the previous week (36% decrease compared to the average weekly number of new intubations during the previous 4 weeks)
- the cumulative number of intubated patients with COVID-19 infection is 96
- 70 deaths were reported (median age: 86 years, range: 51-95 years)
- during the weeks 09-10/2023 all sequenced samples were classified as Omicron sub-variants BA.2 and BA.5
- the proportion of BA.2 showed an increase and reached 63% of all sequenced samples
- the sub-variant BQ.1.1 was the most frequent sub-variant of BA.5 (84%)
- the most frequent BA.2 sub-variants were XBB.1.5 (41%), followed by BA.2.75 (24%) and XBB (21%)
- viral load surveillance in municipal wastewater showed a decrease in SARS-CoV-2 virus circulation in 8 out of 10 areas participating in the network

Influenza virus

- the percentage of sentinel primary care specimens from patients presenting with ILI that tested positive for an influenza virus showed an increase
- no severe cases of laboratory-confirmed influenza admitted to ICU or deaths from laboratory-confirmed influenza were recorded in week 11
- from week 40/2022 to week 11/2023, 65 people with influenza were hospitalized in ICU and 22 deaths were reported
- during the same period, 313 samples positive for influenza viruses (sentinel samples and hospital samples) were detected in the two Influenza Reference Centers, of which 281 (90%) were type A and 32 (10%) were type B
- of the 279 type A viruses subtyped, 256 (92%) were classified as subtype A(H3N2) and 23 (8%) as subtype A(H1N1)pdm09
- during the last three weeks, an excess of type B is recorded

Respiratory syncytial virus – RSV

- test positivity remained low