



Epidemiological Surveillance of Respiratory Infections

Weekly overview

Week 01/2025 (30/12/2024 –05/01/2025)

Influenza-like Illness (ILI)

- The number of influenza cases per 1,000 visits shows an increasing trend, with significant increase compared to last week.

Severe Acute Respiratory Illness- SARI (ILI)

- The number of SARI cases per 1,000 hospital admissions increased compared to last week.

SARS-CoV2 virus - COVID-19 infection

- Test positivity from all tests performed in the country (COVID-19 registry data) increased compared to last week.
- 538 COVID-19 hospital admissions were recorded, while the average weekly number of new hospital admissions during the previous four weeks was 548.
- Eight new intubations were recorded. The average weekly number of new intubations during the previous four weeks was nine.
- The current number of intubated patients with COVID-19 infection is 26.
- 22 deaths were recorded. The average weekly number of deaths during the previous four weeks was 26. From week 01/2024 to week 01/2025, 341 deaths among severe cases (intubated and/or with ICU hospitalization) were recorded.
- As of 27/9, KP.3 was classified by the ECDC/WHO EURO as a Variant of Interest, while XEC was classified as Variant Under Monitoring. The dominant variant in the country is KP.3, whereas the first XEC variants were detected in week 33/2024. XEC shows an increasing trend. These variants have not been associated with an increased risk of severe disease.
- The viral load level in urban wastewater is considered low in four out of the six areas for which data was available, medium in one and high in one (increased compared to last week).

Influenza virus

- Influenza positivity in the community (as assessed by Sentinel surveillance in primary health care (ILI specimens)) remains above the limit that indicates the beginning of the activity of seasonal influenza (10%), showing no significant change compared to last week. Positivity of SARI specimens shows a significant increase compared to last week.
- In week 01/2025, seven new ICU laboratory-confirmed influenza cases and one new death from laboratory-confirmed influenza were recorded. In total, from week 40/2023 to week 01/2025, 31 severe cases of laboratory-confirmed influenza were admitted to ICU and four deaths were recorded. From week 01/2024 to week 01/2025, 65 deaths in severe cases with laboratory confirmed influenza were recorded.
- From week 40/2024 to week 01/2025, among 1.495 samples (Sentinel Primary Health Care Surveillance, SARI surveillance and hospitals outside surveillance networks), 116 (8%) positive samples for influenza viruses were found. Of the 112 standardized samples, 106 were type A and 6 type B.
- Among the 101 type A samples that were subtyped, 33 (33%) were A(H3) and 68 (67%) were A(H1)pdm09.

Respiratory syncytial virus – RSV

- Positivity in both sentinel primary health care (ILI specimens) and in hospitals (SARI specimens) is very low.
- Both influenza and COVID-19 are associated with a significant number of deaths among severe cases. It is recommended that persons who qualify for vaccination, particularly those at higher risk of severe outcomes (elderly and people with underlying diseases) should get vaccinated against both diseases.