



Epidemiological Surveillance of Respiratory Infections

Weekly overview

Week 02/2024 (08/01/2024 – 14/01/2024)

Influenza-like Illness (ILI)

- The number of influenza cases per 1,000 visits significantly decreased compared to last week.

SARS-CoV2 virus - COVID-19 infection

- Test positivity significantly decreased compared to the previous week.
- The number of COVID-19 admissions (n=1.162) decreased 27% compared to the average weekly number of new admissions during the previous 4 weeks (n=1.592) and was lower compared to the respective week of 2023 (n=1.748).
- The number of new intubations (n=28) decreased compared to the average weekly number of new intubations during the previous 4 weeks (n=30) and was lower compared to the respective week of 2023 (n=69).
- The cumulative number of intubated patients with COVID-19 infection is 68.
- 103 deaths were reported (median age: 84 years, range: 52-99). The number of deaths increased compared to the average weekly number of deaths during the previous 4 weeks (n=90) and was lower compared to the respective week of 2023 (n=206).
- In week 50/2023 the most frequent BA.2 sub-variant was JN.1 (44%), followed by EG.5 (31%).
- Viral load surveillance in municipal wastewater showed a decrease in SARS-CoV-2 virus circulation in 9 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 remained above the epidemic threshold of 10% due to ECDC and decreased compared to last week.
- 8 new severe cases of laboratory-confirmed influenza were admitted to ICU while 4 new deaths from laboratory-confirmed influenza were recorded. 7 severe cases of laboratory-confirmed influenza admitted to ICU were retrospectively reported (with admission date within weeks 49/2023 to 01/2024) and 2 deaths (1 with death date within week 52/2023 and 1 with death date within week 01/2024)
- From week 40/2023 to week 02/2024, 64 laboratory-confirmed cases were hospitalized in ICU and 17 laboratory-confirmed deaths were reported.
- From week 40/2023 to week 02/2024, 215 positive samples were typed (sentinel samples and hospital samples), 212 (99%) as A and 3 (1%) as B.
- Of the 194 type A viruses subtyped from the two Influenza Reference Centers, 16 (8%) were classified as subtype A(H3) and 178 (92%) were classified as subtype A(H1)pdm09.

Respiratory syncytial virus – RSV

- RSV positivity from Primary Health Care Sentinel samples remained at the same level compared to the previous week.