



Epidemiological Surveillance of Respiratory Infections

Weekly overview

Week 02/2025 (06/01/2025 –12/01/2025)

Influenza-like Illness (ILI)

- The number of influenza cases per 1,000 visits shows a small increase compared to last week.

Severe Acute Respiratory Illness- SARI (ILI)

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

SARS-CoV2 virus - COVID-19 infection

- Test positivity from all tests performed in the country (COVID-19 registry data) decreased compared to last week.
- 648 COVID-19 hospital admissions were recorded, while the average weekly number of new hospital admissions during the previous four weeks was 525.
- Nine new intubations were recorded. The average weekly number of new intubations for the past four weeks was also nine.
- The current number of intubated patients with COVID-19 infection is 30.
- 24 deaths were recorded. The average weekly number of deaths for the past four weeks was also 24. From week 01/2024 to week 02/2025, 348 deaths among severe cases (intubated and/or with ICU hospitalization) were recorded.
- The KP.3 and XEC sub-variants of BA.2.86 are the predominant variants. In week 33/2024 the first variants of XEC were detected, which since early October has been showing an upward trend. None of these variants are currently associated with an increased risk of severe disease.
- The viral load level in urban wastewater is considered low in two out of the six areas for which data was available, medium in two and high in two (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 an increase compared to last week. Positivity of SARI specimens shows a decrease compared to last week.
- In week 02/2025, 24 new ICU laboratory-confirmed influenza cases and three new deaths from laboratory-confirmed influenza were recorded. In total, from week 40/2023 to week 02/2025, 58 severe cases of laboratory-confirmed influenza were admitted to ICU and seven deaths were recorded. Additionally, three severe cases of laboratory-confirmed influenza admitted to ICU were retrospectively reported (one with admission date within week 50/2024 and two within week 01/2025). From week 01/2024 to week 02/2025, 68 deaths in severe cases with laboratory confirmed influenza were recorded.
- From week 40/2024 to week 02/2025, among 1.652 samples (Sentinel Primary Health Care Surveillance, SARI surveillance and hospitals outside surveillance networks), 167 (10%) positive samples for influenza viruses were found. Of the 164 samples typed, 154 were type A and 10 type B.
- Among the 141 type A samples that were subtyped, 47 (33%) were A(H3) and 94 (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.