



## Epidemiological Surveillance of Respiratory Infections

### Weekly overview

Week 05/2024 (29/01/2024 – 04/02/2024)

#### Influenza-like Illness (ILI)

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

#### SARS-CoV2 virus - COVID-19 infection

- Test positivity decreased compared to the previous week.
- The number of COVID-19 admissions (n=439) decreased 58% compared to the average weekly number of new admissions during the previous 4 weeks (n=1.057) and was lower compared to the respective week of 2023 (n=964).
- The number of new intubations (n=2) decreased compared to the average weekly number of new intubations during the previous 4 weeks (n=29) and was lower compared to the respective week of 2023 (n=33).
- The cumulative number of intubated patients with COVID-19 infection is 45.
- 32 deaths were reported (median age: 85 years, range: 48-94). The number of deaths decreased compared to the average weekly number of deaths during the previous 4 weeks (n=97) and was lower compared to the respective week of 2023 (n=120).
- In week 01/2024 the most frequent BA.2 sub-variant was JN.1 (66%), followed by EG.5 (19%) (temporary data).
- Viral load surveillance in municipal wastewater showed a decrease in SARS-CoV-2 virus circulation in 7 out of 9 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% and decreased compared to last week.
- 9 new severe cases of laboratory-confirmed influenza were admitted to ICU while 3 new deaths from laboratory-confirmed influenza were recorded. 1 severe case of laboratory-confirmed influenza admitted to ICU was retrospectively reported with admission date within week 04/2024 and 1 death with death date within week 04/2024.
- From week 40/2023 to week 05/2024, 104 laboratory-confirmed cases were hospitalized in ICU and 36 laboratory-confirmed deaths were reported.
- From week 40/2023 to week 05/2024, 299 positive samples were typed (sentinel primary health care samples and hospital samples), 296 (99%) as A and 3 (1%) as B.
- Of the 282 type A viruses subtyped from the two Influenza Reference Centers, 18 (6%) were classified as subtype A(H3) and 264 (94%) were classified as subtype A(H1)pdm09.

#### Respiratory syncytial virus – RSV

- RSV positivity slightly increased compared to the previous week.