



## Epidemiological Surveillance of Respiratory Infections Weekly overview - Week 05/2025 (27/01/2025 –02/02/2025)

### Influenza-like Illness (ILI)

- The number of influenza cases per 1,000 visits shows an 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.
- 234 COVID-19 hospital admissions were recorded, while the average weekly number of new hospital admissions during the previous four weeks was 496.
- 5 new intubations were recorded. The average weekly number of new intubations for the past four weeks was 11.
- The current number of intubated patients with COVID-19 infection is 21.
- 17 deaths were recorded. The average weekly number of deaths for the past four weeks was 25. From week 01/2024 to week 05/2025, 369 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.
- At the national level, the weighted viral load in urban wastewater is considered low compared to historical data, showing a decrease from the previous week. More specifically, the viral load level in urban wastewater is low in five out of nine areas participating in the network and moderate in the other four.

### 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, showing no significant change compared to last week. Positivity of SARI specimens increased compared to last week.
- In week 05/2025, 15 new ICU laboratory-confirmed influenza cases and 7 new deaths from laboratory-confirmed influenza were recorded. Additionally, one severe case of laboratory-confirmed influenza admitted to ICU with admission date within week 04/2025. In total, from week 40/2023 to week 05/2025, 113 severe cases of laboratory-confirmed influenza were admitted to ICU and 30 deaths were recorded. From week 01/2024 to week 05/2025, 91 deaths in severe cases with laboratory confirmed influenza were recorded.
- From week 40/2024 to week 05/2025, among 2.154 samples (Sentinel Primary Health Care Surveillance, SARI surveillance and hospitals outside surveillance networks), 312 (14,5%) positive samples for influenza viruses were found. Of the 303 samples typed, 262 were type A and 41 type B.
- Among the 243 type A samples that were subtyped, 80 (33%) were A(H3) and 163 (67%) were A(H1)pdm09.

### Respiratory syncytial virus – RSV

- Positivity has increased in both sentinel primary health care (ILI specimens) and hospitals (SARI specimens), however it remains 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.

NOTE: Retrospective inclusion of data reported with delay can result to modifications in the numbers presented