



## Epidemiological Surveillance of Respiratory Infections

### Weekly overview

Week 07/2024 (12/02/2024 – 18/02/2024)

#### Influenza-like Illness (ILI)

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

#### Severe Acute Respiratory Illness- SARI (ILI)

- The number of SARI cases per 1,000 visits slightly decreased 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=300) decreased 47% compared to the average weekly number of new admissions during the previous 4 weeks (n=568) and was lower compared to the respective week of 2023 (n=951).
- The number of new intubations (n=5) decreased compared to the average weekly number of new intubations during the previous 4 weeks (n=13) and was lower compared to the respective week of 2023 (n=21).
- The cumulative number of intubated patients with COVID-19 infection is 33.
- 21 deaths were reported (median age: 81 years, range: 60-98). The number of deaths decreased compared to the average weekly number of deaths during the previous 4 weeks (n=59) and was lower compared to the respective week of 2023 (n=101).
- In week 02/2024 the most frequent BA.2 sub-variant was JN.1 (79%), followed by EG.5 (11%).
- Viral load surveillance in municipal wastewater showed a decrease in SARS-CoV-2 virus circulation in all 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. Test positivity of SARI samples decreased compared to last week.
- 3 new severe cases of laboratory-confirmed influenza were admitted to ICU while 4 new deaths from laboratory-confirmed influenza were recorded.
- From week 40/2023 to week 07/2024, 121 laboratory-confirmed cases were hospitalized in ICU and 49 laboratory-confirmed deaths were reported.
- From week 40/2023 to week 07/2024, 458 positive samples were typed (sentinel primary health care samples and hospital samples), 441 (96%) as A and 17 (4%) as B.
- Of the 417 type A viruses subtyped from the two Influenza Reference Centers, 30 (7%) were classified as subtype A(H3) and 387 (93%) were classified as subtype A(H1)pdm09.

#### Respiratory syncytial virus – RSV

- RSV positivity increased compared to the previous week, both in sentinel primary health care (ILI specimens) and hospitals (SARI specimens).

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