



Epidemiological Surveillance of Respiratory Infections Weekly overview - Week 07/2025 (10/02/2025 –16/02/2025)

Influenza-like Illness (ILI)

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

Severe Acute Respiratory Illness- SARI (ILI)

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

SARS-CoV2 virus - COVID-19 infection

- Test positivity from all tests performed in the country (COVID-19 registry data) is very low and did not change significantly compared to last week.
- 170 COVID-19 hospital admissions were recorded, while the average weekly number of new hospital admissions during the previous four weeks was 306.
- No new intubations were recorded. The average weekly number of new intubations for the past four weeks was eight.
- The current number of intubated patients with COVID-19 infection is 12.
- Eight deaths were recorded. The average weekly number of deaths for the past four weeks was 19. From week 01/2024 to week 06/2025, 374 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 no significant change compared to the previous week. More specifically, the viral load level in urban wastewater is low in eight out of ten areas participating in the network and moderate in the other two.

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 a small increase compared to last week. Positivity of SARI specimens substantially increased compared to last week.
- In week 06/2025, five new ICU laboratory-confirmed influenza cases and two new deaths from laboratory-confirmed influenza were recorded. Additionally, two severe cases of laboratory-confirmed influenza were admitted to ICU with admission dates within previous weeks. In total, from week 40/2023 to week 06/2025, 133 severe cases of laboratory-confirmed influenza were admitted to ICU and 39 deaths were recorded. From week 01/2024 to week 06/2025, 100 deaths in severe cases with laboratory confirmed influenza were recorded.
- From week 40/2024 to week 06/2025, among 2.479 samples (Sentinel Primary Health Care Surveillance, SARI surveillance and hospitals outside surveillance networks), 413 (17%) positive samples for influenza viruses were found. Of the 402 samples typed, 328 were type A and 52 type B.
- Among the 315 type A samples that were subtyped, 193 (61%) were A(H1)pdm09 and 122 (39%) were A(H3).

Respiratory syncytial virus – RSV

- Positivity increased in sentinel primary health care (ILI specimens), as well as in hospitals (SARI specimens), remaining overall 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