



Epidemiological Surveillance of Respiratory Infections

Weekly overview

Week 08/2024 (19/02/2024 – 25/02/2024)

Influenza-like Illness (ILI)

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

Severe Acute Respiratory Illness- SARI (ILI)

- The number of SARI cases per 1,000 visits remained at the same level compared to last week.

SARS-CoV2 virus - COVID-19 infection

- Test positivity slightly decreased compared to the previous week.
- The number of COVID-19 admissions (n=298) decreased 31% compared to the average weekly number of new admissions during the previous 4 weeks (n=433) and was lower compared to the respective week of 2023 (n=1063).
- The number of new intubations (n=5) decreased compared to the average weekly number of new intubations during the previous 4 weeks (n=6) and was lower compared to the respective week of 2023 (n=29).
- The cumulative number of intubated patients with COVID-19 infection is 30.
- 18 deaths were reported (median age: 87 years, range: 49-89). The number of deaths decreased compared to the average weekly number of deaths during the previous 4 weeks (n=42) and was lower compared to the respective week of 2023 (n=94).
- The most frequent BA.2 sub-variant was JN.1 (83%), followed by EG.5 (6%) (last available data: week 3).
- Viral load surveillance in municipal wastewater showed a decrease in SARS-CoV-2 virus circulation in 6 out of 7 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 increased compared to last week. Test positivity of SARI samples also increased compared to last week.
- 5 new severe cases of laboratory-confirmed influenza were admitted to ICU while 8 new deaths from laboratory-confirmed influenza were recorded. 2 severe cases of laboratory-confirmed influenza admitted to ICU were retrospectively reported (1 with admission date within week 03/2024 and 1 with admission date within week 07/2024) and 1 death with death date within week 07/2024.
- From week 40/2023 to week 08/2024, 128 laboratory-confirmed cases were hospitalized in ICU and 58 laboratory-confirmed deaths were reported.
- From week 40/2023 to week 08/2024, 547 positive samples were typed (sentinel primary health care samples and hospital samples), 499 (91%) as A and 48 (9%) as B.
- Of the 467 type A viruses subtyped from the two Influenza Reference Centers, 35 (7,5%) were classified as subtype A(H3) and 432 (92,5%) were classified as subtype A(H1)pdm09.

Respiratory syncytial virus – RSV

- RSV positivity decreased 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