



Epidemiological Surveillance of Respiratory Infections

Weekly overview

Week 09/2024 (26/02/2024 – 03/03/2024)

Influenza-like Illness (ILI)

- The number of influenza cases per 1,000 visits slightly decreased 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 slightly decreased compared to the previous week.
- The number of COVID-19 admissions (n=208) decreased 44% compared to the average weekly number of new admissions during the previous 4 weeks (n=371) and was lower compared to the respective week of 2023 (n=925).
- The number of new intubations (n=1) decreased compared to the average weekly number of new intubations during the previous 4 weeks (n=5) and was lower compared to the respective week of 2023 (n=33).
- The cumulative number of intubated patients with COVID-19 infection is 22.
- 12 deaths were reported (median age: 86,5 years, range: 70-93). The number of deaths decreased compared to the average weekly number of deaths during the previous 4 weeks (n=30) and was lower compared to the respective week of 2023 (n=96).
- The most frequent BA.2 sub-variant was JN.1 (>75% in the last weeks), followed by BA.2.86 (according to the latest available data).
- Viral load surveillance in municipal wastewater showed a decrease in SARS-CoV-2 virus circulation in all 10 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 also decreased compared to last week.
- 3 new severe cases of laboratory-confirmed influenza were admitted to ICU while 2 new deaths from laboratory-confirmed influenza were recorded. One severe case of laboratory-confirmed influenza admitted to ICU was retrospectively reported with admission date within week 08/2024.
- From week 40/2023 to week 09/2024, 132 laboratory-confirmed cases were hospitalized in ICU and 60 laboratory-confirmed deaths were reported.
- From week 40/2023 to week 09/2024, 596 positive samples were typed (sentinel primary health care samples, SARI sentinel samples and hospital non-sentinel samples), 515 (86%) as A and 81 (14%) as B.
- Of the 482 type A viruses subtyped from the two Influenza Reference Centers, 35 (7%) were classified as subtype A(H3) and 447 (93%) were classified as subtype A(H1)pdm09.

Respiratory syncytial virus – RSV

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

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