



Epidemiological Surveillance of Respiratory Infections

Weekly overview - Week 09/2025 (24/02/2025 –02/03/2025)

Influenza-like Illness (ILI)

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

Severe Acute Respiratory Illness- SARI (ILI)

- The number of SARI cases per 1,000 hospital admissions showed no significant change 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.
- 153 COVID-19 hospital admissions were recorded, while the average weekly number of new hospital admissions during the previous four weeks was 180.
- Two new intubations were recorded. The average weekly number of new intubations for the past four weeks was three.
- The current number of ventilated patients with COVID-19 infection is nine.
- Four deaths were recorded. The average weekly number of deaths for the past four weeks was 12. From week 01/2024 to week 09/2025, 382 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, with no significant change compared to the previous week. More specifically, the viral load level in urban wastewater is low in all areas participating in the network.

Influenza virus

- Influenza positivity in the community (as assessed by Sentinel surveillance in primary health care (ILI specimens)) remains high, showing an increase compared to last week and exceeding the peak observed in the past season. Positivity of SARI specimens increased compared to last week.
- In week 09/2025, 11 new ICU laboratory-confirmed influenza cases and seven 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 09/2025, 154 severe cases of laboratory-confirmed influenza were admitted to ICU and 50 deaths were recorded. From week 01/2024 to week 09/2025, 111 deaths in severe cases with laboratory confirmed influenza were recorded.
- From week 40/2024 to week 09/2025, among 2.926 samples (Sentinel Primary Health Care Surveillance, SARI surveillance and hospitals outside surveillance networks), 580 (20%) positive samples for influenza viruses were found. Of the 569 samples typed, 417 were type A and 152 type B.
- Among the 396 type A samples that were subtyped, 223 (56%) were A(H1)pdm09 and 173 (44%) were A(H3).

Respiratory syncytial virus – RSV

- Positivity in both sentinel primary health care (ILI specimens) and hospitals (SARI specimens) remained low, with no significant change.
- 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 in modifications in the numbers presented