



## Epidemiological Surveillance of Respiratory Infections

### Weekly overview

Week 12/2024 (18/03/2024 – 24/03/2024)

#### 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 increased 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=104) decreased 46% compared to the average weekly number of new admissions during the previous 4 weeks (n=194) and was lower compared to the respective week of 2023 (n=691).
- The number of new intubations (n=1) decreased compared to the average weekly number of new intubations during the previous 4 weeks (n=4) and was lower compared to the respective week of 2023 (n=17).
- The cumulative number of intubated patients with COVID-19 infection is 13.
- 4 deaths were reported (median age: 92,5 years, range: 86-96). The number of deaths decreased compared to the average weekly number of deaths during the previous 4 weeks (n=14) and was lower compared to the respective week of 2023 (n=66).
- The most frequent BA.2 sub-variant was JN.1 (>85% from week 6 and after).
- Viral load surveillance in municipal wastewater showed a decrease in SARS-CoV-2 virus circulation in 7 out of 8 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 slightly increased compared to last week.
- One new severe case of laboratory-confirmed influenza was admitted to ICU, while one new death from laboratory-confirmed influenza was recorded.
- From week 40/2023 to week 12/2024, 134 laboratory-confirmed cases were hospitalized in ICU and 66 laboratory-confirmed deaths were reported.
- From week 40/2023 to week 12/2024, 724 positive samples were typed (sentinel primary health care samples, SARI sentinel samples and hospital non-sentinel samples), 539 (75%) as A and 182 (25%) as B.
- Of the 520 type A viruses subtyped from the two Influenza Reference Centers, 39 (7,5%) were classified as subtype A(H3) and 481 (92,5%) were classified as subtype A(H1)pdm09.

#### Respiratory syncytial virus – RSV

- RSV positivity remained low in both 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