



Epidemiological Surveillance of Respiratory Infections Weekly overview - Week 13/2025 (24/03/2025 –30/03/2025)

Influenza-like Illness (ILI)

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

Severe Acute Respiratory Illness- SARI (ILI)

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

SARS-CoV2 virus - COVID-19 infection

- Test positivity from all tests performed in the country (COVID-19 registry data) remains very low.
- 83 COVID-19 hospital admissions were recorded, while the average weekly number of new hospital admissions during the previous four weeks was 106.
- Three new intubations were recorded. The average weekly number of new intubations for the past four weeks was two.
- The current number of ventilated patients with COVID-19 infection is seven.
- Five deaths were recorded. The average weekly number of deaths for the past four weeks was also six. From week 01/2024 to week 13/2025, 390 deaths among severe cases (intubated and/or with ICU hospitalization) were recorded.
- In week 33/2024 the first variants of XEC were detected, showing thereafter an upward trend. Since the beginning of December 2024, XEC is the predominant variant.
- At the national level, the weighted viral load in urban wastewater is considered low compared to historical data, showing a stable trend compared to the previous week. More specifically, the viral load level in urban wastewater is very low in all areas participating in the network.

Influenza virus

- After the sharp decrease of week 11, influenza positivity in the community (as assessed by Sentinel surveillance in primary health care (ILI specimens) presented a small increase. Positivity of SARI specimens remained low, showing a small increase compared to last week.
- In week 13/2025, two new ICU laboratory-confirmed influenza cases and four new deaths from laboratory-confirmed influenza were recorded. Additionally, one ICU laboratory-confirmed influenza case with admission date within previous week was retrospectively reported. In total, from week 40/2023 to week 13/2025, 179 severe cases of laboratory-confirmed influenza were admitted to ICU and 68 deaths were recorded. From week 01/2024 to week 13/2025, 129 deaths in severe cases with laboratory confirmed influenza were recorded.
- From week 40/2024 to week 13/2025, among 3.876 samples (Sentinel Primary Health Care Surveillance, SARI surveillance and hospitals outside surveillance networks), 812 (21%) positive samples for influenza viruses were found. Of the 799 samples typed, 514 were type A and 285 type B.
- Among the 486 type A samples that were subtyped, 246 (51%) were A(H1)pdm09 and 240 (49%) were A(H3).

Respiratory syncytial virus – RSV

- RSV activity remains relatively mild. Positivity in sentinel primary health care (ILI specimens) showed a small decrease compared to last week, while it slightly increased in hospitals (SARI specimens).
- 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