



## Epidemiological Surveillance of Respiratory Infections

### Weekly overview

Week 14/2023 (03/4/2023 – 9/4/2023)

#### Influenza-like Illness

- a decrease was observed in the community compared to the previous week

#### SARS-CoV2 virus - COVID-19 infection

- test positivity showed an increase compared to the previous week
- the number of COVID-19 admissions remained stable compared to the previous week and showed a 6% decrease compared to the average weekly number of new admissions during the previous 4 weeks
- the number of new intubations showed an increase compared to the previous week and a 16% increase compared to the average weekly number of new intubations during the previous 4 weeks
- the cumulative number of intubated patients with COVID-19 infection is 69
- 44 deaths were reported (median age: 81.5 years, range: 61-99 years)
- during the last weeks, all samples sequenced were classified as Omicron sub-variants BA.2 and BA.5, with BA.2 being the dominant variant from week 9 onwards
- in week 12 the sub-variant BQ.1.1 was the most frequent sub-variant of BA.5 (81%)
- in week 11 the most frequent BA.2 sub-variants were XBB.1.5 (74%), followed by BA.2.75 (18%)
- viral load surveillance in municipal wastewater showed an increase in SARS-CoV-2 virus circulation in 2 out of 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 showed an increase
- one new severe case of laboratory-confirmed influenza admitted to ICU in week 12/2023 was retrospectively recorded. The patient died. One new death from laboratory-confirmed influenza was recorded in week 14/2023
- from week 40/2022 to week 14/2023, 67 people with influenza were hospitalized in ICU and 25 deaths were reported
- during the same period, 342 samples positive for influenza viruses (sentinel samples and hospital samples) were detected in the two Influenza Reference Centers, of which 286 (84%) were type A and 56 (16%) were type B
- of the 283 type A viruses subtyped, 257 (91%) were classified as subtype A(H3N2) and 26 (9%) as subtype A(H1N1)pdm09
- during the last weeks, an excess of type B is recorded

#### Respiratory syncytial virus – RSV

- test positivity remained low