



## Epidemiological Surveillance of Respiratory Infections

### Weekly overview

Week 16/2024 (15/04/2024 – 21/04/2024)

#### 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 slightly increased compared to last week.

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

- Test positivity slightly increased compared to the previous week.
- The number of COVID-19 admissions was n=81. The average weekly number of new admissions during the previous 4 weeks was 82 and the respective week of 2023 the number was 813.
- 2 new intubations were recorded. The average weekly number of new intubations during the previous 4 weeks was 1, whereas the number of intubations the respective week of 2023 was 17.
- The cumulative number of intubated patients with COVID-19 infection is 6.
- 6 deaths were reported (median age: 88,5 years, range: 81-93). The number of deaths was the same with the average weekly number of deaths during the previous 4 weeks (n=6) and was lower compared to the respective week of 2023 (n=47).
- The most frequent BA.2 sub-variant is JN.1 (>85% from week 6 and after).
- Viral load surveillance in municipal wastewater showed a decrease in SARS-CoV-2 virus circulation in 4 out of 7 areas participating in the network, whereas it increased in 2 and remained stable in one.

#### 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% without significant change compared to last week, although it remains high for the season (with B being the dominant type). Test positivity of SARI samples remained at the same level compared to last week and remains low.
- 1 new severe case of laboratory-confirmed influenza were admitted to ICU, while no new deaths from laboratory-confirmed influenza were recorded.
- From week 40/2023 to week 16/2024, 141 laboratory-confirmed cases were hospitalized in ICU and 68 laboratory-confirmed deaths were reported.
- From week 40/2023 to week 16/2024, 933 positive samples were typed (sentinel primary health care samples, SARI sentinel samples and hospital non-sentinel samples), 547 (59%) as A and 386 (41%) as B. From week 10 and after, the dominant type is B in both sentinel primary health care (ILI specimens) and hospitals (SARI specimens).
- Of the 529 type A viruses subtyped from the two Influenza Reference Centers, 42 (8%) were classified as subtype A(H3) and 487 (92%) 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).