

Epidemiological Surveillance of Respiratory Infections Weekly overview - Week 16/2025 (14/04/2025 –20/04/2025)

Influenza-like Illness (ILI)

The number of ILI cases per 1,000 visits shows a decreasing trend since week 9/2025. A decrease was recorded in week 16, compared to the previous week.

Severe Acute Respiratory Illness- SARI (ILI)

• The number of SARI cases per 1,000 hospital admissions shows a gradually decreasing trend since the beginning of 2025, with small weekly fluctuations. decreased compared to last week. A small increase was recorded in week 16, compared to the previous week.

SARS-CoV2 virus - COVID-19 infection

- Test positivity from all tests performed in the country (COVID-19 registry data) remains very low.
- 42 COVID-19 hospital admissions were recorded, while the average weekly number of new hospital admissions during the previous four weeks was 72.
- Two new intubations were recorded. The average weekly number of new intubations for the past four weeks was also two.
- The current number of ventilated patients with COVID-19 infection is five.
- Three new deaths were recorded. The average weekly number of deaths for the past four weeks was four. From week 01/2024 to week 16/2025, 393 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. The average viral load level in urban wastewater is very low in all areas tested.

Influenza virus

- Influenza positivity in the community (as assessed by Sentinel surveillance in primary health care (ILI specimens) presents a decreasing trend. In week 16, it fell below the limit that marks seasonal activity. No positive SARI specimens were recorded.
- In week 16/2025, one new ICU laboratory-confirmed influenza case and two new deaths from laboratory-confirmed influenza were recorded. In total, from week 40/2023 to week 16/2025, 185 severe cases of laboratory-confirmed influenza were admitted to ICU and 76 deaths were recorded. From week 01/2024 to week 15/2025, 137 deaths in severe cases with laboratory confirmed influenza were recorded.
- From week 40/2024 to week 16/2025, among 4.335 samples (Sentinel Primary Health Care Surveillance, SARI surveillance and hospitals outside surveillance networks), 846 (20%) positive samples for influenza viruses were found. Of the 833 samples typed, 529 were type A and 304 type B.
- Among the 496 type A samples that were subtyped, 251 were A(H1)pdm09 and 245 were A(H3).

Respiratory syncytial virus - RSV

- RSV activity remains mild in both sentinel primary health care (ILI specimens) and in hospitals (SARI specimens), with small weekly fluctuations.
- 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