NATIONAL PUBLIC HEALTH ORGANIZATION

Epidemiological Surveillance of Respiratory Infections

Weekly overview

Week 17/2023 (24/4/2023 – 30/4/2023)

Influenza-like Illness

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

SARS-CoV2 virus - COVID-19 infection

- test positivity showed a decrease compared to the previous week
- the number of COVID-19 admissions showed a decrease compared to the previous week and a 3% increase compared to the average weekly number of new admissions during the previous 4 weeks
- the number of new intubations showed a decrease compared to the previous week and a 17% decrease compared to the average weekly number of new intubations duringthe previous 4 weeks)
- the cumulative number of intubated patients with COVID-19 infection is 61
- 57 deaths were reported (median age: 84 years, range: 59-102 years)
- during the last weeks all sequenced samples were classified as Omicron sub-variants BA.2 and BA.5, with BA.2 being the dominant variant from week 9 onwards
- in week 14 the most frequent BA.2 sub-variant was XBB.1.5 (78%), followed by BA.2.75 (12%)
- five tested samples were detected positive for the new variant under monitoring, XBB.1.16 (no epidemiological link has been found so far)
- viral load surveillance in municipal wastewater showed an increase in SARS-CoV-2 virus circulation in 6 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 16/2023 was retrospectively recorded, whereas no severe cases nor deaths from laboratory-confirmed influenza were recorded in week 17/2023
- from week 40/2022 to week 17/2023, 68 people with influenza were hospitalized in ICU and 26 deaths were reported
- during the same period, 362 samples positive for influenza viruses (sentinel samples and hospital samples) were detected in the two Influenza Reference Centers, of which 287 (79%) were type A and 75 (21%) were type B
- of the 285 type A viruses subtyped, 258 (90,5%) were classified as subtype A(H3N2)and 27 (9,5%) as subtype A(H1N1)pdm09
- during the last weeks, type B is the dominant type

Respiratory syncytial virus – RSV

- all tested samples were RSV negative