



Epidemiological Surveillance of Respiratory Infections

Weekly overview

Week 19/2024 (06/05/2024 – 12/05/2024)

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 remained low.

SARS-CoV2 virus - COVID-19 infection

- Test positivity remained low.
- The number of COVID-19 admissions was 78. The average weekly number of new admissions during the previous 4 weeks was 78 as well, and the respective week of 2023 the number was 557.
- No new intubations were recorded. The average weekly number of new intubations during the previous 4 weeks was 3, whereas the number of intubations the respective week of 2023 was 19.
- The cumulative number of intubated patients with COVID-19 infection is 5.
- 4 deaths were recorded. The average weekly number of deaths during the previous 4 weeks was 4 and the number of deaths the respective week of 2023 was 56.
- The most frequent BA.2 sub-variant is JN.1 (>85% from week 6 onwards).
- Viral load surveillance in municipal wastewater showed a decrease in SARS-CoV-2 virus circulation in 3 out of 9 areas participating in the network, whereas it increased in 6.

Influenza virus

- The percentage of sentinel primary care specimens from patients presenting with ILI that tested positive for an influenza virus decreased significantly, although it remained above the epidemic threshold of 10%. All SARI samples were tested negative for influenza.
- 1 new severe case of laboratory-confirmed influenza was admitted to ICU, while 1 new death from laboratory-confirmed influenza was recorded.
- From week 40/2023 to week 19/2024, 144 laboratory-confirmed cases were hospitalized in ICU and 70 laboratory-confirmed deaths were reported.
- From week 40/2023 to week 19/2024, 1.010 positive samples were typed (sentinel primary health care samples, SARI sentinel samples and hospital non-sentinel samples), 549 (54%) as A and 461 (46%) 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 531 type A viruses subtyped from the two Influenza Reference Centers, 42 (8%) were classified as subtype A(H3) and 489 (92%) were classified as subtype A(H1)pdm09.

Respiratory syncytial virus – RSV

- All samples were tested negative in both sentinel primary health care (ILI specimens) and hospitals (SARI specimens).

NOTE: Retrospective inclusion of data reported with delay can result to modifications in the numbers presented