

Epidemiological Surveillance of Respiratory Infections Weekly overview - Week 20/2025 (12/05/2025 –18/05/2025)

Influenza-like Illness (ILI)

 The number of ILI cases per 1,000 visits shows a decreasing trend since week 9/2025, remaining in low levels. In week 20/2025 a small decrease was recorded compared to last 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. In week 20/2025 remained stable compared to previous week.

SARS-CoV2 virus - COVID-19 infection

- Test positivity from all tests performed in the country (COVID-19 registry data) remains very low.
- 50 COVID-19 hospital admissions were recorded in week 20. The average weekly number of new hospital admissions during the previous four weeks was 51.
- No new intubations were recorded in week 20. The average weekly number of new intubations for the past four weeks was two.
- The current number of ventilated patients with COVID-19 infection is one.
- Two new deaths were recorded in week 20. The average weekly number of deaths for the past four weeks was two. From week 01/2024 to week 20/2025, 398 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) is below the limit that marks seasonal activity, with only sporadic positive samples. In week 20, no positive influenza virus sample was recorded.
- In week 20/2025 one new ICU laboratory-confirmed influenza case and three new deaths from laboratory-confirmed influenza were recorded. In total, from week 40/2024 to week 20/2025, 191 severe cases of laboratory-confirmed influenza were admitted to ICU and 82 deaths were recorded. Additionally, one ICU laboratory-confirmed influenza case with admission date within previous week was retrospectively reported. From week 01/2024 to week 20/2025, 143 deaths in severe cases with laboratory confirmed influenza were recorded.
- From week 40/2024 to week 20/2025, among 4.774 samples (Sentinel Primary Health Care Surveillance, SARI surveillance and hospitals outside surveillance networks), 853 (18%) positive samples for influenza viruses were found. Of the 840 samples typed, 531 (63%) were type A and 309 (37%) type B.
- Among the 498 type A samples that were subtyped, 251 were A(H1)pdm09 and 247 were A(H3).

Respiratory syncytial virus - RSV

- RSV activity remains low in both sentinel primary health care (ILI specimens) and in hospitals (SARI specimens), with only sporadic positive samples.
- 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