NATIONAL PUBLIC HEALTH ORGANIZATION

Epidemiological Surveillance of Respiratory Infections

Weekly overview

Week 21/2023 (22/5/2023 – 28/5/2023)

Influenza-like Illness (ILI)

- ILI rate remained stable in the community

SARS-CoV2 virus - COVID-19 infection

- test positivity showed a decrease compared to the previous week
- the number of COVID-19 admissions showed a small decrease compared to the previous week and a 2% decrease 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 59% decrease compared to the average weekly number of new intubations during the previous 4 weeks
- the cumulative number of intubated patients with COVID-19 infection is 40
- 45 deaths were reported (median age: 85 years, range: 71-96 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 18 the most frequent BA.2 sub-variant was XBB.1.5 (86%)
- 66 tested samples were detected positive for the new variant under monitoring, XBB.1.16
- viral load surveillance in municipal wastewater showed an increase in SARS-CoV-2 virus circulation in 4 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 a decrease
- no severe cases of laboratory- confirmed influenza admitted to ICU or deaths from laboratory-confirmed influenza were recorded in week 21/2023
- from week 40/2022 to week 21/2023, 68 people with influenza were hospitalized in ICU and 26 deaths were reported
- during the same period, 370 samples positive for influenza viruses (sentinel samples and hospital samples) were detected in the two Influenza Reference Centers, of which 289 (78%) were type A and 81 (22%) were type B
- of the 287 type A viruses subtyped, 258 (90%) were classified as subtype A(H3N2) and 29 (10%) as subtype A(H1N1)pdm09
- during the last weeks, an excess of type B is recorded

Respiratory syncytial virus – RSV

- all tested samples were RSV negative