



Epidemiological Surveillance of Respiratory Infections

Weekly overview

Week 35/2023 (28/8/2023 – 3/9/2023)

Influenza-like Illness (ILI)

- ILI rate remained low

SARS-CoV2 virus - COVID-19 infection

- test positivity showed a decrease compared to the previous week
- the number of COVID-19 admissions (n=622) showed a small decrease compared to the previous week and there was an 8% increase compared to the average weekly number of new admissions during the previous 4 weeks
- the number of new intubations (n=9) decreased compared to the previous week and compared to the average weekly number of new admissions during the previous 4 weeks (n=8)
- the cumulative number of intubated patients with COVID-19 infection is 23
- 37 deaths were reported (median age: 86 years, range: 69-104)
- during the last weeks all sequenced samples were classified as Omicron sub-variant BA.2
- in week 31 the most frequent BA.2 sub-variants were EG.5 (45%) followed by XBB.1.5 (30%)
- 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 remains below 10% (sentinel)
- no severe cases of laboratory-confirmed influenza admitted to ICU or deaths from laboratory-confirmed influenza were recorded in week 35/2023
- from week 40/2022 to week 35/2023, 71 cases were hospitalized in ICU and 27 deaths were reported
- during the same period, 377 samples positive for influenza viruses (sentinel samples and hospital samples) were detected in the two Influenza Reference Centers, of which 292 (77,5%) were type A and 85 (22,5%) were type B
- of the 290 type A viruses subtyped, 258 (89%) were classified as subtype A(H3N2) and 32 (11%) as subtype A(H1N1)pdm09

Respiratory syncytial virus – RSV

- all samples were tested negative for RSV