



Epidemiological Surveillance of Respiratory Infections

Weekly overview

Week 39/2024 (23/09/2024 – 29/09/2024)

Influenza-like Illness (ILI)

- The number of influenza cases per 1,000 visits remained low.

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 increased compared to last week.
- 672 COVID-19 admissions were recorded, depicting a decrease compared to last week. The average weekly number of new admissions during the previous four weeks was 593.
- Nine new intubations were recorded. The average weekly number of new intubations during the previous four weeks was eight.
- The current number of intubated patients with COVID-19 infection is 23.
- 35 deaths were recorded. The average weekly number of deaths during the previous four weeks was 29.
- As of 27/9, KP.3 was classified by the ECDC/WHO EURO as a Variant Of Interest, while XEC was classified as Variant Under Monitoring. During the last weeks, the dominant variant in the country has been KP.3, whereas the first XEC variants were detected in week 33/2024. These variants have not been associated with an increased risk of severe disease.
- At the national level, the weighted viral load in urban wastewater is at moderate levels compared to historical data, with a mild upward trend. In four of the ten monitored areas, viral load levels appear high, with an increasing trend, while in the remaining areas levels are low/moderate.
- It is recommended for vulnerable population groups (elderly and people with underlying diseases) to scrupulously follow preventive measures against respiratory infections and seek medical advice if symptomatic, to receive timely treatment. At the same time, it is recommended to the general population, in the presence of respiratory infection symptoms, to limit contact with people belonging to vulnerable groups.

Influenza virus

- Influenza positivity as assessed by surveillance networks in primary health care (ILI specimens) and in hospitals (SARI specimens), remains at very low levels, with only sporadic positive samples.
- No new severe cases of laboratory-confirmed influenza were admitted to ICU. No deaths from laboratory-confirmed influenza were reported either.
- From week 40/2023 to week 39/2024, 149 laboratory-confirmed cases were hospitalized in ICU and 71 laboratory-confirmed deaths were reported.
- From week 40/2023 to week 39/2024, 1.069 positive samples were typed (sentinel primary health care samples, SARI sentinel samples and hospital non-sentinel samples), 561 (52%) as A and 508 (48%) as B. From week 10 onwards, the dominant type is type B, both in sentinel primary health care (ILI specimens) and in hospitals (SARI specimens).
- Of the 543 type A viruses subtyped from the two Influenza Reference Centers, 48 (9%) were classified as subtype A(H3) and 495 (91%) 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).