



Epidemiological Surveillance of Respiratory Infections

Weekly overview

Week 41/2023 (9/10/2023 – 15/10/2023)

Influenza-like Illness (ILI)

- ILI rate remained low

SARS-CoV2 virus - COVID-19 infection

- test positivity remained stable
- the number of COVID-19 admissions (n=1.082) increased compared to the previous week and there was a 26% increase compared to the average weekly number of new admissions during the previous 4 weeks
- the number of new intubations (n=33) increased compared to the previous week and compared to the average weekly number of new admissions during the previous 4 weeks (n=15)
- the cumulative number of intubated patients with COVID-19 infection is 53
- 51 deaths were reported (median age: 86 years, range: 56-100)
- during the last weeks, all sequenced samples were classified as Omicron sub-variant BA.2
- in week 39/2023 the most frequent BA.2 sub-variant was XBB.1.5 (39%), followed by EG.5 (24%) and XBB.1.16 (23%)
- 49 positive samples of BA.2.86 sub-variant have been recorded (sampling dates between September 5 and September 28)
- viral load surveillance in municipal wastewater showed an increase in SARS-CoV-2 virus circulation in 6 out of 9 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 while one new death from laboratory-confirmed influenza was recorded in week 41/2023. Two new severe cases of laboratory-confirmed influenza admitted to ICU in week 40/2023 were retrospectively recorded.
- from week 40/2023, 4 samples positive for influenza viruses (sentinel samples and hospital samples) were detected by the two Influenza Reference Centers, all of which type A (subtype A(H1N1)pdm09)

Respiratory syncytial virus – RSV

- test positivity remained low

* seasonal epidemic activity threshold