Epidemiological Surveillance of Respiratory Infections
Weekly overview - Week 41/2025 (06/10/2025 –12/10/2025)

Influenza-like Illness (ILI)

- The number of ILI cases per 1,000 visits lies low, however at higher levels compared to historical data. An increase was recorded compared to week 40/2025.

Severe Acute Respiratory Illness- SARI (ILI)

- The number of SARI cases per 1,000 visits is low, showing a small increase compared to week 40/2025.

SARS-CoV2 virus - COVID-19 infection

- The positivity rate from all SARS-CoV-2 diagnostic tests across the country has not shown any significant change compared to the previous week.
- Since the beginning of the summer, sporadic cases of intubations and deaths have been recorded. In week 41/2025, no new intubations were recorded while three new deaths were reported. From week 01/2024 to week 41/2025, the recorded deaths among severe cases (intubated and/or admitted to ICU) amount to 407.
- Since the end of spring, co-circulation of the strains LP.8.1, NB.1.8.1, and XFG (Variants Under Monitoring according to ECDC and WHO/EURO) has been observed, with a gradual increase in XFG, which is currently the predominant strain in the detections.
- Nationally, the weighted viral load of SARS-CoV-2 in urban wastewater is currently at high levels compared to historical data, showing a significant increase compared to the previous week. In most of the monitored areas, the load is at high levels, with fluctuations depending on the city.

Influenza virus

- Influenza positivity in the community (as estimated by the Sentinel Primary Health Care Surveillance Network) and in secondary healthcare (as estimated by the SARI surveillance network) is at very low levels, with only sporadic positive samples recorded.
- In week 41/2025, no new severe cases requiring ICU admission were recorded, nor were there any new deaths from laboratory-confirmed influenza. From week 01/2024 to week 41/2025, the recorded deaths in severe cases with laboratory-confirmed influenza total 148
- In total, from week 40/2025 to week 41/2025, among 269 samples (from Sentinel community, SARI surveillance network and hospitals outside the surveillance network), four positive samples for influenza virus type A were found. Among the three type A strains that subtyped, belonged to the A(H1) subtype.

Respiratory syncytial virus – RSV

- No positive samples were found in the community (Sentinel Primary Health Care network), nor in the hospitals (SARI surveillance network).

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