Epidemiological Surveillance of Respiratory Infections
Weekly overview
Week 44/2023 (30/10/2023 – 5/11/2023)

Influenza-like Illness (ILI)

- ILI rate remained low

SARS-CoV2 virus - COVID-19 infection

- test positivity decreased compared to the previous week
- the number of COVID-19 admissions (n=781) decreased 22% compared to the average weekly number of new admissions during the previous 4 weeks and was lower compared to the respective week of 2022
- the number of new intubations (n=24) increased compared to the average weekly number of new intubations during the previous 4 weeks (n=21) and was lower compared to the respective week of 2022
- the cumulative number of intubated patients with COVID-19 infection is 41
- 57 deaths were reported (median age: 87 years, range: 63-96). The number of deaths slightly decreased compared to the average weekly number of deaths during the previous 4 weeks (n=59) and was lower compared to the respective week of 2022
- in week 42/2023 the most frequent BA.2 sub-variant was XBB.1.5 (49%), followed by EG.5 (23%) and XBB.1.16 (16%)
- 116 positive samples of BA.2.86 sub-variant have been recorded (sampling dates between September 5 and October 20)
- viral load surveillance in municipal wastewater showed an increase in SARS-CoV-2 virus circulation in 1 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 or deaths from laboratory-confirmed influenza were recorded in week 44/2023
- from week 40/2023 to week 44/2023, 3 laboratory-confirmed cases were hospitalized in ICU and 2 laboratory-confirmed deaths were reported
- from week 40/2023, 12 samples positive for influenza viruses were recorded (sentinel samples and hospital samples), of which 11 (92%) were typed as A and 1 (8%) was typed as B by the two Influenza Reference Centers
- all type A viruses subtyped were classified as subtype A(H1)pdm09

Respiratory syncytial virus – RSV

- all samples were tested negative for RSV

* seasonal epidemic activity threshold