

Epidemiological Surveillance of Respiratory Infections Weekly overview Week 47/2023 (20/11/2023 – 26/11/2023)

Influenza-like Illness (ILI)

• ILI rate remained low

SARS-CoV2 virus - COVID-19 infection

- test positivity slightly increased compared to the previous week
- the number of COVID-19 admissions (n=838) increased 3% 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=25) increased compared to the average weekly number of new intubations during the previous 4 weeks (n=18) and was lower compared to the respective week of 2022
- the cumulative number of intubated patients with COVID-19 infection is 50
- 45 deaths were reported (median age: 85 years, range: 57-94). The number of deaths decreased compared to the average weekly number of deaths during the previous 4 weeks (n=54) and was lower compared to the respective week of 2022
- in week 45/2023 the most frequent BA.2 sub-variant was EG.5 (47%), followed by XBB.1.5 (20%) and XBB.1.16 (10%) (preliminary data)
- viral load surveillance in municipal wastewater showed an increase in SARS-CoV-2 virus circulation in 4 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)
- one new severe case of laboratory-confirmed influenza admitted to ICU and one new death from laboratory-confirmed influenza were recorded in week 47/2023. A severe case of laboratory-confirmed influenza admitted to ICU hospitalization was retrospectively reported (admission date within week 46/2023).
- from week 40/2023 to week 47/2023, 6 laboratory-confirmed cases were hospitalized in ICU and 4 laboratory-confirmed deaths were reported
- from week 40/2023, 20 samples positive for influenza viruses were recorded (sentinel samples and hospital samples), of which 19 (95%) were typed as A and 1 (5%) was typed as B by the two Influenza Reference Centers
- of the 19 type A viruses subtyped, 4 (21%) were classified as subtype A(H3) and 15 (79%) were classified as subtype A(H1)pdm09

Respiratory syncytial virus – RSV

• RSV positivity is low

^{*} seasonal epidemic activity threshold