



## Epidemiological Surveillance of Respiratory Infections

### Weekly overview

Week 49/2023 (04/12/2023 – 10/12/2023)

#### Influenza-like Illness (ILI)

- The number of influenza cases per 1,000 visits remains at the same level compared to last week

#### SARS-CoV2 virus - COVID-19 infection

- Test positivity increased compared to the previous week
- The number of COVID-19 admissions (n=1.176) increased 38% 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=26) 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 59
- 48 deaths were reported (median age: 82,5 years, range: 58-99). The number of deaths increased compared to the average weekly number of deaths during the previous 4 weeks (n=44) and was lower compared to the respective week of 2022
- In week 46/2023 the most frequent BA.2 sub-variant was EG.5 (40%), followed by XBB.1.5 (29%)
- Viral load surveillance in municipal wastewater showed an increase in SARS-CoV-2 virus circulation in 7 out of 10 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 remained above the epidemic threshold of 10%
- 4 new severe cases of laboratory-confirmed influenza were admitted to ICU while no new deaths from laboratory-confirmed influenza were recorded in week 49/2023. A severe case of laboratory-confirmed influenza admitted to ICU was retrospectively reported (admission date within week 48/2023)
- From week 40/2023 to week 49/2023, 14 laboratory-confirmed cases were hospitalized in ICU and 4 laboratory-confirmed deaths were reported
- From week 40/2023, 41 samples positive for influenza viruses were recorded (sentinel samples and hospital samples), of which 39 (95%) were typed as A and 1 (2%) was typed as B by the two Influenza Reference Centers (for one positive sample the virus type was not available)
- Of the 39 type A viruses subtyped, 8 (20,5%) were classified as subtype A(H3) and 31 (79,5%) were classified as subtype A(H1)pdm09

#### Respiratory syncytial virus – RSV

- Positivity rate increased