



## Epidemiological Surveillance of Respiratory Infections

### Weekly overview

#### Week 50/2024 (09/12/2024 – 15/12/2024)

##### Influenza-like Illness (ILI)

- The number of influenza cases per 1,000 visits shows an overall increasing trend, with a small increase compared to last week.

##### Severe Acute Respiratory Illness- SARI (ILI)

- The number of SARI cases per 1,000 visits is low.

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

- Test positivity from all tests performed in the country (COVID-19 registry data) remained at the same level compared to last week.
- The number of new admissions decreased compared to last week. 514 COVID-19 admissions were recorded, while the average weekly number of new admissions during the previous four weeks was 588.
- 6 new intubations were recorded. The average weekly number of new intubations during the previous four weeks was 10.
- The current number of intubated patients with COVID-19 infection is 23.
- 14 deaths were recorded. The average weekly number of deaths during the previous four weeks was also 30. Since the beginning of the year, recorded deaths among severe cases (intubated and/or with ICU hospitalization) is 326.
- As of 27/9, KP.3 was classified by the ECDC/WHO EURO as a Variant of Interest, while XEC was classified as Variant Under Monitoring. The dominant variant in the country is KP.3, whereas the first XEC variants were detected in week 33/2024. XEC shows an increasing trend. These variants have not been associated with an increased risk of severe disease.
- At the national level, the weighted viral load in urban wastewater is at medium levels compared to historical data, showing a slight decrease compared to last week. In one of the ten monitored areas, viral load levels in urban wastewater appear increased (decreased in one of them compared to last week), moderate in one (with no significant change compared to last week), whereas in the remaining areas it is low.

##### Influenza virus

- Influenza positivity in the community (as assessed by Sentinel surveillance in primary health care (ILI specimens) is above the limit that indicates the beginning of the activity of seasonal influenza (10%), keeping its increasing trend. Positivity of SARI specimens shows a slight decrease.
- One new ICU laboratory-confirmed influenza case was recorded, while no new deaths from laboratory-confirmed influenza were recorded. Additionally, one severe case of laboratory-confirmed influenza admitted to ICU was retrospectively reported (admission date within week 48/2024). In total, from week 40/2023 to week 50/2024, seven severe cases of laboratory-confirmed influenza were admitted to ICU and one death was recorded. Since the beginning of the year, recorded deaths in severe cases with laboratory confirmed influenza is 62.
- From week 40/2024 to week 50/2024, among 1.148 samples (Sentinel Primary Health Care Surveillance, SARI surveillance and hospitals outside surveillance networks), 34 (3%) positive samples for influenza viruses were found, 32 type A and 2 type B.
- Among the 32 type A samples, 9 (28%) were A(H3) and 23 (72%) were A(H1)pdm09.

##### Respiratory syncytial virus – RSV

- Positivity in sentinel primary health care (ILI specimens) is low, while all samples were tested negative in hospitals (SARI specimens).
- 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.