



## Epidemiological Surveillance of Respiratory Infections Weekly overview - Week 10/2025 (03/03/2025 –09/03/2025)

### Influenza-like Illness (ILI)

- The number of influenza cases per 1,000 visits, after the upward trend recorded since week 49 of 2024, has stabilized since early 2025, with small weekly fluctuations. In week 10 a decrease was recorded compared to the previous week.

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

- The number of SARI cases per 1,000 hospital admissions slightly increased compared to last week.

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

- Test positivity from all tests performed in the country (COVID-19 registry data) remains very low.
- 90 COVID-19 hospital admissions were recorded, while the average weekly number of new hospital admissions during the previous four weeks was 159.
- No new intubations were recorded. The average weekly number of new intubations for the past four weeks was two.
- The current number of ventilated patients with COVID-19 infection is seven.
- Six deaths were recorded. The average weekly number of deaths for the past four weeks was nine. From week 01/2024 to week 10/2025, 385 deaths among severe cases (intubated and/or with ICU hospitalization) were recorded.
- The KP.3 and XEC sub-variants of BA.2.86 are the predominant variants. In week 33/2024 the first variants of XEC were detected, which since early October has been showing an upward trend. None of these variants are currently associated with an increased risk of severe disease.
- At the national level, the weighted viral load in urban wastewater is considered low compared to historical data, with decrease compared to the previous week. More specifically, the viral load level in urban wastewater is low in all areas participating in the network.

### Influenza virus

- Influenza positivity in the community (as assessed by Sentinel surveillance in primary health care (ILI specimens)) remains high, showing a decrease compared to last week. Positivity of SARI specimens decreased compared to last week.
- In week 10/2025, seven new ICU laboratory-confirmed influenza cases and three new deaths from laboratory-confirmed influenza were recorded. Additionally, five severe cases of laboratory-confirmed influenza were admitted to ICU and two deaths from laboratory-confirmed influenza with admission dates within previous weeks were retrospectively reported. In total, from week 40/2023 to week 10/2025, 166 severe cases of laboratory-confirmed influenza were admitted to ICU and 55 deaths were recorded. From week 01/2024 to week 10/2025, 116 deaths in severe cases with laboratory confirmed influenza were recorded.
- From week 40/2024 to week 10/2025, among 3.225 samples (Sentinel Primary Health Care Surveillance, SARI surveillance and hospitals outside surveillance networks), 672 (21%) positive samples for influenza viruses were found. Of the 661 samples typed, 457 were type A and 204 type B.
- Among the 435 type A samples that were subtyped, 230 (53%) were A(H1)pdm09 and 205 (47%) were A(H3).

### Respiratory syncytial virus – RSV

- Positivity in sentinel primary health care (ILI specimens) remained low, showing a decrease compared to last week, while it increased 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.

NOTE: Retrospective inclusion of data reported with delay can result in modifications in the numbers presented