

Influenza, RSV and Other Respiratory Viruses Surveillance Report

Week 48 2023 (27th November – 3rd December 2023)



This report presents data on the epidemiology of influenza, respiratory syncytial virus (RSV) and other respiratory viruses (ORVs). For further information on the epidemiology of COVID-19, please refer to [COVID-19 surveillance reports](#).

Summary Week 48 2023

Influenza activity increased further during week 48 2023 but remains at low levels in Ireland. Increasing detections of influenza A(H1)pdm09, A(H3) and influenza B are being reported. Respiratory syncytial virus (RSV) circulation remains at very high levels and RSV hospitalised cases continue to increase with the highest rates in those aged less than one year old, followed by the 1-4 year age group. Rhino/enteroviruses have been circulating at high levels in recent weeks.

- **Influenza-like illness (ILI):** The sentinel GP ILI consultation rate was 4.9 per 100,000 population during week 48 2023, compared to the updated rate of 5.9/100,000 in week 47. ILI consultation rates have been below the Irish baseline threshold (18.1/100,000 population) for the season to date (weeks 40-48 2023). Sentinel GP ILI age specific rates were below age specific baseline thresholds in all age groups during week 48 2023.
- **National Virus Reference Laboratory (NVRL):** During week 48 2023, of 125 sentinel GP acute respiratory infection (ARI) specimens tested and reported by the NVRL, eight (6.4%) were positive for influenza (six influenza A(H3) and two influenza B), five (4.0%) for SARS-CoV-2, 39 (31.2%) for RSV and 21 (16.8%) for rhino/enterovirus.
- Of 129 non-sentinel respiratory specimens tested and reported by the NVRL during week 48 2023, three (2.3%) were positive for influenza (one influenza A(H1)pdm09 and two influenza A(H3)), 22 (17.1%) for RSV and 14 (10.9%) for rhino/enterovirus.
- Of 91 specimens (including both sentinel GP ARI and non-sentinel respiratory specimens) testing positive for influenza and reported by the NVRL during the 2023/24 season, ten (11.0%) were coinfecting with other viruses.
- **GP Out of hours (OOHs):** Cough calls comprised 25.4% (2895/11,382) of all reported GP OOHs calls during week 48 2023, which is above the baseline threshold of 10.8%. Half (49.6% (1437/2895)) of cough calls were in those aged 0-4 years. The number of flu calls was 174/11,382 (1.5%) in week 48, which is below the baseline threshold level (2.3%).
- **Influenza notifications:** 172 laboratory confirmed influenza cases were notified during week 48 2023: 13 influenza A (H3), eight A(H1)pdm09, 138 influenza A (not subtyped), 11 influenza B and two influenza A and B coinfections. This is an increase compared to 90 cases notified during week 47 2023.
- **RSV notifications:** 985 RSV cases were notified during week 48 2023, an increase compared to 730 cases notified during week 47 2023. Age specific rates were highest in those aged less than one year.
- **Hospitalisations:** Notified laboratory confirmed influenza hospital inpatients increased with 56 cases notified in week 48 2023 compared to 23 in week 47. 49 of the hospitalised cases were influenza A (not subtyped), three were influenza A(H1)pdm09, three were influenza B and one was an influenza A and B coinfection. There were 368 laboratory confirmed RSV hospital inpatients notified in week 48, compared to 342 cases in week 47 2023. Of the hospitalised RSV cases, 46% (168/368) were aged less than one year.
- **Intensive care admissions:** One laboratory confirmed influenza (influenza A and B coinfection) case was admitted to intensive care unit and notified to HPSC during week 48 2023. Three influenza ICU cases (one influenza A (not subtyped), one A(H1)pdm09 and one A and B coinfection) have been notified for the season to date (weeks 40 - 48 2023).
- **Mortality:** No deaths in notified influenza cases were reported to HPSC during week 48 2023 or for the season to date. No excess all-cause mortality has been reported since week 2 2023.
- **Outbreaks:** During week 48 2023, three influenza outbreaks (all in acute hospitals) and three acute respiratory infection (ARI) outbreaks (two in nursing homes and one in a community/long stay hospital) were reported to HPSC.
- **International:** In the European region during week 47 2023, influenza activity remained at low levels but is increasing. RSV and SARS-CoV-2 activity are at elevated levels. Rates of ILI and/or ARI were elevated above baseline levels in 7 of 29 countries of the WHO European Region.

1. Consultations for Influenza Like Illness - GP sentinel surveillance system

- During week 48 2023, 39 sentinel GP influenza-like illness (ILI) consultations were reported from the Irish sentinel GP network, corresponding to an ILI consultation rate of 4.9 per 100,000 population, compared to an updated rate of 5.9 per 100,000 population during week 47 2023 (Figure 1).
- Out of the 94 GP practices reporting ILI consultations from the Irish sentinel GP network, 91 provided data for consultations in week 48.
- The sentinel GP ILI consultation rates have been below the Irish sentinel GP ILI baseline threshold (18.1/100,000 population) this season to date.
- Age specific ILI consultation rates were below age specific baseline thresholds in all age groups during week 48 and the 2023/2024 season to date (weeks 40-48 2023) (Figure 2, Table 1).
- The Irish sentinel baseline ILI threshold for the 2023/2024 influenza season is 18.1 per 100,000 population. ILI rates above this baseline threshold combined with sentinel GP influenza positivity >10% indicate the likelihood that influenza is circulating in the community. The Moving Epidemic Method (MEM) is used to calculate thresholds for GP ILI consultations in a standardised approach across Europe. The baseline ILI threshold (18.1/100,000 population), low (57.5/100,000 population), medium (86.5/100,000 population) and high (103.6/100,000 population) intensity ILI thresholds are shown in Figure 1.

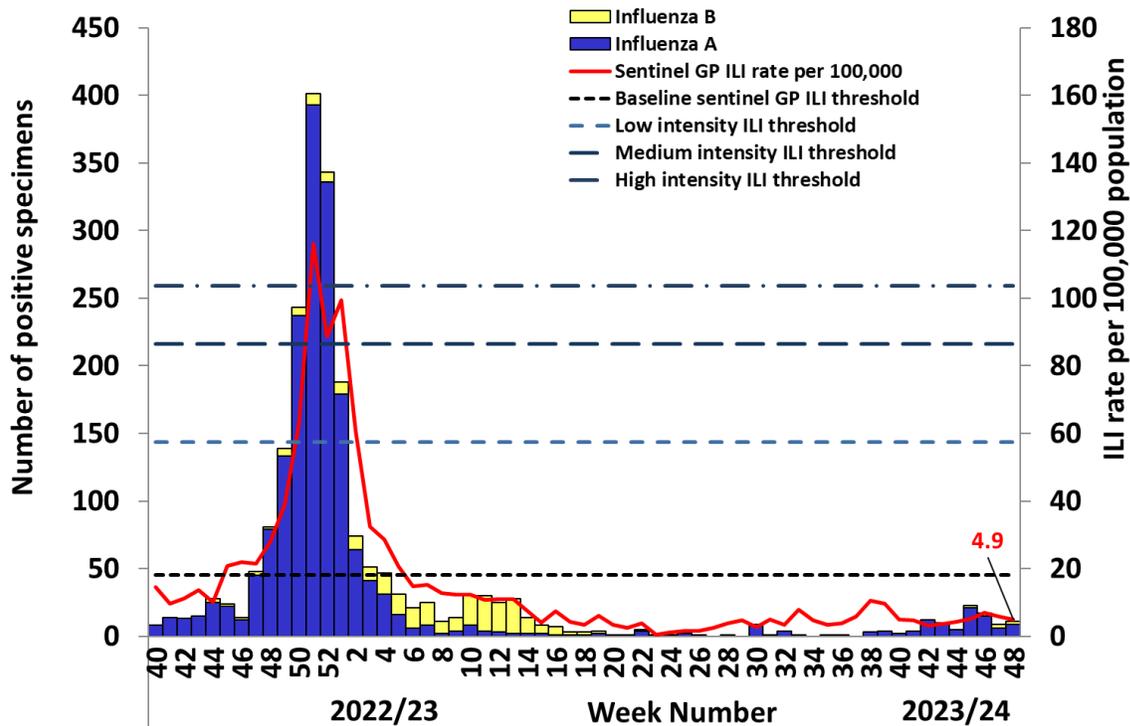


Figure 1: Sentinel GP **Influenza-like illness (ILI)** consultation rates per 100,000 population, baseline, low, medium and high intensity ILI thresholds and number of positive influenza A and B specimens tested by the NVRL, by influenza week and season. *Source: ICGP and NVRL*

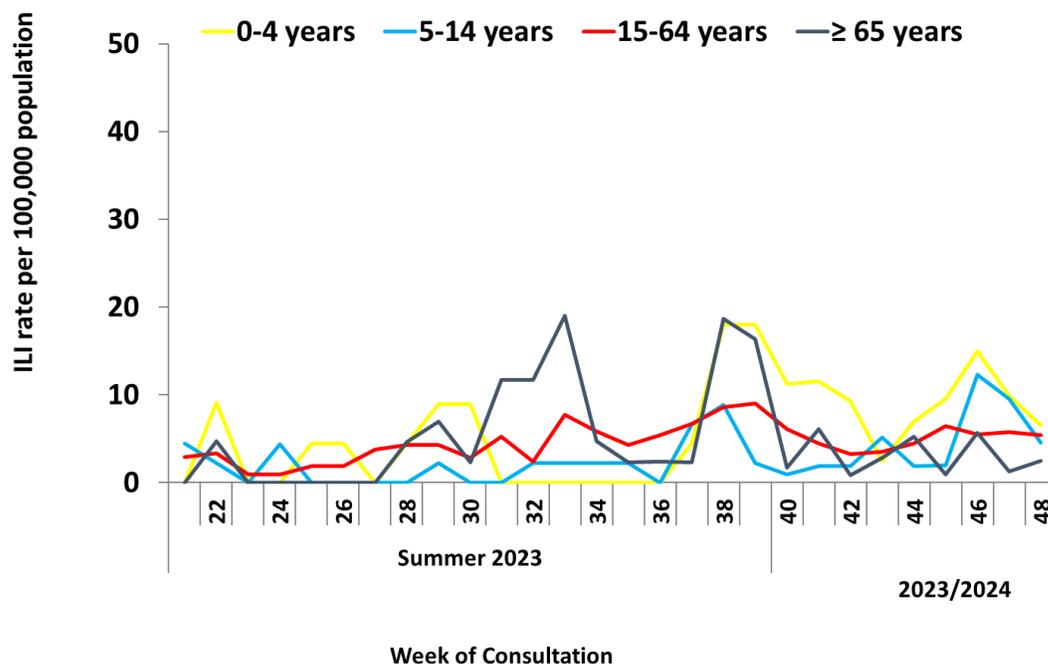


Figure 2: Age specific sentinel GP **ILI consultation** rate per 100,000 population by week (weeks 21-48 2023). *Source: ICGP.*

Table 1: Age specific sentinel GP **ILI consultation** rate per 100,000 population by week (weeks 40-48 2023), colour coded by sentinel GP ILI age specific Moving Epidemic Method (MEM) threshold levels. *Source: ICGP.*

MEM Threshold Levels	Below Baseline	Low	Moderate	High	Extraordinary
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	2023/2024								
Age group (years)	40	41	42	43	44	45	46	47	48
All Ages	5.0	4.8	3.1	3.6	4.4	5.2	7.0	5.9	4.9
<15 yrs	3.7	4.4	3.8	4.1	3.1	3.9	12.2	8.9	4.8
15-64 yrs	6.1	4.5	3.3	3.5	4.5	6.5	5.5	5.8	5.4
≥65 yrs	1.7	6.1	0.9	2.8	5.3	0.9	5.7	1.3	2.5
Reporting practices (N=94)	88	86	85	78	86	82	63	57	91

2. Influenza and Other Respiratory Virus Detections - NVRL

The data reported in this section for the 2023/2024 influenza season refers to sentinel GP ARI and non-sentinel respiratory specimens routinely tested for influenza, respiratory syncytial virus (RSV), adenovirus, parainfluenza virus types 1-4 (PIV-1-4), human metapneumovirus (hMPV) and rhino/enteroviruses by the National Virus Reference Laboratory (NVRL) (Tables 2 & 3, Figure 3a, 3b, 4).

- A lag time with testing and reporting is noted for the most recent surveillance week.
- During week 48 2023 of 125 sentinel GP ARI specimens tested and reported by the NVRL, eight (6.4%) were positive for influenza (six influenza A(H3) and two influenza B), five (4.0%) for SARS-CoV-2, 39 (31.2%) for RSV and 21 (16.8%) for rhino/enterovirus.
- In comparison during week 47 2023, of 94 sentinel GP ARI specimens tested and reported by the NVRL, five (5.3%) were positive for influenza (three influenza A(H3) and two influenza B), five (5.3%) for SARS-CoV-2, 16 (17.0%) for RSV and 21 (22.3%) for rhino/enterovirus.
- During week 48 2023, of 129 non-sentinel respiratory specimens tested and reported by the NVRL, three (2.3%) were positive for influenza (one influenza A(H1)pdm09 and two influenza A(H3)), 22 (17.1%) for RSV and 14 (10.9%) for rhino/enterovirus.
- During week 47 2023, of 169 non-sentinel respiratory specimens tested, four (2.4%) were positive for influenza (three influenza A(H3) and one influenza B), 32 (18.9 %) for RSV, and 19 (11.2%) for rhino/enterovirus (Figure 3b).
- Other respiratory viruses (ORVs) are being detected at lower levels (Figure 3a and 3b).
- Of 91 sentinel GP ARI specimens and non-sentinel specimens positive for influenza and reported by the NVRL during the 2023/24 season, ten (11.0%) were coinfecting with other viruses, two (2.2%) with rhino/enteroviruses, two (1.3%) with RSV, four (4.4%) with SARS-CoV-2, one with bocavirus (1.1%) and one with coronavirus NL63 (1.1%)

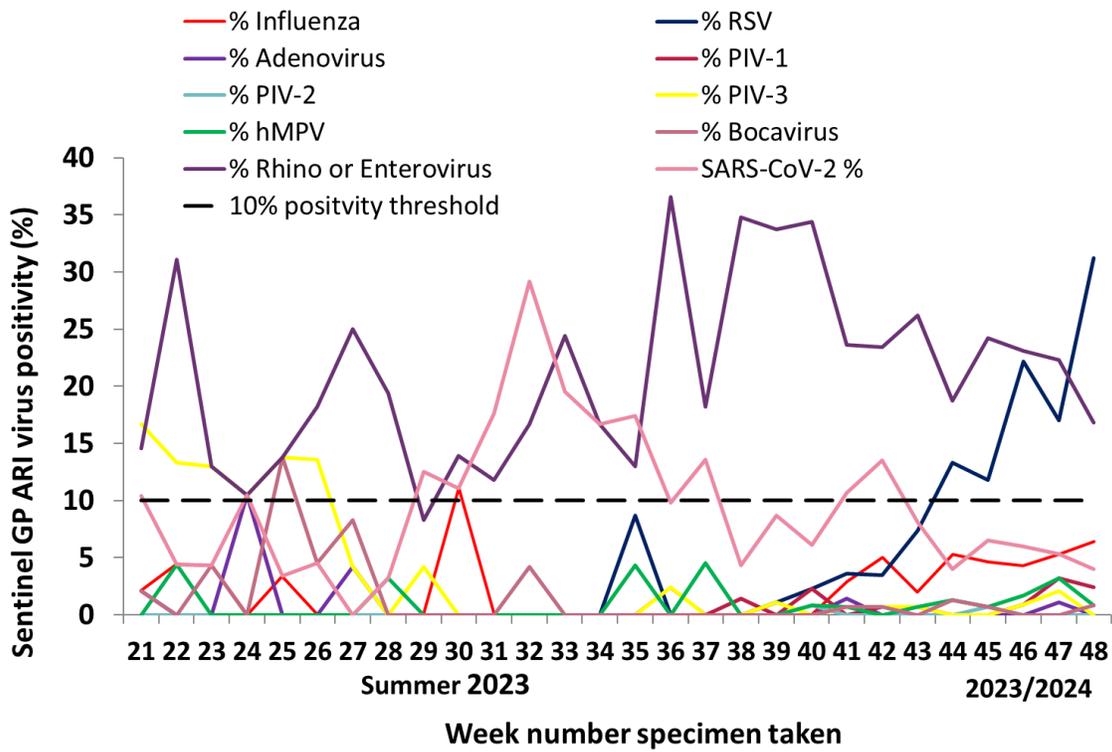


Figure 3a: Percentage positive results for **sentinel GP ARI** specimens tested by the NVRL for influenza, SARS-CoV-2, RSV and other respiratory viruses by week specimen was taken, weeks 21-48 2023. *Source: NVRL*

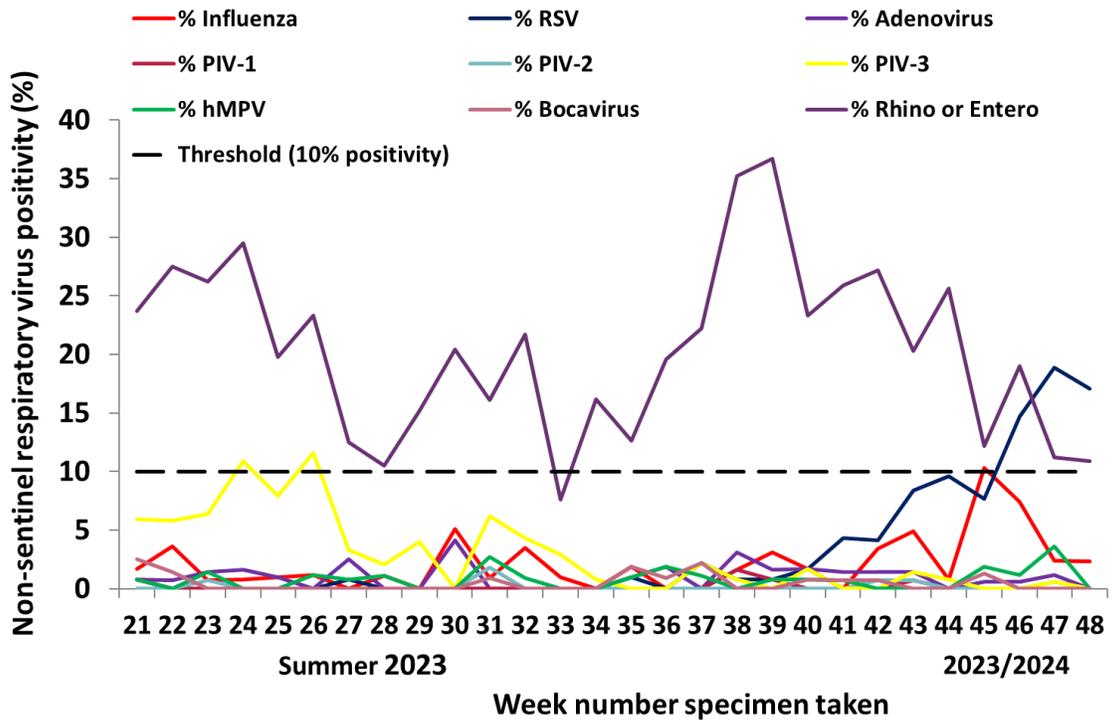


Figure 3b: Percentage positive results for **non-sentinel respiratory** specimens tested by the NVRL for influenza, RSV and other respiratory viruses by week specimen was taken, weeks 21-48 2023. *Source: NVRL*

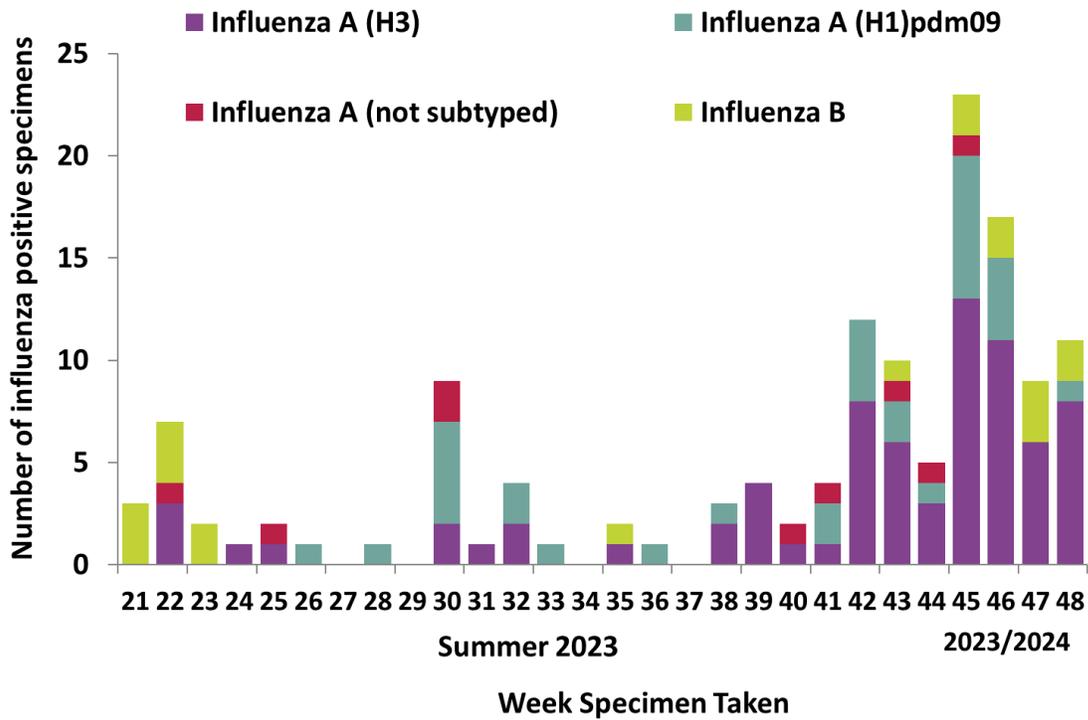


Figure 4: Number of positive **influenza** specimens (from sentinel GP ARI and non-sentinel respiratory sources) tested by the NVRL by influenza type/subtype and by week specimen was taken, weeks 21-48 2023. *Source: NVRL*

Table 2: Number of sentinel GP ARI and non-sentinel respiratory specimens tested by the NVRL and positive **influenza** results, overall and by influenza type and subtype, for weeks 47 and 48 2023 and the 2023/2024 Season. *Source: NVRL*

Surveillance period	Specimen type	Total tested	Number influenza positive	% Influenza positive	Influenza A				Influenza B			
					A(H1)pdm09	A(H3)	A (not subtyped)	Total influenza A	B (unspecified)	B Victoria lineage	B Yamagata lineage	Total influenza B
Week 48 2023	Sentinel GP ARI	125	8	6.4	0	6	0	6	2	0	0	2
	Non-sentinel respiratory	129	3	2.3	1	2	0	3	0	0	0	0
	Total	254	11	4.3	1	8	0	9	2	0	0	2
Week 47 2023	Sentinel GP ARI	94	5	5.3	0	3	0	3	2	0	0	2
	Non-sentinel respiratory	169	4	2.4	0	3	0	3	1	0	0	1
	Total	263	9	3.4	0	6	0	6	3	0	0	3
2023/2024	Sentinel GP ARI	1125	43	3.8	11	24	3	38	5	0	0	5
	Non-sentinel respiratory	1291	50	3.9	10	33	2	45	3	1	1	5
	Total	2416	93	3.8	21	57	5	83	8	1	1	10

Table 3: Number of sentinel GP ARI and non-sentinel respiratory specimens tested by the NVRL and positive **RSV** results, overall and by RSV type, for weeks 47 and 48 2023 and the 2023/2024 Season. *Source: NVRL*

Surveillance period	Specimen type	Total tested	Number RSV positive	% RSV positive	RSV A	RSV B	RSV (unspecified)
Week 48 2023	Sentinel GP ARI	125	39	31.2	35	4	0
	Non-sentinel	129	22	17.1	19	3	0
	Total	254	61	24.0	54	7	0
Week 47 2023	Sentinel GP ARI	94	16	17.0	12	4	0
	Non-sentinel	169	32	18.9	25	7	0
	Total	263	48	18.3	37	11	0
2023/2024	Sentinel GP ILI/ARI	1125	133	11.8	100	33	0
	Non-sentinel	1291	128	9.9	102	26	0
	Total	2416	261	10.8	202	59	0

Table 4: Number and percentage positive sentinel GP ARI specimens by **respiratory virus**, weeks 47 and 48 2023, and the 2023/2024 season. *Source: NVRL*

Virus	Week 48 2023 (N=125)		Week 47 2023 (N=94)		2023/2024 (N=1125)	
	Total positive	% positive	Total positive	% positive	Total positive	% positive
SARS-CoV-2	5	4.0	5	5.3	84	10.1
Influenza virus	8	6.4	5	5.3	43	1.6
Respiratory Syncytial Virus (RSV)	39	31.2	16	17.0	3	0.4
Rhino/enterovirus	21	16.8	21	22.3	156	22.5
Adenovirus	0	0.0	1	1.1	4	0.6
Bocavirus	1	0.8	0	0.0	10	1.4
Human metapneumovirus (hMPV)	1	0.8	3	3.2	6	0.9
Parainfluenza virus type 1 (PIV-1)	3	2.4	3	3.2	1	0.1
Parainfluenza virus type 2 (PIV-2)	0	0.0	0	0.0	0	0.0
Parainfluenza virus type 3 (PIV-3)	0	0.0	2	2.1	30	4.3
Parainfluenza virus type 4 (PIV-4)	3	2.4	1	1.1	35	5.1

Table 5: Number and percentage positive non-sentinel respiratory specimens, by **respiratory virus**, weeks 47 and 48 2023, and the 2023/2024 season. *Source: NVRL*

Virus	Week 48 2023 (N=129)		Week 47 2023 (N=169)		2023/2024 (N=1291)	
	Total positive	% positive	Total positive	% positive	Total positive	% positive
Influenza virus	3	2.3	4	2.4	50	3.9
Respiratory Syncytial Virus (RSV)	22	17.1	32	18.9	128	9.9
Rhino/enterovirus	14	10.9	19	11.2	248	19.2
Adenovirus	0	0.0	2	1.2	12	0.9
Bocavirus	0	0.0	0	0.0	5	0.4
Human metapneumovirus (hMPV)	0	0.0	6	3.6	13	1.0
Parainfluenza virus type 1 (PIV-1)	0	0.0	0	0.0	1	1.0
Parainfluenza virus type 2 (PIV-2)	0	0.0	1	0.6	3	0.2
Parainfluenza virus type 3 (PIV-3)	0	0.0	1	0.6	6	0.5
Parainfluenza virus type 4 (PIV-4)	2	1.6	2	1.2	22	1.7

3. GP Out-Of-Hours services surveillance

National data on calls to GP Out-of-Hours services in Ireland are collated by HPSC. Five out of 14 Out-of-Hours GP services currently participate in this programme. Records of calls with clinical symptoms self-reported as 'flu' or 'cough' are included in the analysis. This information may act as an early indicator of circulation of influenza viruses, SARS-CoV-2, or other respiratory viruses.

- Four out of the five participating GP OOH services provided data for week 48 2023.
- Out of a total of 11,382 calls made to the participating GP OOHs in week 48:
 - 2895 (25.4%) were for self-reported 'cough', which is above the baseline threshold of 10.8% for cough calls. Coughs as a percentage of all calls is stable compared to the percentage of cough calls (24.6%) in week 47 (Figures 5 and 6).
 - 174 (1.5%) were for self-reported 'flu', which is below the baseline threshold of 2.3% for 'flu' calls (Figures 7 and 8).
- 49.6% (1437/2895) of all cough calls were from those aged four years and under.

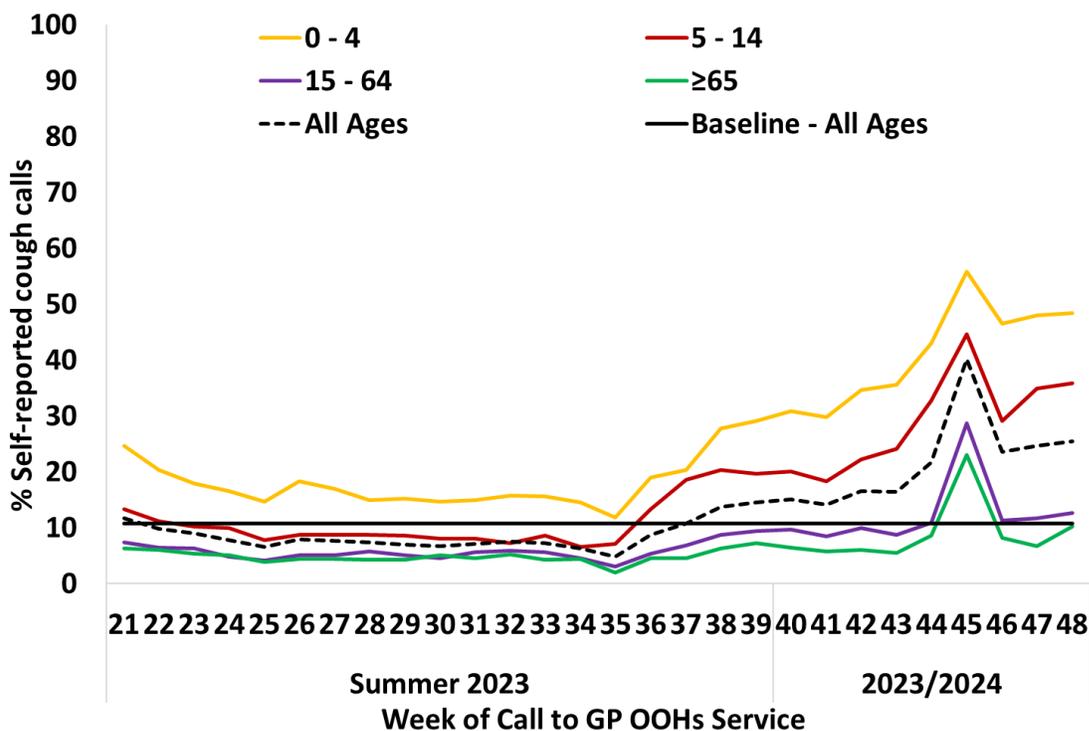


Figure 5: Percentage of self-reported **COUGH** calls for all ages and by age group as a proportion of total calls to GP Out-of-Hours services by week of call, summer 2023 and the 2023/2024 season. The baseline % cough calls for all ages calculated using the MEM method on historic data is shown. *Source: GP Out-Of-Hours services in Ireland (collated by HSE & ICGP).*

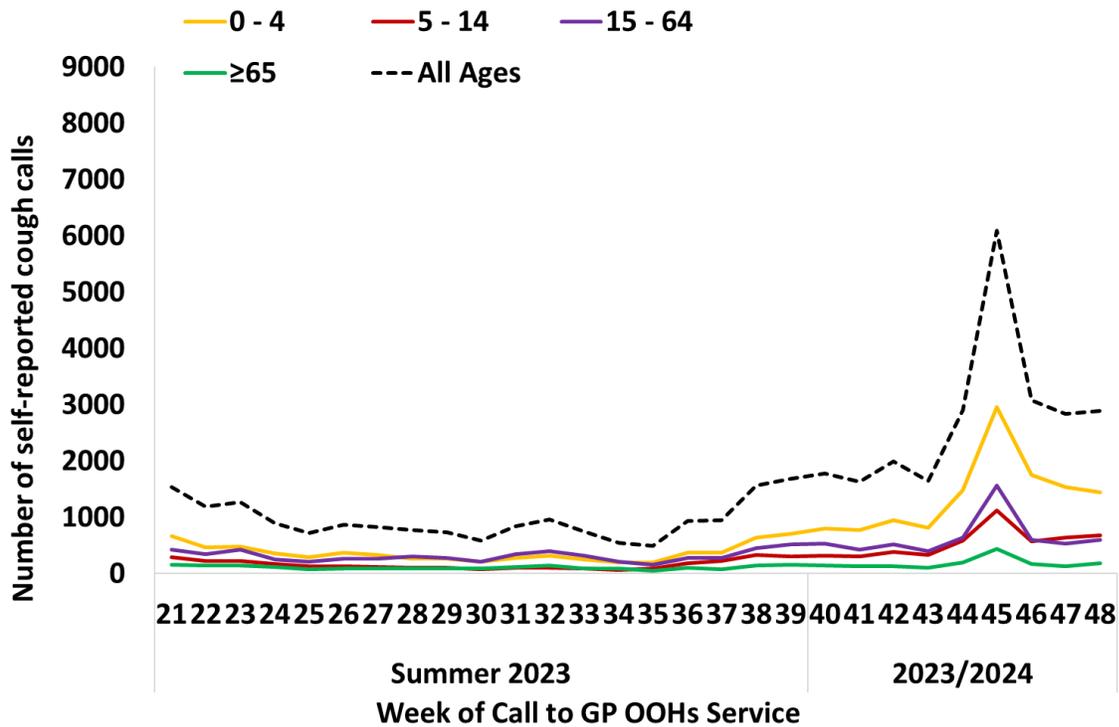


Figure 6: Number of self-reported **COUGH** calls for all ages and by age group to GP Out-of-Hours services by week of call, Summer 2023 and 2023/2024. Source: GP Out-Of-Hours services in Ireland (collated by HSE & ICGP).

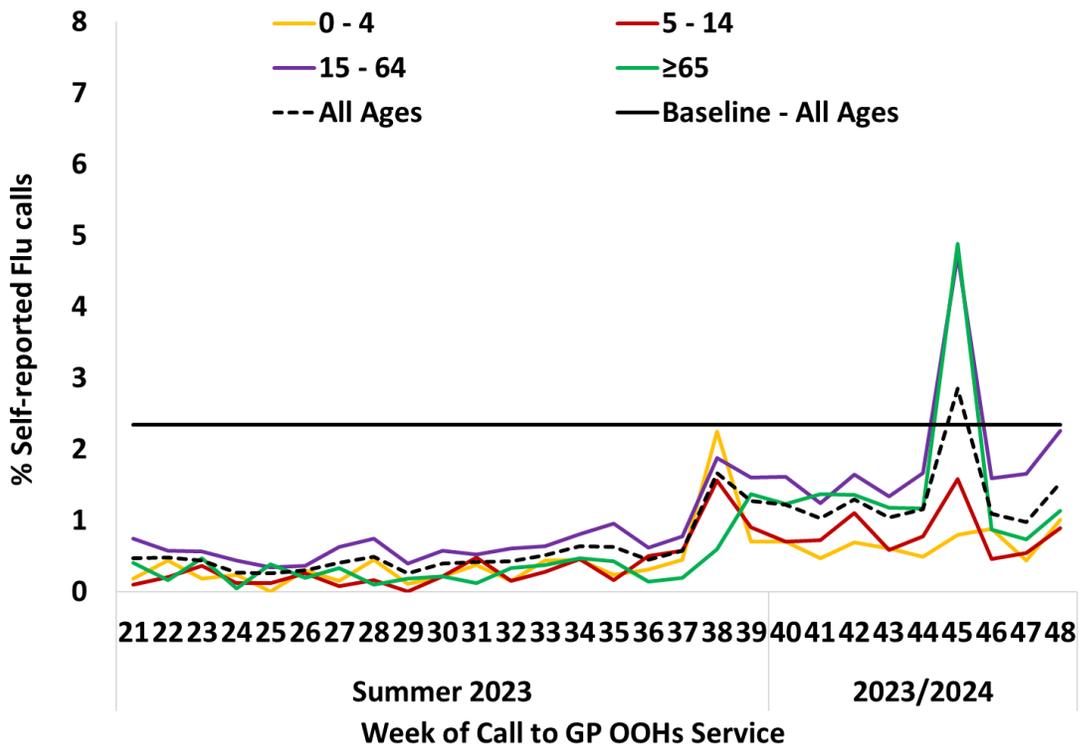


Figure 7: Percentage of self-reported **FLU** calls for all ages and by age group as a proportion of total calls to GP Out-of-Hours services by week of call, Summer 2023 and 2023/2024. The baseline % flu calls for all ages calculated using the MEM method on historic data is shown. Source: GP Out-Of-Hours services in Ireland (collated by HSE & ICGP)

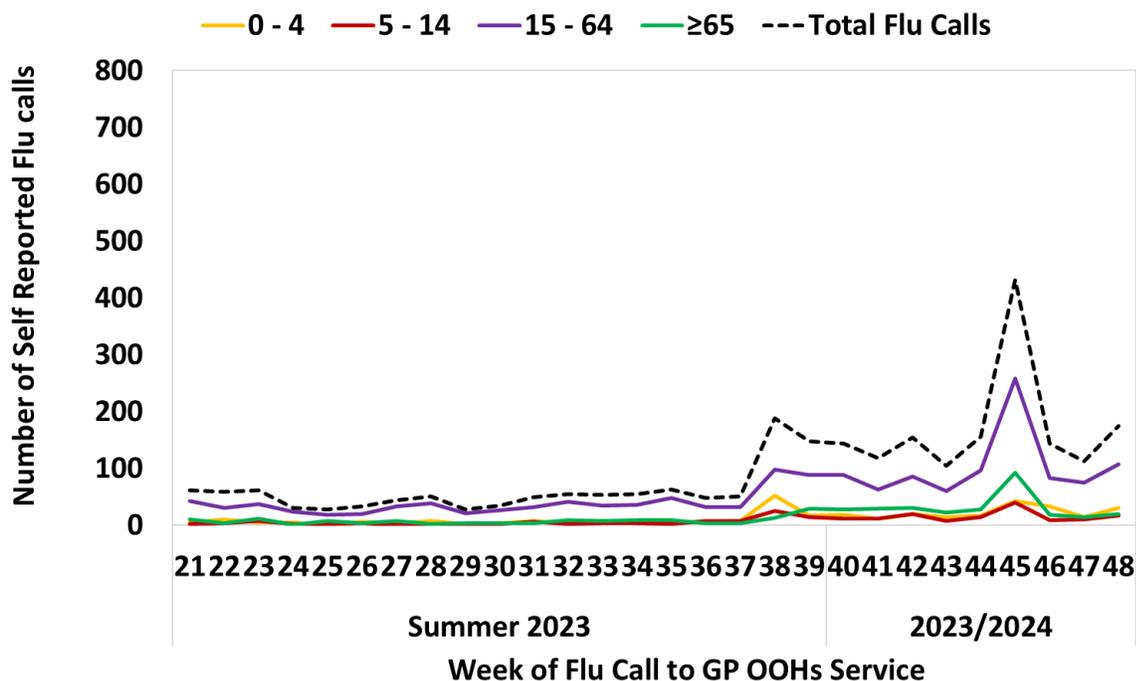


Figure 8: Number of self-reported **FLU** calls for all ages and by age group to GP Out-of-Hours services by week of call, Summer 2023 and 2023/2024. *Source: GP Out-Of-Hours services in Ireland (collated by HSE & ICGP).*

4. Influenza & RSV notifications

Influenza and RSV case notifications are reported on Ireland’s Computerised Infectious Disease Reporting System (CIDR), including all laboratory-confirmed influenza/RSV specimens reported from all laboratories testing for influenza/RSV.

- Influenza and RSV notifications are reported in the [Weekly Infectious Disease Report for Ireland](#).
- 172 laboratory confirmed influenza cases were notified during week 48 2023 (Table 6): 13 influenza A (H3), eight A(H1)pdm09, 138 influenza A (not subtyped), 11 influenza B and two influenza A and B coinfections. This is an increase compared to 90 cases notified during week 47 2023 (Figure 10).
- Age specific rates of notified laboratory confirmed influenza cases were low in all age groups during week 48 2023 but showed increasing trends in all age-groups, particularly in the 0-4, 5-14 and 65+ age groups.
- Laboratory confirmed influenza notified cases by HSE Health Region, are reported in Table 6.
- 985 RSV cases were notified during week 48 2023, an increase compared to 730 cases notified during week 47 2023 (Figure 11).
- Age specific notification rates for RSV were highest and continued to increase in those aged less than one year, at 675/100,000 population, followed by the 1–4-year age group at 144/100,000 (Figure 12). Notifications in those aged less than one year accounted for 40% (390/985) of all RSV notifications in week 48.

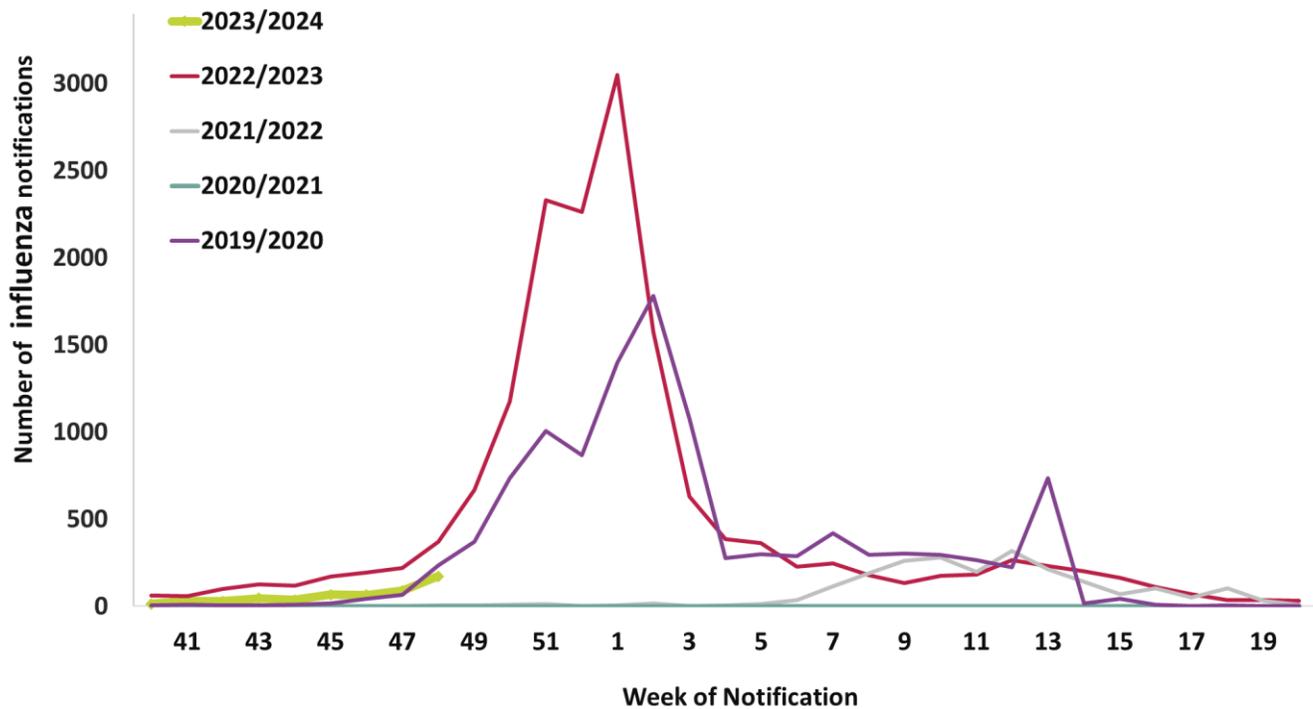


Figure 9: Number of laboratory confirmed **Influenza** notifications to HPSC by week of notification, 2019/2020 to 2023/2024 seasons. *Source: Ireland’s Computerised Infectious Disease Reporting System*

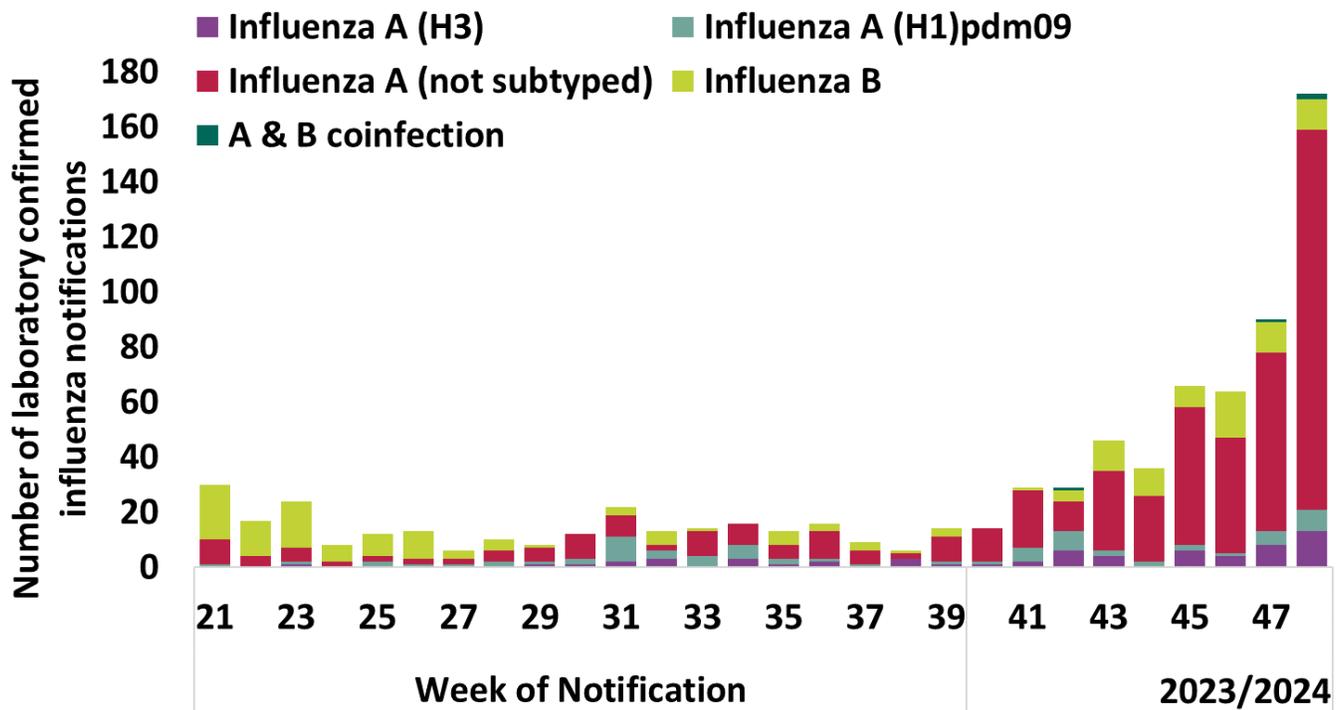


Figure 10: Number of laboratory confirmed **influenza** notifications by influenza type/subtype and week, summer 2023 and 2023/2024 season. *Source: Ireland’s Computerised Infectious Disease Reporting System*

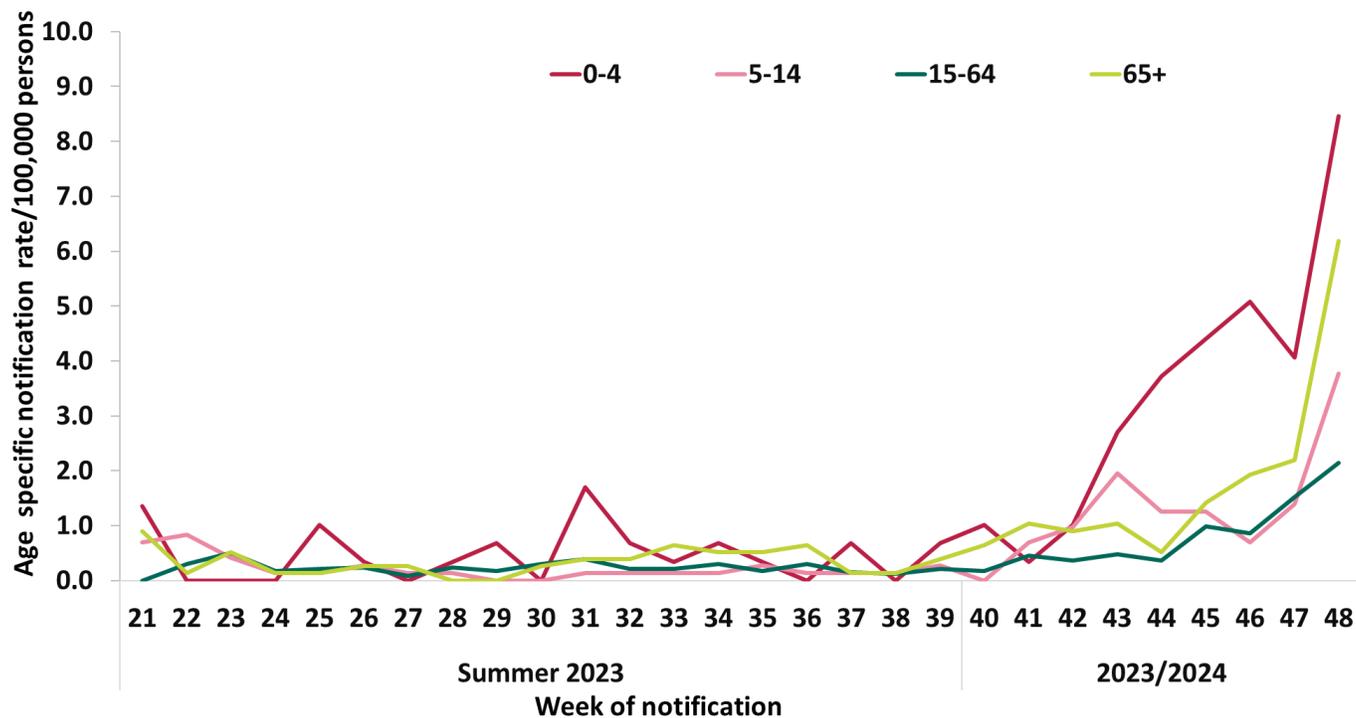


Figure 11: Age specific rates per 100,000 population of laboratory confirmed **influenza** notifications to HPSC by week of notification and season, Summer 2023 and 2023/2024. *Source: Ireland’s Computerised Infectious Disease Reporting System.*

Table 6: Number of laboratory confirmed **influenza** notifications by HSE Health Region for week 48 2023 and the 2023/2024 season to date. *Source: CIDR*

HSE Health Region	Week 48 2023	2023/2024 season (Week 40- 48 2023)
Dublin and North East	30	122
Dublin and Midlands	14	71
Dublin and South East	27	76
South West	48	120
Mid West	8	23
North and North West	45	133
Total	172	545

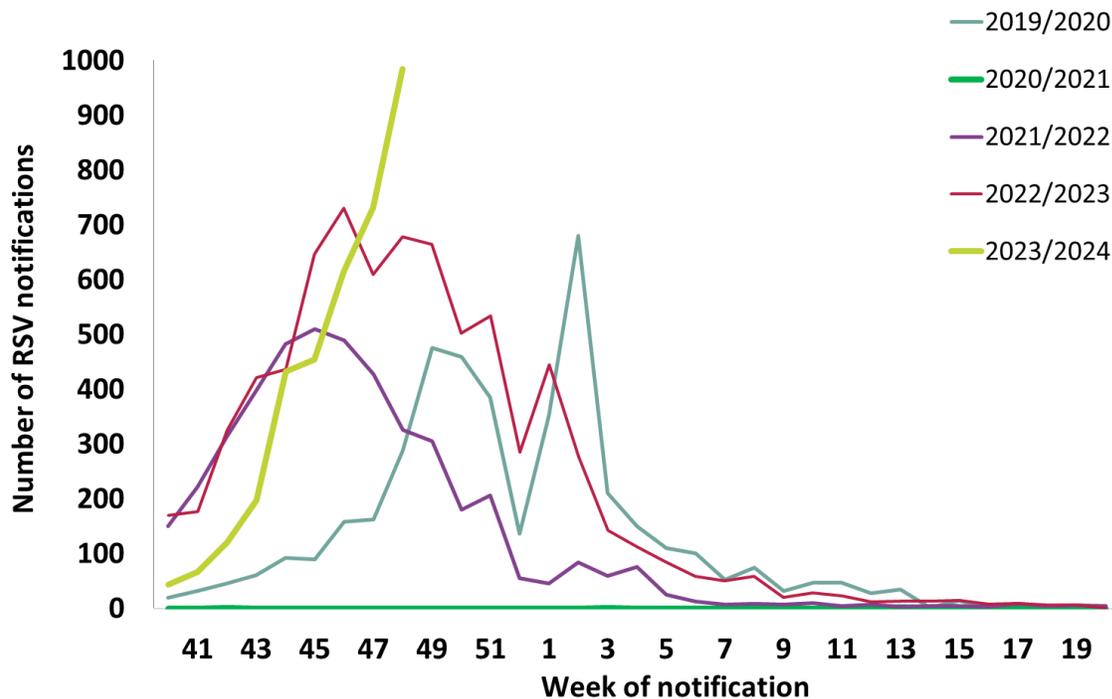


Figure 12: Number of laboratory confirmed RSV notifications to HPSC by week of notification*, 2019/2020 to 2023/2024 seasons. Source: Ireland’s Computerised Infectious Disease Reporting System.

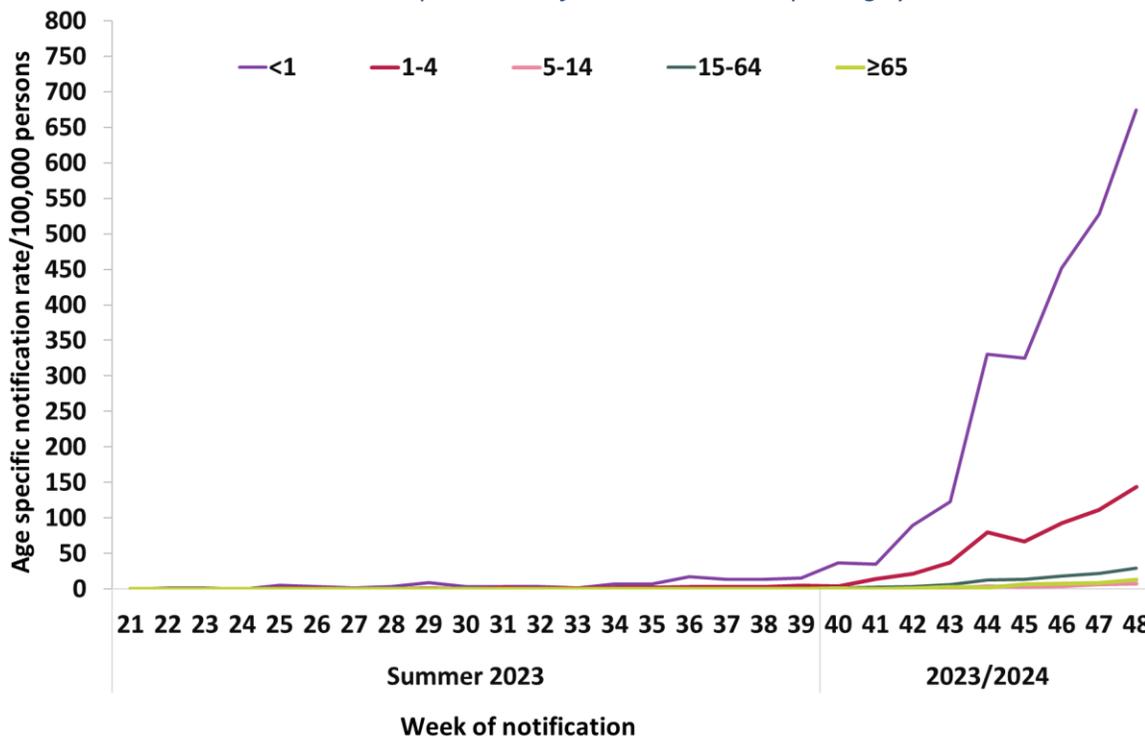


Figure 13: Age specific rates per 100,000 population for laboratory confirmed RSV notifications* to HPSC by week of notification-weeks 21-48, 2023. Source: Ireland’s Computerised Infectious Disease Reporting System.

*Please note that due to a reporting delay, approximately 10% of RSV cases notified in week 44 were diagnosed between weeks 40 and 43

5. Hospitalisations

- During week 48 2023, the number of notified laboratory confirmed influenza hospital inpatients doubled with 56 cases notified compared to 23 in week 47. 49 of the hospitalised cases were influenza A (not subtyped), three were influenza A(H1)pdm09, three were influenza B and one was an influenza A and B coinfection (Figure 15).
- During week 48 2023, 368 laboratory confirmed RSV hospital inpatients were notified, compared to 342 cases in week 47 2023 (Figure 17). Of the hospitalised RSV cases, 46% (168/368) were aged less than one year.
- The age specific RSV hospitalisation rate was highest in those aged less than one year (291/100,000 population) and those aged 1-4 years (48/100,000 population).
- The number of laboratory confirmed influenza and RSV notifications by patient type and week for the 2023/2024 season are reported in Tables 7 and 8.

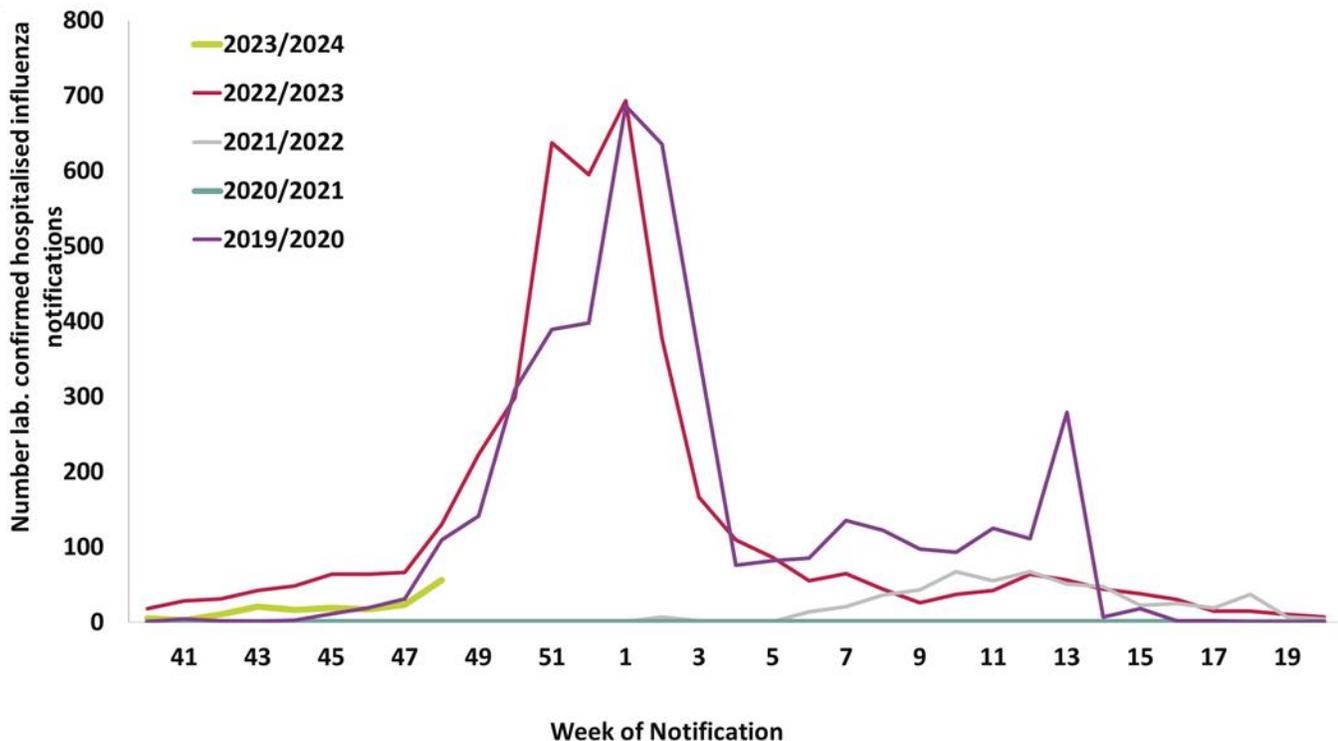


Figure 14: Number of notified **influenza** hospital inpatients, by week of notification and season, for the 2019/2020 to 2023/2024 seasons. *Source: Ireland's Computerised Infectious Disease Reporting System.*

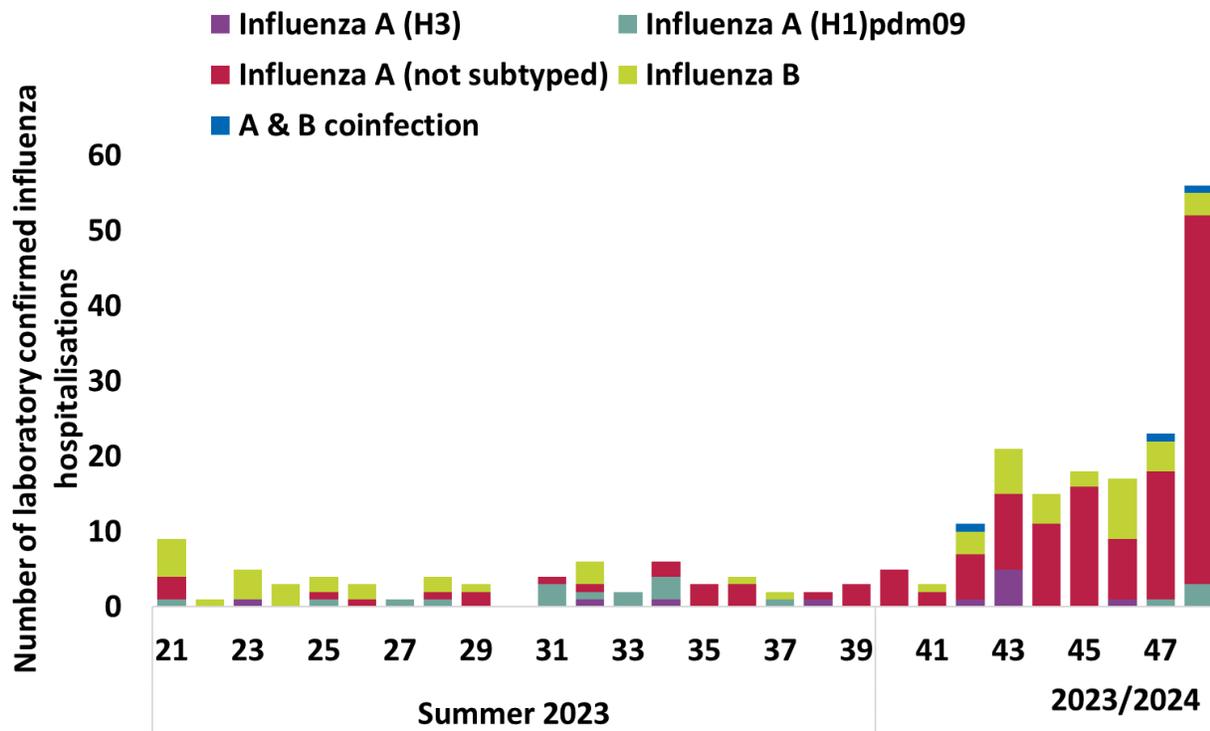


Figure 15: Number of notified laboratory-confirmed **influenza** hospital inpatients by influenza type/subtype by week, summer 2023 and 2023/2024 season. *Source: Ireland's Computerised Infectious Disease Reporting System.*

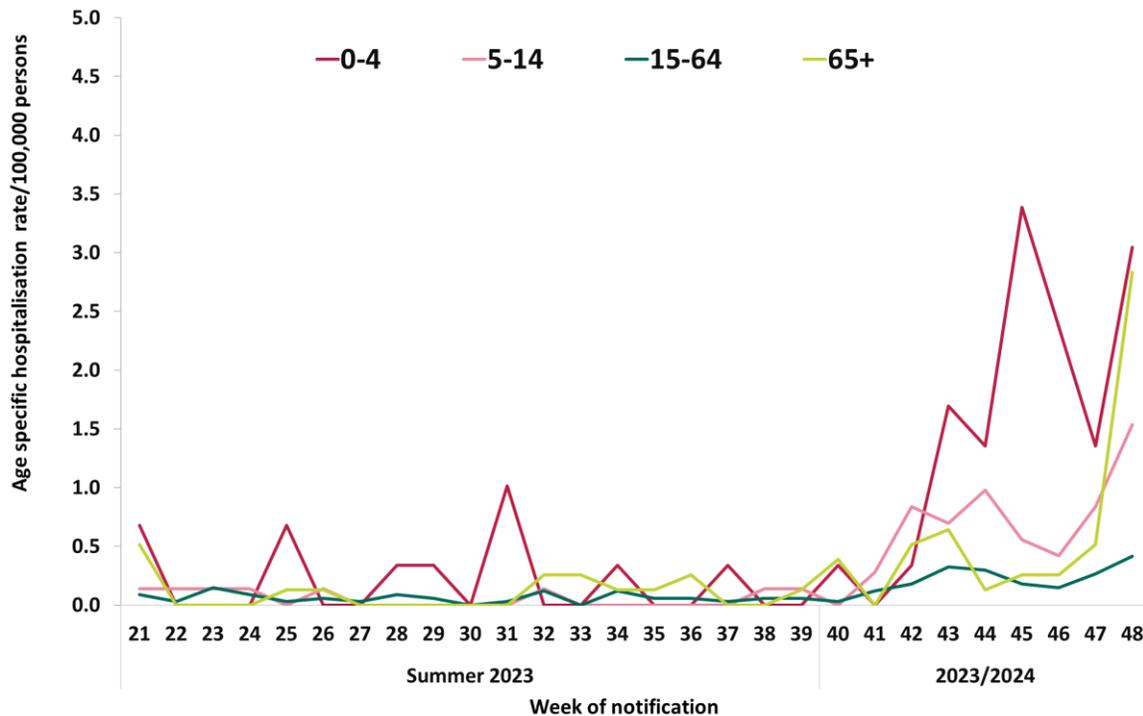


Figure 16: Age specific rates per 100,000 population for laboratory confirmed **influenza** cases reported as **hospital inpatients** by week of notification and season, Summer 2023 and 2023/2024. *Source: Ireland's Computerised Infectious Disease Reporting System.*

Table 7: Number of notified laboratory-confirmed **influenza** cases by patient type and week of notification 2023/2024 season (week 40 2023 onwards). *Source: Ireland's Computerised infectious Disease Reporting System*

	Patient Type							Total
	GP Patient	ED patient	Hospital Inpatient	Hospital Day Patient	Hospital Outpatient	Other	Unknown	
Week 48	8	62	56	2	10	7	27	172
Week 47	7	40	23	1	9	2	8	90
Week 46	8	28	17	0	5	1	5	64
Week 45	4	26	19	0	6	4	6	65
Week 44	0	15	15	1	1	1	3	36
Week 43	7	17	20	0	0	0	2	46
Week 42	6	8	11	0	1	0	3	29
Week 41	3	14	4	1	2	0	5	29
Week 40	0	6	5	0	3	0	0	14
Total	43	216	170	5	37	15	59	545

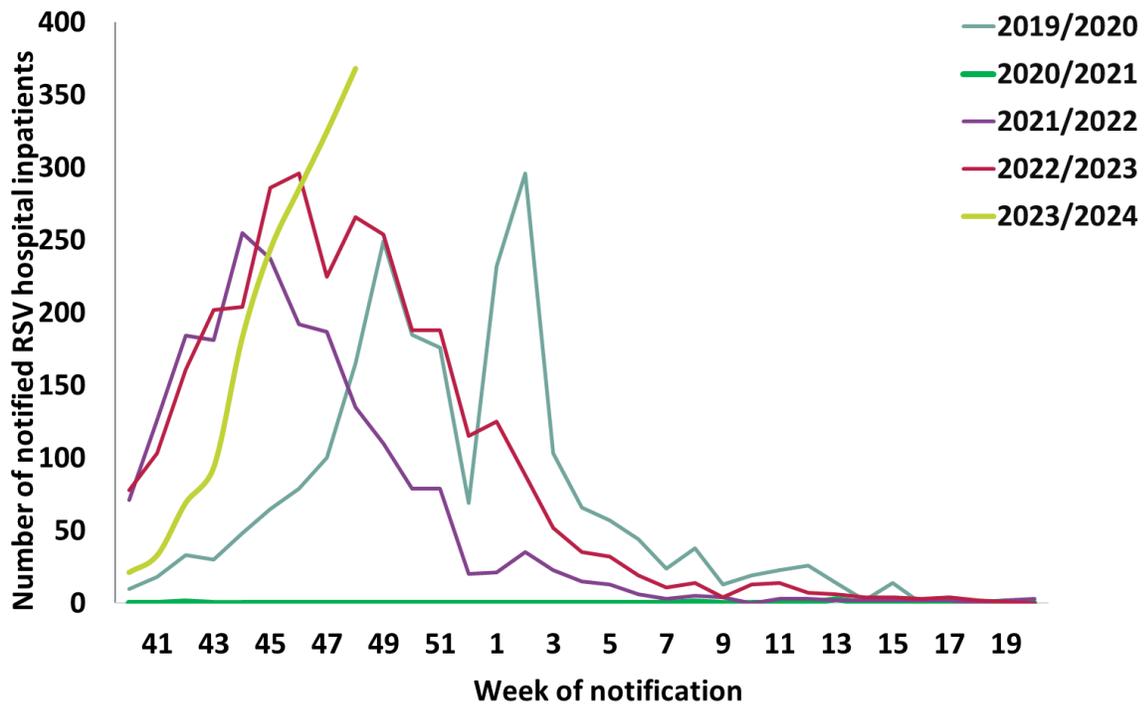


Figure 17: Number of notified **RSV** hospital inpatients, by week of notification and season, for the 2019/2020 to 2023/2024 seasons. *Source: Ireland's Computerised Infectious Disease Reporting System.*

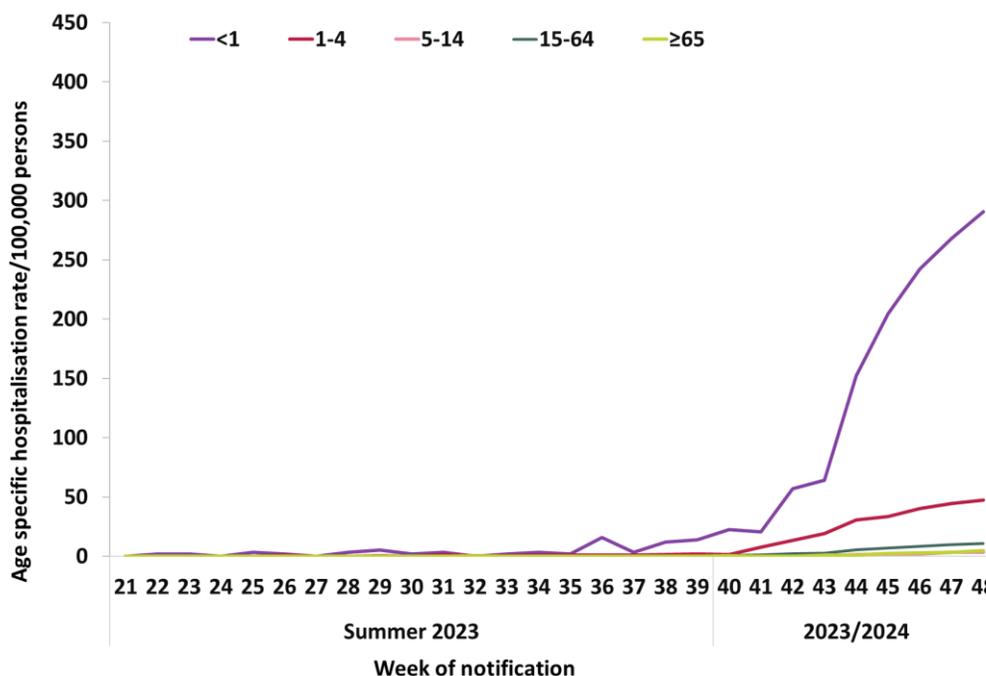


Figure 18: Age specific notification rates per 100,000 population for laboratory confirmed RSV hospital inpatients by week of notification and season, Summer 2023 and 2023/2024. *Source: Ireland’s Computerised Infectious Disease Reporting System*

Table 8: Number of notified laboratory confirmed RSV cases by patient type and week of notification, 2023/2024 season (week 40 2023 onwards). *Source: Ireland’s Computerised infectious Disease Reporting System*

	Patient Type							Total
	GP Patient	ED patient	Hospital Inpatient	Hospital Day Patient	Hospital Outpatient	Other	Unknown	
Week 48	16	463	368	10	16	27	85	985
Week 47	12	277	342	2	19	24	54	730
Week 46	7	260	294	7	9	1	237	815
Week 45	6	170	240	6	6	2	24	454
Week 44	7	215	182	4	12	4	9	433
Week 43	1	72	92	0	8	2	22	197
Week 42	2	31	64	0	9	6	8	120
Week 41	1	23	33	1	1	1	7	67
Week 40	0	16	20	1	2	3	1	43
Total	52	1527	1635	31	82	70	447	3844

6. Intensive Care Surveillance

The Intensive Care Society of Ireland (ICSI) and the HSE Critical Care Programme conducts enhanced surveillance (established during the 2009 pandemic), on all intensive care patients with laboratory confirmed influenza. HPSC processes and reports on this information on behalf of the regional Directors of Public Health/Medical Officers of Health.

- There was one laboratory confirmed influenza case (A and B coinfection) admitted to intensive care and notified to HPSC during week 48 2023.
- Three influenza (one influenza A (not subtyped), one A(H1)pdm09 and one influenza A and B coinfection) ICU cases have been notified for the season to date (Week 40-Week 48).

Table 9: Cumulative number and age specific rate per 100,000 population of laboratory confirmed notified influenza hospitalised and intensive care cases, weeks 40-48 2023. *Source: Ireland's Computerised infectious Disease Reporting System*

Age (years)	Hospitalised		Admitted to ICU	
	Number	Age specific rate per 100,000 pop.	Number	Age specific rate per 100,000 pop.
<1	7	12.1	0	0.0
1-4	34	14.3	0	0.0
5-14	43	6.0	0	0.0
15-24	4	0.6	0	0.0
25-34	10	1.6	0	0.0
35-44	0	0.0	0	0.0
45-54	6	0.8	1	0.1
55-64	13	2.2	1	0.2
≥65	43	5.5	1	0.1
Unknown	0	-	0	-
Total	160	3.1	3	0.1

7. Mortality Surveillance

Influenza deaths include all deaths in notified influenza cases. HPSC receives daily mortality data from the General Register Office (GRO) on all deaths from all causes registered in Ireland. These data have been used to monitor excess all-cause and influenza and pneumonia mortality as part of the influenza surveillance system and the European Mortality Monitoring Project. Excess mortality analyses are corrected for reporting delays with the standardised EuroMOMO algorithm. Due to delays in death registrations in Ireland, excess mortality data included in this report are reported with a one-week lag time. These data are provisional due to the time delay in deaths' registration in Ireland. <http://www.euromomo.eu/>

- There were no deaths in notified influenza cases reported to HPSC during week 48 2023 or for the season to date.
- There was no excess mortality reported for week 47 2023.

8. Outbreak Surveillance

In this surveillance report, ARI outbreaks refer to outbreaks of acute respiratory infection caused by pathogens other than influenza, SARS-CoV-2 or RSV. COVID-19 outbreaks are not included in this report; surveillance data on COVID-19 outbreaks are detailed on the HPSC website. <https://www.hpsc.ie/a-z/respiratory/coronavirus/novelcoronavirus/casesinireland/>

- During week 48 2023, three influenza A (not subtyped) outbreaks (all in acute hospitals) and three ARI outbreaks (one in a community hospital/long stay unit and two in nursing homes) were reported to HPSC (Tables 10 & 11).
- The pathogen identified for one of the ARI outbreaks was a mixed COVID-19, coronavirus NL63 and rhino/enterovirus outbreak. There were no pathogens identified for the other two ARI outbreaks.
- There have been 28 outbreaks reported to date this season, including 10 influenza outbreaks, seven RSV outbreaks and 11 acute respiratory infection (ARI) outbreaks.

Table 10: Summary of influenza, RSV and ARI (influenza/RSV/SARS-CoV-2 negative) outbreaks by HSE Area during week 48 2023 and the 2023/2024 season (weeks 40-48 2023) *Source: CIDR*

HSE Health Region	Influenza		RSV		ARI		Total	
	Week 48	2023/2024	Week 48	2023/2024	Week 48	2023/2024	Week 48	2023/2024
Dublin and North East	0	1	0	1	1	5	1	7
Dublin and Midlands	0	1	0	4	0	0	0	5
Dublin and South East	2	3	0	1	0	3	2	7
South West	1	2	0	0	0	0	1	2
Mid West	0	0	0	0	0	0	0	0
North and North West	0	3	0	1	2	3	2	7
Unknown	0	0	0	0	0	0	0	0
Total	3	10	0	7	3	11	6	28

Table 11: Summary of influenza, RSV and ARI (influenza/RSV/SARS-CoV-2 negative) outbreaks by outbreak setting during week 48 2023 and the 2023/2024 season (weeks 40-48 2023). *Source: CIDR*

Setting	Influenza		RSV		ARI		Total	
	Week 48	2023/2024	Week 48	2023/2024	Week 48	2023/2024	Week 48	2023/2024
Community hospital/Long-stay unit	0	0	0	0	1	2	1	2
Nursing Home	0	2	0	2	2	7	2	11
Hospital	3	4	0	2	0	0	3	6
Residential Institution	0	4	0	1	0	1	0	6
Childcare facility	0	0	0	2	0	0	0	2
Family Outbreaks	0	0	0	0	0	0	0	0
Other settings	0	0	0	0	0	1	0	1
Total	3	10	0	7	3	11	6	28

9. International Summary

According to [European Respiratory Virus Surveillance Summary](#), during week 47 2023 (including data up to 26/11/2023), Influenza activity remained low but is slowly increasing; all three influenza virus types/subtypes (A(H1N1)pdm09, A(H3N2) and B) are co-circulating. Of 24 countries reporting the geographical spread of influenza, four countries reported no activity, 12 reported sporadic activity, two reported local, three reported regional, and three reported widespread activity. The change from last week suggests increasing geographical spread in some countries. RSV activity began in around week 36 and has been increasing since, resulting in increasing hospital admissions particularly among the 0–4-years age group. This increase appears to have occurred around four weeks later than last year. Transmission of SARS-CoV-2 began increasing in the late summer and continues to show an increase based on the sentinel median positivity data as well as severity indicators (hospital admissions, ICU admissions, and death rates). The impact of SARS-CoV-2 on severe disease mainly affects those aged 65 years and above.

As of 12th November 2023, WHO has reported that globally influenza detections increased due to increases in parts of the temperate Northern hemisphere. In the countries of North America, influenza detections increased but remained low or below baseline. Influenza A(H1N1)pdm09 viruses predominated among the detections. In East Asia, influenza activity continued to increase mainly due to activity in China and the Republic of Korea, with influenza A(H3N2) and A(H1N1)pdm09 viruses more frequently detected, respectively. In the Central American and Caribbean countries, influenza activity continued to increase in the Caribbean with detections of predominantly influenza A(H1N1)pdm09 and remained low overall in Central America with detections of predominantly B/Victoria lineage viruses. In tropical Africa, influenza detections decreased in Western Africa but increased in Eastern and Middle Africa.

See [ECDC](#) and [WHO](#) influenza surveillance reports for further information.

- Further information on influenza is available on the following websites:
 - European respiratory virus surveillance summary <https://erviss.org/>
 - Europe – ECDC <http://ecdc.europa.eu/>
 - UK Health Security Agency <https://www.gov.uk/government/collections/weekly-national-flu-reports>
 - United States CDC <http://www.cdc.gov/flu/weekly/fluactivitysurv.htm>
 - Public Health Agency of Canada <http://www.phac-aspc.gc.ca/fluwatch/index-eng.php>
- Influenza case definition in Ireland <https://www.hpsc.ie/a-z/respiratory/influenza/casedefinitions/>
- COVID-19 case definition in Ireland <https://www.hpsc.ie/a-z/respiratory/coronavirus/novelcoronavirus/casedefinitions/>
- Avian influenza overview May – August 2020 <https://www.ecdc.europa.eu/en/publications-data/avian-influenza-overview-may-august-2020>
- Avian influenza: EU on alert for new outbreaks <https://www.ecdc.europa.eu/en/news-events/avian-influenza-eu-alert-new-outbreaks>
- Information on COVID-19 in Ireland is available on the HPSC website <https://www.hpsc.ie/a-z/respiratory/coronavirus/novelcoronavirus/>
- The WHO categorised COVID-19 as a pandemic on 11 March 2020. For more information about the situation in the WHO European Region visit:
 - WHO website: <https://www.who.int/emergencies/diseases/novel-coronavirus-2019>
 - ECDC website: <https://www.ecdc.europa.eu/en/novel-coronavirus-china>

11. WHO recommendations on the composition of influenza virus vaccines

The WHO vaccine strain selection committee recommends that quadrivalent egg-based vaccines for use in the 2023/2024 northern hemisphere influenza season contain the following:

- an A/Victoria/4897/2022 (H1N1)pdm09-like virus;
- an A/Darwin/9/2021 (H3N2)-like virus; and
- a B/Austria/1359417/2021 (B/Victoria lineage)-like virus; and
- a B/Phuket/3073/2013 (B/Yamagata lineage)-like virus.

<https://www.who.int/news/item/24-02-2023-recommendations-announced-for-influenza-vaccine-composition-for-the-2023-2024-northern-hemisphere-influenza-season>

Further information on influenza in Ireland is available at www.hpsc.ie

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