

Disclaimer: We kindly ask to acknowledge that due to the diverse and heterogeneous nature of the questions and dynamic situations they pertain to, some of the information might be incomplete or only correct for the time being. Thus, please consider the date and date of last update with the below information. All available information was provided by a country representative from the PHIRI network during or in connection to the respective meeting.

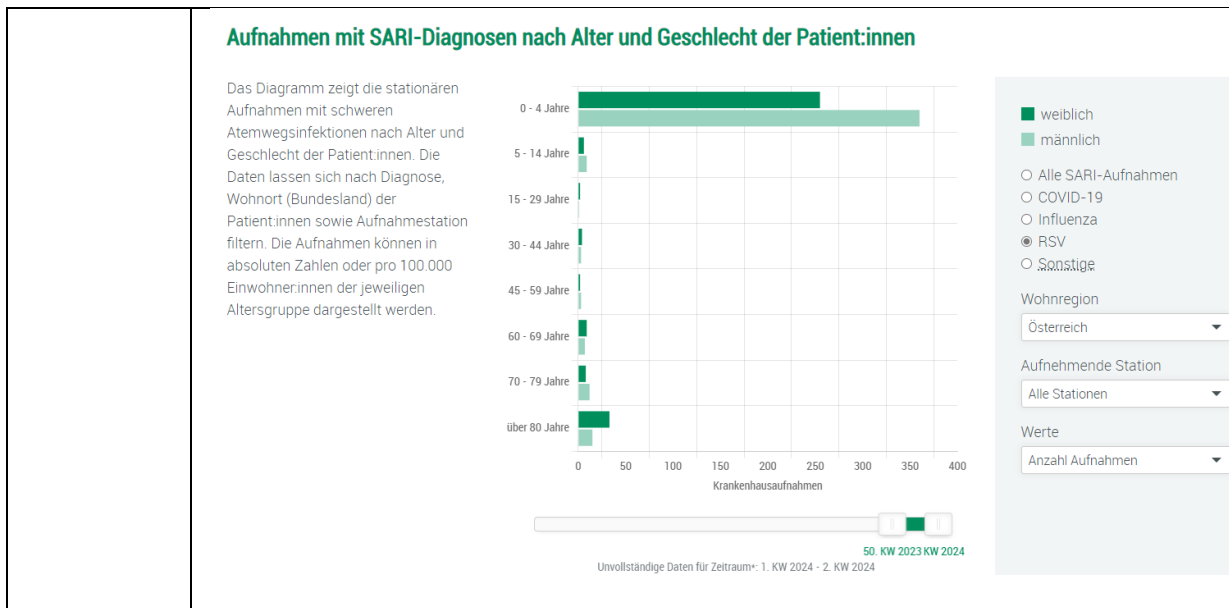
Date: 15.01.2024

Table 1: Country responses: Human Respiratory Syncytial Virus (RSV) and hospitalisation rate in children

Country	Topic: Human Respiratory Syncytial Virus (RSV) and hospitalisation rate in children																																								
Austria	<p>In Austria, epidemic outbreaks of RSV infections occur every year with a peak incidence in the months of November to March. Particularly affected are newborns and infants and, as risk groups, premature babies and children with congenital heart defects and/or severe pulmonary problems.</p> <p>It is estimated that around 54,600 children in Austria are infected with RSV in the first year of life, of which the virus reaches the deep respiratory tract in 11,000 to 22,000 children, and 1,100 children have to be hospitalised (according to the Centre for Virology at the University of Vienna). In the 1st week of 2024, RSV has reached an early stage of epidemic activity in Austria.</p> <p>RSV is constantly monitored by the Austrian RSV Network run by the Centre for Virology of the Medical University of Vienna https://www.virologie.meduniwien.ac.at/wissenschaft-forschung/virus-epidemiologie/rsv-netzwerk-oersn/ based on samples from selected general practitioners in the federal states (Sentinella system) and from hospitalised patients.</p> <p>There is currently no approved RSV vaccine for the active immunisation of children in Austria. However, there are two ways to passively immunise children against RSV: either by administering monoclonal antibodies or by vaccinating pregnant women (24 to 36 weeks' gestation).</p> <p>From autumn 2023, two vaccines to prevent RSV-related diseases of the lower respiratory tract will be available in Austria for adults aged 60 and over. Vaccination is authorised and recommended from the age of 60.</p> <p>The number of inpatient hospitalisations with an RSV diagnosis as well with other severe acute respiratory infections are publicly available via the SARI dashboard: https://www.sari-dashboard.at/. According to this, there were around 230 hospitalisations end of 2023/ beginning of 2024 with a significant decrease since week 2/24:</p> <div data-bbox="379 1160 1388 1724"> <p>Anzahl der stationären Aufnahmen mit SARI-Diagnosen</p> <p>Das Diagramm zeigt die absolute Zahl der stationären Aufnahmen in Krankenhäusern mit schweren Atemwegsinfektionen im Wochenvergleich. Die Daten lassen sich nach Diagnose, Bundesland sowie Aufnahmeinstitution filtern.</p> <table border="1"> <caption>Data from SARI Dashboard: Anzahl der stationären Aufnahmen mit SARI-Diagnosen</caption> <thead> <tr> <th>Wochennummer</th> <th>Normalstation</th> <th>Intensivstation</th> <th>Gesamt</th> </tr> </thead> <tbody> <tr><td>46. KW 2023</td><td>15</td><td>0</td><td>15</td></tr> <tr><td>47. KW 2023</td><td>20</td><td>0</td><td>20</td></tr> <tr><td>48. KW 2023</td><td>35</td><td>0</td><td>35</td></tr> <tr><td>49. KW 2023</td><td>50</td><td>0</td><td>50</td></tr> <tr><td>50. KW 2023</td><td>95</td><td>0</td><td>95</td></tr> <tr><td>51. KW 2023</td><td>135</td><td>0</td><td>135</td></tr> <tr><td>52. KW 2023</td><td>230</td><td>0</td><td>230</td></tr> <tr><td>1. KW 2024</td><td>100</td><td>0</td><td>100</td></tr> <tr><td>2. KW 2024</td><td>60</td><td>0</td><td>60</td></tr> </tbody> </table> </div> <p>It also shows that the hospitalisation rate of children up to 4 years old is significantly high compared to all other age groups. Currently, 50 children in this age group are hospitalised, followed by the 70 plus age group with only 6 hospitalisations:</p>	Wochennummer	Normalstation	Intensivstation	Gesamt	46. KW 2023	15	0	15	47. KW 2023	20	0	20	48. KW 2023	35	0	35	49. KW 2023	50	0	50	50. KW 2023	95	0	95	51. KW 2023	135	0	135	52. KW 2023	230	0	230	1. KW 2024	100	0	100	2. KW 2024	60	0	60
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Belgium

Sources:
 Dashboard: <https://epistat.sciensano.be/dashboard/>
 Weekly Bulletin infections respiratoires acute: <https://www.sciensano.be/en/biblio/bulletin-infections-respiratoires-aigues-semaine-52-2023>
 Week 1 2024 : https://www.sciensano.be/sites/default/files/respi_2024_01_fr.pdf

The information below comes from the last weekly report of 2023.
 Exceptionally, no test results are available for week 52. In recent weeks, we mainly observed SARS-CoV-2, RSV and influenza infections in the samples collected by general practitioners in patients suffering from influenza symptoms (ILI) or other signs of acute respiratory infection. Most diagnoses in recent weeks have been RSV, influenza and Mycoplasma pneumoniae in children and young adults, and mainly RSV and influenza in adults more aged.
 During weeks 51 and 52, there was a delay in reporting. The graph shows the number of infections reported in a subset of laboratories that regularly report the following five pathogens: adenovirus, RSV, parainfluenza virus, influenza and Mycoplasma pneumoniae. THE graph only aims to show the relative distribution of these pathogens, but says nothing about the numbers absolute. Monitoring laboratories do not report SARS-CoV-2 in the same way as other pathogens; Therefore, SARS-CoV-2 is not included in these tables.

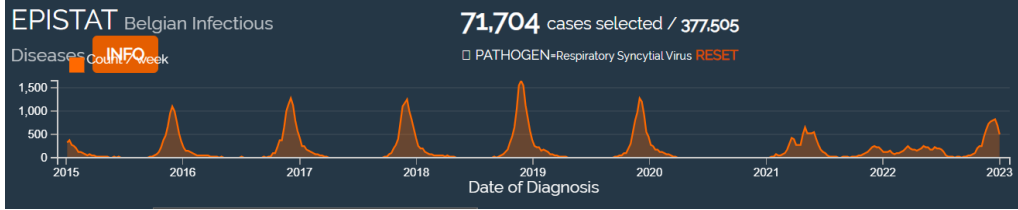
Enfants (0-14 ans)

The incidence of hospital admissions for severe acute respiratory infection due to RSV showed a peak in weeks 44 and 45. Since then, the number of RSV infections has decreased, but the number hospital admissions due to RSV remains above baseline.

Dashboard:



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<p>Italy</p>	<p>In December 2022 the European Centre for Disease Prevention and Control published a 'RAPID RISK ASSESSMENT' on 'Intensified circulation of respiratory syncytial virus (RSV) and associated hospital burden in the EU/EEA' stating that 'In recent weeks, respiratory syncytial virus (RSV) circulation in the EU/EEA has intensified, with increasing transmission rates in all population groups and an earlier-than-usual start of the season. Several EU/EEA countries are experiencing high RSV circulation and the number of severe acute respiratory infections (SARI) due to RSV is increasing. At this time of the year RSV infections are not unusual, however this year there is more RSV activity and it began earlier than in pre-COVID-19 seasons'.</p> <p>In Italy, you can find surveillance information at the web page https://www.epicentro.iss.it/influenza/respivirnet (in Italian language), and at the web page of the 'RespiVirNet - Integrated respiratory virus surveillance' https://respivirnet.iss.it/Default.aspx?ReturnUrl=%2f (in Italian language).</p> <p>In the last web page you can find the following specific sections: the 'In the foreground' section (including the most important and updated information on the surveillance of the disease), the 'RespiVirNet Report' section (including the updated weekly reports, and data on young and children), the 'Previous seasons' section (including the weekly reports referred to the previous years).</p> <p>The annual reports on the Hospital Discharge Records are also periodically available at the website of the Ministry of Health https://www.salute.gov.it/portale/temi/p2_6.jsp?id=1237&area=ricoveriOspedaliere&menu=vuoto.</p> <p>Recent publications are also available:</p> <ul style="list-style-type: none"> - An Italian Multicenter Study on the Epidemiology of Respiratory Syncytial Virus During SARS-CoV-2 Pandemic in Hospitalized Children. <i>Front. Pediatr.</i>, 14 July 2022, Volume 10 - 2022 https://doi.org/10.3389/fped.2022.930281; - A. Pierangeli, R. Nenna, M. Fracella, C. Scagnolari, G. Oliveto, L. Sorrentino, F. Frasca, M.G. Conti, L. Petrarca, P. Papoff, O. Turriziani, G. Antonelli, P. Stefanelli, A.T. Palamara, F. Midulla. Genetic diversity and its impact on disease severity in respiratory syncytial virus subtype-A and -B bronchiolitis before and after pandemic restrictions in Rome, <i>Journal of Infection</i>, Volume 87, Issue 4, 2023: 305-314; ISSN 0163-4453, https://doi.org/10.1016/j.jinf.2023.07.008; - Nenna R, Matera L, Licari A, Manti S, Di Bella G, Pierangeli A, Palamara AT, Nosetti L, Leonardi S, Marseglia GL, Midulla F, ICHRIS Group. An Italian Multicenter Study on the Epidemiology of Respiratory Syncytial Virus during SARS-CoV-2 Pandemic in Hospitalized Children. <i>Frontiers in Pediatrics</i>, Vol 10, 2022; https://www.frontiersin.org/articles/10.3389/fped.2022.930281; - Bozzola E. Respiratory Syncytial Virus Resurgence in Italy: The Need to Protect All Neonates and Young Infants. <i>Int J Environ Res Public Health</i>. 2021 Dec 30;19(1):380. doi: 10.3390/ijerph19010380. https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8744776/
<p>Netherlands</p>	<p>Much of the information that is available in the Netherlands about RSV is derived from electronic health Records from general practitioners and is used for regular updates. They are also in primary care database reported and there you will find the whole spectrum of diseases in terms of ICPC codes and their preferences on a yearly basis.</p>
<p>Norway</p>	<p>Weekly report on respiratory disease and hospitalization: https://www.fhi.no/publ/statusrapporter/luftveisinfeksjoner/#alle-ukerapporter-2020-2023</p> <p>RSV is not so significant as COVID or influenzas and it is indicated that hospitalization of kids on minimum in Norway.</p>
<p>Serbia</p>	<p>There is no dashbaord in Serbia yet, although there is currently an outbreak.</p>
<p>Sweden</p>	<p>All the statistics related to public health are on the Public Health Authority website: https://www.folkhalsomyndigheten.se/folkhalsorapportering-statistik/statistik-a-o/sjukdomsstatistik</p>

