

Respiratory Viruses in Luxembourg (ReViLux)

Sentinel Network Report -Week 03

Summary of Sentinel Network activities

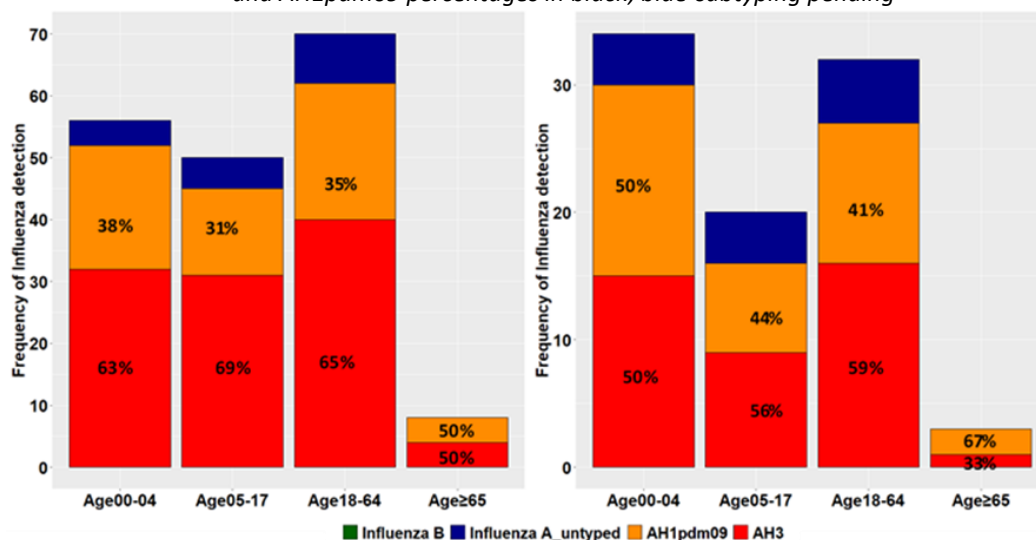
In week **2026/03**, consultations for acute respiratory infections (**ARI**) declined to **11.8%**, while influenza-like illness activity (**ILI**) decreased slightly from **9.4% to 6.2%**, indicating low epidemic activity.

During the same week, the LNS processed 106 sentinel specimens, with respiratory viruses detected in 67.9% of samples. **Influenza A** was the leading pathogen (**44.3%**) and continues to rise, while **RSV** remained at around **10%** after peaking at Christmas time. In addition, SARS-CoV-2 circulation remained below 10% for the past four weeks. Human rhinovirus and metapneumovirus, were detected across all age-groups, whereas parainfluenza and adenovirus were mainly identified in children under 10 years of age.

Influenza activity: season 2025/26

Influenza A activity has remained high since surpassing 20% threshold in week 2025/51, following an initial rise above 10% in week 2025/48. Overall 167 (90.7%) of the 184 samples have been subtyped: 64.1% (N=107) as A(H3) and 35.9% (N=60) as A(H1)pdm09. Over the past two weeks, A(H1)pdm09 detections have further increased across all age-groups below 65 years, although some samples remain un-subtyped, which may further influence the subtype distribution.

Influenza cases by age group: comparison of 2025/40-2026/03 (N=184) vs. 2026/02-03 (N=89); AH3 and AH1pdm09 percentages in black; blue-subtyping pending



Sentinel Surveillance Network

The Sentinel Surveillance aims to monitor circulating respiratory viruses, from traditional ones like influenza to more recent ones like SARS-CoV-2, and hence underpin public health actions. The Sentinel Network is a group of general practitioners and paediatricians spread across the country. They report the weekly number of patients showing symptoms suggestive of acute respiratory infection (ARI) and influenza-like illness (ILI), and those patients are then sampled and tested for a panel of respiratory viruses. The circulation of respiratory viruses in the Northern Hemisphere is generally monitored by seasons that range from week 40 to week 20. The period between weeks 20 and 40 is usually called inter-season.

Clinical results

In weeks 2026/03, consultations for acute respiratory infections (ARI) decreased to just below 12% and ILI rates decreased from 9.4% to 6.2%, indicating low epidemic activity. Similar trends are being observed in other European countries, despite high circulation of influenza A.

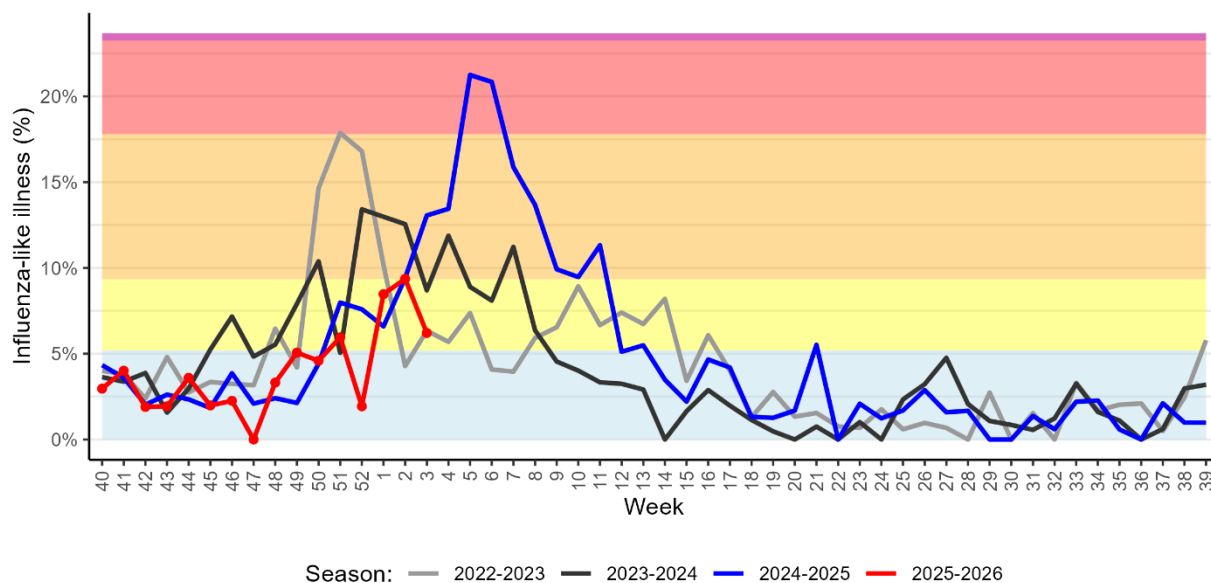
Historical trends in ILI consultations are presented in figure 2, and a detailed summary of the ARI and ILI case counts for the past four weeks is provided in table 1.

Table 1. Syndromic surveillance over the last 4 weeks

Week	ARI		ILI		Total consultations
	N	%	N	%	
2025/52	22	14.19	3	1.94	155
2026/01	47	18.95	21	8.47	248
2026/02	57	21.35	25	9.36	267
2026/03	55	11.78	29	6.21	467

ARI: Acute Respiratory Infections; ILI: Influenza-like Illness.

Figure 1. Percentage of patients with Influenza-like illness over the last three seasons and 2025-2026 (red) Background colours according to intensity of circulation: baseline, low, medium, high, very high.



Laboratory results

During week 2026/03, the LNS received 106 sentinel specimens. Of these, 35.2% (N=44) were from adults aged 18 to 64 years, followed by 32.8% (N=41) from children under 5 years. Children aged 5 to 17 years accounted for 28.0% (N=35) and patients aged ≥ 65 years for 4.0% (N=5). Overall, 55.2% (N=58) were female and 44.8% (N=47) were male patients.

Respiratory viruses were detected in 72 (67.9%) of the 106 sentinel samples. The predominant pathogen was **influenza A (44.3%)**, followed by **RSV (9.5%)** and **human rhinovirus (8.6%)**. SARS-CoV-2 circulation has remained below 10% for the past four weeks and has only increased slightly over the past week. In contrast, influenza A activity has been above 30% for two consecutive weeks, with an increasing trend since the start of the new year. RSV positivity peaked during Christmas time to 27.3% but declined to around 10% over the past three weeks.

Since the beginning of the season, 135 cases of RSV have been confirmed. Subtyping identified 76 RSV-A (67.3%) and 33 (32.7%) RSV- B cases. Approximately 32% of RSV infections occurred in children under 2 years of age, 33% in children aged 2 to 4 years, and 22% in adults aged 18 to 64 years.

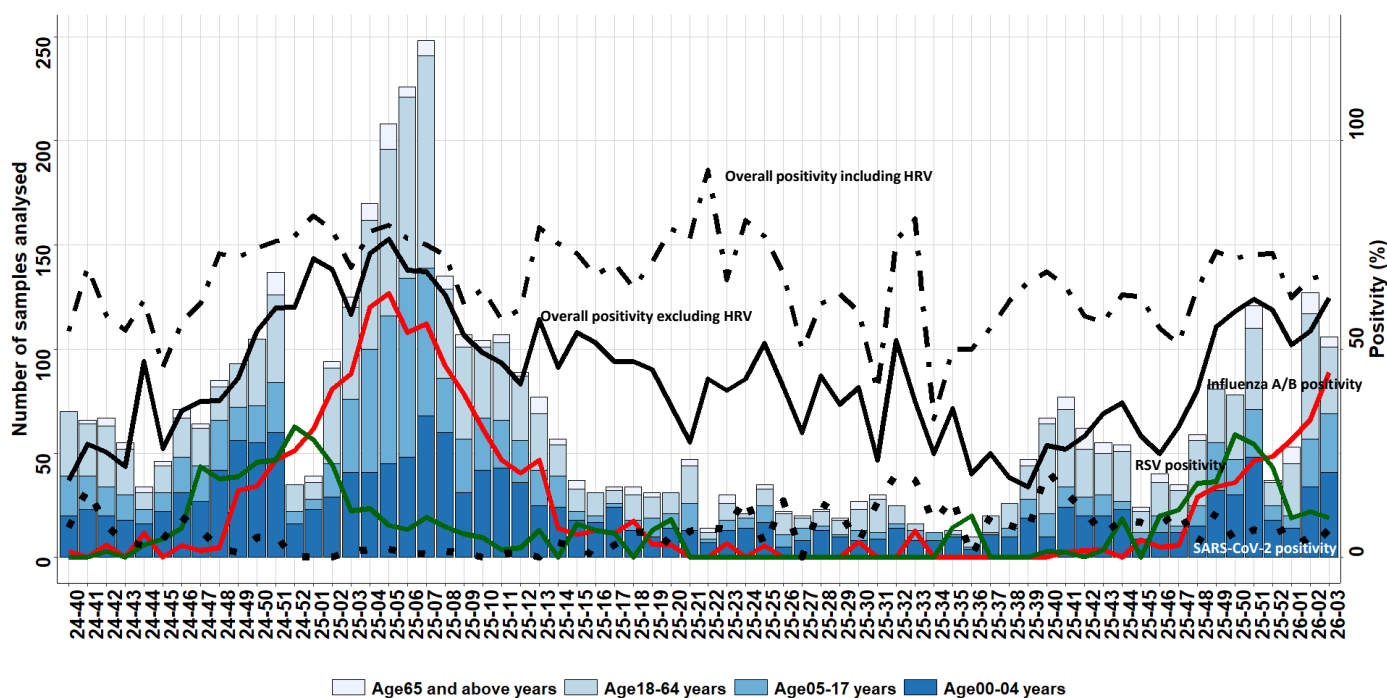
Furthermore, over the past two weeks, human rhinovirus and metapneumovirus have been detected in all age-groups, while parainfluenza and adenovirus have been primarily detected in children under 10 years.

An overview of the circulating viral pathogens in the sentinel network in Luxembourg during the current and previous (inter)- season is presented in figure 2, 3 and table 2.

Table 2. Distribution of respiratory viruses detected within the Sentinel Network during the past 4 weeks compared to previous season; Total N detected during season 2025/26 and previous season; Results from last weeks are not all yet consolidated.

Virus	Season 2025/26					Season 2024/25		
	Positivity Rate in %					Positivity Rate in %		
	W52	W01	W02	W03	Total N (%)	W02	W03	Total N (%)
Influenzavirus A	24.3	28.3	33.1	44.3	184 (17.0)	28.7	35.2	502 (17.2)
Respiratory syncytial virus	21.6	9.4	11.0	9.5	135 (12.5)	22.3	11.2	287 (9.9)
Human rhinovirus	24.3	15.1	14.2	8.6	289 (26.8)	16.1	18.5	720 (24.8)
SARS-CoV-2	5.4	7.5	2.4	6.6	88 (8.1)	0.0	1.6	80 (2.7)
Adenovirus	8.1	1.9	1.6	7.6	60 (5.6)	8.6	4.0	203 (7.0)
Metapneumovirus	5.4	5.7	4.7	2.9	34 (3.2)	5.4	3.2	157 (5.4)
Parainfluenzavirus	2.7	0.0	2.4	0.0	41 (3.8)	1.1	0.8	99 (3.4)
Influenzavirus B	0.0	0.0	0.0	0.0	0 (0.0)	12.8	9.6	404 (13.9)

Figure 2. Presents number of sentinel samples received per week by age-group (weeks 2024/40 to 2026/03) including overall sample positivity- including human rhinovirus (HRV, dot-dash line), excluding HRV (black line), SARS-CoV-2 (dotted line), influenza **combined** (red) and RSV (green); Secondary axis corresponds to positivity; Results from last weeks are not all yet consolidated.



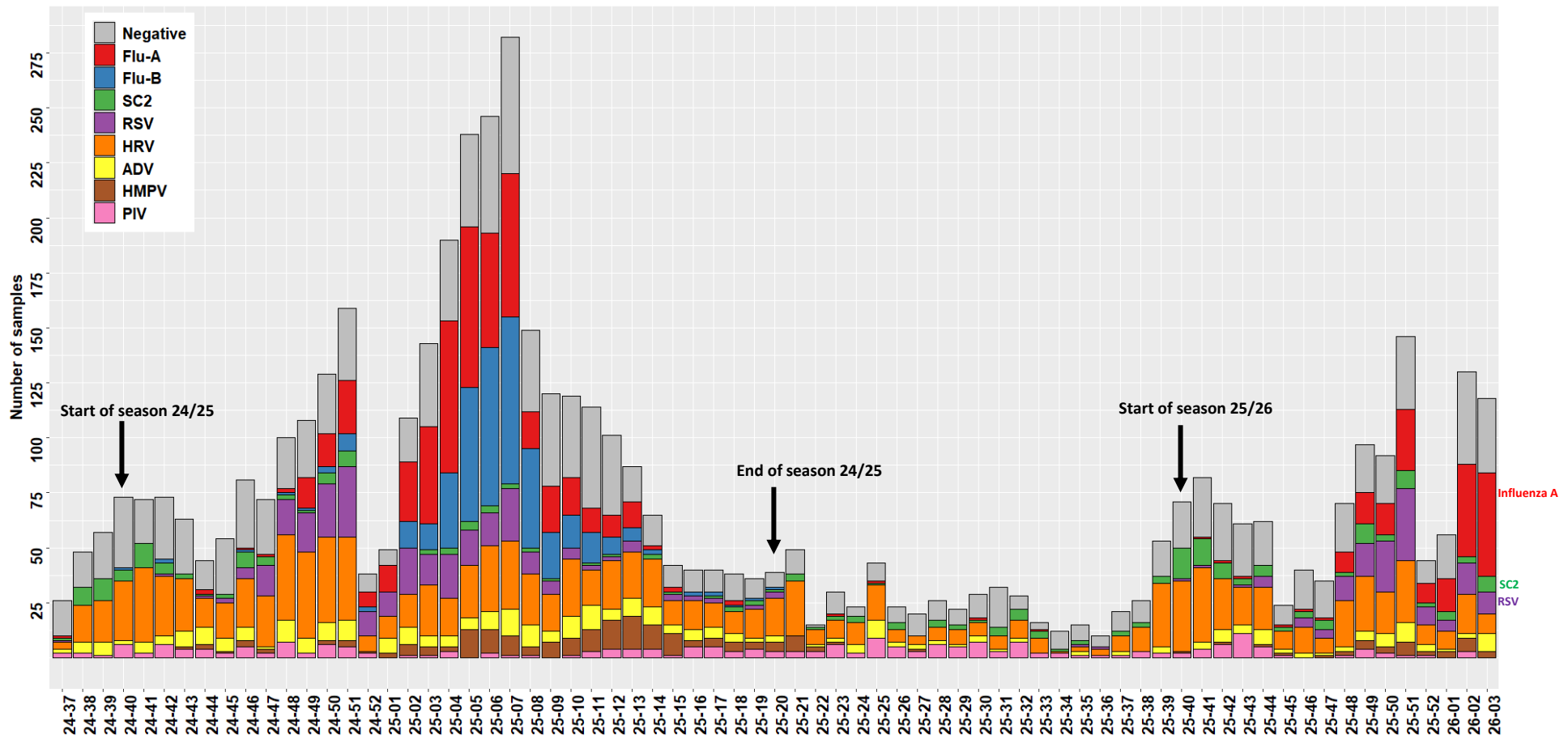
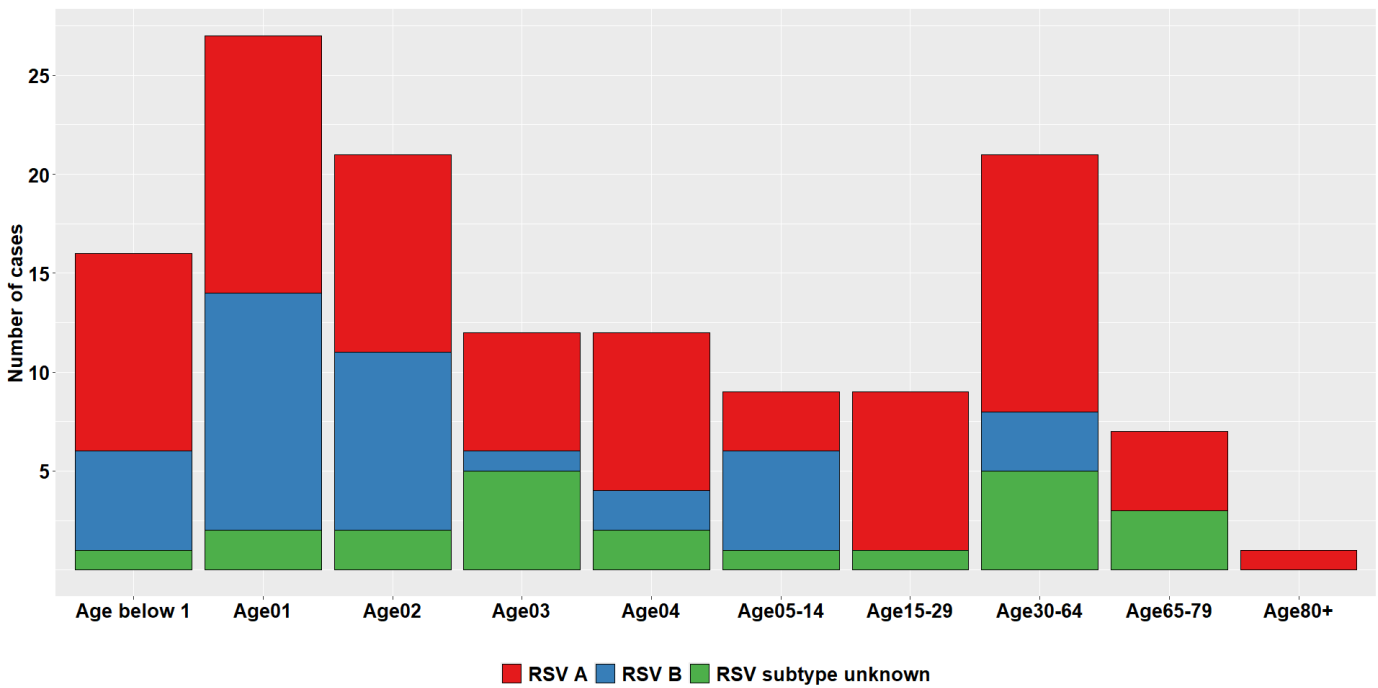


Figure 3. Circulation of respiratory viruses detected within the Sentinel Network by calendar week (seasons 24/25 and 25/26). FLU-A: influenza A; FLU-B: influenza B; PIV: parainfluenza virus; RSV: respiratory syncytial virus; ADV: adenovirus; HMPV: metapneumovirus; HRV: human rhinovirus; SC2: SARS-CoV-2; Results from last weeks are not all yet consolidated.

Figure 4. Number of RSV cases detected in different age-groups (N=135) from 2025/40 to 2026/03



References

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