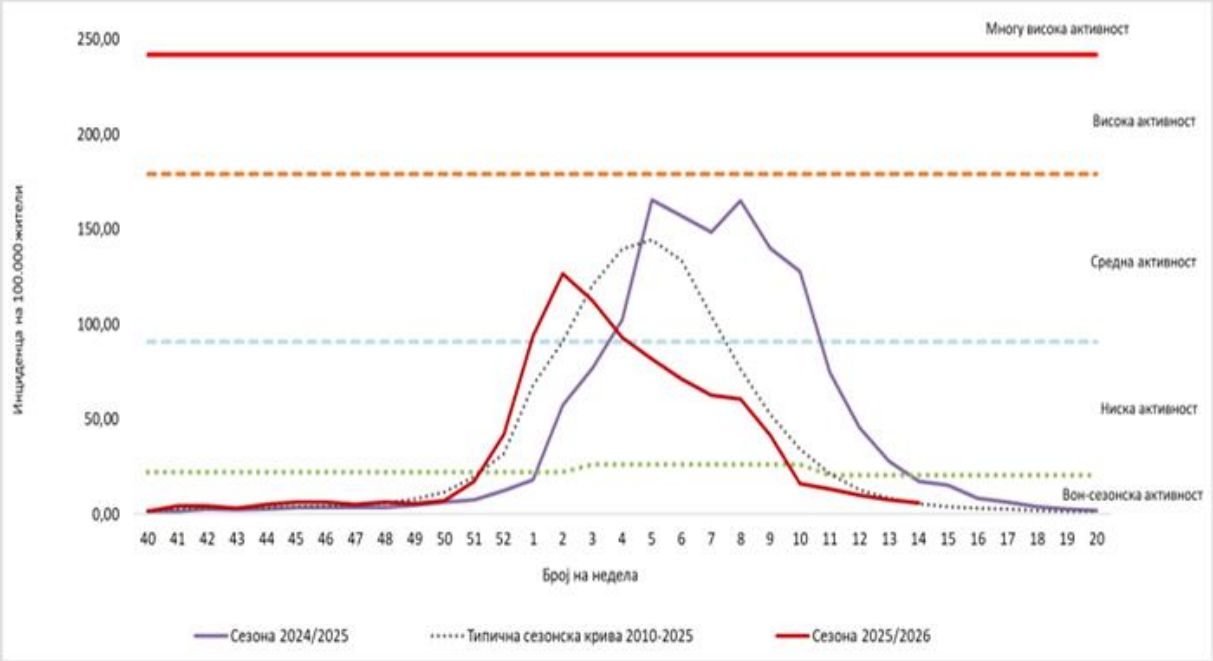
INFLUENZA STATUS – SEASON 2025/2026 *(Week 14, up to 05.04.2026)*

Weekly data
During week 14 of 2026 (30.03–05.04.2026), 110 cases (I = 6.0/100,000) of group-reported influenza / influenza-like illnesses were recorded, which is 22.5% lower compared to the previous week (n = 142).

The number of reported cases this week, compared to week 14 of the previous season (n = 319), has decreased by 65.5%, while compared to the number for week 14 of the typical epidemic curve (modeled from the last 15 seasons) (n = 104), it has increased by 5.8% (Graph 1).

During week 14, the registered incidence falls within off-season activity (Graph 1).

Graph 1. Intensity levels and weekly distribution of influenza / influenza-like illness cases according to the expected epidemic curve 2010–2025, season 2024/2025, and season 2025/2026



Regarding age distribution:

- 64 cases are aged 15–64 years
- 24 cases are over 65 years
- 12 cases are children aged 0–4 years
- 10 cases are children aged 5–14 years

The highest incidence (12.4/100,000) is registered among children aged 0–4 years.

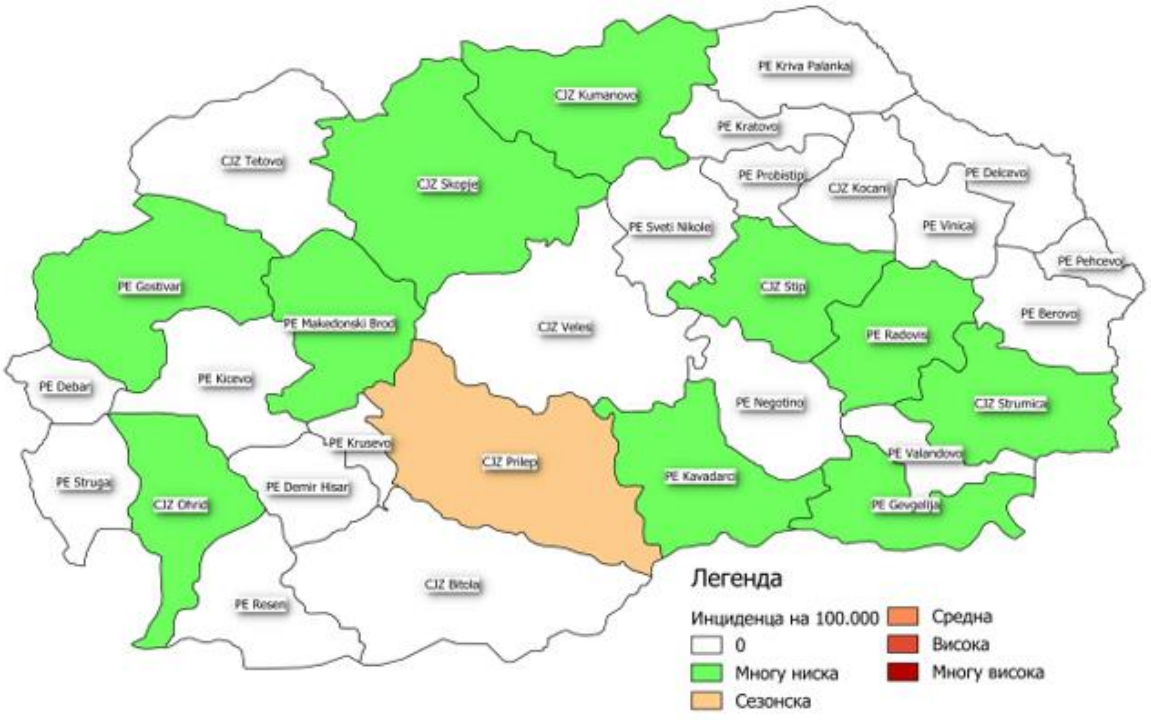
Cases were reported from 11 Centers for Public Health / regional units:

- Skopje – 42
- Prilep – 25
- Ohrid and Strumica – 10 each
- Gevgelija, Kavadarci, Kumanovo, Makedonski Brod, Gostivar, Shtip, and Radovish reported fewer than 10 cases each

No cases of influenza or influenza-like illnesses were reported in Bitola, Demir Hisar, Kichevo, Resen, Veles, Negotino, Sveti Nikole, Kochani, Berovo, Vinica, Delchevo, Pehchevo, Kriva Palanka, Kratovo, Debar, Struga, Krushevo, Valandovo, Tetovo, and Probishtip.

In one public health unit (CPH Prilep), seasonal activity is recorded, while in 10 units very low influenza virus activity is observed (Cartogram 1).

Cartogram 1. Influenza activity level by incidence per 100,000 population, week 14, 2026



VIROLOGICAL SURVEILLANCE

During week 14 of 2026, 48 samples from routine and SARI surveillance were received at the virology laboratory of the Institute of Public Health for laboratory testing, simultaneously tested for Influenza, SARS-CoV-2, and/or RSV.

Out of the total tested samples, one positive case of Influenza A (unsubtyped) was detected.

Additionally, out of 13 samples tested for RSV, 2 positive cases were detected (RSV type A). During this week, one positive case of SARS-CoV-2 was also detected.

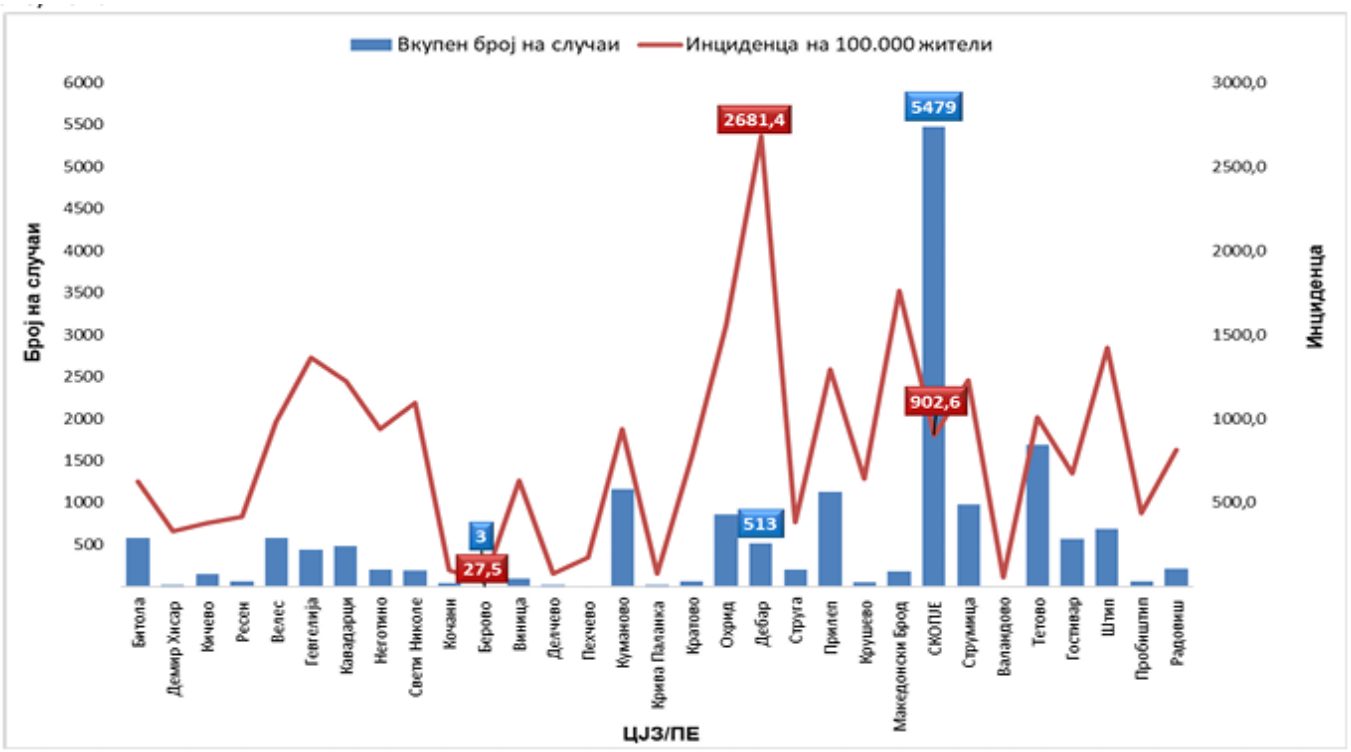
EPIDEMIOLOGICAL SURVEILLANCE – Cumulative data
In the 2025/2026 season, the total number of influenza / influenza-like illness cases is 16,722 (I = 910.4/100,000).

Compared to the same period last season (n = 25,330), the number of reported cases has decreased by 34.0%, and compared to the model from the last 15 seasons (n = 20,538), a decrease of 18.6% is recorded.

Cumulatively, cases have been reported from all Centers for Public Health / regional units. The highest number of cases (n = 5,479) was registered in Skopje, while the highest cumulative incidence (I = 2,681.4/100,000) was registered in Debar (n = 513) (Table 1 in Appendix).

Regarding age distribution, the largest number of cases is reported in the 15–64 age group – 9,703 cases (58.0%), while the highest incidence (2,022.4/100,000) is recorded in the 0–4 age group (n = 1,952) (Graph 2, Table 1 in Appendix).

Graph 2. Distribution of seasonal influenza cases by Centers for Public Health / regional units and incidence per 100,000 population, season 2025/2026



Distribution of seasonal influenza / influenza-like illness cases by month (Table 1 in Appendix):

- October – 338 cases (2.0%)
- November – 438 cases (2.6%)
- December – 1,324 cases (7.9%)

- January – 9,315 cases (55.7%)
- February – 4,336 cases (25.9%)
- March – 861 cases (5.1%)
- April (up to 05.04.2026) – 110 cases (0.7%)

During the influenza season, four deaths associated with influenza were recorded.

VIROLOGICAL SURVEILLANCE – Cumulative data
Since the start of the 2025/2026 season, up to week 14/2026, a total of 1,195 samples from routine and sentinel SARI surveillance were received at the virology laboratory of the Institute of Public Health of the Republic of North Macedonia. All samples were tested for the presence of influenza virus, SARS-CoV-2, and/or RSV.

A total of 126 positive influenza cases were detected:

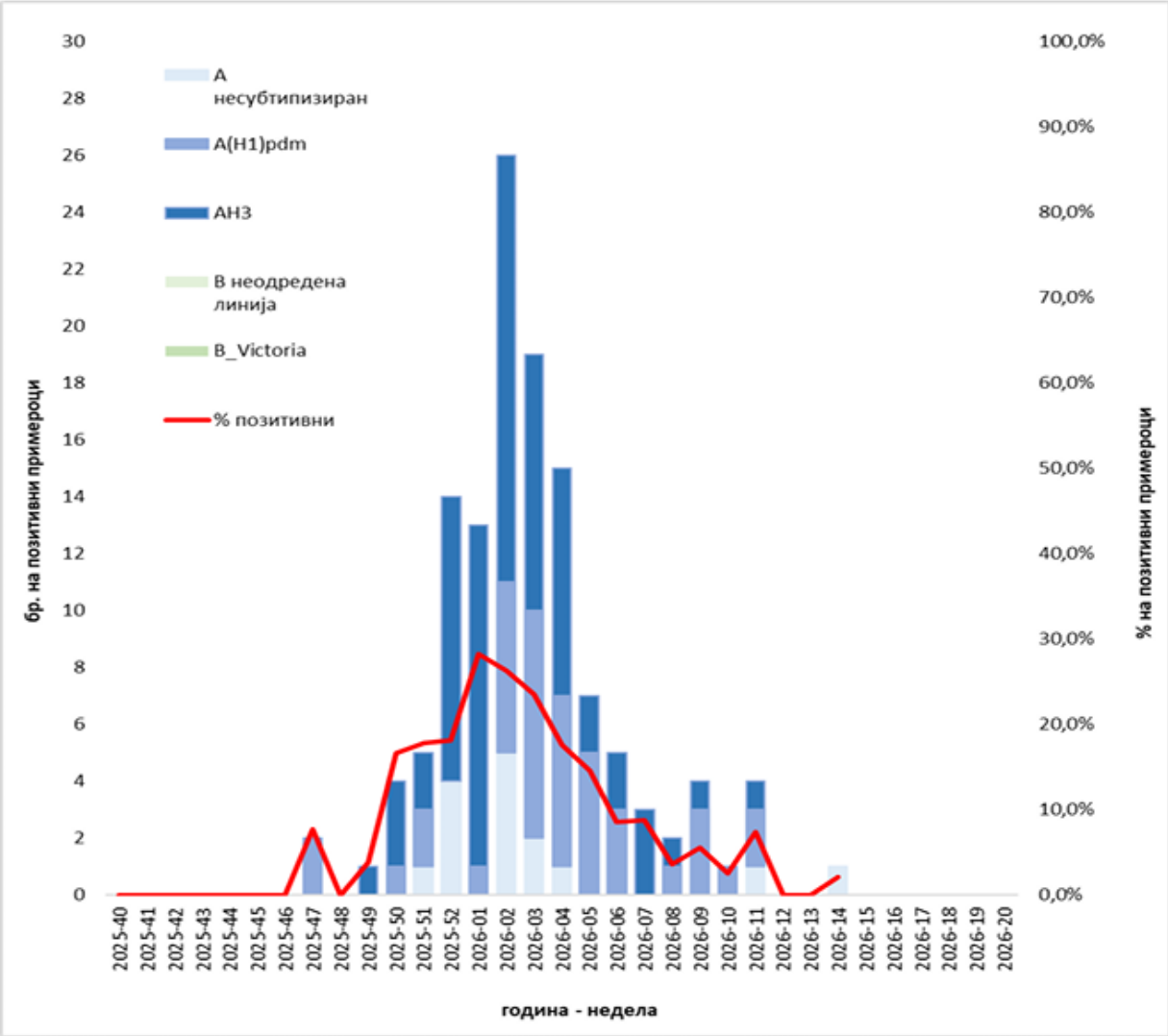
- Influenza A – 126
    - Influenza A(H1)pdm09 – 41 (32.5%)
    - Influenza A(H3) – 70 (55.6%)
    - Influenza A – unsubtyped – 15 (11.9%)
- Influenza B – 0

Additionally:

- 26 positive cases of SARS-CoV-2 were registered
- 143 positive cases of respiratory syncytial virus (RSV) were registered:
    - RSV (unsubtyped) – 5
    - RSV-A – 39
    - RSV-B – 99

Furthermore, 5 other respiratory viruses were detected in the tested samples.

Graph 3. Weekly distribution of the number and percentage of positive influenza samples, routine and sentinel surveillance, Republic of North Macedonia, 2025/2026



EPIDEMIOLOGICAL COMMENT

During week 14 of 2026, the downward trend in the number of cases and the incidence of influenza-like illnesses continues on a weekly basis. The reported weekly incidence remains within off-season activity levels.

The results from virological influenza surveillance indicate sporadic geographic activity of the influenza virus. The positivity rate is below the 10% threshold.

According to these data, the country is experiencing low influenza virus intensity.

GENERAL PREVENTIVE MEASURES

Source: https://sezonskigrip.mk/

General protective measures against influenza apply to all acute respiratory illnesses and can be very useful, especially if practiced throughout the entire winter period:

- Avoid gatherings and staying in crowded indoor spaces; especially avoid close contact with people who are ill or suspected to be ill (coughing, sneezing, fever).
- Wash hands frequently with soap and water or use a disinfectant.
- Keep indoor spaces warm and ventilate them regularly.
- Dress warmly in layers; warm baths are recommended.
- Drink warm beverages (teas, soups), fresh juices, and water with lemon.
- Consume fresh foods rich in vitamins and minerals, especially fruits and vegetables. Foods rich in vitamin C (such as citrus fruits like lemons and oranges) are particularly recommended. If fresh food is not always available, multivitamin drinks and supplements may be used.
- Maintain a healthy lifestyle, including good sleep and rest, healthy nutrition, physical and mental activity, and stress reduction.

A strong immune system will help you stay healthy or cope more easily with influenza and influenza-like illnesses. However, even if you are perfectly healthy and have strong immunity, you can still get sick.

What to do if you get sick with the flu?

Follow these recommendations:

- Stay at home and do not go to work, school, or crowded places.
- Rest and consume plenty of fluids and light food.
- Avoid close contact with household members; do not receive visitors while sick.
- Cover your nose and mouth with a tissue when coughing or sneezing; dispose of it after use.
- Wear a protective mask when in contact with household members, especially if coughing or sneezing.
- Practice frequent and thorough handwashing with warm water and soap.
- Use wet wipes containing alcohol or hand disinfectants.
- Avoid touching your eyes, nose, and mouth with your hands.
- Ventilate the room you stay in frequently.
- Maintain cleanliness of your surroundings—clean objects and surfaces regularly.
- If you are over 65, have chronic illnesses, or if symptoms worsen or persist for several days, seek medical attention.

INFLUENZA VACCINATION

Vaccination against seasonal influenza is the most effective protection against this disease. The Institute of Public Health recommends vaccination for the entire population, especially for people belonging to so-called risk groups (according to WHO recommendations):

- Elderly persons (over 65 years)
- Children aged 6–59 months
- Persons older than 6 months with chronic diseases
- Pregnant women

- Healthcare workers

For the 2025/2026 season, the Ministry of Health provided a free quadrivalent vaccine in a total quantity of 80,000 doses, intended for priority population groups.

Vaccination began on 16.10.2025 and is carried out in the Centers for Public Health (CPH) with their regional units and/or Health Centers. Vaccination of healthcare workers in Skopje is carried out at the Institute of Public Health.

According to data from the eHealth Administration, from the start of vaccination until the closing of this report, a total of 77,281 individuals from risk groups have been vaccinated with free vaccines.

Additionally, 2,400 doses of commercial vaccines were procured by the Centers for Public Health for the rest of the population not included in the priority groups. These are available for a fee and administered at the Centers for Public Health and their regional units.

According to the eHealth Administration, a total of 1,841 people have been vaccinated with commercial vaccines.

By week 14, a total of 79,122 individuals in the Republic of North Macedonia have been vaccinated with either free or commercial vaccines.

EUROPEAN REGION
Source: https://erviss.org/

According to the ERVISS report published for week 12 of 2026 on influenza virus activity in the WHO European Region:

- Rates of influenza-like illness (ILI) and/or acute respiratory infection (ARI) are above baseline levels in 3 out of 26 reporting countries in the WHO European Region.
- Circulation of the influenza virus continues to decline, and the positivity rate in sentinel surveillance in primary healthcare is now below the regional epidemic threshold of 10%. Influenza A subtypes A(H1) and A(H3) are co-dominant, although there are variations between countries and regions.
- Regional indicators of SARS-CoV-2 activity remain at baseline levels.
- Regional indicators for RSV activity and severity remain elevated but show a decreasing trend, except in some countries where levels remain higher. The disease burden and positivity rates remain highest among children under 5 years of age.

The WHO has issued recommendations for seasonal influenza vaccines for use in the 2026–2027 season in the Northern Hemisphere.

The recommended **trivalent vaccine** should contain:

Egg-based vaccines:

- A/Missouri/11/2025 (H1N1)pdm09-like virus
- A/Darwin/1454/2025 (H3N2)-like virus
- B/Tokyo/EIS13-175/2025 (B/Victoria lineage)-like virus

Cell-based or recombinant vaccines:

- A/Missouri/11/2025 (H1N1)pdm09-like virus
- A/Darwin/1415/2025 (H3N2)-like virus
- B/Pennsylvania/14/2025 (B/Victoria lineage)-like virus

The **B/Yamagata lineage component** has been excluded, as the virus has not been detected since March 2020.