



## Regional Update EW 47

Influenza  
(December 6, 2011 - 17 h GMT; 12 h EST)

PAHO interactive influenza data: [http://ais.paho.org/hip/viz/ed\\_flu.asp](http://ais.paho.org/hip/viz/ed_flu.asp)  
Influenza Regional Reports: [www.paho.org/influenzareports](http://www.paho.org/influenzareports)

The information presented in this update is based on data provided by Ministries of Health and National Influenza Centers of Member States to the Pan American Health Organization (PAHO) or from updates on the Member States' Ministry of Health web pages.

- In North America, influenza activity remains low; with slightly increase in some Canadian regions (Alberta, British Columbia, Quebec y Ontario).
- In Central America and the Caribbean, the predominance of respiratory syncytial virus (RSV) continued (Costa Rica, Honduras and Dominican Republic). Among influenza viruses, the circulation of influenza A(H1N1)pmd09 continued (Jamaica), in co-circulation with influenza A/H3N2 (Costa Rica and Honduras) and influenza B (Dominican Republic).
- In South America, influenza activity remains low or within the expected level for this period of time. In Venezuela, increased activity of acute respiratory infections was reported.

### Epidemiologic and virologic influenza update

#### North America

In Canada<sup>1</sup>, in epidemiological week (EW) 47, influenza activity started to increase with sporadic detections in some regions in the provinces of Alberta, British Columbia, Ontario, Quebec, but remained at inter-seasonal levels in the rest of the country. In EW 47, Influenza-like Illness (ILI) consultation rates were 18.4 per 1,000 consultations; slightly higher than the previous EW (15.7) and within the expected levels for this time of year. Compared to other age groups, in EW 47, a higher ILI consultation rate was observed in children under 5 years old (~66.8/1,000 consultations). In EW 47, among the total samples analyzed (n=2,107), the percent positivity for respiratory viruses remained lower than 1%, which was similar to previous week. In EW 47, the percent of influenza positive for rinovirus and metapneumovirus continued to decrease since peaking in EW44. Concerning influenza viruses, in EW 47, influenza A/H3, influenza A(H1N1)pmd09 and influenza B were detected.

In the United States<sup>2</sup>, in EW 47, at the national level, the proportion of ILI consultations (1.4%) remained below the national baseline (2.4%). The proportion of deaths attributed to pneumonia and influenza for EW 47 (6.4%) was lower than the epidemic threshold for this time of year (7.1%). In EW 47, two pediatric deaths associated with influenza were reported. Among all samples tested during EW 47 (n=2,130), the percentage of samples positive for influenza continued to remain low (<2%), with sporadic detections of influenza A/H3, influenza A(H1N1)pmd09 and influenza B.

In Mexico, in EW 47, according to laboratory data, of total samples received (n=58), the percent positivity remained <2%, and only one sample positive for A(H1N1)pmd09 was detected.

#### Caribbean

CAREC<sup>3</sup>, in EW 47, received epidemiological information from Jamaica and Tobago. The proportion of admissions for Severe Acute Respiratory Infection (SARI) among all hospitalizations (1.1%) decreased as compared to the prior week (2.9%). Concerning age groups, among children between 6 months and 4 years old highest SARI hospitalization rate was reported (6.7%). Since EW 38, no SARI deaths were reported.

\* Includes Barbados, Belize, Dominica, Jamaica, St Vincents and the Grenadines, St Lucia, Suriname and Trinidad and Tobago

According to laboratory data, between EW 43-46, positive samples for influenza A(H1N1)pmd09 and RSV were detected.

In Jamaica, in EW 47, the proportion of consultations for Acute Respiratory Illness (ARI) was 4.6%, which was slightly higher than the previous week (4%). The proportion of SARI admissions was 0.9% which was the same as the previous week. There was no SARI death reported for EW 47. According to laboratory data, in EW 47, one sample positive for influenza A(H1N1)pmd09 virus was detected.

In Cuba, according to laboratory data, in EW 47, among all samples tested (n=81), ~42% were positive for respiratory viruses, mainly RSV and adenovirus. In EW 47, no samples positive for influenza were detected.

In the Dominican Republic, according to laboratory data, in EW 48, among all samples tested (n=23), the percentage of samples positive for respiratory viruses was ~35%, which was similar to the previous week, being RSV the predominant virus in circulation, followed by parainfluenza. Concerning influenza viruses, in EW 47, influenza A(H1N1)pmd09 and influenza B were detected.

### *Central America*

In Costa Rica according to laboratory data, in EW 48, among all samples tested (n=169), the percentage of samples positive for respiratory viruses (~40%) was slightly lower than the previous week. RSV has been the predominant virus since EW 28, followed by adenovirus. From EW 44 - 48, the percentage of samples positive for influenza showed an increasing trend, due to an increased detection of influenza A(H1N1)pmd09 and influenza A/H3.

In Honduras, according to laboratory data, in EW 47, among all samples tested (n=20), the percentage of samples positive for respiratory viruses remained at 15%. RSV predominated since EW 35, and in EW 47 is in co-circulation with adenovirus. Concerning influenza viruses, influenza B was detected.

In Panama, in EW 47, few positive samples for respiratory viruses were detected. No influenza influenza viruses have been detected since EW 43.

### *South America – Andean*

In Colombia, according to the national laboratory<sup>3</sup>, no positives samples for respiratory viruses have been detected since EW 45. Between EW 36-44, influenza A/(H1N1)pmd09 and influenza A/H3 had co-circulated in variable amounts.

In Venezuela<sup>4</sup>, in EW 46, ARI and pneumonia endemic channels showed an increasing trend in the number of cases since ~EW 38, but within expected levels for this time of year. The higher incidence rate was reported in children less than 7 years old. In 2011 up to EW 46, of all samples tested (n=9,115), the percentage of positive samples for respiratory viruses was ~38%. Concerning influenza viruses, of the total number of samples tested, ~25% of samples tested were positive for influenza A(H1N1)pmd09, ~5% was influenza A/H3 and <1% was influenza B.

### *South America – Southern Cone*

In Argentina<sup>5</sup>, in EW 42, ILI and SARI endemic channels showed that the number of ILI and pneumonia cases continued to decrease since peaking in EW 27, and remained lower than observed in the same period of 2010.

In Brazil, according to Adolfo Lutz Institute (Sao Paulo), in EW 47, among the tested samples (n=26), the percentage of samples positive for respiratory viruses was ~30% and for influenza viruses was ~4%, detecting mainly parainfluenza virus, followed by RSV and influenza A(H1N1)pmd09. According to Fio Cruz Institute (Rio de Janeiro), no influenza samples have been detected since EW 42.

In Paraguay<sup>6</sup>, in EW 47, the proportion of ILI consultations (3.3%) was lower than the previous week (5.1%). In EW 45, the proportion of SARI hospitalization and SARI deaths remained under 3%; however, the proportion of SARI ICU admissions increased to ~18%. According to laboratory data, adenovirus has been the predominant respiratory virus in circulation since EW 42. In EW 47, influenza A/H3 and influenza A(H1N1)pmd09 were also detected.

In Uruguay<sup>7</sup>, in EW 48, the proportion of SARI hospitalizations, ICU admissions and deaths remained <5%. In general, these proportions have continued to decrease since peaking in EW 31.

**Graphs**

**North America**

**Canada**

Figure 7. Influenza-like illness (ILI) consultation rates, Canada, by report week, 2011-2012 compared to 1996/97 through to 2010/11 seasons (with pandemic data suppressed)

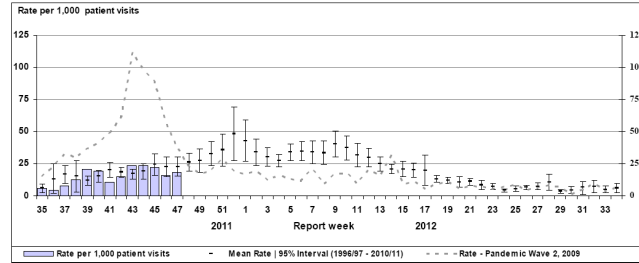
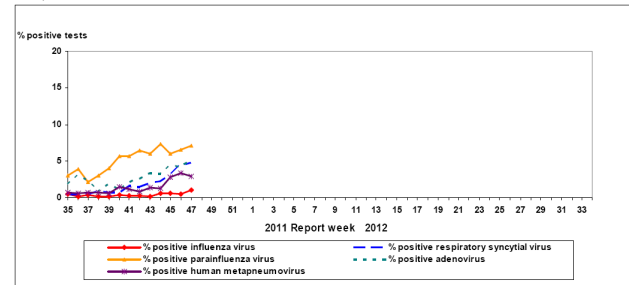
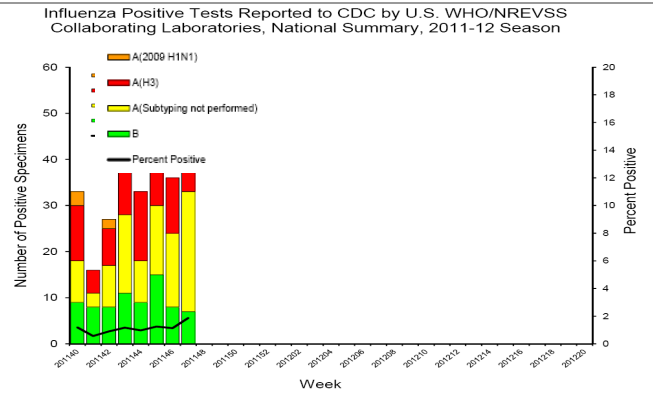
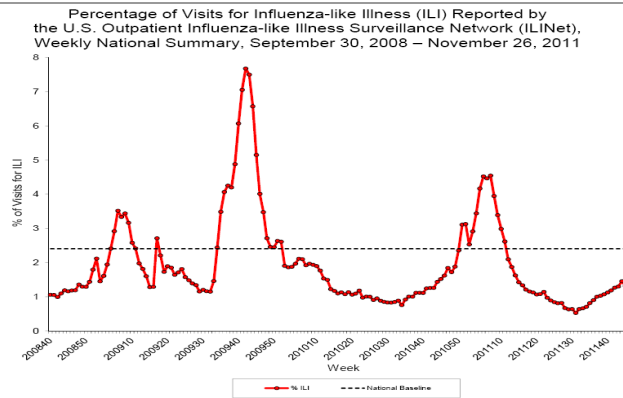


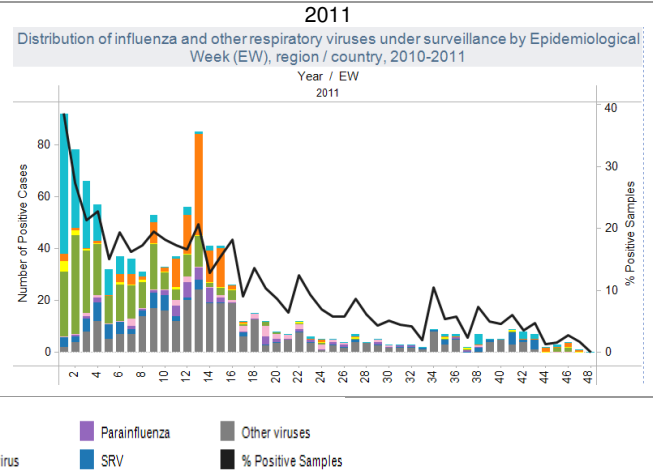
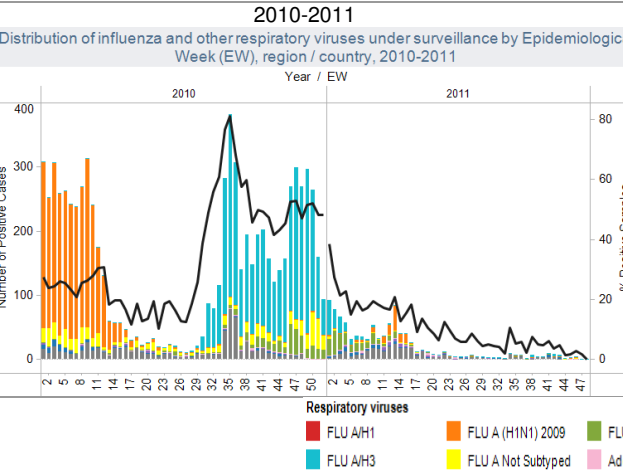
Figure 5. Percent positive influenza tests, compared to other respiratory viruses, Canada, by reporting week, 2011-2012



**United States**

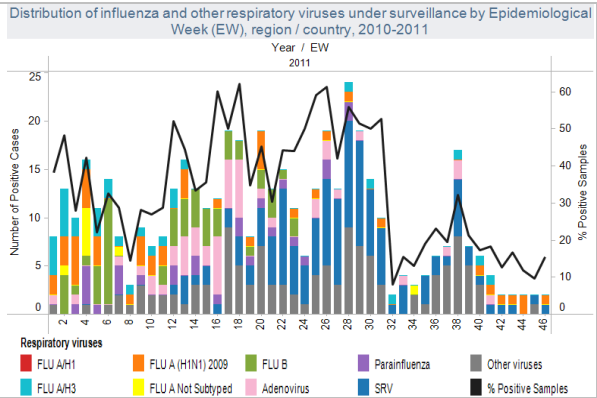
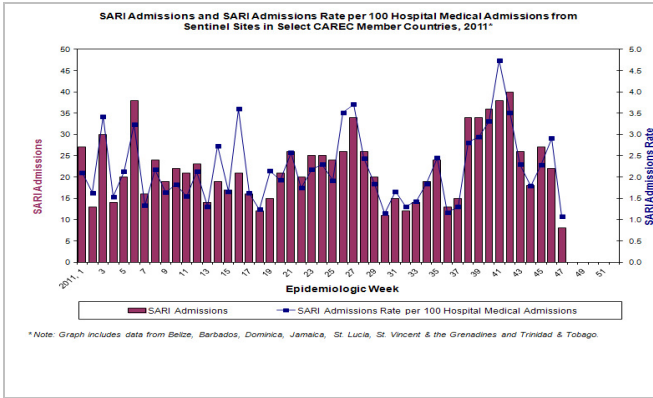


**Mexico**

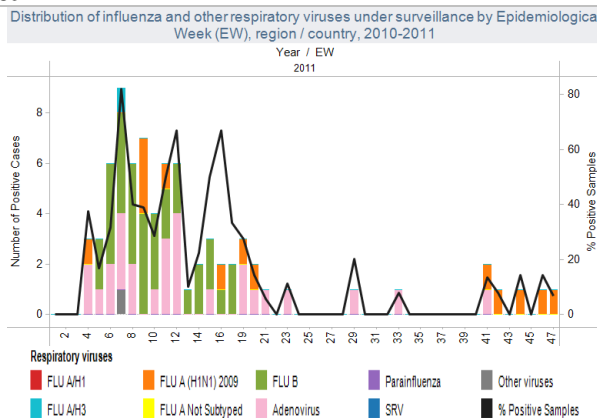
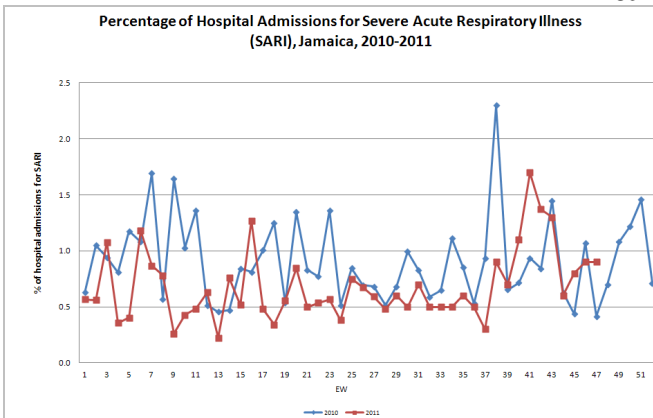


# Caribbean

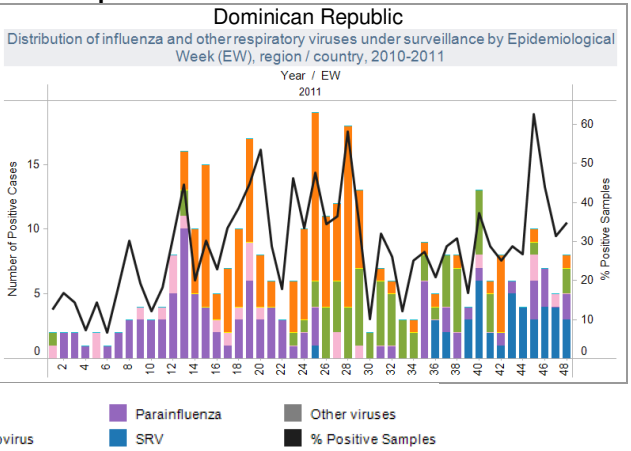
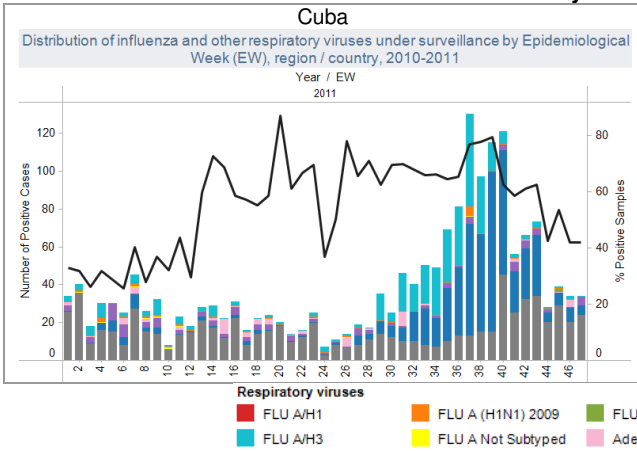
## CAREC



## Jamaica

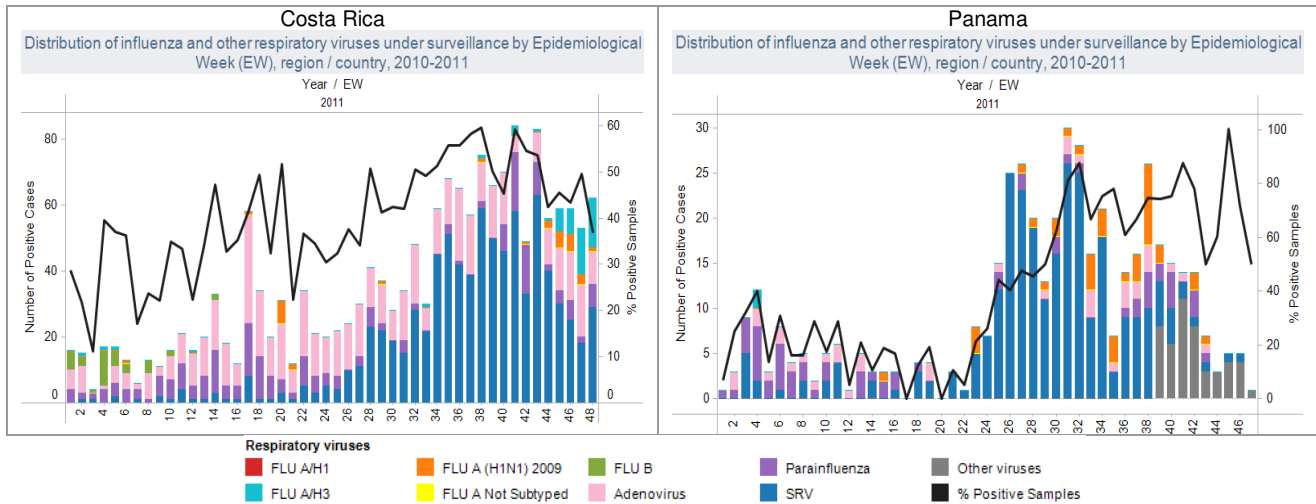


## Cuba y Dominican Republic

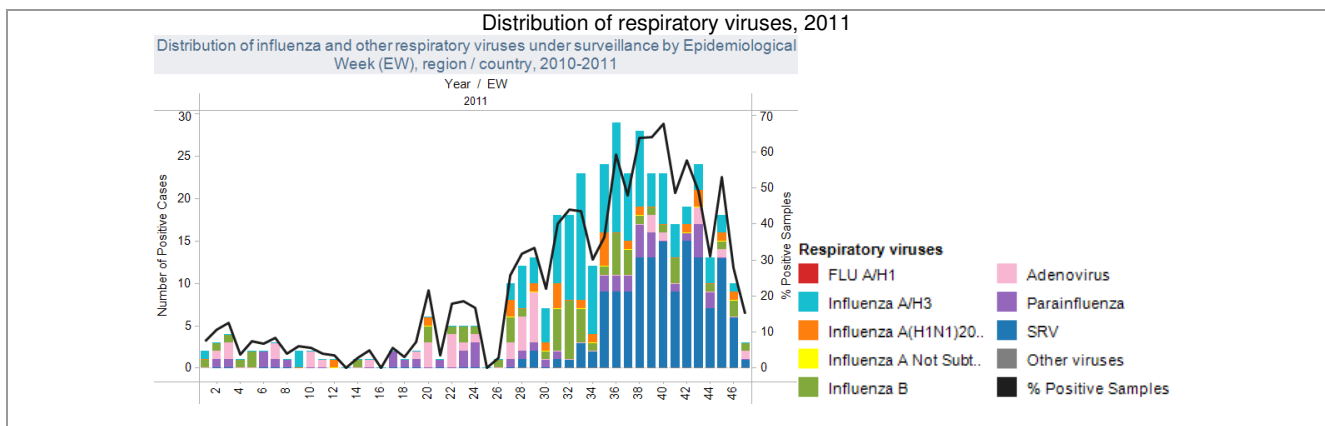


# Central America

## Costa Rica and Panama

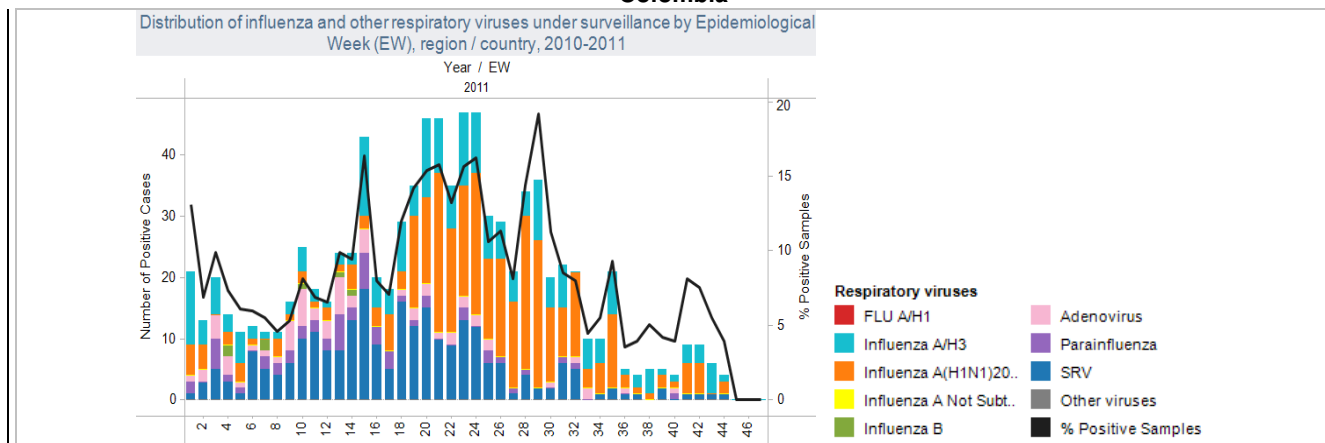


## Honduras

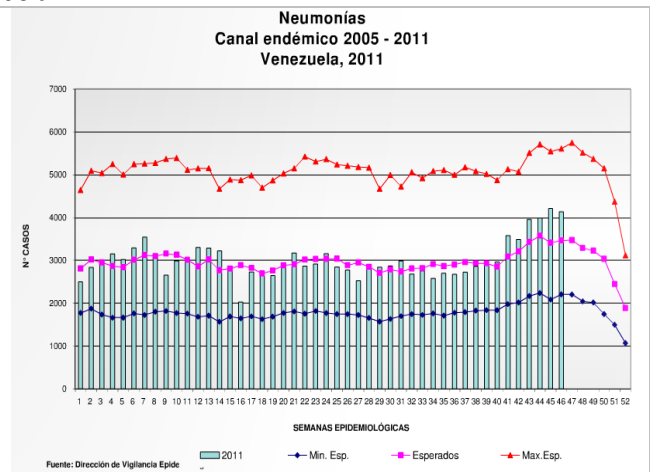
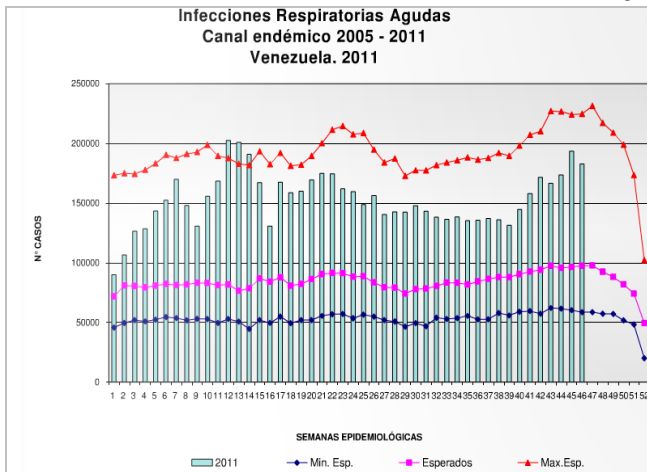


# South America - Andean

## Colombia

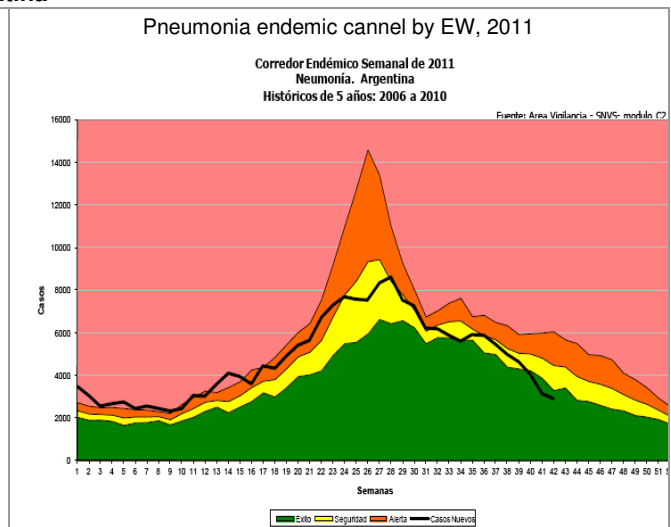
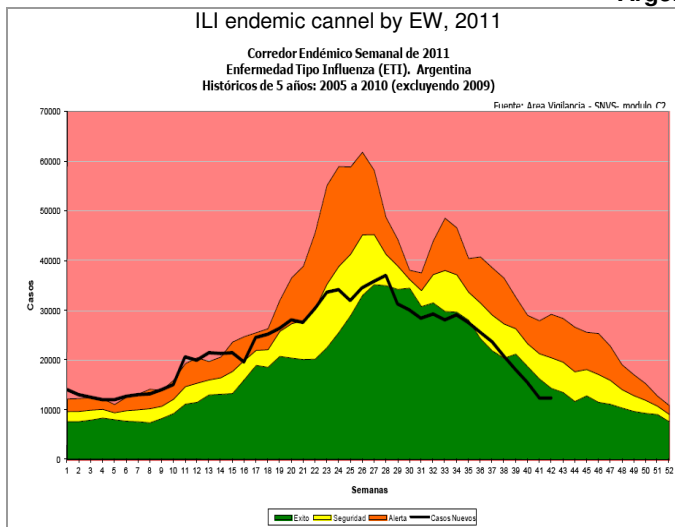


## Venezuela

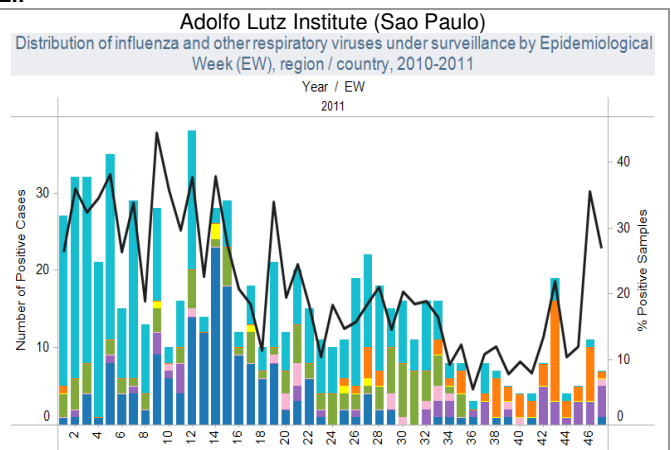
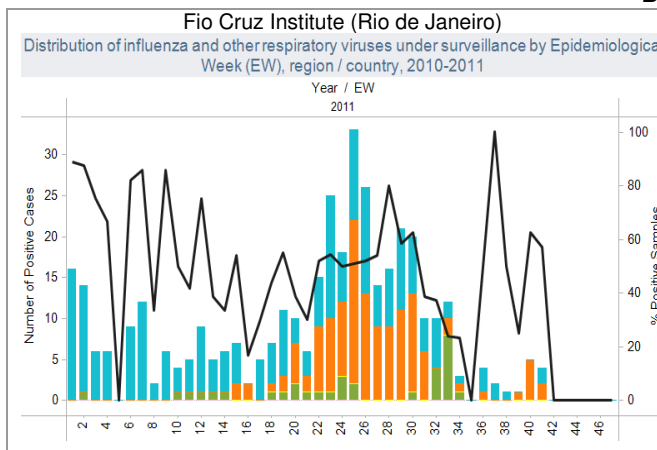


## South America – Southern Cone

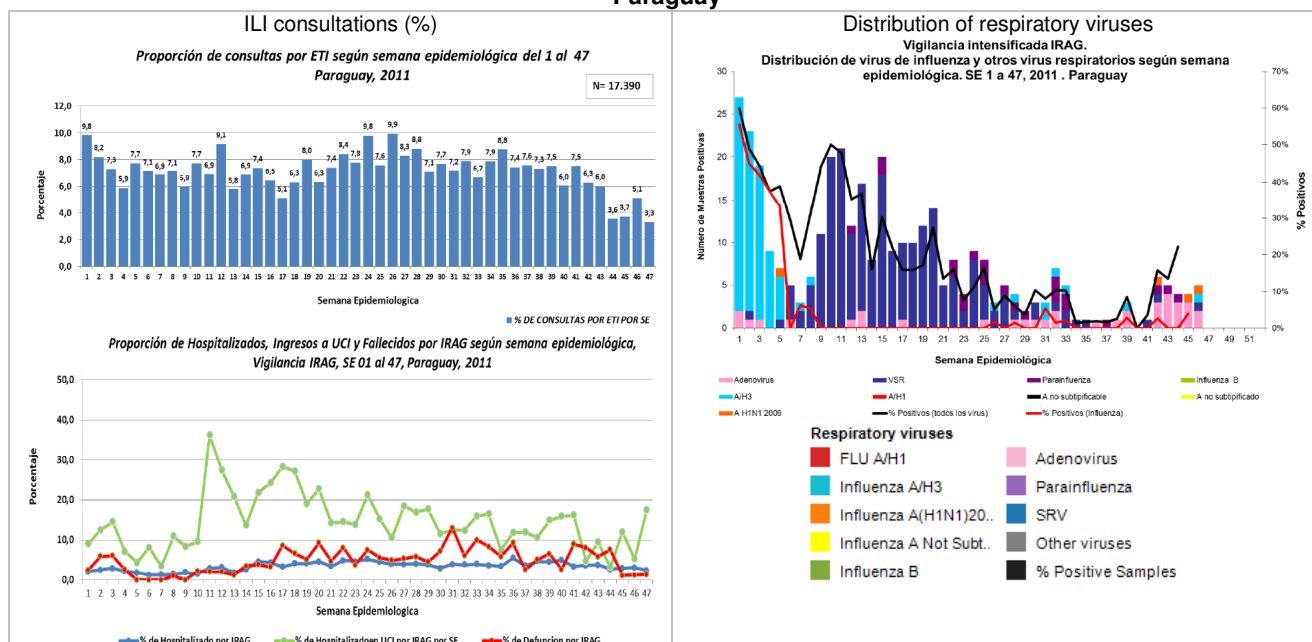
### Argentina



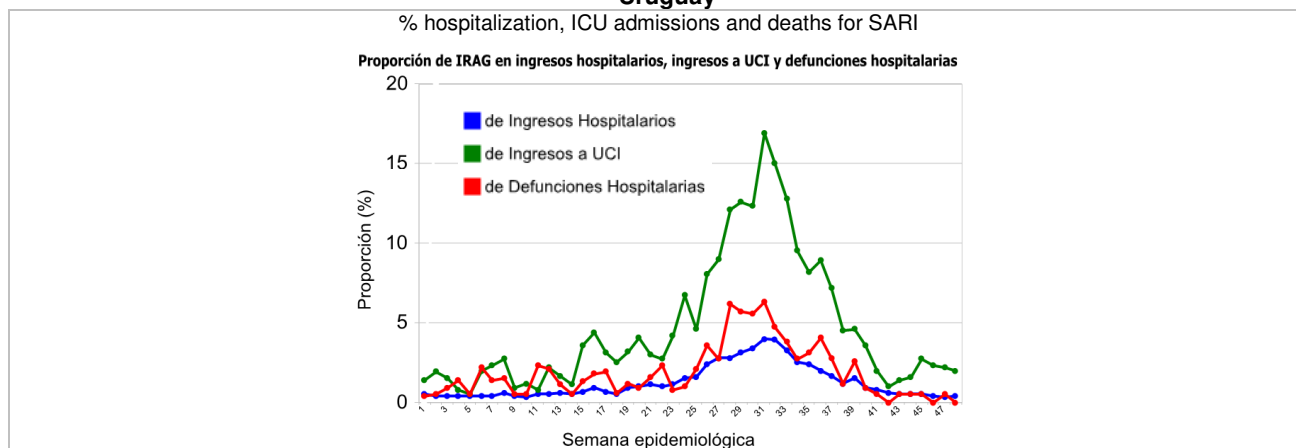
### Brazil



## Paraguay



## Uruguay



<sup>1</sup> FluWatch Report. EWs 47. <http://www.phac-aspc.gc.ca/fluwatch/>

<sup>2</sup> US Surveillance Summary. Week 47. Centers for Disease Control and Prevention

<sup>3</sup> Colombia. Instituto Nacional de Salud.

<sup>4</sup> Venezuela. Boletín epidemiológico - SE 46. Ministerio del Poder Popular para la Salud. Disponible en: [http://www.mpps.gob.ve/index.php?option=com\\_content&view=article&id=549&Itemid=915](http://www.mpps.gob.ve/index.php?option=com_content&view=article&id=549&Itemid=915)

<sup>5</sup> Argentina. Actualización situación de enfermedades respiratorias 2011. SE 47.

<sup>6</sup> Paraguay. Boletín epidemiológico semanal, SE 47. Ministerio de Salud Pública y Bienestar Social

<sup>7</sup> Uruguay. Dirección General de la Salud. División Epidemiología. SE 48. Available at:

<https://trantor.msp.gub.uy/epidemiologia/servlet/iraggrafmenu>