



Regional Update EW 24

Influenza
(June 28, 2011 - 17 h GMT; 12 h EST)

PAHO interactive influenza data: http://ais.paho.org/phis/viz/ed_flu.asp

Influenza Regional Reports: http://new.paho.org/hq/index.php?option=com_content&task=view&id=3352&Itemid=2469&to=2246

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, most of the regions from these countries reported the absence of influenza activity. The detection of influenza in laboratories is low and/or continues to decrease.
- In Central America and the Caribbean, even though in the Dominican Republic the circulation of influenza A/H1N1 2009 persists; in most countries the detection of influenza is none or low (influenza B in Honduras).
- In South America, even though the activity of influenza remains at a low level for this time of year in comparison to previous years, some Andean countries reported co-circulation of influenza A/H1N1 2009 and influenza A/H3 (Colombia and Bolivia). In the Southern Cone, the respiratory syncytial virus (RSV) continues to be the predominant virus in circulation, with low detection of influenza.

Epidemiologic and virologic influenza update

North America

In Canada¹, the 2010-11 influenza season is coming to an end in epidemiological weeks (EWs) 23-24, with influenza detections approaching baseline levels. Most regions in the country reported no influenza activity. The influenza-like illness (ILI) consultation rates were 11.7 (EW 23) and 7.7 (EW 24) per 1000 consultations; such rate for EW 23 was greater than expected, however, it returned to its expected level in EW 24. Only 7 cases positive to influenza were detected between EW 23 and 24, the proportion of positive samples was 0.3% for each of these weeks. Among other respiratory viruses, the detection of Respiratory Syncytial Virus (RSV) continued to decrease after peaking in EW 07. Parainfluenza virus experienced a slight increase in EW 24, after being decreasing since its peak (EW 19).

In the United States², in EW 24, at the national level, the proportion of consultations of ambulatory ILI patients (0.7%) was below the national baseline. The proportion of deaths attributed to pneumonia and influenza was below its epidemiologic threshold. This week, two pediatric deaths associated to influenza were reported. During EW 24, the percentage of positive samples to influenza (n=6) among those analyzed was low (0.77%).

In Mexico, in EW 24, among all analyzed samples, no samples positive to influenza and other respiratory viruses were detected.

Caribbean

CAREC^{*}, in EW 24, reported that the proportion of SARI admissions (~2%) remained similar to the previous weeks. No SARI deaths have been reported in the last EW. The highest SARI hospitalization rate by age group was observed in children between 6-48 months (6.45 per 100 hospitalizations-week). In laboratory results, RSV continued being the primary virus in circulation since EW 21.

In the Dominican Republic, in EW 25, among all samples tested, the percentage of samples positive to respiratory viruses increased to ~45% due to the increase of influenza A/H1N1 2009 detection, being this the

^{*} Países miembros de CAREC que participan en esta evaluación conjunta: Barbados, Dominica, Jamaica, San Vicente y las Granadinas, Santa Lucía y Trinidad y Tobago

predominant virus between EWs 13-25, followed by influenza B. Among other respiratory viruses, parainfluenza continued to be detected.

Central America

In Costa Rica, in EW 24, among samples tested, the percentage of positive samples for respiratory viruses remained at ~30%; adenovirus being the primary virus in circulation, followed by RSV and parainfluenza. In the last three weeks, no samples positive to influenza were detected.

In Honduras³, in EW 24, at the national level, the proportion of admissions for ILI was 3.71% (450/12.108), less than observed during EW 23 (4.2%). The proportion of SARI hospitalizations was 3.71% (12/323) slightly superior to that observed in EW 23 (2.8%). According to National Laboratory data, in EW 24, low circulation of influenza B persisted. Among other respiratory viruses, parainfluenza was the predominant virus in the last two weeks, followed by adenovirus.

In Nicaragua, the percentage of positivity for respiratory viruses continued below 5%, without influenza detection since EW 9.

In Panama, in EW 24, the percentage of samples positive to respiratory viruses remained at ~15%, without influenza detection. Among other respiratory viruses, the predominant virus is RSV.

South America – Andean

In Bolivia, in EW 24, in the department of La Paz (west of the country), the percentage of samples positive to influenza maintained an increasing trend since EW 16 (0%) to EW 24 (65%), with primary circulation of influenza A/H3N2 as the only influenza virus between EWs 17-24. In the department of Santa Cruz (east of the country), the percentage of samples positive to influenza increased from 7% (EW 23) to ~20%, with predominance of influenza A/H3N2 in the last three weeks, previous to influenza A/H1N1 2009.

In Colombia⁴, according to the SARI surveillance system of Bogota, in EW 23, the percentage of SARI hospitalizations (3%) was less than the previous week. The proportion of SARI ICU admissions remained at ~14%. The age group with the highest proportion of SARI hospitalizations and SARI ICU admissions were children less than 5 years old, especially less than 1 years old. In EW 24, the predominant virus in SARI patients in Bogota was unsubtype influenza A. According to national laboratory data, the positivity percentage for respiratory viruses remained at ~15%; the predominant respiratory virus was influenza A/H1N1 2009, followed by influenza A/H3N2 and RSV.

In Peru⁵, in EW 23, ARI and pneumonia activity indicators (number of ARI cases in less than 5 years old and the number of children less than 5 years old with pneumonia, respectively) were similar and lower, respectively, as compared to the previous week and both remained within its endemic channel for this time of year. To date in 2011, 131 deaths associated with pneumonia notified in less than 5 years old were reported, this represents a lower recount than observed in the years 2008-2010, for this time of year; regionally during 2011, the highest recounts of deceased children less than 5 years old were in Loreto (20), Puno (16), Lima (10), Junin (10) and Amazonas (9).

In Venezuela⁶, in EW 23, the ARI and pneumonia endemic channels remained similar to the previous week and within the expected for this of year.

South America – Southern Cone

In Argentina, by EW 21, ILI and pneumonia endemic channels show a decreasing trend compared to the previous weeks and are below the expected level for this time of year. According to laboratory data, in EW 24, the percentage of samples positive to respiratory viruses decreased slightly (from 48% to 41%), where the predominant respiratory virus has been RSV since EW 10. Concerning influenza viruses, just 2% of the samples tested were positive to influenza, mainly influenza A/H1N1 2009. At the regional level, there was reported an outbreak of influenza A/H1N1 2009 in Mendoza, with 54 confirmed cases for influenza A/H1N1 2009 accumulated since EW 20 to the present date; among them, 3 children and 7 adults were hospitalized, including a pregnant woman and a deceased case who presented cardiac comorbidity.

In Chile⁷, in EW 24, ILI activity (11.2 consultations per 100,000 inhabitants) at the national level, was similar to the previous week (11.8 per 100.000 inhabitants) and remained within the expected levels for this time of

year and less than that observed during 2009 and 2010; whilst at the regional level, a slight increase was observed in the regions of Valparaiso and Metropolitana. This week the percentage of emergency department admissions for respiratory cases in children less than 15 years old (48%) remained similar to the previous week, after a continuous increase since EW 15 (~30%). By EW 24, no deaths associated to influenza have been reported. The number of cases positive to respiratory viruses showed an increasing trend between EWs 13-24, with increase of RSV as the primary virus in circulation, followed by adenovirus and parainfluenza. Influenza viruses continued to circulate in a very low proportion.

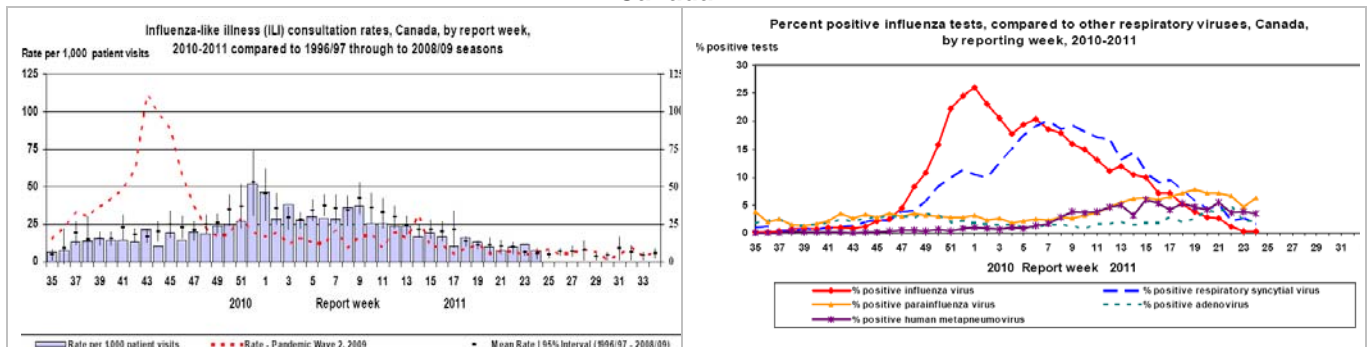
In Paraguay⁸, in EW 24, the proportion of ILI consultations among all consultations showed a fluctuating trend during 2011, but it remains <10%. In SARI surveillance, the proportion of SARI hospitalizations among all hospitalizations and the proportion of SARI deaths among deaths for all causes remained below 10% whilst the proportion of SARI ICU admissions among all ICU admissions remained at ~13%. According to laboratory data at the national level by EW 24, the percentage of samples positive to respiratory viruses remained similar to the previous weeks at ~12%, RSV being the predominant respiratory virus since EW 6. Low detection of influenza was reported.

In Uruguay⁹, in EWs 25 and 26, in SARI surveillance, the proportion of SARI hospitalizations among all hospitalizations, the proportion of SARI ICU admissions among all ICU admissions, and the proportion of SARI deaths among deaths for all causes, remained below 5%. In laboratory, in EW 23, the detection of other respiratory viruses (RSV, followed by parainfluenza and adenovirus) predominated, with few sporadic detections of influenza B.

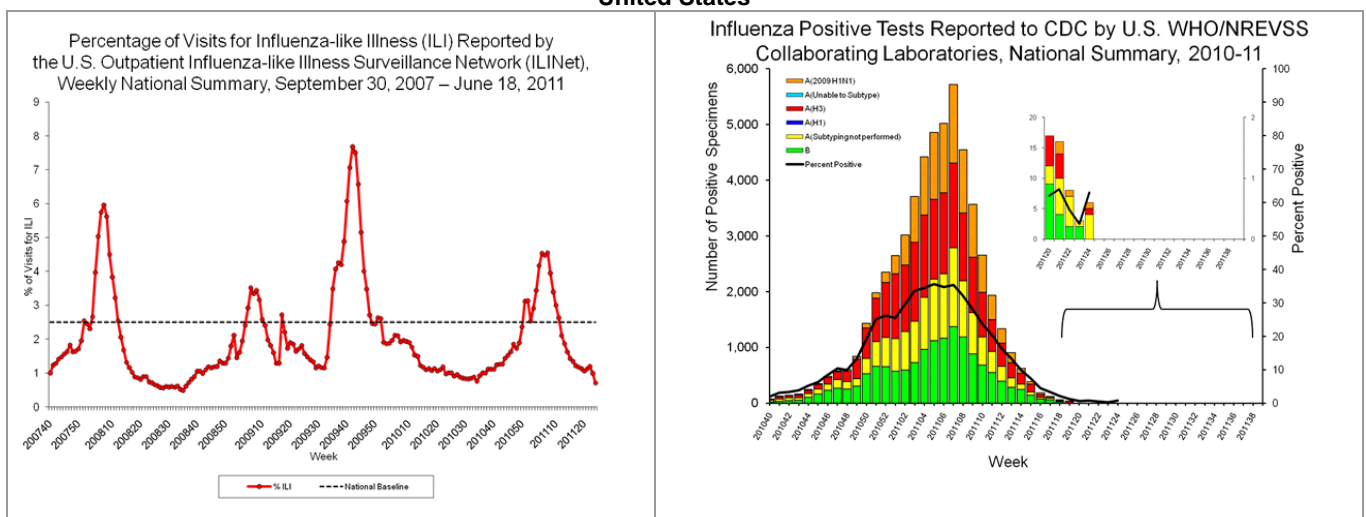
Graphs

North America

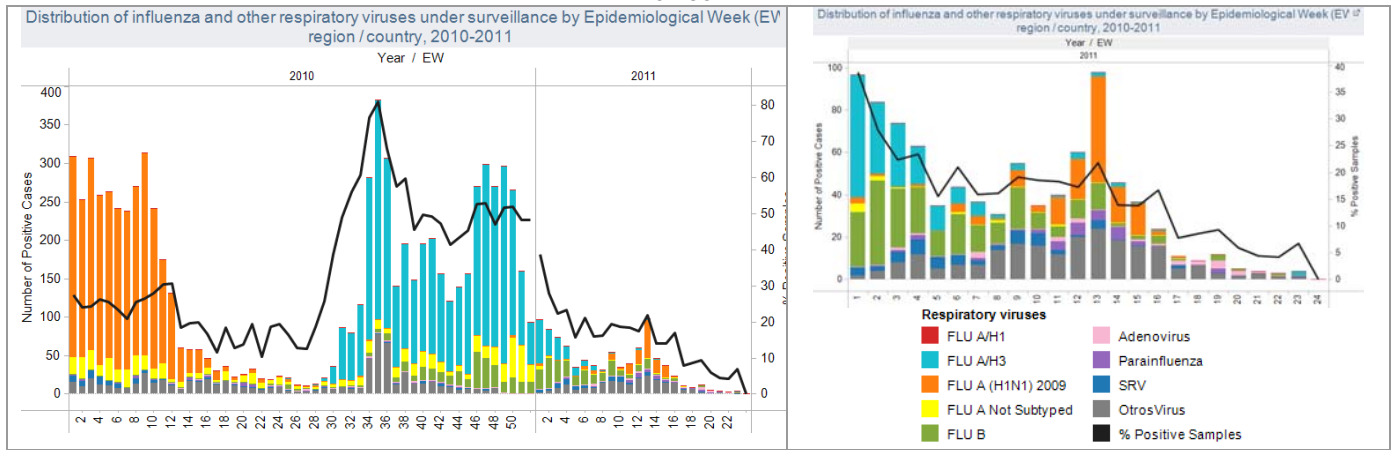
Canada



United States

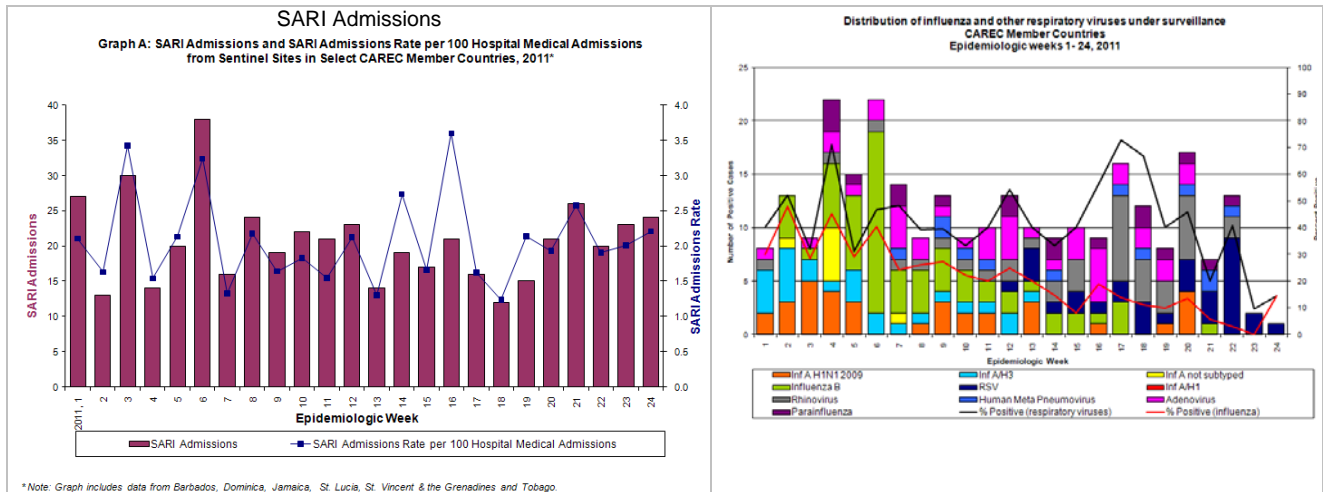


Mexico



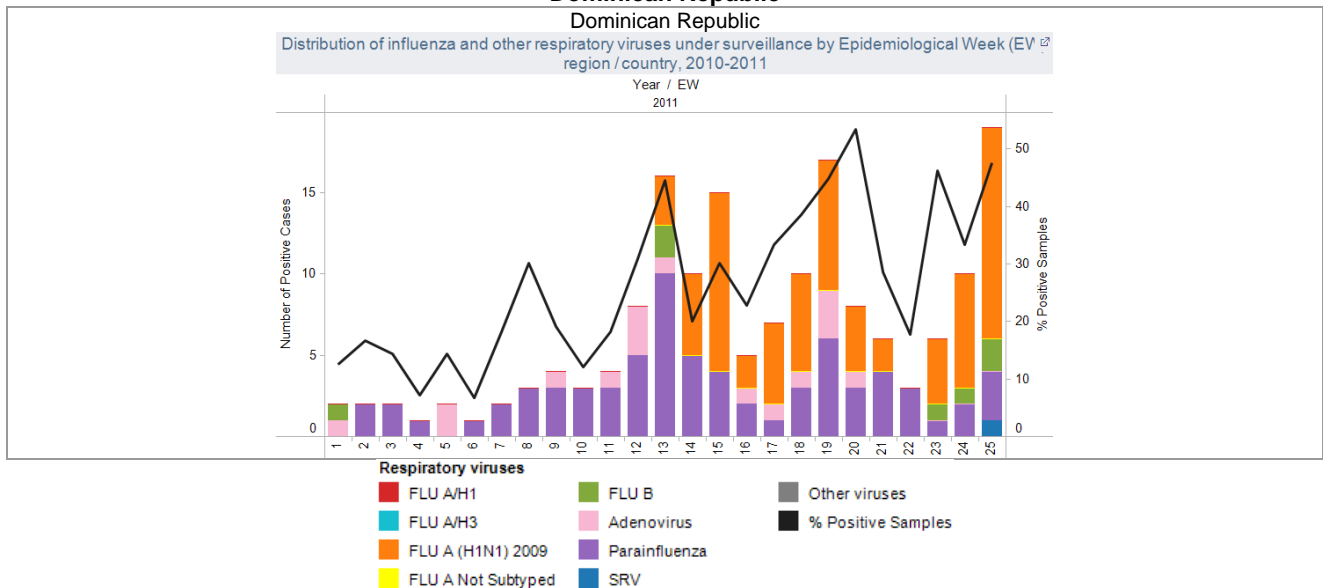
Caribbean

CAREC

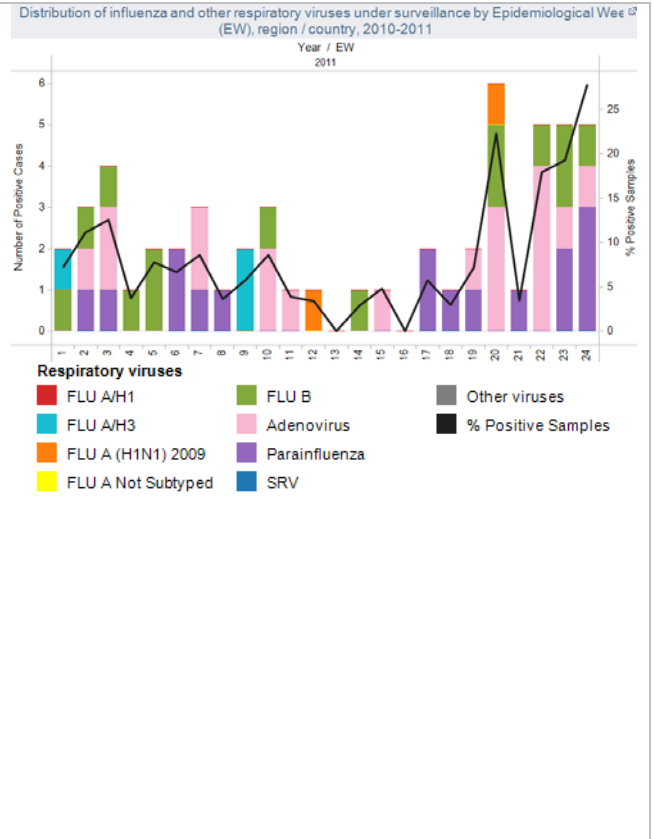
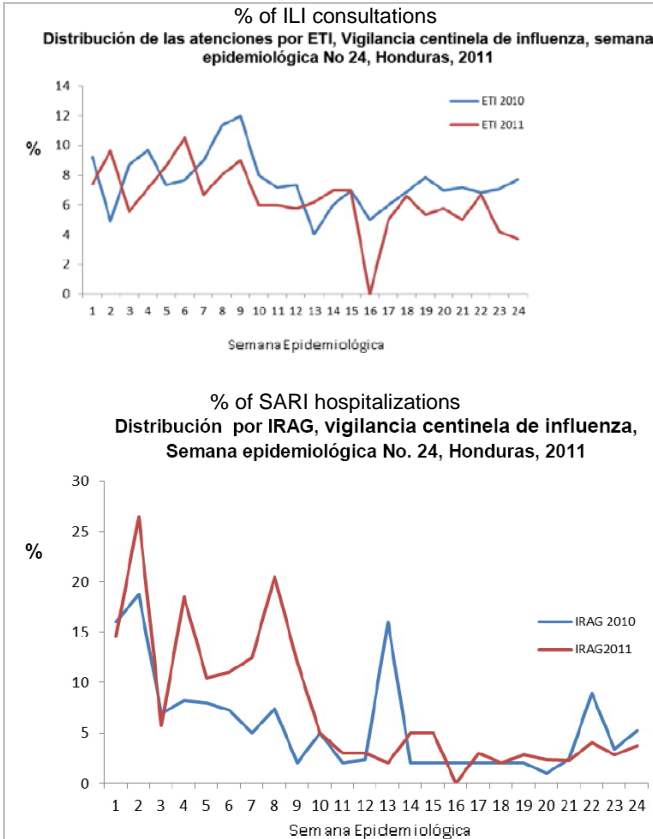


Dominican Republic

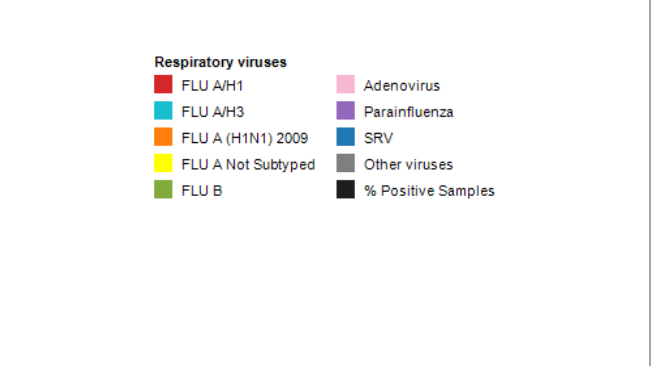
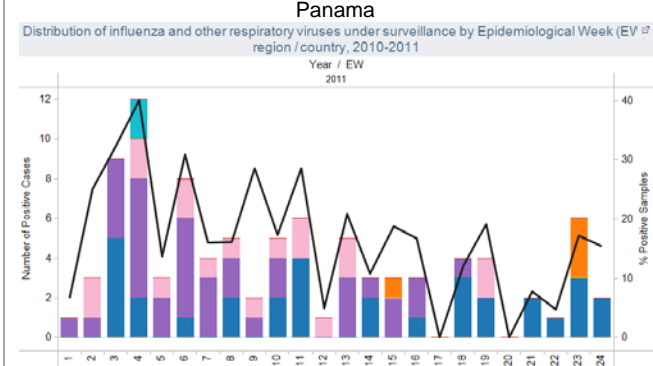
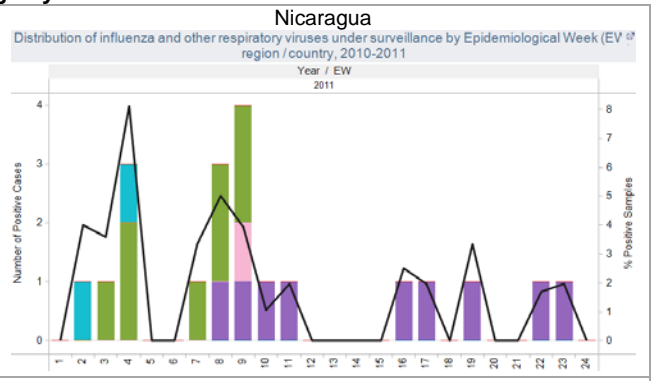
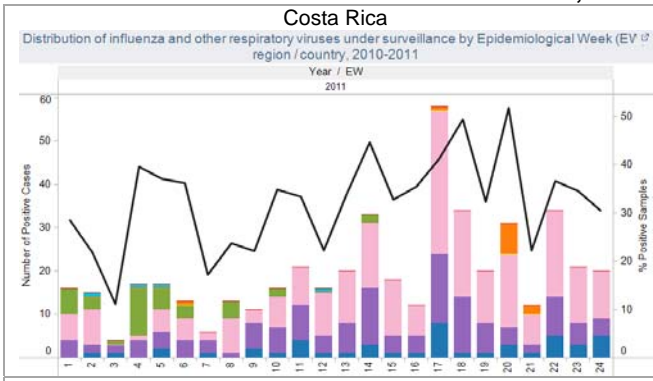
Dominican Republic



Honduras

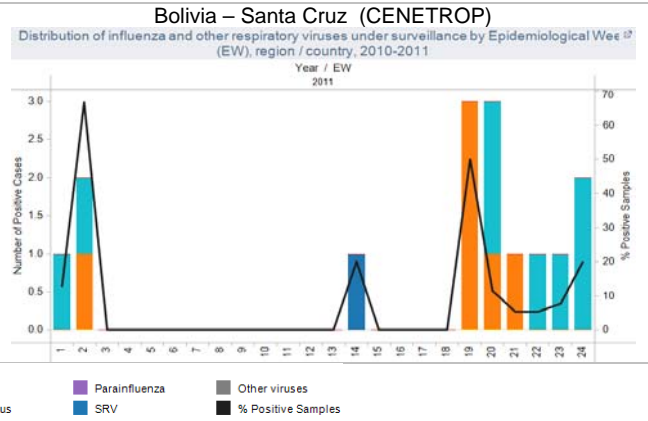
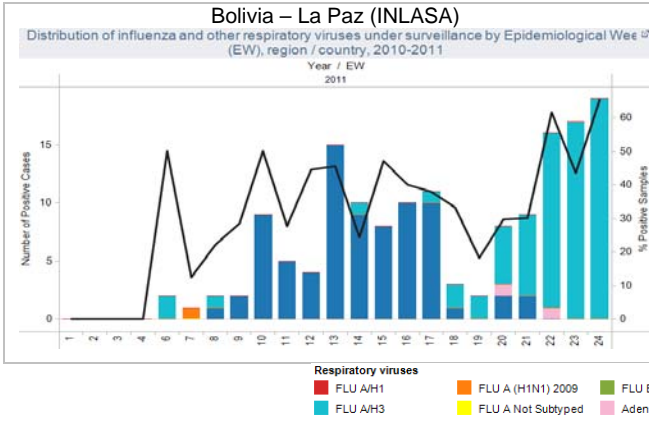


Costa Rica, Nicaragua y Panama

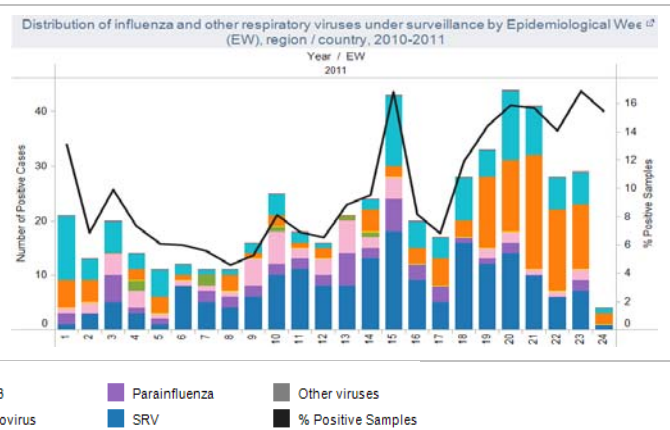
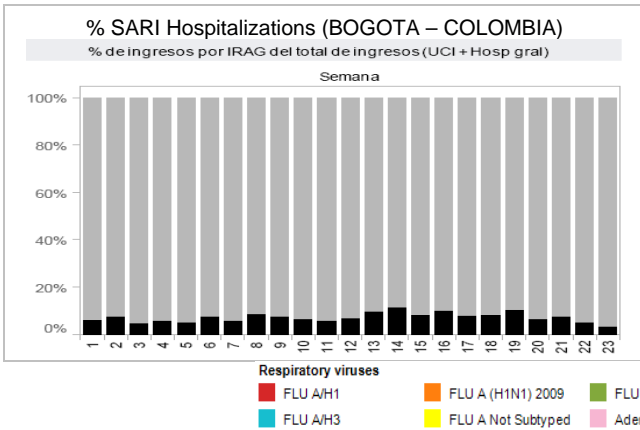


South America - Andean

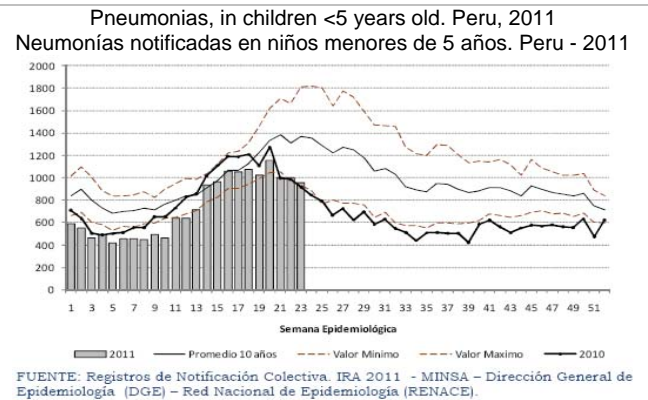
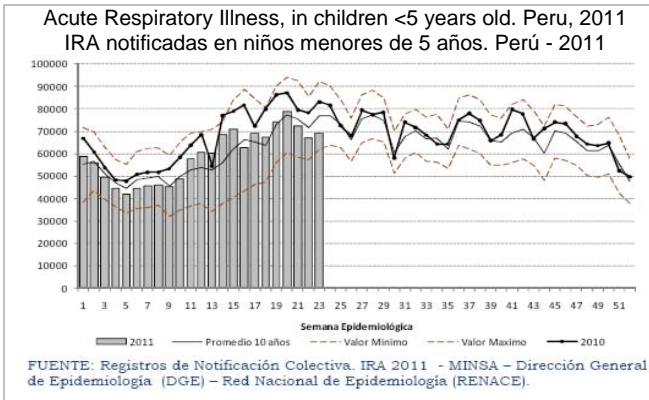
Bolivia



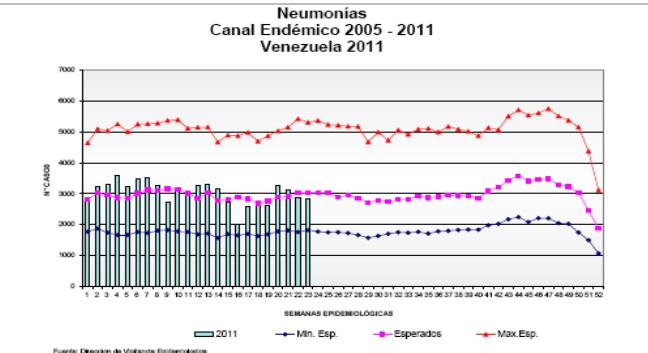
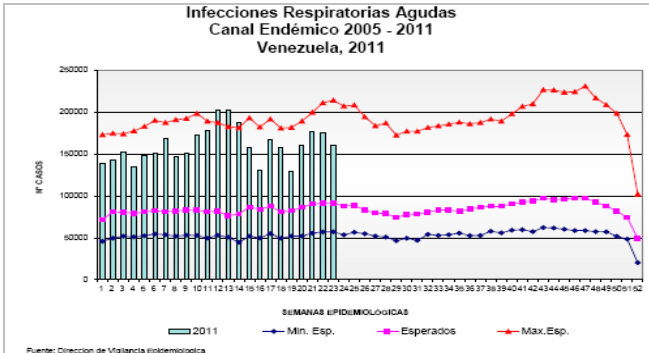
Colombia



Peru

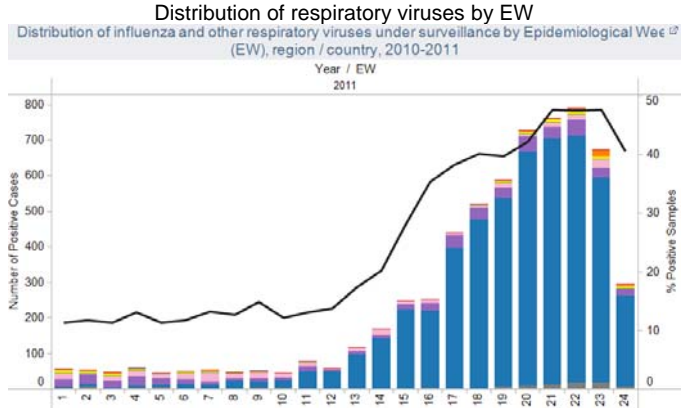
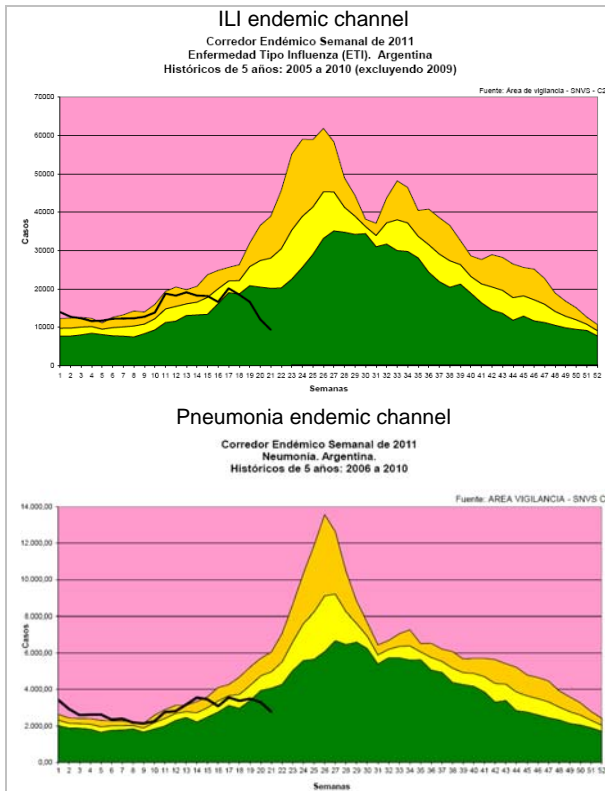


Venezuela

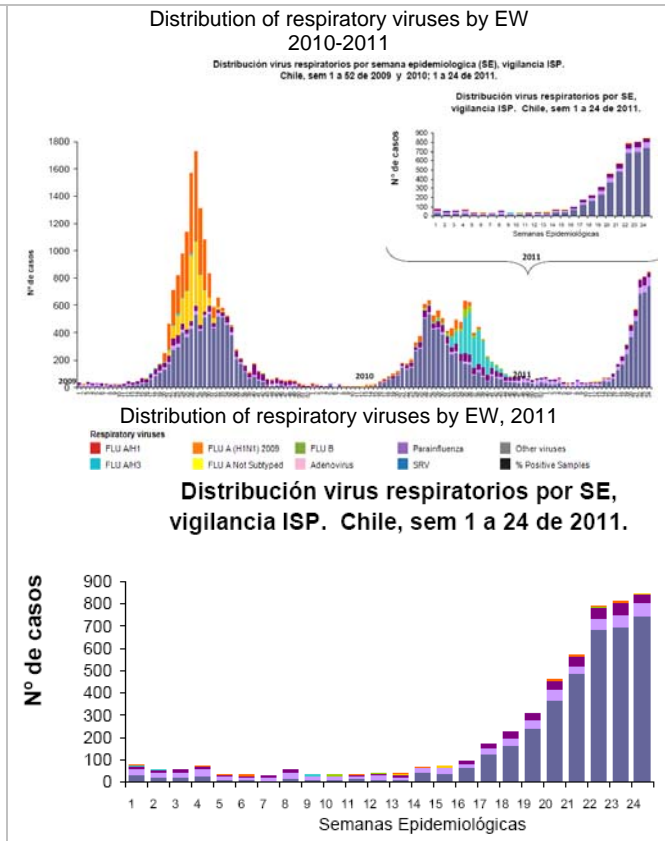
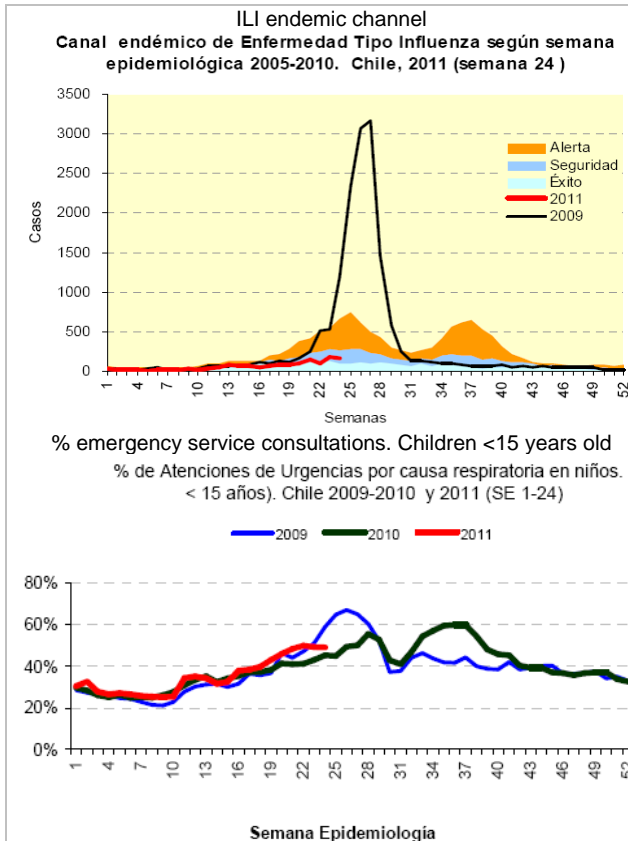


South America – Southern Cone

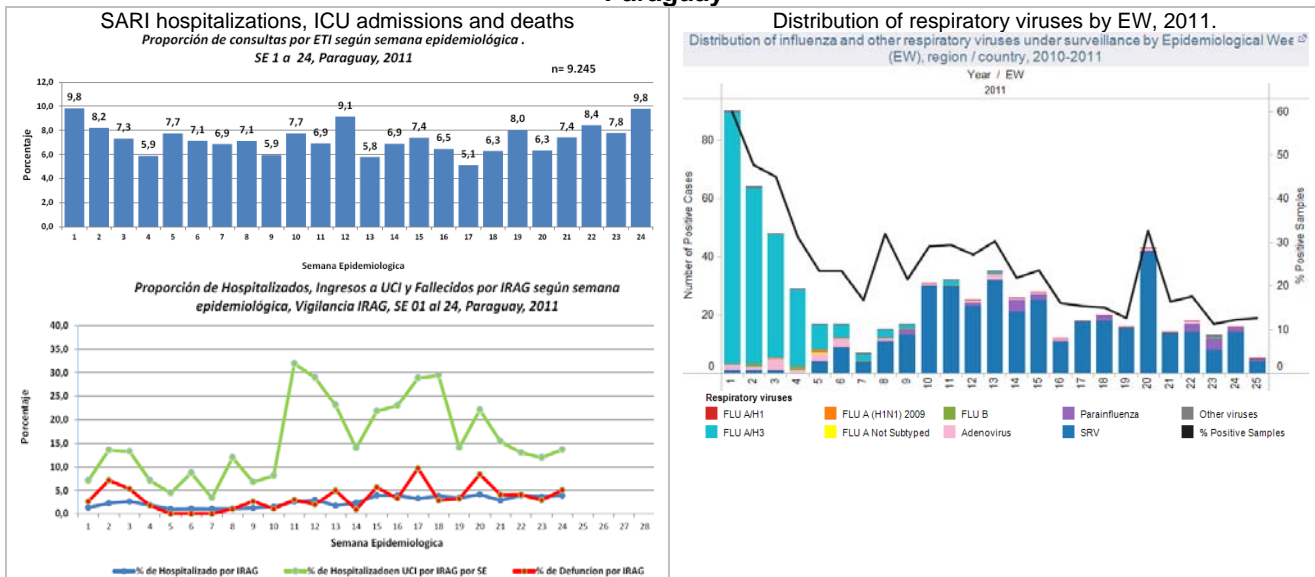
Argentina



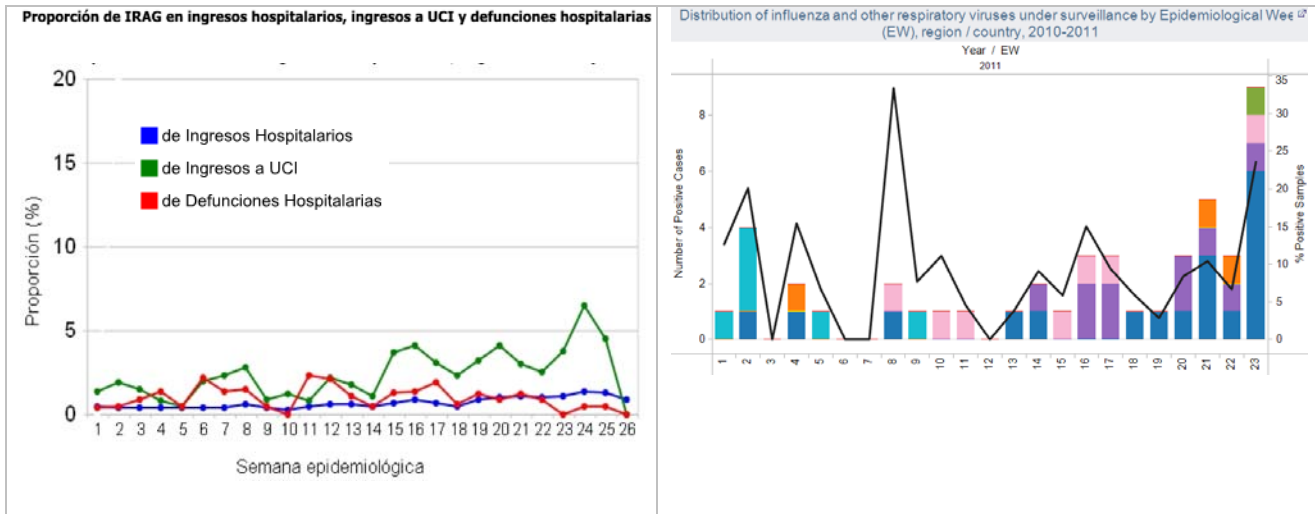
Chile



Paraguay



Uruguay



¹ FluWatch Report. EWs 23-24. <http://www.phac-aspc.gc.ca/fluwatch/>

² USA. Surveillance Summary. Week 24. Centers for Disease Control and Prevention

³ Honduras. Vigilancia centinela de Tegucigalpa y San Pedro Sula. SE 24.

⁴ Informe de Fase inicial del Proyecto de Vigilancia Nacional Intensificada de Colombia. Participantes: Secretaria Distrital de Salud de Bogotá, Instituto Nacional de Salud y 5 hospitales de Bogotá.

⁵ Perú. Sala de Situación de Salud. SE 23. Ministerio de Salud. Dirección General de Epidemiología

⁶ Venezuela. Boletín epidemiológico - SE 23. Ministerio del Poder Popular para la Salud.

⁷ Chile. Informe de situación. SE 24. www.pandemia.cl

⁸ Paraguay. Boletín epidemiológico semanal. SE 24. Ministerio de Salud Pública y Bienestar Social

⁹ Uruguay. Dirección General de la Salud. Epidemiología. <https://trantor.msp.gub.uy/epidemiologia/servlet/iraggrafmenu>