



The information contained within this update is obtained from data provided by Ministries of Health of Member States and National Influenza Centers through reports sent to Pan American Health Organization (PAHO) or updates on their web pages.

## **I- Evolution of the pandemic**

### ***North America***

In Canada, in EW 06 the national influenza-like illness (ILI) consultation rate was similar to the previous week and still below the historical average. No new hospitalizations or ICU admissions associated with the pandemic this week. A total of 13 oseltamivir-resistant isolates have been reported since April 2009.

In the United States, the proportion of outpatient consultations for ILI has remained below the national baseline for six consecutive weeks. Three of ten sub-national surveillance regions reported the proportion of outpatient visits for ILI to be above their region specific baseline. Laboratory-confirmed influenza hospitalization rates remained stable, but high, especially in children 0–4 years of age. The proportion of deaths attributed to pneumonia and influenza was below the epidemic threshold. A total of two influenza-associated pediatric deaths were reported. Both deaths were associated with the pandemic virus. A total of 60 oseltamivir-resistant isolates have been detected since April 2009.

### ***Caribbean***

Dominica and Saint Lucia reported no influenza activity and decreasing or unchanging trends in acute respiratory disease. These countries reported low/moderate intensity of acute respiratory disease and low impact of acute respiratory disease on health care services.

### ***Central America***

Nicaragua reported regional influenza activity while Guatemala and El Salvador reported no influenza activity. These countries reported decreasing or unchanging trends in acute respiratory diseases, except Nicaragua which reported an increasing trend. Guatemala reported high intensity and moderate impact of acute respiratory disease on the health care services. The rest of these countries reported low/moderate intensity and low impact on health care services.

### **Weekly Summary**

- In North America, acute respiratory disease activity remained stable and is lower than expected in most areas
- In the Caribbean, trends in acute respiratory disease were decreasing or unchanged
- In Central America, these countries reported decreasing or unchanged trends except Nicaragua which reported increasing trend in acute respiratory disease.
- South American countries reported decreasing or unchanged trends of acute respiratory disease except Peru which reported increasing trend
- In North America, a median of 87.3% of subtyped influenza A viruses were pandemic (H1N1) 2009
- 51 new confirmed deaths in 5 countries were reported; in total there have been 7,484 cumulative confirmed deaths

## ***South America***

### **Andean**

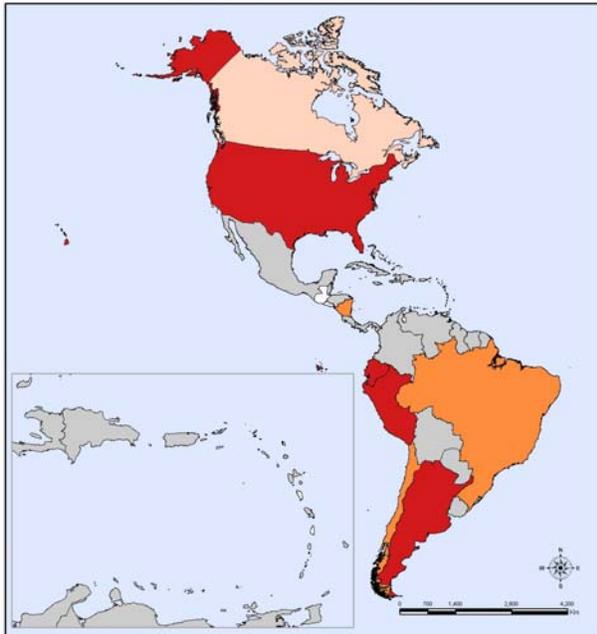
Peru and Ecuador reported widespread influenza activity. Ecuador reported unchanged trends while Peru reported an increasing trend in acute respiratory disease. Low/moderate intensity of acute respiratory disease and low impact of acute respiratory disease on health care services were reported by these countries.

### **Southern Cone**

Influenza activity was reported as widespread in Argentina and regional in Brazil and Chile. The trends of acute respiratory disease were reported as unchanged in these countries. These countries reported low/moderate intensity and low impact on health care services.

Argentina reported a low incidence of ILI this week (less than 0.5 per 100,000 population).

**Map 1. Pandemic (H1N1) 2009, Geographical Spread by Country. Americas Region. EW 6, 2010\*.**



**Geographical Spread**

- No activity
- No information available
- Localized
- Regional
- Widespread

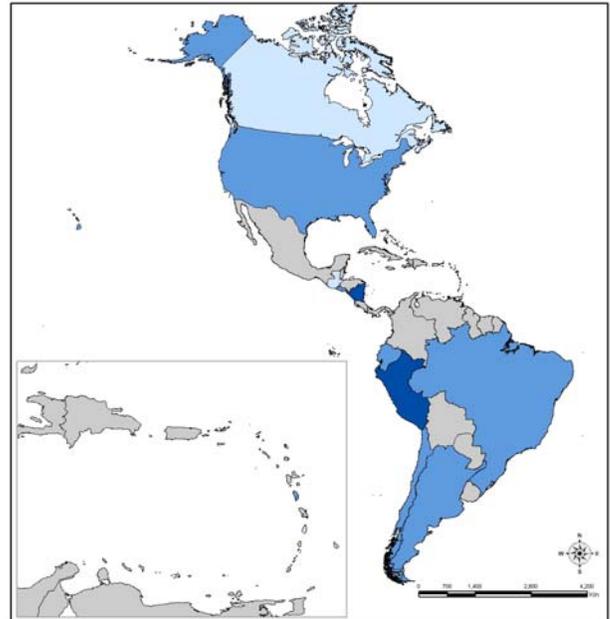
Map Production: PAHO/HS/DCD  
February 19, 2010

Cartographic projection:  
Lambert Equal Area Azimuthal  
Central Meridian: -90.00000  
Latitude of Origin: 10.00000

Source: Ministries of Health of the countries  
Consolidated by PAHO/WHO  
Created by PAHO/WHO

\* EW 6 = epidemiological week from February 7 to February 13, 2010.  
Includes the latest information reported by each country this week.

**Map 2. Pandemic (H1N1) 2009, Trend of respiratory disease activity compared to the previous week. Americas Region. EW 6, 2010\*.**



**Trend**

- No information available
- Decreasing
- Unchanged
- Increasing

Map Production: PAHO/HS/DCD  
February 19, 2010

Cartographic projection:  
Lambert Equal Area Azimuthal  
Central Meridian: -90.00000  
Latitude of Origin: 10.00000

Source: Ministries of Health of the countries  
Consolidated by PAHO/WHO  
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\* EW 6 = epidemiological week from February 7 to February 13, 2010.  
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**Map 3. Pandemic (H1N1) 2009, Intensity of Acute Respiratory Disease in the Population. Americas Region. EW 6, 2010\*.**



**Intensity of acute respiratory disease**

- No information available
- Low or moderate
- High
- Very high

Map Production: PAHO/HS/DCD  
February 19, 2010

Cartographic projection:  
Lambert Equal Area Azimuthal  
Central Meridian: -90.00000  
Latitude of Origin: 10.00000

Source: Ministries of Health of the countries  
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Created by PAHO/WHO

\* EW 6 = epidemiological week from February 7 to February 13, 2010.  
Includes the latest information reported by each country this week.

**Map 4. Pandemic (H1N1) 2009, Impact of Acute Respiratory Disease on Health-Care Services. Americas Region. EW 6, 2010\*.**



**Impact on health-care services**

- No information available
- Low
- Moderate
- Severe

Map Production: PAHO/HS/DCD  
February 19, 2010

Cartographic projection:  
Lambert Equal Area Azimuthal  
Central Meridian: -90.00000  
Latitude of Origin: 10.00000

Source: Ministries of Health of the countries  
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## II- Description of hospitalizations and deaths among confirmed cases of pandemic (H1N1) 2009

A table containing the number of deaths reported to PAHO is included in Annex 2.

The ratio of males to females among hospitalized cases was approximately one (Table 1). Hospitalizations were highest in children and young adults. Underlying comorbidities were present in approximately 55% of hospitalized cases.

**Table 1: Description of hospitalizations and severe cases—selected countries**

	Argentina	Canada
<b>Reporting period</b>	Until EW 5	April 12, 2009–February 13, 2010
<b>Type of cases reported</b>	Hospitalized	Hospitalized, confirmed
<b>Number of cases</b>	14,136	8,162
<b>Percentage of women</b>	-	50
<b>Age</b>	Most affected age group: 0–4 years (incidence 76.4/ 100,000 population)	Median 29 years
<b>Percent with underlying co-morbidities</b>	-	55.1
<b>Co-morbidities most frequently reported (%)</b>	-	
<b>Percent pregnant among women of child-bearing age</b>	-	20.4*

\* Percent of pregnant women among women 15 to 44 years of age

Overall, approximately half of deceased cases were among women (Table 2). The percentage of cases with underlying co-morbidities varied from 60 to 82%.

**Table 2: Description of deaths among confirmed cases of pandemic (H1N1) 2009 in selected countries**

	Argentina	Canada	Mexico	Peru
<b>Reporting period</b>	Until EW 5	April 12, 2009– February 13, 2010	Until February 17, 2010	Until February 15, 2010
<b>Number of confirmed deaths</b>	626	423	1,052	215
<b>Percentage of women</b>	No gender differences	49.6	48.6	48
<b>Age</b>	Highest rate in 50–59 year age group	Median 53 years	Highest percentage (69.6%) in 20–54 year age group	Highest percentage (60.9%) in 20–59 year age group
<b>Percent with underlying co-morbidities</b>	-	81.9	59.6	77.2
<b>Co-morbidities most frequently reported (%)</b>	-	-	-	Metabolic (28.9) Cardiovascular (24.7) Respiratory (15.8)
<b>Percent pregnant among women of child-bearing age</b>	-	8*	-	7.9**

\* Percent of pregnant women among women 15 to 44 years of age

\*\* The denominator used was all deaths as information was not provided about women of child-bearing age

### III- Viral circulation

For the purpose of this analysis, only countries which reported data on influenza A subtypes were considered. We excluded from the calculations of the percentages, results from samples of influenza A that were not subtyped or were unsubtypeable.

Currently, in North America, pandemic (H1N1) 2009 continues to predominate among circulating subtyped influenza A viruses in the Region (Table 3).

**Table 3: Relative circulation of pandemic (H1N1) 2009 for selected countries—last EW available**

Country	Epidemiologic Week	Percentage of pandemic (H1N1) 2009*
Canada	06	75**
USA	06	100
<b>MEDIAN percentage pandemic (H1N1) 2009</b>		<b>87.3</b>

\*Percentage of pandemic (H1N1) 2009 virus = Pandemic (H1N1) 2009 virus / All subtyped influenza A viruses

\*\* 3 samples were positive for pandemic (H1N1) 2009 virus and one sample was positive for seasonal flu.

**Table 4: Cumulative relative circulation of pandemic (H1N1) 2009 for selected countries**

Country	Epidemiologic Week	Percentage of pandemic (H1N1) 2009*
Canada	August 30, 2009– February 13, 2010	99.8
<b>MEDIAN percentage pandemic (H1N1) 2009</b>		<b>99.8</b>

\*Percentage of pandemic (H1N1) 2009 virus = Pandemic (H1N1) 2009 virus / All subtyped influenza A viruses

**Annex 1: Weekly monitoring of pandemic epidemiological indicators for countries that provided updated information—Region of the Americas, Epidemiologic Week 06, 2010**

Country	Geographic spread	Trend	Intensity	Impact on Health Care Services	EW
Antigua and Barbuda					
Argentina	Widespread	Unchanged	Low or moderate	Low	5
Bahamas					
Barbados					
Belize					
Bolivia					
Brazil	Regional	Unchanged	Low or moderate	Low	6
Canada	Localized	Decreasing	Low or moderate	NIA	6
Chile	Regional	Unchanged	Low or moderate	Low	6
Colombia					
Costa Rica					
Cuba					
Dominica	No activity	Unchanged	Low or moderate	Low	6
Dominican Republic					
Ecuador	Widespread	Unchanged	Low or moderate	Low	6
El Salvador	No activity	Unchanged	Low or moderate	Low	6
Grenada					
Guatemala	No activity	Decreasing	High	Moderate	6
Guyana					
Haiti					
Honduras					
Jamaica					
Mexico					
Nicaragua	Regional	Increasing	Low or moderate	Low	6
Panama					
Paraguay					
Peru	Widespread	Increasing	Low or moderate	Low	6
Saint Kitts and Nevis					
Saint Lucia	No activity	Decreasing	Low or moderate	Low	6
Saint Vincent and the Grenadines					
Suriname					
Trinidad and Tobago					
United States of America	Widespread	Unchanged	Low or moderate	low	6
Uruguay					
Venezuela					

NIA: No information Available

**Annex 2: Number of deaths confirmed for the pandemic (H1N1) 2009 virus  
Region of the Americas. Updated as of February 19, 2010 (17 h GMT; 12 h EST).**

*Source:* Ministries of Health of the countries in the Region.

Country	Cumulative number of deaths	New deaths (since Feb 12, 2010, 12 h EST)
<b>Southern Cone</b>		
Argentina	626	0
Brazil	1,632	
Chile	155	
Paraguay	47	
Uruguay	20	
<b>Andean Area</b>		
Bolivia	59	0
Colombia	205	
Ecuador	120	0
Peru	215	3
Venezuela	133	
<b>Caribbean Countries</b>		
Antigua & Barbuda	0	
Bahamas	1	
Barbados	3	
Cuba	53	
Dominica	0	
Dominican Republic	23	
Grenada	0	
Guyana	0	
Haiti	0	
Jamaica	7	
Saint Kitts & Nevis	2	
Saint Lucia	1	
Saint Vincent & Grenadines	0	
Suriname	2	
Trinidad & Tobago	5	
<b>Central America</b>		
Belize	0	
Costa Rica	47	
El Salvador	33	0
Guatemala	18	0
Honduras	16	0
Nicaragua	11	0
Panama	12	1
<b>North America</b>		
Canada	427	1
Mexico	1,052	17
United States	2,559	29
<b>TOTAL</b>	<b>7,484</b>	<b>51</b>

As of **19 February, 2010**, a total of **7,484 deaths** have been reported among the confirmed cases in **28 countries** of the Region.

In addition to the figures displayed in **Annex 2**, the following overseas territories have confirmed deaths of pandemic (H1N1) 2009: United Kingdom Overseas Territories; Cayman Islands (1 death); French Overseas Communities: Guadeloupe (5 deaths), French Guiana (1 death) and Martinique (1 death).