# **Regional Update EW 42**



(November 2, 2011 - 17 h GMT; 12 h EST)

PAHO interactive influenza data: http://ais.paho.org/phip/viz/ed\_flu.asp Influenza Regional Reports: 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.
- In Central America and the Caribbean, the predominance of respiratory syncytial virus (RSV) continued (Costa Rica, Guatemala, Honduras, Cuba and Dominican Republic). Among influenza viruses, circulation of influenza A(H1N1)pmd09 (Nicaragua, Jamaica and Panama) and influenza A/H3N2 (Honduras and Nicaragua) were reported.
- In the Southern Cone, influenza activity remains low. Co-circulation of influenza A(H1N1)pmd09, influenza A/H3 and influenza B was reported.

### Epidemiologic and virologic influenza update

### North America

In Canada<sup>1</sup>, in epidemiological week (EW) 42, influenza activity continued at inter-seasonal levels. Influenzalike Illness (ILI) consultation rates were 13.8 per 1,000 consultations; remaining below the expected levels for this time of year. Compared to other age groups, a higher ILI consultation rate was observed among children between 5 and 19 years of age in EW 42. Few influenza detections were reported in EW 42, and the percentage of samples positive for influenza was less than 1%, as was observed in previous EWs. The influenza viruses detected were influenza A/H3N2 and unsubtyped influenza A.

In the United States<sup>2</sup>, in EW 42, at the national level, the proportion of ILI consultations (1.1%) remained below the national baseline (2.4%). The proportion of deaths attributed to pneumonia and influenza for EW 42 (6.2%) was lower than the epidemic threshold for this time of year (6.7%). In this week, no pediatric deaths associated with influenza were reported. Among all samples tested (n=1,479), during EW 42, the percentage of samples positive for influenza continued to remain low (<1%), with sporadic detections of unsubtyped influenza A, influenza A/H3 and influenza B.

In Mexico, in EW 42, according to laboratory data, of total samples received (n=64), the percent positivity was <2%, with only one detection of influenza A/H3.

#### Caribbean

CAREC\*, in EW 42, received epidemiological information from Barbados, Jamaica and Tobago. The proportion of admissions for Severe Acute Respiratory Infection (SARI) among all hospitalizations (3.3%) diminished compared to the previous week (4.9%). Children less <6 months had the highest percentage of SARI hospitalizations (6%). The majority of cases in infants <6 months of age (n=7) are from one sentinel hospital in Jamaica, where laboratory studies are pending. No SARI deaths have been reported since EW 38. According to laboratory data, no samples positive for respiratory viruses were detected since EW 40. The viruses detected in the past weeks were RSV and influenza A/(H3N2).

In Jamaica, in EW 42, the proportion of consultations for Acute Respiratory Illness (ARI) was 4.9%, which was lower than the previous week. The proportion of SARI admissions was <2% and slightly lower than the

 $<sup>^</sup>st$  Includes Barbados, Dominica, Jamaica, St Vincents and the Grenadines, St Lucia, and Trinidad and Tobago

previous week. In EW 42, no SARI related deaths were reported. According to laboratory data, in EW 41 and 42, few influenza A(H1N1)pdm09 cases were detected.

In Cuba, according to laboratory data, in EW 42, among all samples tested (n=108), ~60% were positive for respiratory viruses and ~2% of all samples tested were positive for influenza; both percentages were similar to the previous week. According to laboratory data, in EW 42, RSV continues to be the predominant virus. Concerning influenza viruses, influenza A/H3 was the primary virus in circulation, with a decreasing trend since its peak in EW 37.

In the Dominican Republic, according to laboratory data, in EW 43, among all samples tested (n=21), the percentage of samples positive for respiratory viruses was 29%, slightly higher than the previous week. The primary virus in circulation was RSV.

### Central America

In Costa Rica, in EW 43, among all samples tested (n=155), the percentage of samples positive for respiratory viruses (53%) remained similar to the previous week. RSV has been the predominant virus since EW 28, followed by parainfluenza which has been consistently detected in the last 4 weeks. Among the influenza viruses in EWs 42 and 43, few influenza A(H1N1)pmd09 and influenza A/H3 cases have been detected.

In Guatemala, in EW 42, according to laboratory data, of all samples tested (n=11), the percentage of samples positive for respiratory viruses remained at ~30%, and RSV was the primary virus detected, with a decreasing trend compared to the previous week. Recently, several, influenza B cases have been detected.

In Honduras<sup>3</sup>, in EW 41, the proportion of ILI consultations was slightly lower than the previous EW and below what was observed in 2010. The proportion of SARI hospitalizations (12%) has continued to increase since EW 37 and remained above that observed in 2010. No SARI related deaths were reported in EW 41. According to laboratory data, in EW 42, the percentage of samples positive for respiratory viruses remained at ~50%. RSV predominated in EWs 35-42. Concerning influenza viruses, influenza A/H3, influenza A(H1N1)pmd09 and influenza B circulated between EW 40-42.

In Nicaragua, a progressive increase of positive cases for influenza A(H1N1)pmd09 was reported from EW 37 (n=2 positive cases) to EW 42 (n=171 positive cases); with co-circulation of influenza A/H3 and RSV.

In Panama, in EW 42, several parainfluenza and influenza A(H1N1)pmd09 were detected.

### South America - Andean

In Bolivia<sup>4</sup>, through EW 41, at the national level, 629 cases of influenza A(H1N1) pmd09 were reported and overall has been trending downwards since peaking in EW 39 (n=321 cases). The cases were distributed primarily in Santa Cruz (n=652), followed by Cochabamba (n=67), Chuquisaca (n=58), La Paz (n=45) and Tarija (n=20). Low levels of influenza A/H3 and influenza B was detected. In the SARI surveillance, in La Paz<sup>5</sup>, the proportion of SARI hospitalizations, SARI ICU admissions and SARI deaths remained below 10%; mainly associated to influenza A(H1N1)pdm09 and influenza B.

In Colombia, according to the national laboratory<sup>6</sup>, in EW 41, influenza A/H3 virus co-circulated with influenza A(H1N1)pmd09.

In Ecuador, in EW 42, at the national level the percentage of SARI hospitalizations, SARI ICU admissions and SARI deaths remained below 15%. According to laboratory data, in EW 42, of all samples tested (n=52), the percentage of samples positive for respiratory viruses remained at ~10%. Among influenza viruses, a few positives cases of influenza A(H1N1)pmd09 have been reported in the last 4 weeks.

In Peru<sup>7</sup>, in EW 41, at the national level, the number of ARI and pneumonia cases in children less than 5 years of age remained similar to the previous week and has remained below expected levels for this time of year. Through EW 41 of 2011, 306 pneumonia deaths were reported in children less than 5 years of age, which represents 18% less than the average reported for the same period in the last three years (2008-2010).

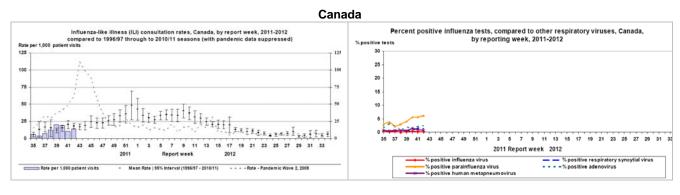
### South America - Southern Cone

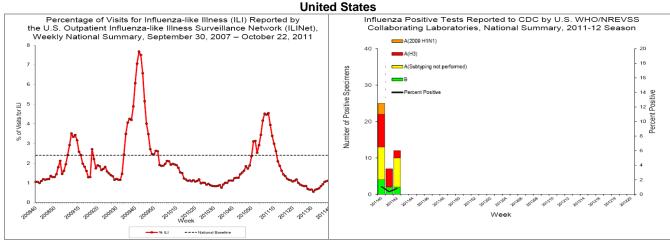
In Argentina, according to national laboratory data, in EW 42, among all samples tested (n=523), the percentage of samples positive for respiratory viruses was  $\sim$ 10%, with detection of parainfluenza, RSV and unsubtyped influenza A.

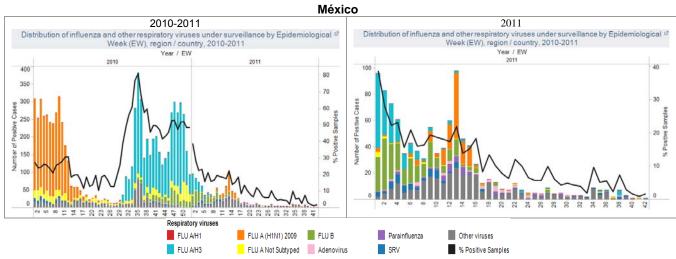
In Uruguay<sup>8</sup>, in EW 43, the proportion of SARI hospitalizations, ICU admissions and deaths remained <5%. These proportions have continued to decrease trend since peaking in EW 31.

## **Graphs**

## North America

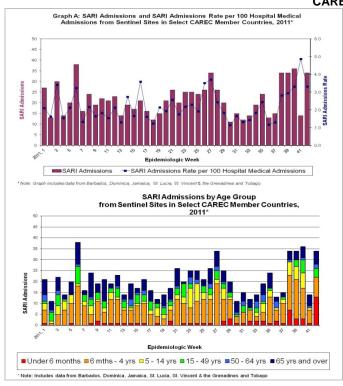


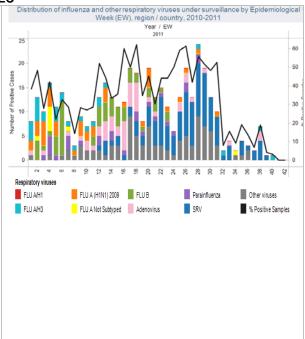




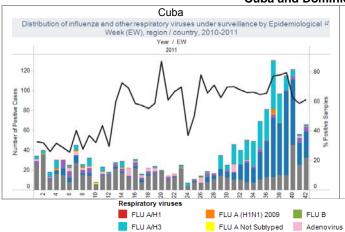
# Caribbean

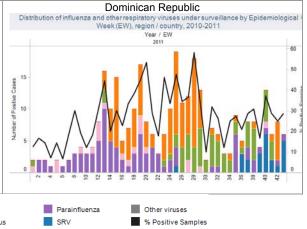
### **CAREC**



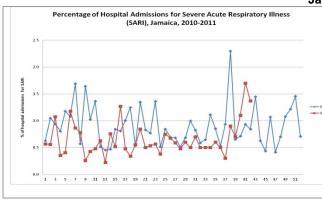


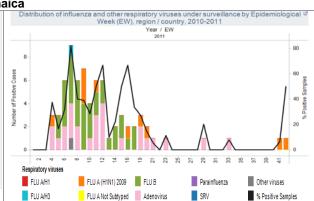
### **Cuba and Dominican Republic**



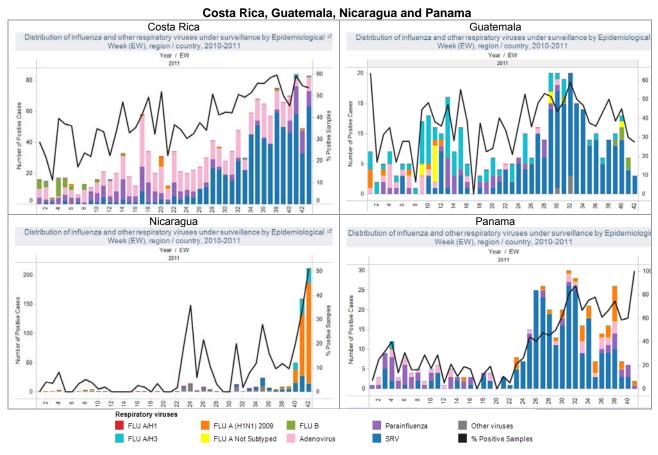


### Jamaica

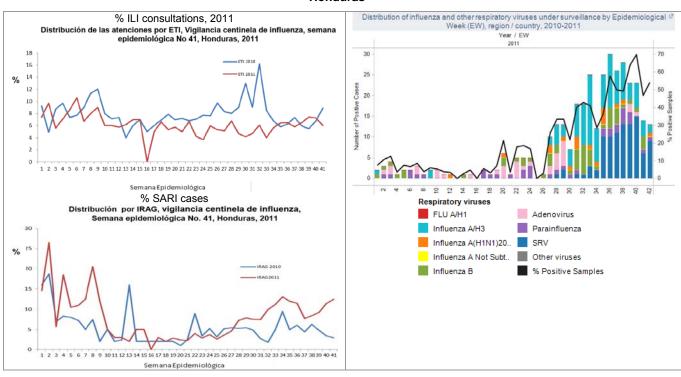




## Central America

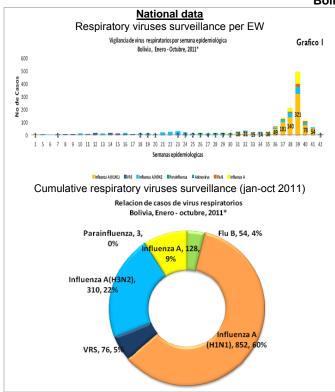


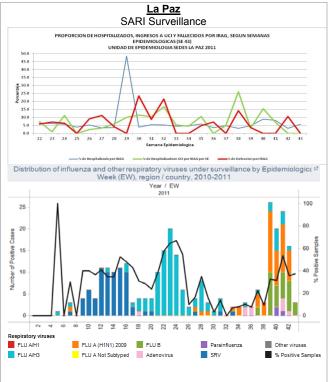




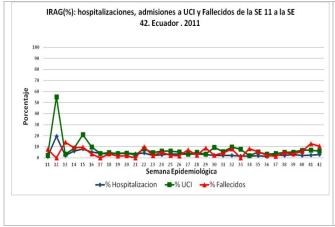
## South America - Andean

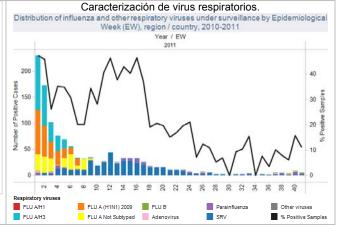




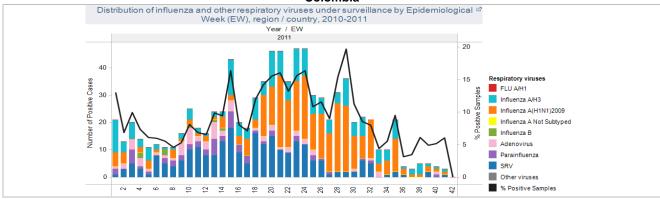


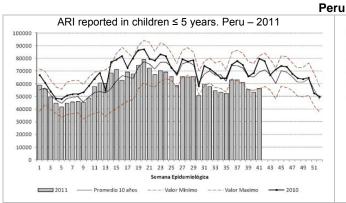
### **Ecuador**

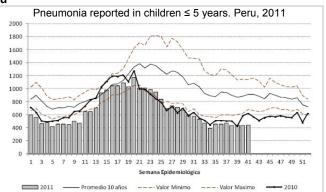




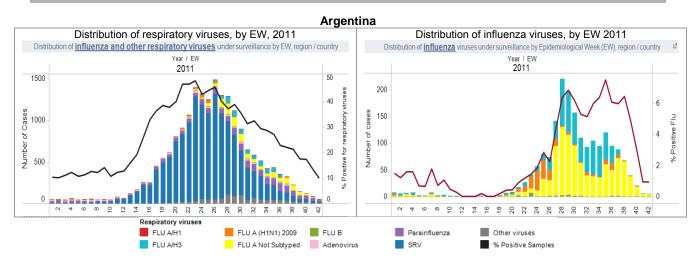
#### Colombia

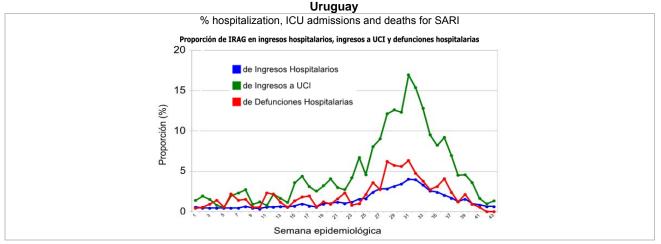






## South America - Southern Cone





<sup>&</sup>lt;sup>1</sup> FluWatch Report. EWs 42. http://www.phac-aspc.gc.ca/fluwatch/

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

<sup>&</sup>lt;sup>2</sup> US Surveillance Summary. Week 42. Centers for Disease Control and Prevention

<sup>&</sup>lt;sup>3</sup> Honduras. Vigilancia centinela de Tegucigalpa y San Pedro Sula. SE 42

<sup>&</sup>lt;sup>4</sup> Bolivia. Ministerio de Salud y Deportes. Parte Epidemiológico. No. 129. 20 de Octubre 2011.

<sup>&</sup>lt;sup>5</sup> Bolivia SEDES La Paz. Vigilancia Nacional Intensificada de IRAG

<sup>&</sup>lt;sup>6</sup> Colombia. Instituto Nacional de Salud.

<sup>&</sup>lt;sup>7</sup> Perú. Sala de Situación de Salud. SE 41. Ministerio de Salud. Dirección General de Epidemiología.

<sup>&</sup>lt;sup>8</sup> Uruguay. Dirección General de la Salud. División Epidemiología. SE 43. Available at: