



## Regional Update Pandemic (H1N1) 2009

(September 18, 2009 - 22 h GMT; 17 h EST)

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### Update on the Qualitative Indicators

For Epidemiological Week 36 (EW 36), from 6 September to 12 September, 17 countries reported updated information to the Pan American Health Organization (PAHO) regarding the qualitative indicators to monitor pandemic (H1N1) 2009 (Table 1). Only those 17 countries were included in this analysis.

Presently, 15 countries in the Region report having widespread geographical distribution of influenza virus. Brazil continues to report Regional activity and Dominica continues to report no activity (Map 1).

Honduras, Mexico, Peru, and the United States are the only countries reporting an increasing trend of respiratory disease and this represents change in these countries from last week. Argentina, Bolivia, Brazil, Costa Rica, El Salvador, Panama, and Venezuela, reported a decreasing trend. The other six countries reported an unchanged trend (Map 2).

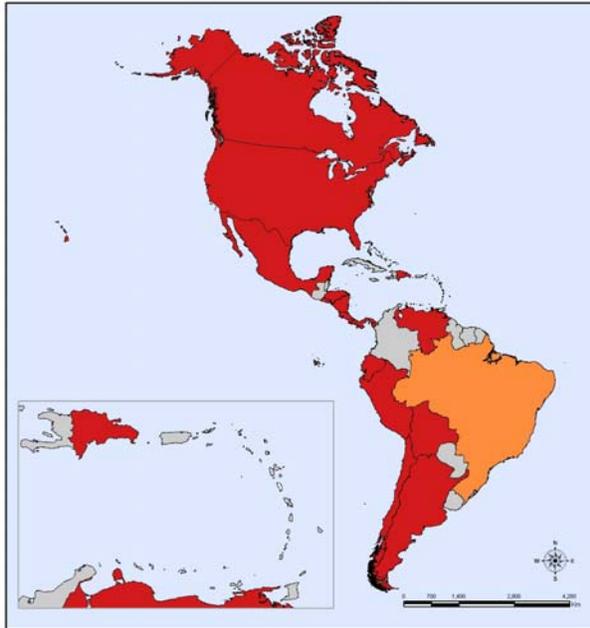
Regarding the intensity of acute respiratory disease, Bolivia, El Salvador, and Mexico reported high intensity of acute respiratory disease. The remaining 14 countries reported low or moderate intensity (Map 3).

Eight countries (Bolivia, Brazil, Costa Rica, Ecuador, El Salvador, Mexico, United States, and Venezuela) reported moderate impact on health care services, while 8 countries reported low impact (Map 4).

In North America, Mexico and the United States are reporting widespread activity, increasing trend in respiratory disease activity, and moderate impact on healthcare services.

The World Health Organization (WHO) does not recommend any travel restrictions or border closings due to pandemic (H1N1) 2009.

**Map 1. Pandemic (H1N1) 2009, Geographical Spread by Country. Americas Region. EW 36\*.**



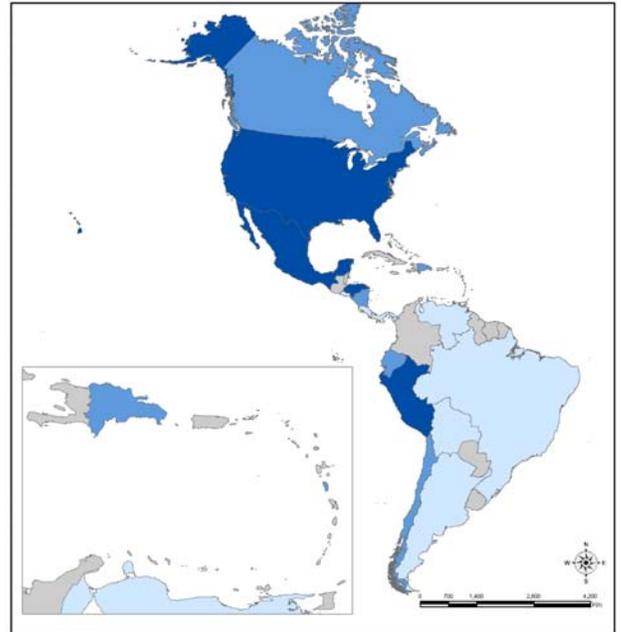
**Geographical Spread**

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

Map Production:  
HSD/CDC  
September 17th, 2009  
Cartographic projection:  
Lambert Equal Area Azimuthal  
Source: Ministries of Health of the countries  
Consolidated by PAHO/WHO  
Created by PAHO/WHO

\* EW 36 = epidemiological week from September 6th to September 12th 2009. 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 36\*.**



**Trend**

- No information available
- Decreasing
- Unchanged
- Increasing

Map Production:  
HSD/CDC  
September 17th, 2009  
Cartographic projection:  
Lambert Equal Area Azimuthal  
Source: Ministries of Health of the countries  
Consolidated by PAHO/WHO  
Created by PAHO/WHO

\* EW 36 = epidemiological week from September 6th to September 12th 2009. Includes the latest information reported by each country this week.

**Map 3. Pandemic (H1N1) 2009, Intensity of Acute Respiratory Disease in the Population. Americas Region. EW 36\*.**



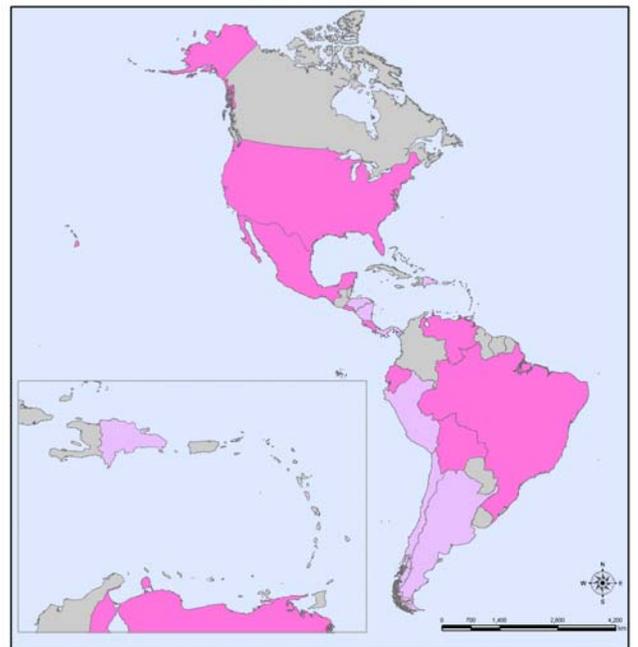
**Intensity of acute respiratory disease**

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

Map Production:  
HSD/CDC  
September 17th, 2009  
Cartographic projection:  
Lambert Equal Area Azimuthal  
Source: Ministries of Health of the countries  
Consolidated by PAHO/WHO  
Created by PAHO/WHO

\* EW 36 = epidemiological week from September 6th to September 12th 2009. 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 36\*.**



**Impact on health-care services**

- No information available
- Low
- Moderate
- Severe

Map Production:  
HSD/CDC  
September 17th, 2009  
Cartographic projection:  
Lambert Equal Area Azimuthal  
Source: Ministries of Health of the countries  
Consolidated by PAHO/WHO  
Created by PAHO/WHO

\* EW 36 = epidemiological week from September 6th to September 12th 2009. Includes the latest information reported by each country this week.

Table 1: Weekly monitoring of qualitative indicators for Pandemic (H1N1) 2009.  
Last epidemiologic week available. Americas Region.

Country	Geographic spread	Trend	Intensity	Impact on Health Care Services	EW
Antigua and Barbuda					
Argentina	Widespread	Decreasing	Low or moderate	Low	34
Bahamas					
Barbados					
Belize					
Bolivia	Widespread	Decreasing	High	Moderate	36
Brazil	Regional	Decreasing	Low or moderate	Moderate	36
Canada	Widespread	Unchanged	Low or moderate	NIA	36
Chile	Widespread	Unchanged	Low or moderate	Low	36
Colombia					
Costa Rica	Widespread	Decreasing	Low or moderate	Moderate	36
Cuba					
Dominica	No activity	Unchanged	Low or moderate	Low	36
Dominican Republic	Widespread	Unchanged	Low or moderate	Low	36
Ecuador	Widespread	Unchanged	Low or moderate	Moderate	36
El Salvador	Widespread	Decreasing	High	Moderate	36
Grenada					
Guatemala					
Guyana					
Haiti					
Honduras	Widespread	Increasing	Low or moderate	Low	35
Jamaica					
Mexico	Widespread	Increasing	High	Moderate	36
Nicaragua	Widespread	Unchanged	Low or moderate	Low	36
Panama	Widespread	Decreasing	Low or moderate	Low	36
Paraguay					
Peru	Widespread	Increasing	Low or moderate	Low	36
Saint Kitts and Nevis					
Saint Lucia					
Saint Vincent and the Grenadines					
Suriname					
Trinidad and Tobago					
United States of America	Widespread	Increasing	Low or moderate	Moderate	35
Puerto Rico (U.S.)					
Virgin Islands (U.S.)					
Uruguay					
Venezuela	Widespread	Decreasing	Low or moderate	Moderate	36

NIA = No information available

Source: Ministries of Health of the countries in the Region

## Update on the number of cases and deaths

As of 18<sup>th</sup> September 2009, a total of **130,448 confirmed cases** have been notified in all **35 countries** in the Americas Region. A total of **2,948 deaths** have been reported among the confirmed cases in **22 countries** of the Region (Table 2). One new death has also been reported in Martinique.

In addition to the figures displayed in Table 2, the following overseas territories have confirmed cases of pandemic (H1N1) 2009: American Samoa, U.S. Territory (8); Guam, U.S. Territory (1); Puerto Rico, U.S. Territory (20); Virgin Islands, U.S. Territory (49); Bermuda, UK Overseas Territory (1); Cayman Islands, UK Overseas Territory (14); British Virgin Islands, UK Overseas Territory (2); Turks and Caicos Islands (3); Martinique, French Overseas Community (44, 1 death); Guadeloupe, French

Overseas Community (27); Guyane, French Overseas Community (29); Saint-Martin, French Overseas Community (16); Saint Bartholomew; French Overseas Community (2); Netherlands Antilles, Aruba (13); Netherlands Antilles, Bonaire (29); Netherlands Antilles, Curacao (46)\*; Netherlands Antilles, St. Eustatius (1); and Netherlands Antilles, St. Maarten (22).

\* Three cases were reported on a cruise-ship.

The distribution of cases and deaths at the first sub-national level can be found in the interactive map available through the following link: <http://new.paho.org/hq/images/atlas/en/atlas.html>

Table 2: Number of cases and deaths confirmed for the Pandemic (H1N1) 2009 virus Region of the Americas. Updated as of 18<sup>th</sup> September 2009, (17 h GMT; 12 h EST).

Country	Number of confirmed cases	Number of deaths	New cases (since Sept 11)	New deaths (since Sept 11)
Antigua & Barbuda	3	0	0	0
Argentina	8,851	514	467	2
Bahamas	23	0	0	0
Barbados	73	0	0	0
Belize	23	0	0	0
Bolivia	1,766	35	114	0
Brazil***	9,249	899	2,657	242
Canada*	10,156	74	0	0
Chile**	12,247	132	42	0
Colombia	1,090	65	325	20
Costa Rica	1,315	37	69	4
Cuba	404	0	0	0
Dominica	2	0	0	0
Dominican Republic	405	21	7	4
Ecuador	1,628	49	53	5
El Salvador	744	17	0	0
Grenada	3	0	0	0
Guatemala	751	13	0	0
Guyana	7	0	0	0
Haiti	5	0	0	0
Honduras	459	14	15	2
Jamaica	89	4	0	0
Mexico	24,686	215	1,441	6
Nicaragua	1,841	7	492	1
Panama	713	10	0	0
Paraguay	523	42	43	1
Peru	7,686	121	374	12
Saint Kitts & Nevis	6	1	0	0
Saint Lucia	13	0	0	0
Saint Vincent & Grenadines	2	0	0	0
Suriname	11	0	0	0
Trinidad & Tobago	97	0	0	0
United States of America*	43,771	593	0	0
Uruguay*	550	20	0	0
Venezuela	1,256	65	130	11
<b>TOTAL</b>	<b>130,448</b>	<b>2,948</b>	<b>6,229</b>	<b>310</b>

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

\*This country no longer updates on the total number of confirmed cases; only on the number of deaths.

\*\*There are 362.404 cases compatible with the case definition; of those, 12.247 have been confirmed for the pandemic (H1N1) 2009 virus.

\*\*\*Brazil reports the number of cases of pandemic (H1N1) 2009 among cases of severe acute respiratory infections (SRAG).

## Update on the Virological Situation

Virological data obtained from Ministry of Health websites, Ministry of Health reports sent to PAHO, and notifications from National Influenza Centers (NIC) are provided in Table 3. 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.

In this table, we see that in these countries, for either week 35 or 36, the majority (median: 95.2%, range: 87.5%-97.2%) of circulating subtyped influenza A viruses were pandemic (H1N1) 2009.

Table 3: Relative circulation of pandemic (H1N1) 2009 for selected countries

Country	Epidemiological Week	%	Pandemic (H1N1) 2009
			All subtyped influenza A
Canada	35		96.80%
Chile	36		87.50%
Colombia	35		95.20%
Dominican Republic	36		88.00%
United States of America	35		97.20%
<b>MEDIAN</b>			<b>95.20%</b>

*Source:* Ministries of Health and National Influenza Centers of the countries of the Region.

## Update on Antiviral Susceptibility

Influenza virus antiviral susceptibility testing is done routinely as part of the surveillance activities carried out by the WHO collaborating center for Surveillance, Epidemiology & Control of Influenza at the U.S. Centers for Disease Control and Prevention. Susceptibility to neuraminidase inhibitors is carried out for the neuraminidase inhibition assay and resistant viruses are sequenced to determine the presence of molecular markers of resistance. The susceptibility to adamantanes is carried out by determining the presence of molecular markers of resistance.

There are no updates to report this week for antiviral susceptibility testing in Latin America and the Caribbean.

The United States and Canada reported, as of September 5, 2009, nine and one oseltamivir-resistant pandemic (H1N1) 2009 cases, respectively.

## Annex 1: Qualitative indicators for the monitoring of pandemic (H1N1) 2009

<b>Geographical spread:</b> refers to the number and distribution of sites reporting influenza activity.	
<b>No activity:</b>	No laboratory confirmed case(s) of influenza, or evidence of increased or unusual respiratory disease activity.
<b>Localized:</b>	Limited to one administrative unit of the country (or reporting site) only.
<b>Regional:</b>	Appearing in multiple but <50% of the administrative units of the country (or reporting sites).
<b>Widespread:</b>	Appearing in ≥50% of the administrative units of the country (or reporting sites).
<b>No information available:</b>	No information available for the previous 1 week period.
<b>Trend of respiratory disease activity compared to the previous week:</b> refers to changes in the level of respiratory disease activity compared with the previous week.	
<b>Increasing:</b>	Evidence that the level of respiratory disease activity is increasing compared with the previous week.
<b>Unchanged:</b>	Evidence that the level of respiratory disease activity is unchanged compared with the previous week.
<b>Decreasing:</b>	Evidence that the level of respiratory disease activity is decreasing compared with the previous week.
<b>No information available.</b>	
<b>Intensity of Acute Respiratory Disease in the Population:</b> is an estimate of the proportion of the population with acute respiratory disease, covering the spectrum of disease from influenza-like illness to pneumonia.	
<b>Low or moderate:</b>	A normal or slightly increased proportion of the population is currently affected by respiratory illness.
<b>High:</b>	A large proportion of the population is currently affected by respiratory illness.
<b>Very high:</b>	A very large proportion of the population is currently affected by respiratory illness.
<b>No information available.</b>	
<b>Impact on Health-Care Services:</b> refers to the degree of disruption of health-care services as a result of acute respiratory disease.	
<b>Low:</b>	Demands on health-care services are not above usual levels.
<b>Moderate:</b>	Demands on health-care services are above the usual demand levels but still below the maximum capacity of those services.
<b>Severe:</b>	Demands on health care services exceed the capacity of those services.
<b>No information available.</b>	

*Source: Updated interim WHO guidance on global surveillance of human infection with pandemic (H1N1) 2009 virus. 10 July 2009.*

The data and information in this report will be updated on a weekly basis and available at: [http://new.paho.org/hq/index.php?option=com\\_content&task=blogcategory&id=814&Itemid=1206](http://new.paho.org/hq/index.php?option=com_content&task=blogcategory&id=814&Itemid=1206)

This report was prepared based on the indicators in the document *Human infection with pandemic (H1N1) 2009 virus: updated interim WHO guidance on global surveillance* available at: ([http://www.who.int/csr/disease/swineflu/notes/h1n1\\_surveillance\\_20090710/en/index.html](http://www.who.int/csr/disease/swineflu/notes/h1n1_surveillance_20090710/en/index.html)).

The information presented herein has been obtained through the official sites of the Ministries of Health of the countries in the Region as well as official reports submitted by the International Health Regulation (2005) National Focal Points.