



## Regional Update EW 21

**Influenza**  
(June 7, 2011 - 17 h GMT; 12 h EST)

PAHO interactive influenza data: [http://ais.paho.org/phis/viz/ed\\_flu.asp](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](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, influenza activity shows the end of the influenza season in this region. Influenza detection in the laboratories is low and/or continues to decline.
- In Central America and the Caribbean, the activity of influenza remains at a low level. In most countries, in the last available week, there was no detection of influenza circulation, or low circulation was detected (influenza B in El Salvador; influenza A/H3 in Guatemala).
- In South America, although 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, some indicators of respiratory infection activity have increased, mainly in children less than 15 years old, with respiratory syncytial virus (RSV) as the predominant respiratory virus and sporadic detections of influenza.

### Epidemiologic and virologic influenza update

#### *North America*

In Mexico, in EW 21, no respiratory viruses were detected, in EWs 19-20, few positive samples for influenza B and other respiratory viruses were detected.

In the United States<sup>1</sup>, in EW 21, at the national level, the proportion of outpatient consultations for ILI (0.9%) remained below the national baseline. The proportion of deaths attributed to pneumonia and influenza was below its epidemic threshold. This week, one pediatric death was associated to influenza B. During EW 21, 1.1% (n=9) of samples tested were positive for influenza, detecting influenza B, influenza A/H3, influenza A/H1N1 2009 and influenza A unsubtype.

#### *Caribbean*

CAREC\*, in EW 21, the rate of SARI admissions was 1.3 per 100 medical admissions, similar to the previous week. No SARI deaths have been reported since week 17. In laboratory results, rhinovirus continues to be the primary virus in circulation. No influenza viruses were detected since EW 13.

In Cuba, in EW 21, among all samples tested, the percentage of positive samples for respiratory viruses decreased to ~60%; without positive samples for influenza. In EWs 19-20, influenza A/H3 was detected as the only circulating influenza virus. Among other respiratory viruses detected, the circulation of rhinovirus continued to be predominant this week.

In the Dominican Republic, in EW 22, among all samples tested, the percentage of positive samples for respiratory viruses decreased to ~20%. In EW 22, no influenza viruses were detected, after 9 weeks of persistent detection of influenza A/H1N1 2009. Among other respiratory viruses detected, parainfluenza continued to be predominant.

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

In Jamaica for EW 21, the proportion of Acute Respiratory Infection (ARI) consultations remained similar to the previous week (4.3%). The proportion of SARI admissions was less than 1% and remained stable compared to the previous week. In EW 21, one SARI death was reported. No influenza viruses were detected in EW 21, which represented a decrease compared to the previous week (7.1%)

### *Central America*

In Costa Rica, in EW 22, among all samples tested, the percentage of positive samples for respiratory viruses increased to ~30% from ~20% (EW 21); adenovirus was the primary respiratory virus in circulation. In EW 22 no influenza viruses were detected.

In El Salvador, since EW 13, influenza B was detected as the primary virus in circulation. Among other respiratory viruses, RSV is the primary virus in circulation, followed by parainfluenza.

In Honduras, in EW 20, few positive influenza samples to influenza B and influenza A/H1N1 2009 were detected. In EW 21, the percentage of positive samples to respiratory viruses diminished to ~5%, without positive samples to influenza. Among other respiratory viruses, adenovirus and parainfluenza were detected in the last weeks.

In Nicaragua and Panama, in EWs 20-21, no respiratory viruses were detected. No influenza viruses have been detected since EW 9 and 15, respectively.

### *South America – Andean*

In Bolivia, in the department of La Paz (west of the country), influenza A/H3N2 was detected as the only influenza virus between EWs 16-20. While in the department of Santa Cruz (east of the country), between EWs 19-21, the primary influenza virus detected was A/H1N1 2009 followed by influenza A/H3 cases.

In Colombia, according to the national laboratory, in EW 21, the predominance of influenza A/H3N2 and influenza A/H1N1 co-circulation continued among respiratory viruses. The percentage of positive samples to influenza (13%) showed an increasing trend in the last 6 weeks.

In Peru<sup>2</sup>, in EW 20, ARI and pneumonia activity indicators (number of ARI cases in less than 5 years old and number of children less than 5 years old with pneumonia, respectively) remained with an increasing trend since ~EW 10, but remained within the endemic threshold for this time of year. To date in 2011, 114 pneumonia deaths were reported in children less than 5 years old, which represents a lower recount than observed in 2008-2010, for this time of year; regionally during 2011 the highest recounts in children less than 5 years old were in Loreto (16), Puno (13), Lima (10), Amazonas (9) and Junin (9).

### *South America – Southern Cone*

In Chile<sup>3</sup>, in EW 21, the ILI activity (8.1 consultations per 100,000 inhabitants) continued to increase at the national level, which was slightly superior to the previous week (6.1 per 100,000 inhabitants) and remained within the expected levels for this time of year and lower than that observed during 2009 and 2010; whilst at the regional level, an increase in the notification of ILI cases was observed in Maule (associated with RSV), Puerto Montt and Concepcion. The percentage of emergency department admissions for respiratory cases in children less than 15 years old continued to increase to 48% since EW 15 (~30%) and was higher than observed in 2010. In EW 21, no deaths associated to influenza were reported. The number of positive cases for respiratory viruses showed an increasing trend between EWs 13-21, with increasing RSV as the primary virus in circulation, followed by adenovirus and parainfluenza. In EW 21, continued the detection of positive cases of influenza A/H1N1 2009 and influenza A/H3, but at a very low proportion.

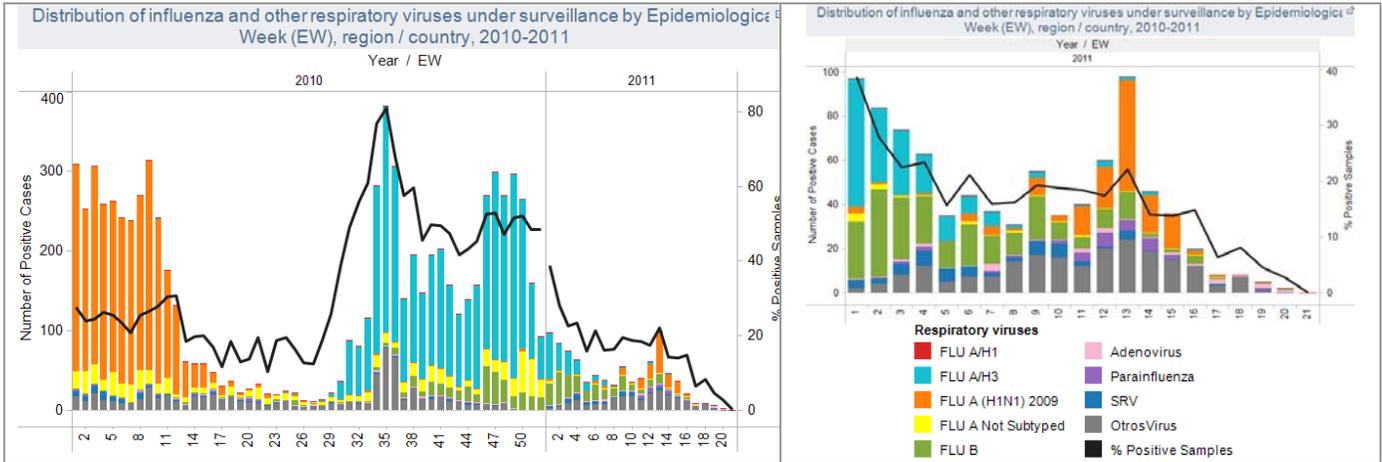
In Paraguay<sup>4</sup>, in EW 21, the proportion of ILI outpatient consultations, among all consultations remained similar throughout the year, being highest in less than 5 years old. The proportion of admissions for SARI (4%) among admissions for all causes and the proportion of ICU admission for SAR (15%) remained similar to the previous week; however, there was an increase in the proportion of SARI deaths (12%) during the last two previous weeks. According to laboratory data at the national level, in EW 20, the proportion of positive samples to respiratory virus increased to ~50% since the previous week (15%). RSV continued to be the predominant respiratory virus since EW 6. No influenza viruses were detected since EW 13.

In Uruguay<sup>5</sup>, in EW 23, the proportion of SARI medical admissions, among all medical admissions had a slight increase compared to the previous week. The percentage of SARI ICU admissions (~2%) was lower than the previous week. No SARI deaths were reported. In the laboratory, between EWs 20-21, the detection of other respiratory viruses (RSV and parainfluenza) and 1 case of influenza A/H1N1 2009 were predominant.

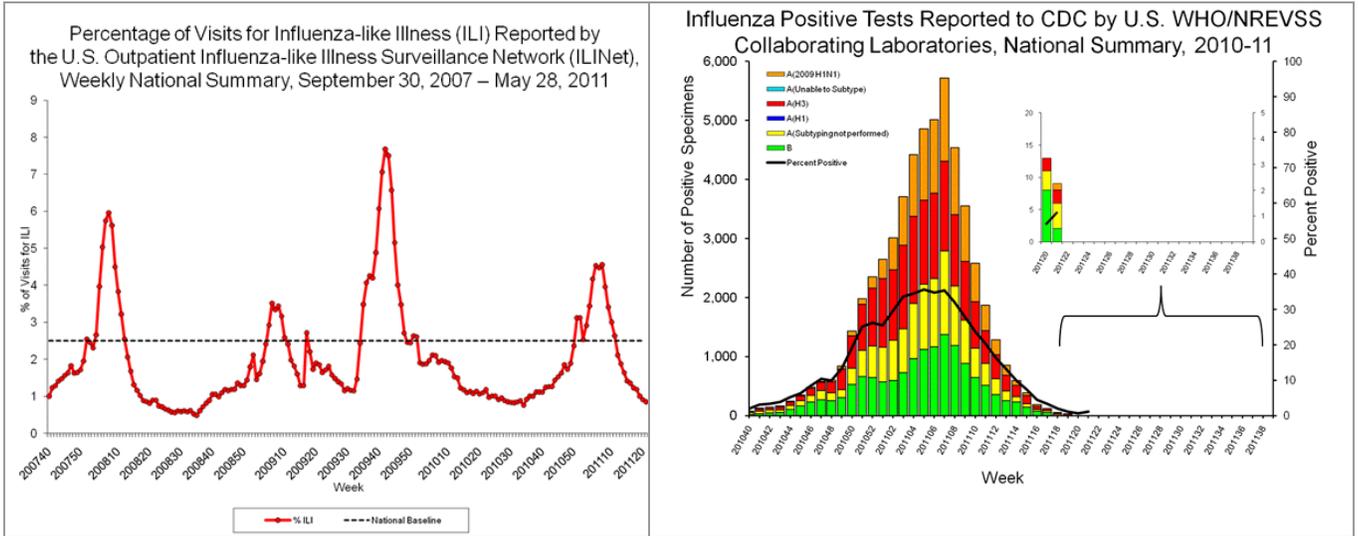
**Graphs**

**North America**

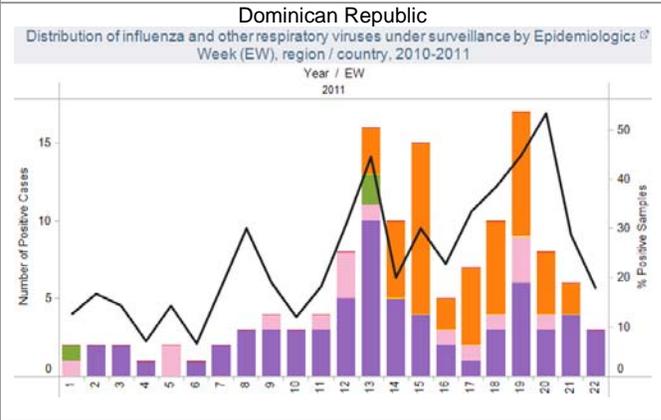
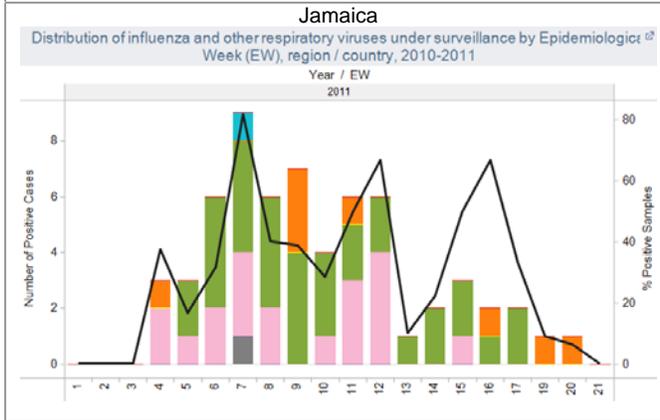
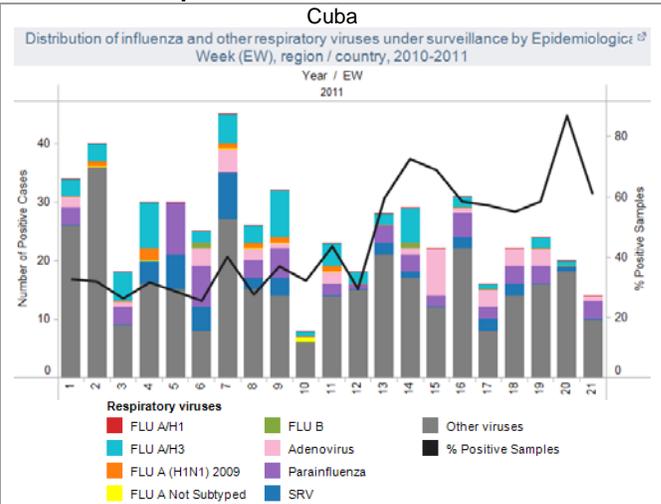
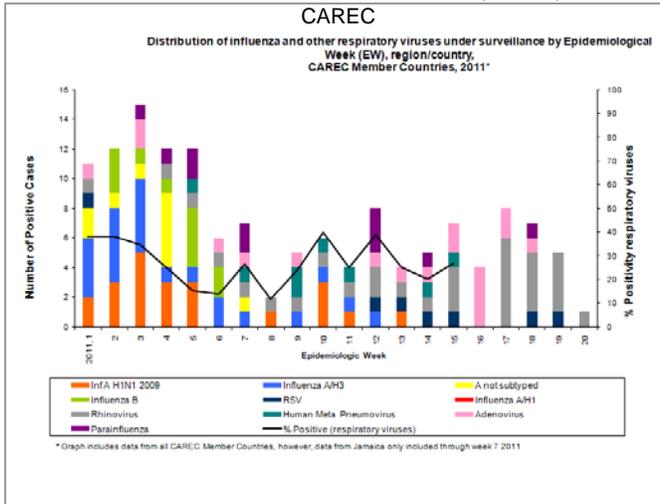
**Mexico**



**United States**



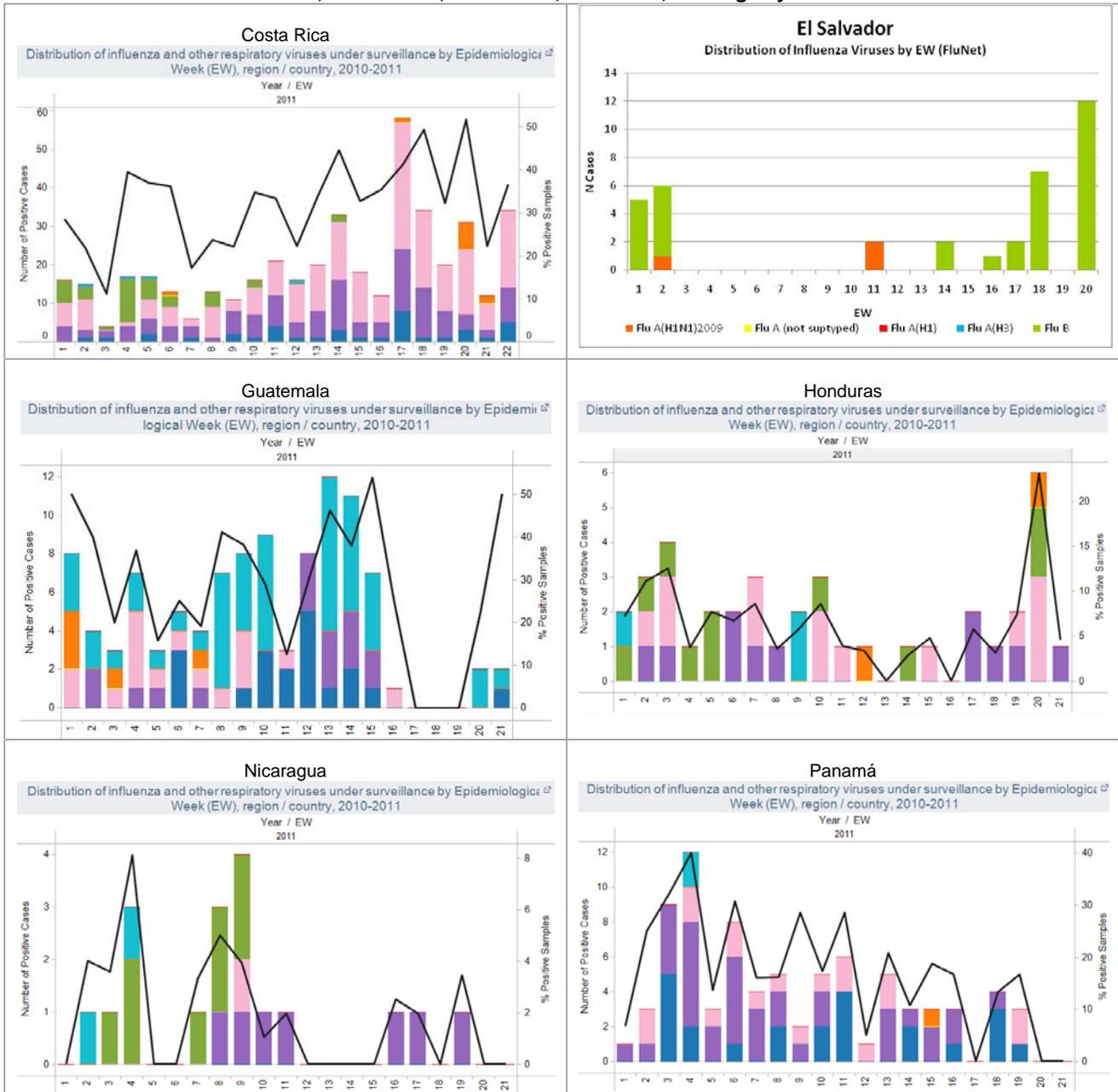
CAREC, Cuba, Jamaica & Dominican Republic



- Respiratory viruses**
- FLU A/H1
  - FLU B
  - Other viruses
  - FLU A/H3
  - Adenovirus
  - % Positive Samples
  - FLU A (H1N1) 2009
  - Parainfluenza
  - FLU A Not Subtyped
  - SRV

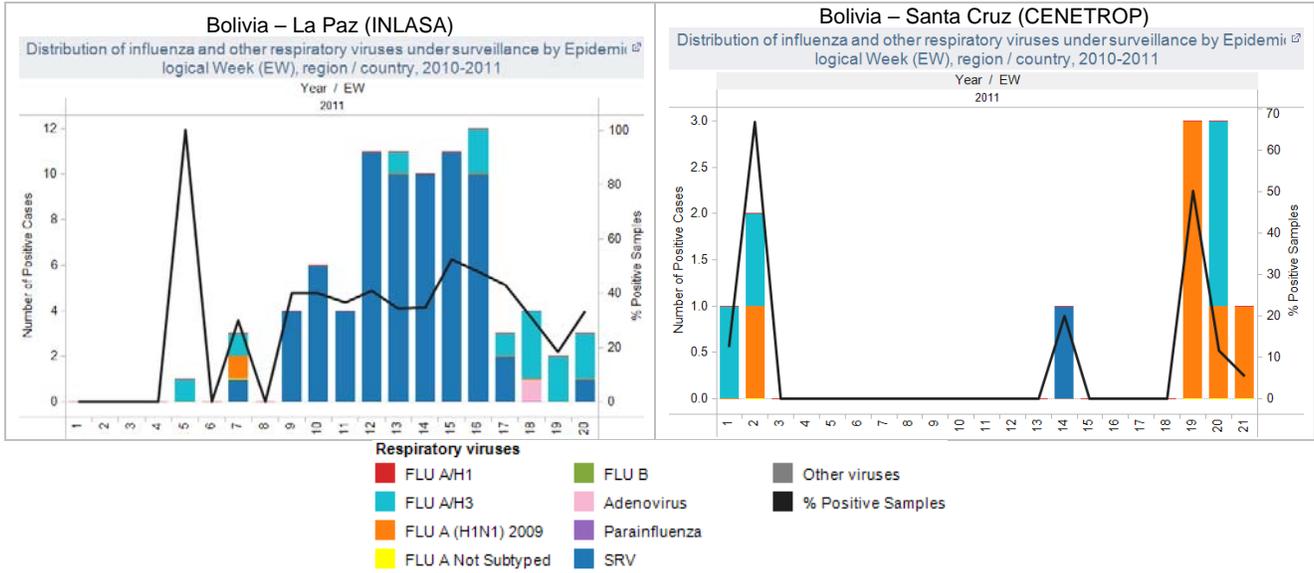
# Central America

## Costa Rica, El Salvador, Guatemala, Honduras, Nicaragua y Panamá

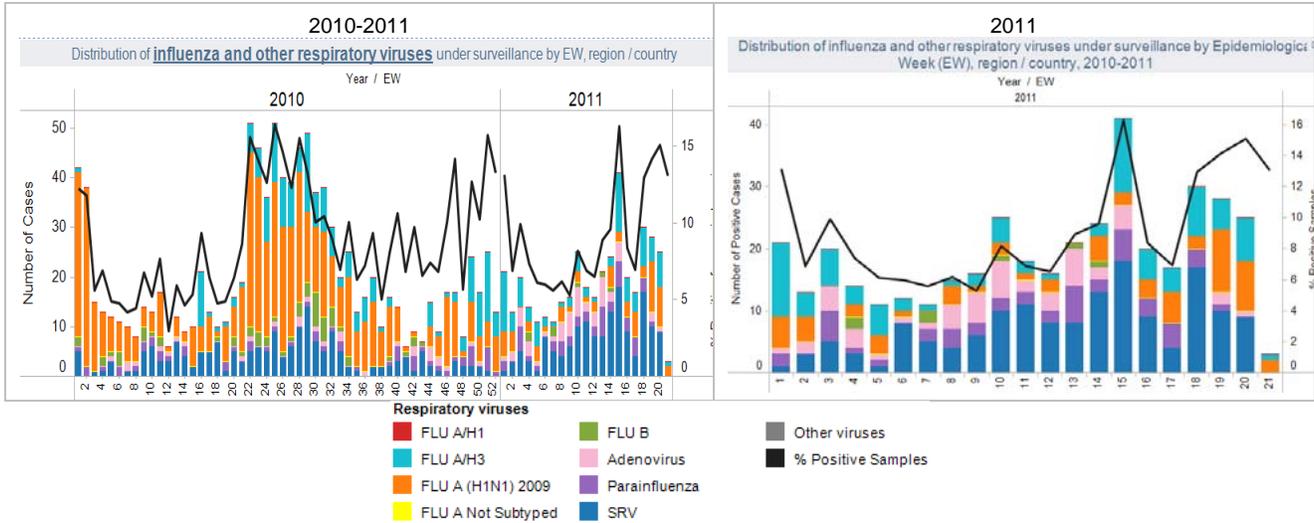


# South America - Andean

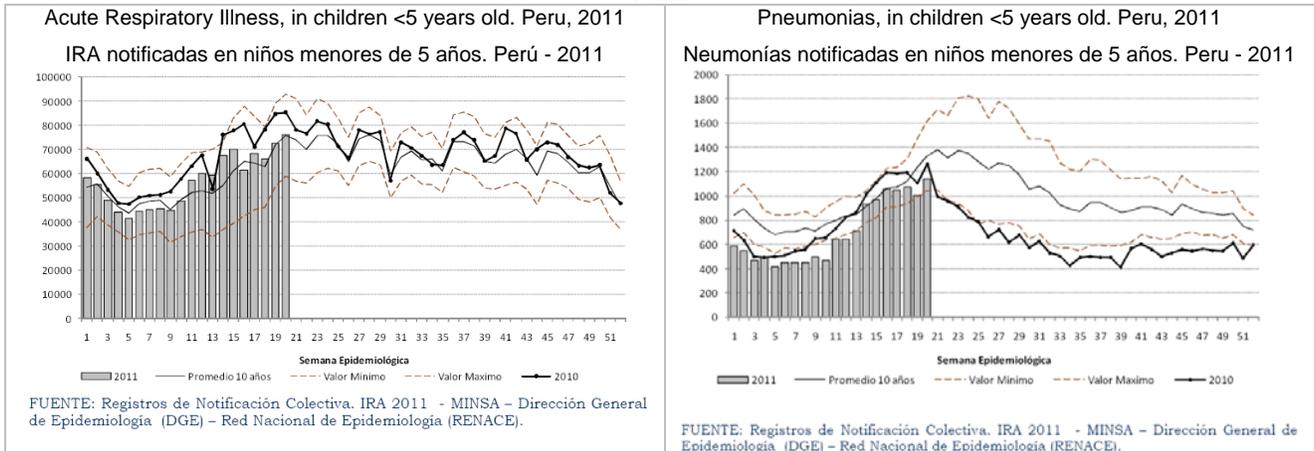
## Bolivia



## Colombia

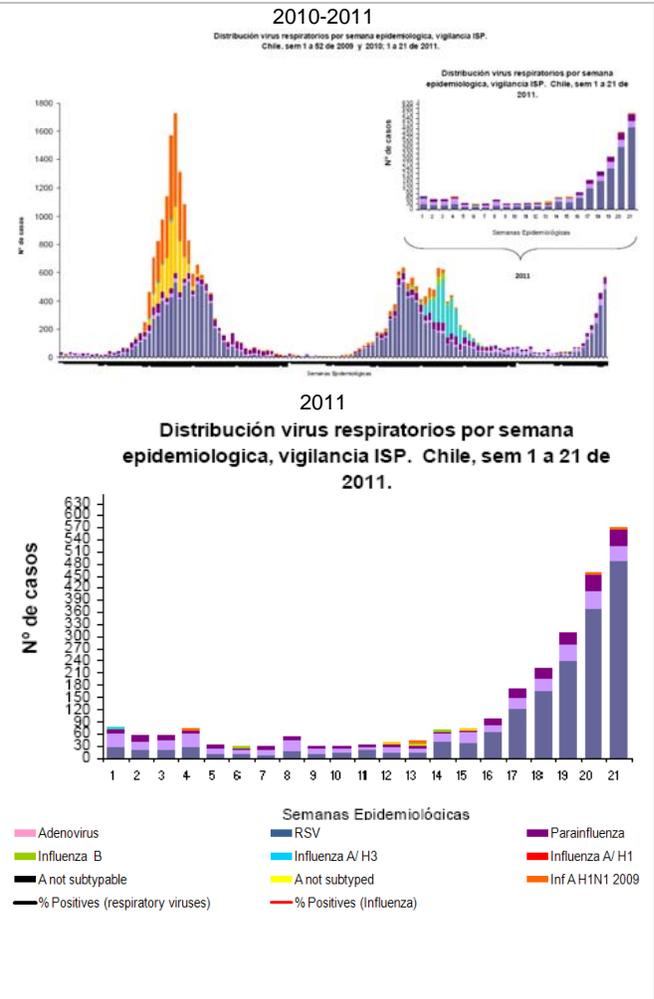
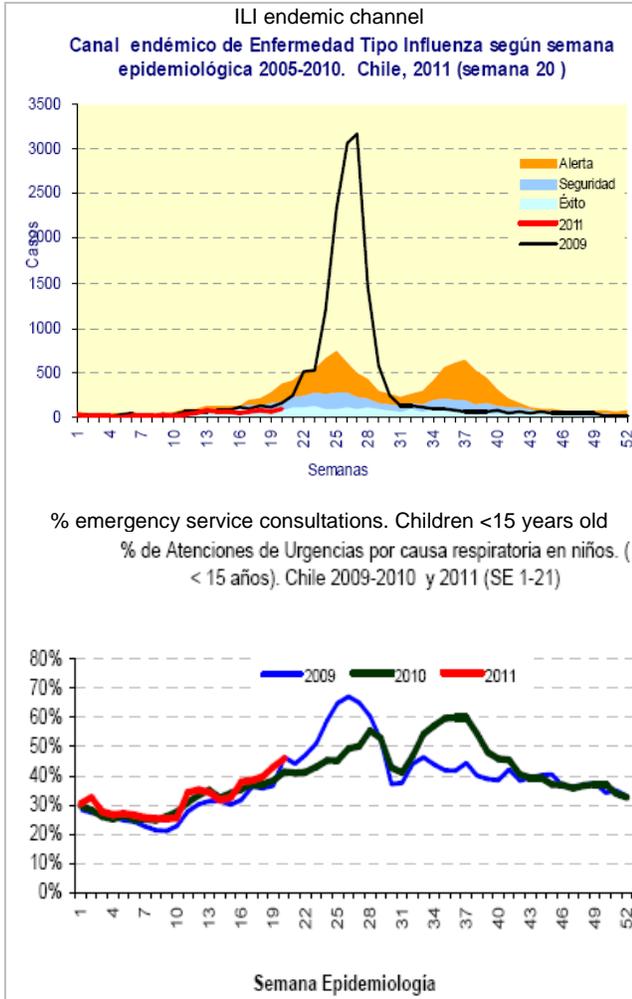


## Peru

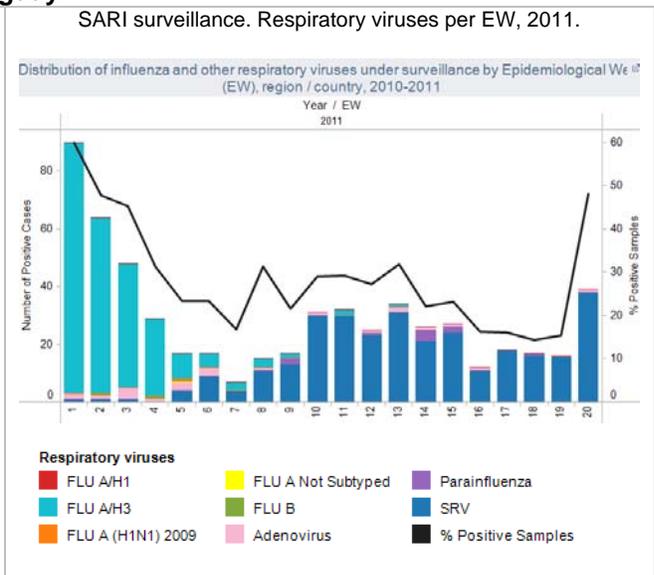
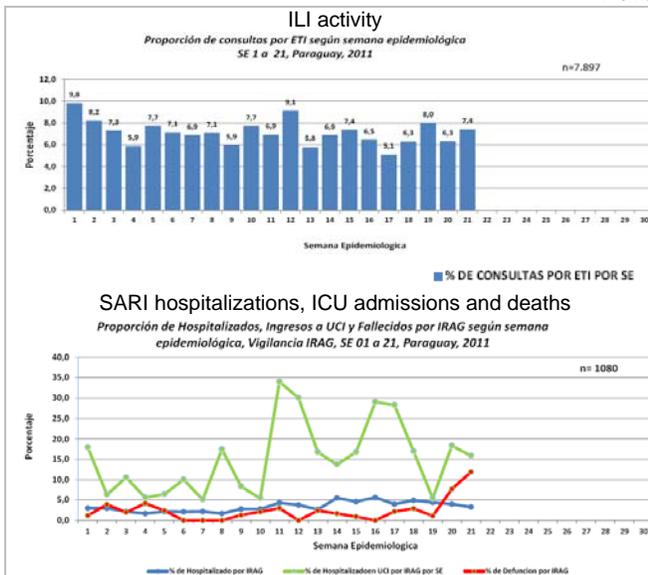


# South America – Southern Cone

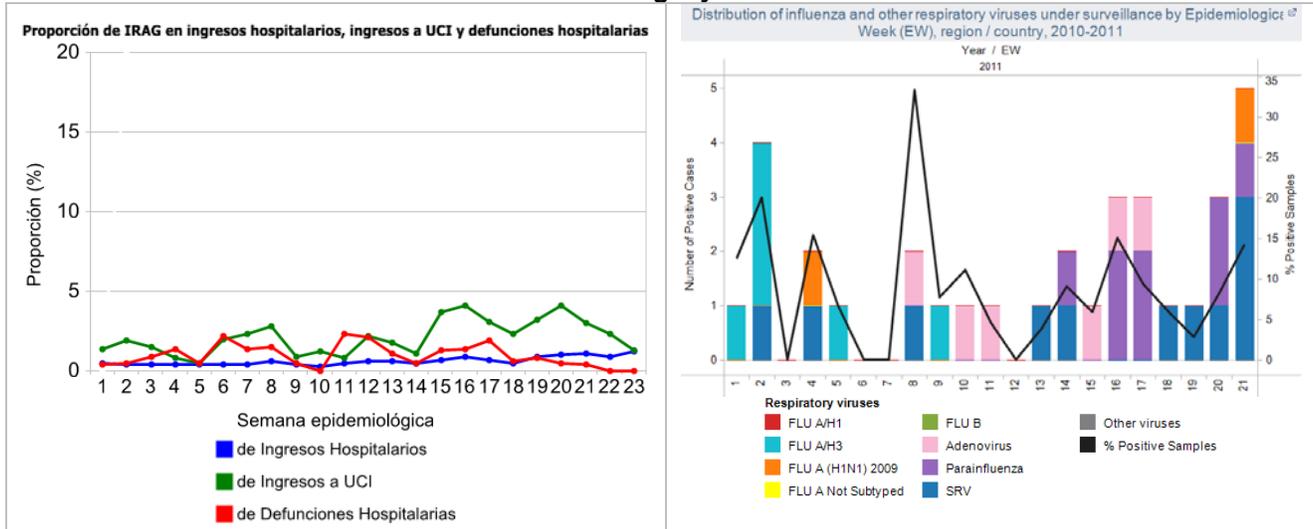
## Chile



## Paraguay



## Uruguay



<sup>1</sup> USA. Surveillance Summary. Week 21. Centers for Disease Control and Prevention

<sup>2</sup> Perú. Sala de Situación de Salud. SE 20. Ministerio de Salud. Dirección General de Epidemiología

<sup>3</sup> Chile. Informe de situación. SE 21. [www.pandemia.cl](http://www.pandemia.cl)

<sup>4</sup> Paraguay. Boletín epidemiológico semanal. SE 22. Ministerio de Salud Pública y Bienestar Social

<sup>5</sup> Uruguay. Dirección General de la Salud. Epidemiología. <https://trantor.msp.gub.uy/epidemiologia/servlet/iraggrafmenu>