



Regional Update EW 26, 2012

Influenza
(July 10, 2012 - 17 h GMT; 12 h EST)

PAHO interactive influenza data: http://ais.paho.org/phis/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 decreased.
- In Central America and the Caribbean there was a mixed circulation of respiratory viruses.
- In South America, acute respiratory illness activity has been increasing in some countries in the last weeks; but remained within the expected level for this time of year. Co-circulation of different types/subtypes of influenza (influenza A(H1N1)pdm09, influenza (H3) and influenza B) was reported, with a predominance of influenza A (H1N1) pdm09 in Bolivia (La Paz). Respiratory syncytial virus (RSV) predominated in Chile.

Epidemiologic and virologic influenza update

North America

In Canada¹, in epidemiological weeks (EW) 25 and 26, 2012, influenza activity remained low and continued to decline. In these weeks, the influenza-like illness (ILI) consultation rate was higher than the expected levels for this time of year, likely due to respiratory viruses other than influenza. In EWs 25 and 26, among the total samples analyzed, the proportion of samples positive for influenza (2.0 and 1.8% respectively) decreased. In EWs 25 and 26, of the total cases positive for influenza, the percent positive for influenza A was 53.6%. Concerning other respiratory viruses, the percent positive for rhinovirus remained the highest (20%) as compared to other respiratory viruses.

In the United States², in EW 26, nationally, the proportion of ILI consultations (1.0%) was below the baseline (2.4%). Nationally, the proportion of deaths attributed to pneumonia and influenza for EW 26 (6.6%) was below the epidemic threshold for this time of year (6.9%). In EW 26, one pediatric death associated with influenza A(H1N1)pdm 09 was reported. Among all samples tested during EW 26 (n=1,449), the percentage of samples positive for influenza (8.6%) was similar to the previous week. Nationally, among the positive samples, 28.2% were influenza A [among the subtyped influenza A viruses, mainly influenza A(H3N2)] and 71.8% were influenza B.

In Mexico, according to laboratory data, in EW 26, no respiratory viruses were detected.

Caribbean

CAREC*, in EW 26, received epidemiological information from 5 countries: Barbados, Belize, Jamaica, St. Vincent & the Grenadines and Trinidad & Tobago. In EW 26, the proportion of severe acute respiratory infection (SARI) hospitalizations was 1.9%, which is lower than the prior week (2.9%). Children aged 6 months – 4 years had the highest rates of SARI hospitalization (6.9% of all children admitted to hospital were for SARI), followed by 5 – 14 years (2.0%). No SARI related deaths were reported in EW 26. Influenza viruses confirmed by country in the past four weeks are influenza A(H1N1)pdm09 in Bermuda, influenza A H3N2 in Bermuda and Suriname, and influenza B in Anguilla, Jamaica and Barbados. To date in 2012, the

* Includes Barbados, Belize, Dominica, Jamaica, St Vincents and the Grenadines, St Lucia, Suriname and Trinidad and Tobago

overall percentage positivity for samples tested is 38%, with % positive for influenza = 21% and % positive for other respiratory viruses = 17%.

In Jamaica for EW 26, sentinel site data shows that the proportion of consultations for Acute Respiratory Illness was 4.6% which was similar to the previous week. The proportion of admissions due to SARI was 0.9% which was similar to the week before. There were no SARI deaths reported for EW 26.

In Cuba, according to laboratory data in EW 26, among the samples analyzed (n=105), the percent positivity for respiratory viruses was 47% and the percent positive for influenza, among all samples analyzed, was 34.3%. Influenza B predominated.

In the Dominican Republic, according to laboratory data from EW 27, among the samples analyzed (n=28), the percent positivity for respiratory viruses was 53.6% and the percent positivity for influenza among all samples analyzed was 42.9%. Influenza A/H3 predominated.

Central America

In Costa Rica, in EW 26, according to laboratory data, among all samples tested (n=17), the percentage of positives for respiratory viruses was 100%, similar to the previous EW. Adenovirus and parainfluenza were detected, as well as influenza B, influenza A(H1N1)pdm09, influenza A(H3) and RSV.

In El Salvador, in EW 27, according to laboratory data, among all sample tested (n=127), the percentage of positives for respiratory viruses was 22.8%, which was lower than the previous EW (26.4%). Influenza A(H1N1)pdm09 was detected (62.1%). Also influenza B, parainfluenza, adenovirus, and SRV were detected.

In Honduras, in EW 26, according to laboratory data, among all samples tested (n=23), the percentage of positives for respiratory viruses was 21.7%. Influenza A(H1N1)pdm09 and RSV were detected.

In Panama, according to laboratory data, in EW 27, among all samples tested (n=2), the percentage of positives for respiratory viruses was 50%. Influenza A(H1N1)pdm09 was detected.

South America – Andean

In Santa Cruz, Bolivia, according to data from Cenetrop, viral circulation showed a decreasing trend since EW 13, with a positivity of 27% in EW 26 among all samples analyzed (n=71), with a predominance of influenza A(H1N1)pdm09 (7/19) and parainfluenza (5/19). In the SARI surveillance in La Paz, in EW 26, the proportion of hospitalizations (22%) remained unchanged with respect to the previous week; additionally three SARI associated deaths were reported this week, all from Instituto Nacional del Tórax. In this Department, viral circulation showed a decrease in the positivity since EW 23, reaching 49.4% in EW 26, with a predominance of influenza A (H1N1) pdm2009 (67%) among the 166 samples processed. The distribution of SARI cases confirmed for influenza A (H1N1) pdm2009 did not show a marked predminance according to age group.

In Ecuador, viral circulation has shown an increasing trend since EW 19. Of the samples analyzed from SARI cases (n=34), in the same week, the percent positivity was 35%, representing an increase with respect to the previous week with a predominance of influenza B (11/12). In EW 26, the proportions of hospitalizations for SARI and ICU admissions remained low and unchanged as compared to the previous week; no SARI associated deaths were reported this week. With respect to severity, since the beginning of the year, the highest proportion of hospitalizations, ICU admissions, and deaths associated with SARI were attributed to RSV, coinciding with an increase in the circulation of this virus in the first quarter of the year.

América del Sur – Cono Sur

In Chile, in EW 26 at the national level, ILI activity was about at the epidemic zone of the endemic channel (rate 16.6/100,000 population), showing a delay of six weeks in the expected seasonal rise. The percent of emergency visits for respiratory causes, which has been increasing since EW 11, reached 33.6% in EW 11, superceeding values expected for this time of year. According to laboratory data at the national level, in the same week, among the samples analyzed (n=1,209), the percent positivity for respiratory viruses was 56%, higher than the previous week, with a predominance of RSV (81%). According to the SARI surveillance system, the proportion of hospitalizations also showed a gradual increase since EW 11, reaching 88.9% in

EW 25, among the samples analyzed (n=72), with RSV predominating (65%). Since the beginning of the year, among the SARI samples positive for respiratory viruses, the highest proportion of hospitalized cases and ICU admissions were attributed to RSV, however, no deaths were attributed to this virus.

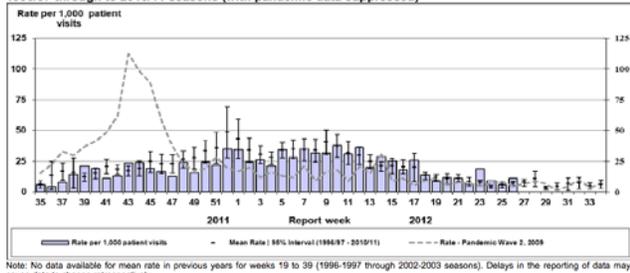
In Paraguay, at the national level, in EW 26, the ILI rate (178.3/100,000 population) remained in the epidemic zone of the endemic channel, with an increasing trend. According to laboratory data, at the national level, in EW 26, among the samples analyzed (n=251), the positivity was 44%, with a predominance of influenza A(H1N1)pdm09 (53%) and there was an increase this week in the circulation of RSV (30%). In the SARI surveillance system, the proportion of hospitalizations has shown a progressive increase since EW 18, reaching 9.2% (179/1950) in EW 26; the trend in the proportion of SARI deaths showed an increase with respect to the previous week, reaching 8% (8/100). With respect to severity, since the beginning of the year, the highest proportion of hospitalizations, ICU admissions, and deaths were attributed to influenza A(H1N1)pdm09.

Graphs

North America

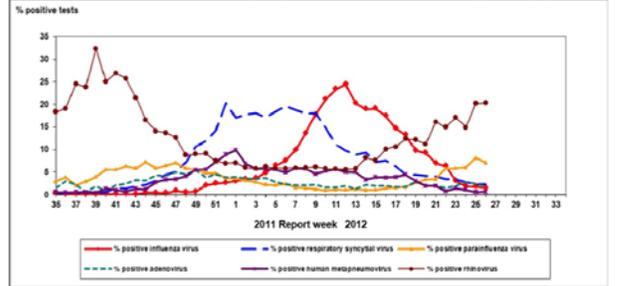
Canada

Figure 7. Influenza-like illness (ILI) consultation rates, Canada, by report week, 2011-2012 compared to 1996/97 through to 2010/11 seasons (with pandemic data suppressed)



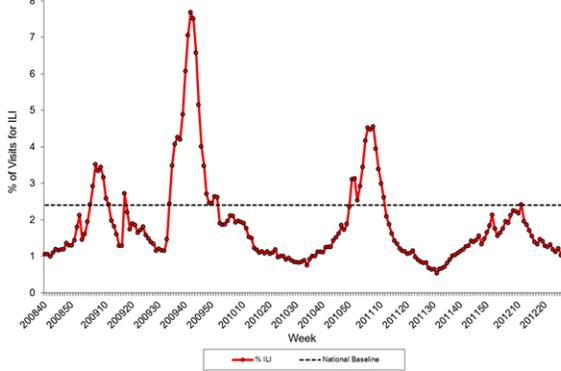
Note: No data available for mean rate in previous years for weeks 19 to 39 (1996-1997 through 2002-2003 seasons). Delays in the reporting of data may cause data to change retrospectively.

Figure 5. Percent positive influenza tests, compared to other respiratory viruses, Canada, by reporting week, 2011-2012

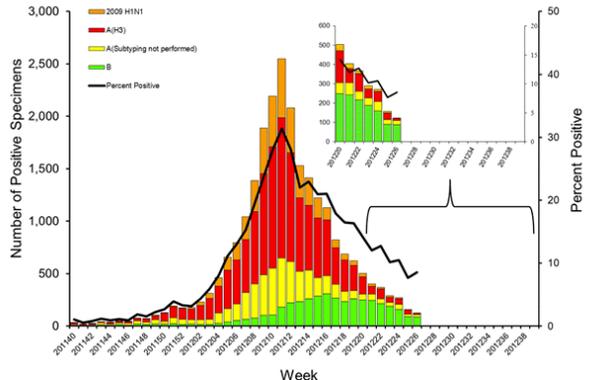


United States

Percentage of Visits for Influenza-like Illness (ILI) Reported by the U.S. Outpatient Influenza-like Illness Surveillance Network (ILINet), Weekly National Summary, September 28, 2008 – June 30, 2012

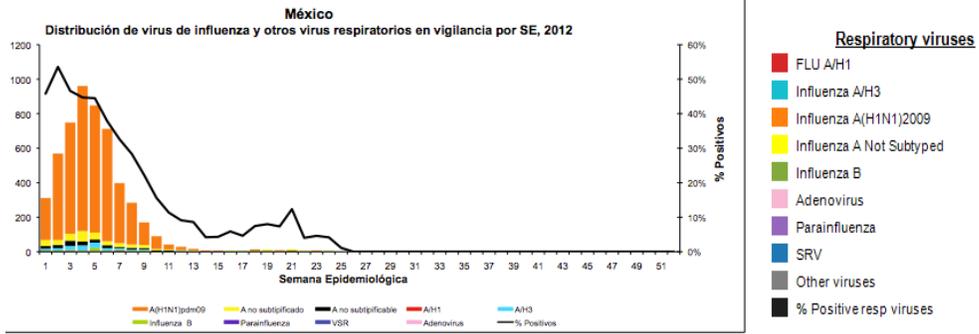


Influenza Positive Tests Reported to CDC by U.S. WHO/NREVSS Collaborating Laboratories, National Summary, 2011-12

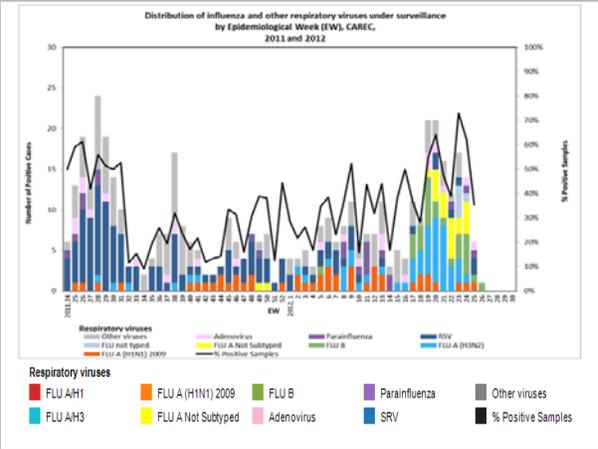
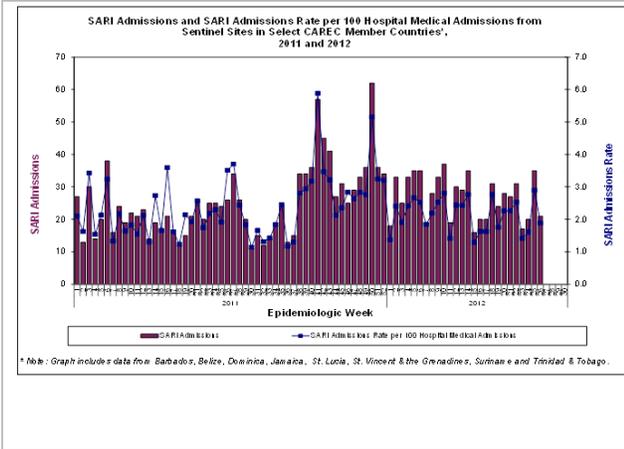


Mexico

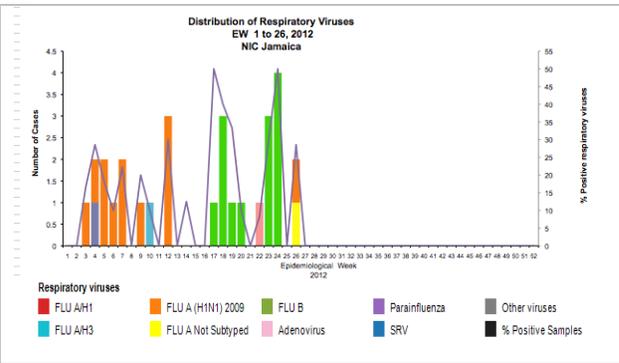
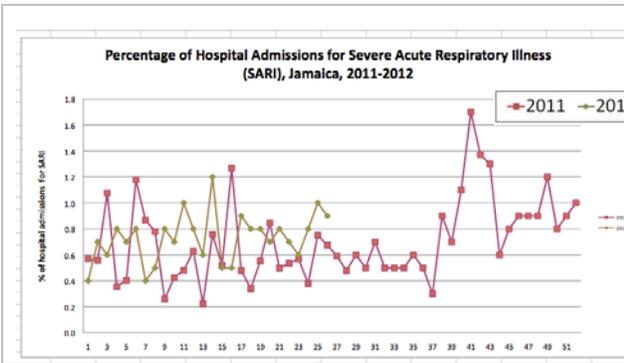
Distribution of respiratory viruses by EW, 2011-2012



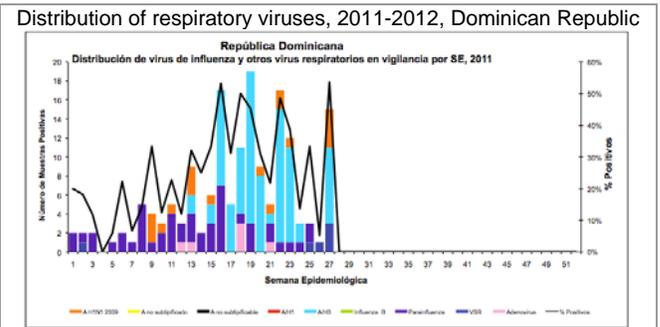
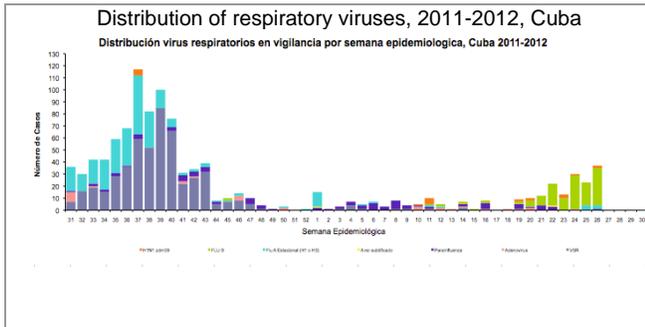
CAREC



Jamaica



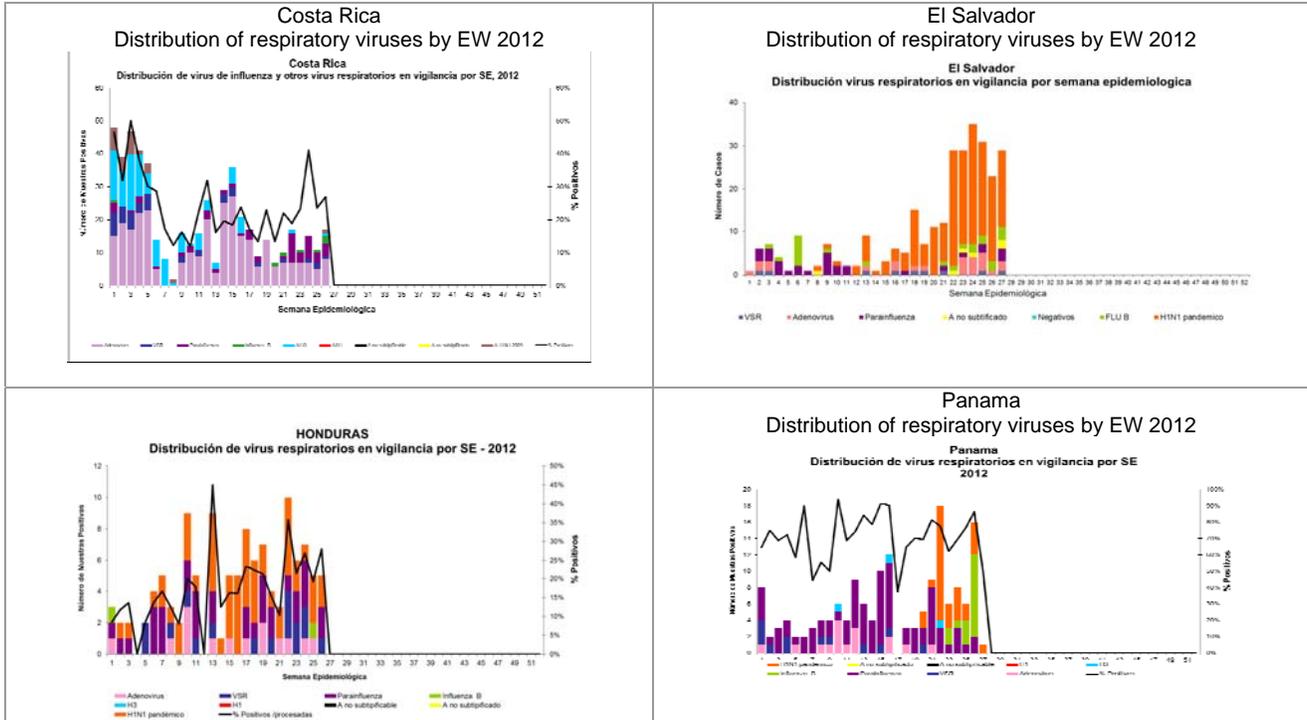
Cuba and Dominican Republic



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

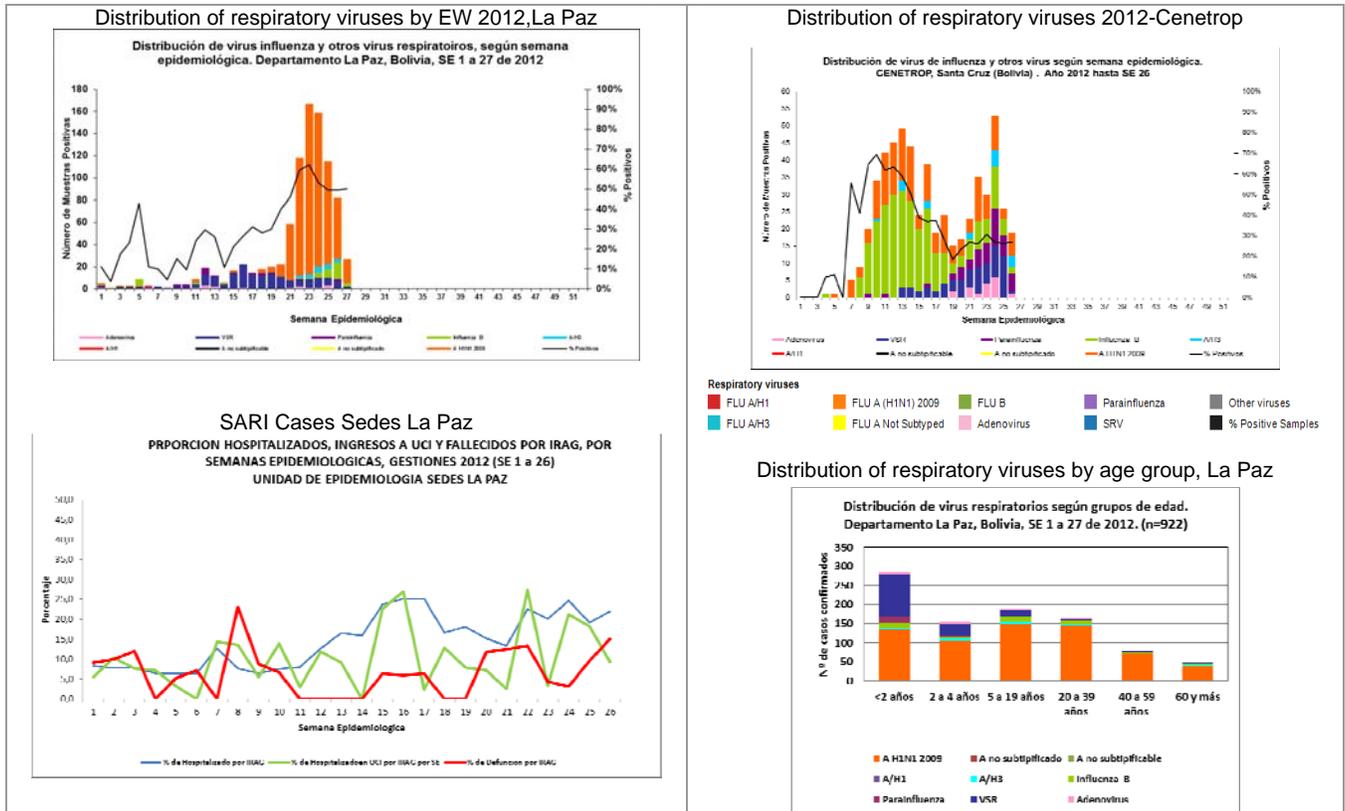
Central America

Costa Rica, El Salvador, Honduras, and Panama



South America - Andean

Bolivia

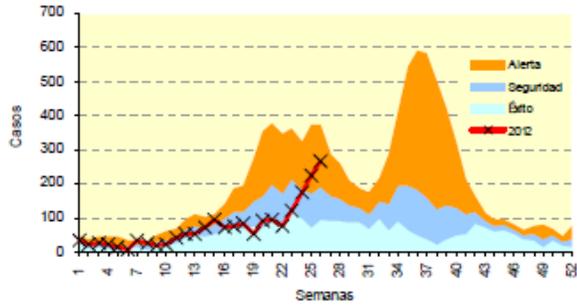


South America – Southern Cone

Chile

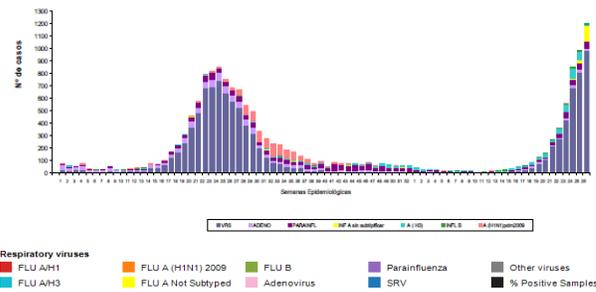
ILI cases by EW 2012

Canal endémico de Enfermedad Tipo Influenza según semana epidemiológica 2006-2011*. Chile, 2012 (semana 1-26)



Distribution of respiratory viruses by EW, 2011-2012

Distribución virus respiratorios por semana epidemiológica, vigilancia ISP. Chile, 2011 - 2012 (SE 1-26)



SARI cases: Distribution of respiratory viruses by EW, 2012

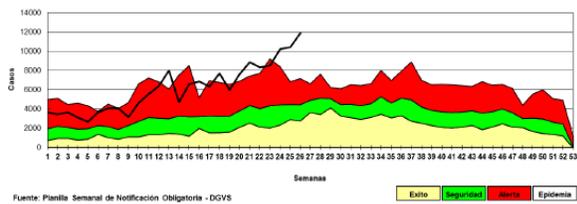
Distribución porcentual de virus respiratorios en vigilancia de IRAG según gravedad. Chile, SE 1 a 26 de 2012



Paraguay

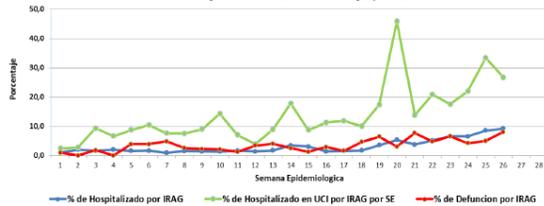
ILI endemic channel

Canal endémico de ETI en población total según semana epidemiológica Paraguay, 2012 (Semana Epidemiológica N° 26)



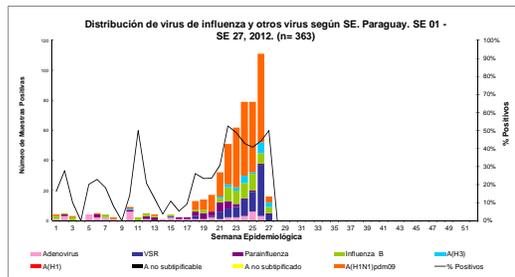
SARI cases (%) by EW 2012

Proporción de Hospitalizados, Ingresos a UCI y Fallecidos por IRAG según semana epidemiológica, Vigilancia IRAG, SE 01 al 26, Paraguay, 2012



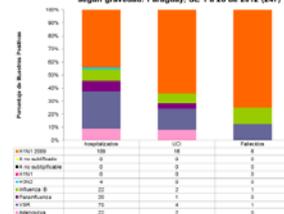
Distribution of respiratory viruses by EW, 2012

Distribución de virus de influenza y otros virus según SE. Paraguay, SE 01 - SE 27, 2012, (n= 363)



SARI cases: distribution of respiratory viruses by EW, 2012

Distribución porcentual de virus respiratorios en vigilancia de IRAG según gravedad. Paraguay, SE 1 a 26 de 2012 (SARI)



¹ FluWatch Report. EW 26. Available at <http://www.phac-aspc.gc.ca/fluwatch/>
² US Surveillance Summary. EW 26. Centers for Disease Control and Prevention