



Influenza (September 13, 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 as the primary virus in circulation (Costa Rica and Guatemala), as well as predominance of influenza A/H3N2 (Cuba and Honduras).
- In the Southern Cone, RSV circulation continued to show a circulation with a decreasing trend (Argentina and Chile). Among influenza viruses, a lower circulation than expected for this time of year is observed, with predominance of influenza A/H1N1 2009 (Colombia, Chile); with variable co-circulation of influenza A/H3 (Peru and Argentina) and influenza B (Brazil).

Epidemiologic and virologic influenza update

North America

In the United States¹, in EW 35, at the national level, the proportion of Influenza-like Illness (ILI) consultations (0.7%) remained below the national baseline (2.5%). The proportion of deaths attributed to pneumonia and influenza for EW 34 (5.8%) remained below the epidemic threshold (6.4%). In EW 35 one pediatric death associated with influenza B was reported. During EW 35, among all samples tested (n=742), the percentage of samples positive for influenza remained at low levels (<2%), with sporadic detections of unsubtyped influenza A/H3 and influenza A/H1N1 2009.

In Mexico, in EW 35, according to laboratory data, of total samples received (n=32), no samples positive for respiratory viruses were detected. Since EW 17, influenza and other respiratory viruses activity remains low.

Caribbean

CAREC*, in EW 35, received information from Jamaica, and Dominica. The proportion of severe acute respiratory infection (SARI) among all hospitalizations was 1.5% similar to the previous week (1.8%). No SARI related deaths were reported since EW 27. According to laboratory data, in EW 33, among samples tested no samples positive for respiratory viruses were detected. Respiratory syncytial virus (RSV) was the primary virus in circulation between EWs 26-31, with sporadic detections of A/H1N1 2009 throughout the year.

In Cuba, in EW 35, among all samples tested (n=107), ~65% were positive for respiratory viruses and overall <25% were positive for influenza. Between EWs 29-34, the primary viruses in co-circulation were influenza A/H3 and RSV, followed by other respiratory viruses.

In the Dominican Republic, in EW 36, among all samples tested (n=24), the percentage of samples positive for respiratory viruses was ~21%, lower than the previous week. The primary virus in circulation was parainfluenza. Concerning influenza viruses, co-circulation of influenza B and influenza A/H1N1 2009 continues.

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

In Jamaica, in EW 35, the proportion of acute respiratory illness (ARI) consultations was 2.8%, similar to that observed during the previous week. The proportion of SARI admissions was <1% and remained stable compared to the previous week. In EW 35 no SARI related deaths were reported. According to laboratory data there has been no detection of positive cases for influenza since EW 20.

Central America

In Costa Rica, in EW 36, among all samples tested (n=113), the percentage of samples positive for respiratory viruses was ~55%, similar to the previous week. RSV has been the predominant virus since EW 28, followed by adenovirus. In EW 36, just as in the previous two weeks, no samples positive for influenza viruses were detected.

In Guatemala, in EW 35, according to laboratory data, of all samples tested (n=22), ~40% were positive for respiratory viruses; RSV was the only virus detected and the predominant one since EW 26. In EW 35, there was sporadic detection of influenza A/H3, between EWs 32-34 no samples positive for influenza have been detected.

In Honduras², in EW 34, at the national level, the proportion of ILI consultations (~6%) increased slightly compared to the previous week (4%) and continued less than observed in 2010 for this time of year. The proportion of SARI hospitalizations was similar to the previous week and remains below 10% and less than observed during 2010. This week, no SARI deaths were reported. According to laboratory data, in EW 35, of all samples tested (n=26), ~42% were positive for influenza viruses and overall, ~35% to influenza viruses. Influenza A/H3 has been the predominant virus since EW 28, followed by influenza A/H1N1 2009, and RSV.

In Panama, in EW 35, among samples tested, ~40% were positive for some respiratory virus; RSV has been the predominant virus between EWs 21-34. Concerning influenza viruses, the detected circulating virus at a low quantity was influenza A/H1N1 2009.

South America – Andean

In Bolivia, in La Paz (INLASA laboratory), after a predominance of influenza A/H3 up to EW 31, and sporadic detection of influenza A/H1N1 2009 in EW 33-34; in EW 35, of all samples tested (n=13), ~8% were positive for some respiratory virus, mainly detecting adenovirus.

In Colombia according to the national laboratory 3 , in EWs 34-35, of all samples received (n=74), no samples positive for respiratory viruses were received. To date this year, up to EW 31, co-circulation of influenza A/H3 and influenza A/H1N1 2009 was reported.

In Peru⁴, in EW 34, at the national level, ARI and pneumonia activity indicators (number of ARI cases in less than 5 years old and number of pneumonia cases in children less than 5 years old, respectively) continued to show a decreasing trend since the peak in EW 20, remaining below the expected level for this time of year. Up to EW 31 of 2011, 255 pneumonia related deaths were notified in less than 5 years old; this represents ~19% less than the average notified in the last three years (2008-2010).

South America - Southern Cone

In Argentina⁵, ILI and SARI endemic channels showed that the number of ILI and SARI cases for EW 32 remained with a decreasing trend and at lower levels than observed during 2010. According to national laboratory data, in EW 34 the predominance of RSV as respiratory virus continued but with a decreasing trend since its peak in EW 26. In EW 34, among samples tested (n=633), 30% were positive for respiratory viruses. Concerning influenza viruses, a decreasing trend has continued in the number of influenza A cases detected since its peak in EW 28. Unsubtyped influenza A has been the main virus detected. Among subtyped viruses, co-circulation of influenza A/H3N2 and influenza A/H1N1 2009 was observed between EWs 19-33. In EW 34, only influenza A/H3N2 was detected.

In Brazil, according to FIOCRUZ laboratory (Rio de Janeiro), between EWs 35-36, of all samples tested no samples positive for respiratory viruses were detected. The Evandro Chagas Institute (Belen), between EWs 34 and 36, no positive samples for respiratory viruses were detected.

In Chile⁶, in EW 35, ILI activity (6.2 consultations per 100,000 inhabitants) at the national level was lower than the previous week (10.2 per 100,000 inhabitants), but remained with low intensity and within the expected levels for this period. In EW 35, the percentage of emergency department admission for respiratory cases among children under 15 years old remained similar to the previous week represented below that observed in 2010. In EW 35, 10 deaths associated to influenza A/H1N1 2009 were registered, 9 of these with a history of one or more associated co-morbidities. According to laboratory data, in EW 35, among samples tested at the national level (n=46), 20% were positive for respiratory viruses; of these positives, RSV maintained a decreasing trend since its peak in EW 24. Concerning influenza viruses, among all tested samples, 6.5% were positive for influenza A/H1N1 2009, main influenza virus since its peak in SE 32.

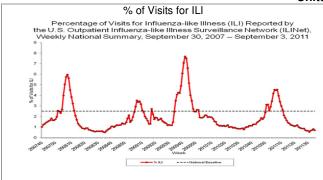
In Paraguay⁷, in EW 35, the proportion of ILI consultations among all consultations was ~9%, slightly higher than the previous EW (~8%). In EW 35 the proportion of SARI hospitalizations, ICU admissions, and deaths decreased or remained similar to the previous week, and were all below 5%. According to laboratory data, in EW 35, of all samples tested ~3% were positive for respiratory viruses (RSV). Between EWs 27-34, few samples positive for adenovirus, RSV, parainfluenza and influenza A/H3 were detected.

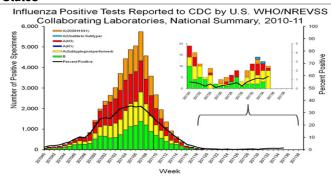
In Uruguay⁸, in EW 36, the proportion of SARI hospitalizations and the proportion of SARI ICU admissions were below 5% and 15% respectively.

Graphs

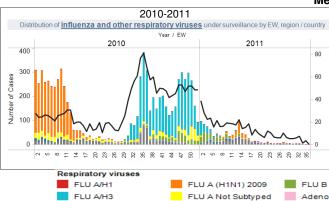
North America

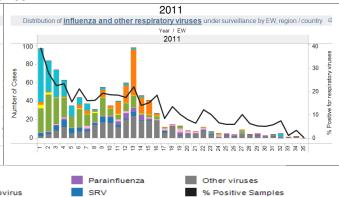
United States





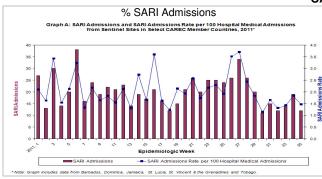
Mexico

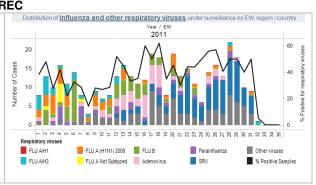




Caribbean

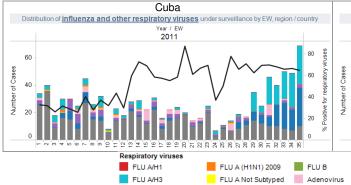
CAREC

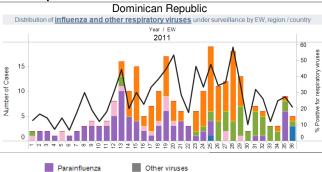




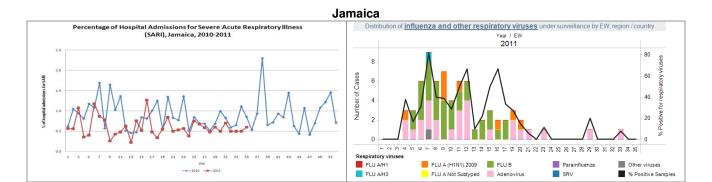
Cuba and Dominican Republic

SRV



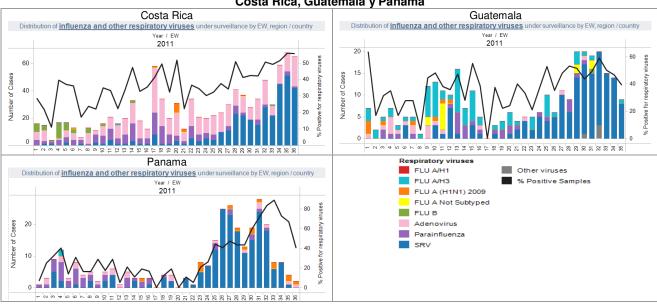


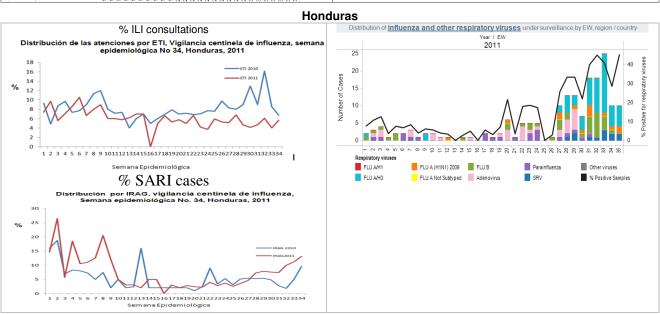
% Positive Samples



Central America

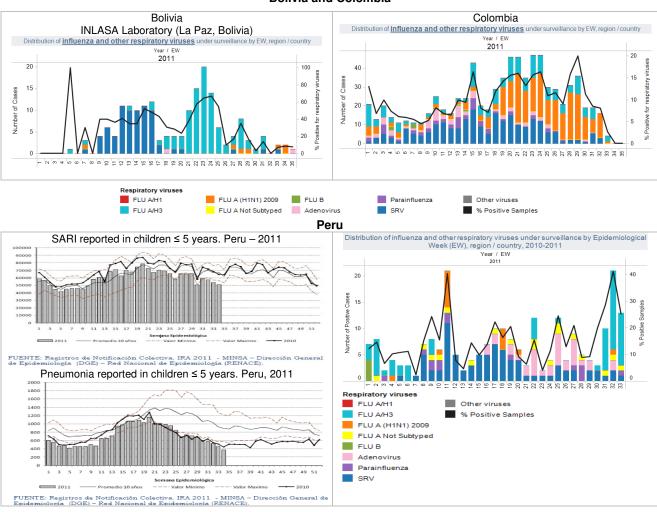
Costa Rica, Guatemala y Panama



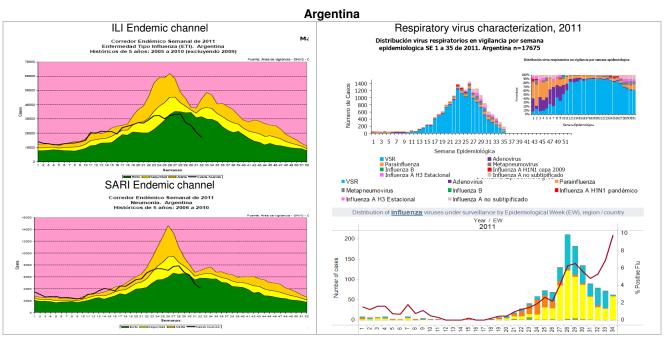


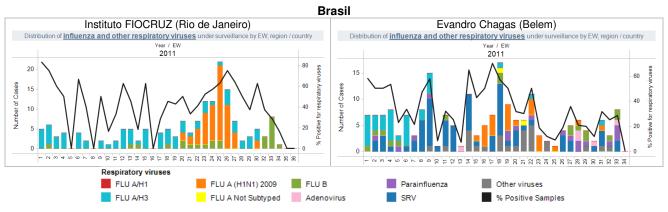
South America - Andean

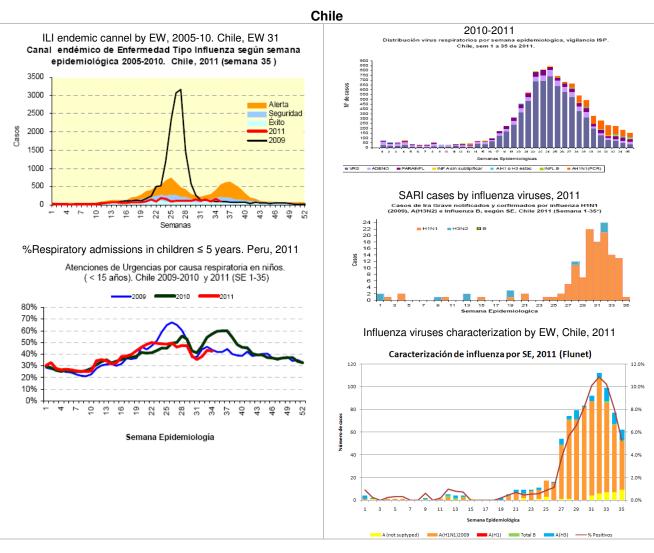
Bolivia and Colombia

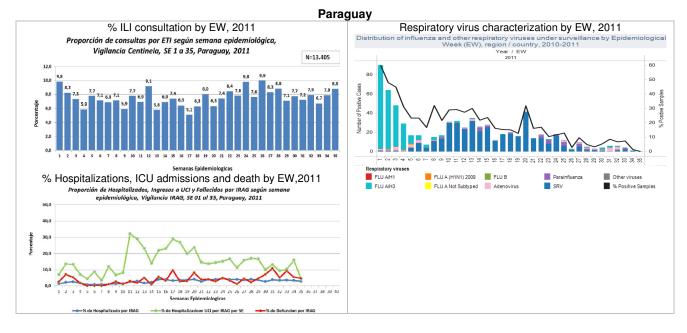


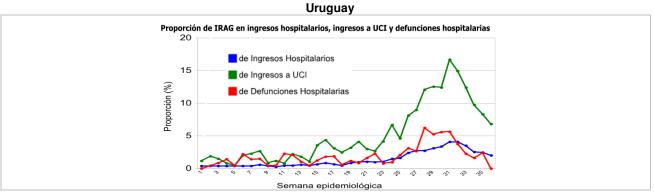
South America - Southern Cone











¹ US Surveillance Summary. Week 35. Centers for Disease Control and Prevention

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

² Honduras. Vigilancia centinela de Tegucigalpa y San Pedro Sula. SE 34

³ Colombia. Instituto Nacional de Salud.

⁴ Perú. Sala de Situación de Salud. SE 34. Ministerio de Salud. Dirección General de Epidemiología.

⁵ Argentina. Actualización situación de enfermedades respiratorias 2011. SE 36.

⁶ Chile. Informe de situación. SE 35. www.pandemia.cl

⁷ Paraguay. Boletín epidemiológico semanal. SE 36. Ministerio de Salud Pública y Bienestar Social

⁸ Uruguay. Dirección General de la Salud. División Epidemiología. SE 36. Available at: