



Regional Update EW 10

Influenza
(March 22, 2011 - 17 h GMT; 12 h EST)

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 Canada, influenza activity is declining. Nationally, the ILI consultation rate was below expected levels for this time of year. In the United States, at the national level, ILI activity was decreased but remained above the baseline, and the proportion of deaths attributed to pneumonia and influenza remained above epidemic threshold. In Canada, influenza A/H3 has predominated since the beginning of the influenza season. In the United States, there has been a co-circulation of influenza A and B.
- Influenza activity in Central America, the Caribbean, the Andean Region and the South Cone remained low. There has been a co-circulation of influenza A and B.

Epidemiologic and virologic influenza update

North America

In Canada¹, in epidemiological week (EW) 10, overall influenza activity declined. In EW 10, the national influenza-like illness (ILI) consultation rate decreased compared to the prior week and dropped below expected levels. Children under 5 years of age had the highest ILI consultation rate (52.1 per 1,000 consultations). The percentage of samples positive for influenza was 14.9%, which represents a slight decrease from the prior week (15.8%). Since the beginning of the influenza season, influenza A/H3N2 has been the predominant strain circulating in Canada. In EW 10, of the positive tests reported (n=833), 34.1% were untyped influenza A, 33.9% were influenza A/H3N2, 24.1% were influenza B, and 7.9% were influenza A/H1N1 2009. Among the other respiratory viruses, the proportion of specimens positive for respiratory syncytial virus (RSV) decreased slightly compared to the prior week and appears to have peaked in EW 07.

In the United States², in EW 10, at the national level, the proportion of outpatient consultations for ILI (3.0%) was above the baseline, but decreased as compared to EW 09. At the regional level, eight of ten regions reported ILI activity to be at or above their region-specific baseline. The proportion of deaths attributed to pneumonia and influenza remained above the epidemic threshold. Eleven influenza-associated pediatric deaths were reported this week. During EW 10, 21.1% of samples tested were positive for influenza [influenza A/H3 (28.7%), influenza type B (27.1%), untyped influenza A (22.8%), and influenza A/H1N1 2009 (21.4%)]. Of characterized influenza B viruses, 93.9% belong to the B/Victoria lineage, which is included in the 2010-2011 Northern Hemisphere vaccine, and 6.1% belong to the B/Yamagata lineage.

Caribbean

CAREC^{*}, in EW 10, reported that the proportion of admissions for severe acute respiratory infection (SARI) was slightly greater than one percent and stable compared to the prior week. Three SARI deaths have been reported in the last two EWs, representing 2.4% of deaths in EW 10.

In Cuba, in EW 10 few respiratory viruses were detected and to date in 2011, influenza A/H3 has been the predominant influenza virus circulating.

In the Dominican Republic, to date in 2011, parainfluenza has been the primary respiratory virus circulating.

In Jamaica, to date in 2011, influenza type B has been the predominant respiratory virus detected.

^{*} Participating CAREC member countries, which include, Barbados, Dominica, Jamaica, St Vincent and the Grenadines, St. Lucia and Trinidad and Tobago, were assessed together

Central America

In Honduras, to date in 2011, small numbers of respiratory viruses have been detected.

South America – Andean

In Colombia, to date in 2011, there has been a co-circulation of multiple respiratory viruses, with influenza A/H3 being the predominant influenza virus.

In Venezuela³, in EW 09, the number of acute respiratory infection (ARI) and pneumonia cases increased slightly as compared to EW 08, remaining below the highest expected counts for this time of year. The highest rates for both ARI and pneumonia were observed in those less than one year of age. Of a total of 134 samples tested, 57.5% were positive for influenza—76.6% influenza A/seasonal, 16.9% influenza/H1N1 2009, and 6.5% influenza B.

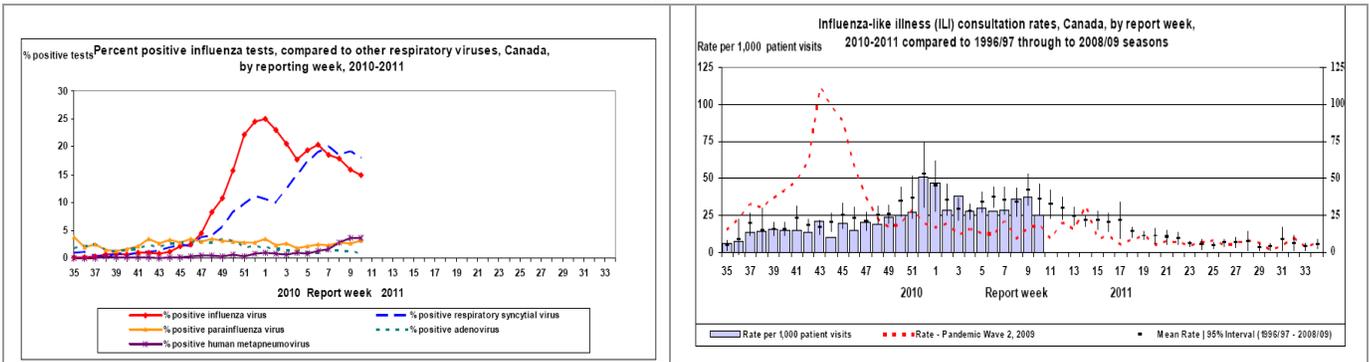
South America – Southern Cone

In Argentina, to date in 2011, parainfluenza and adenovirus were the predominant circulating respiratory viruses, and influenza A/unsubtyped was the predominant circulating virus among influenza viruses.

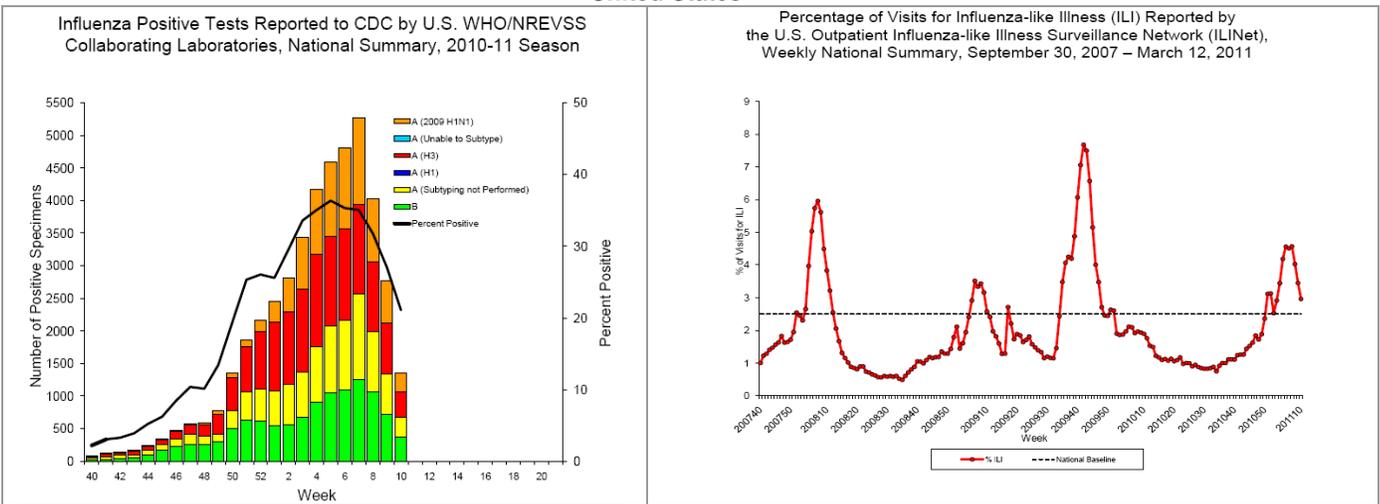
Graphs

North America

Canada

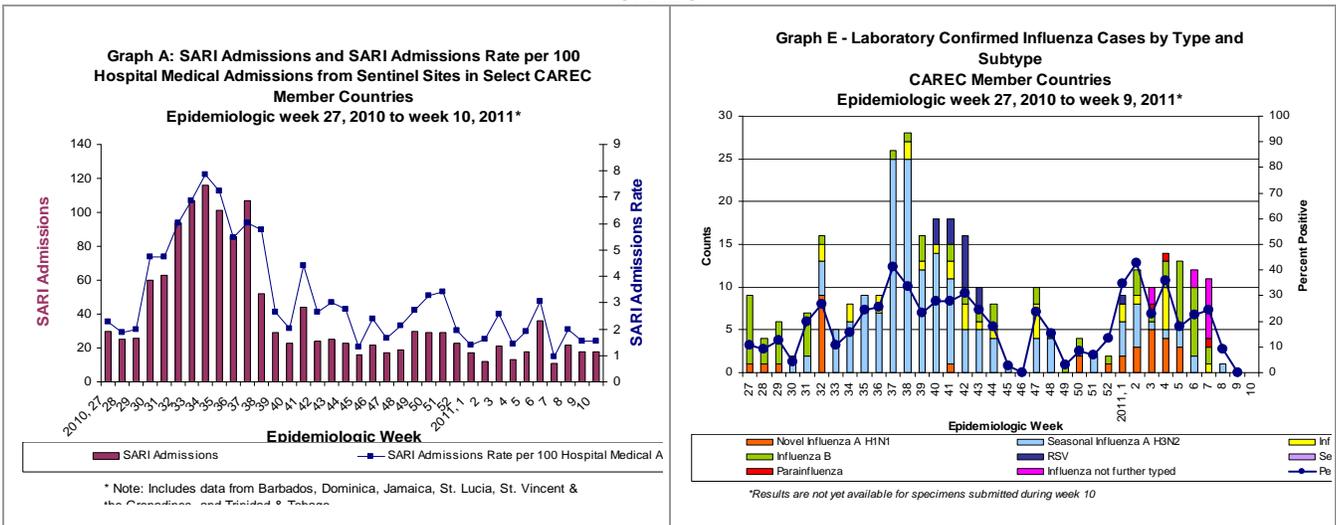


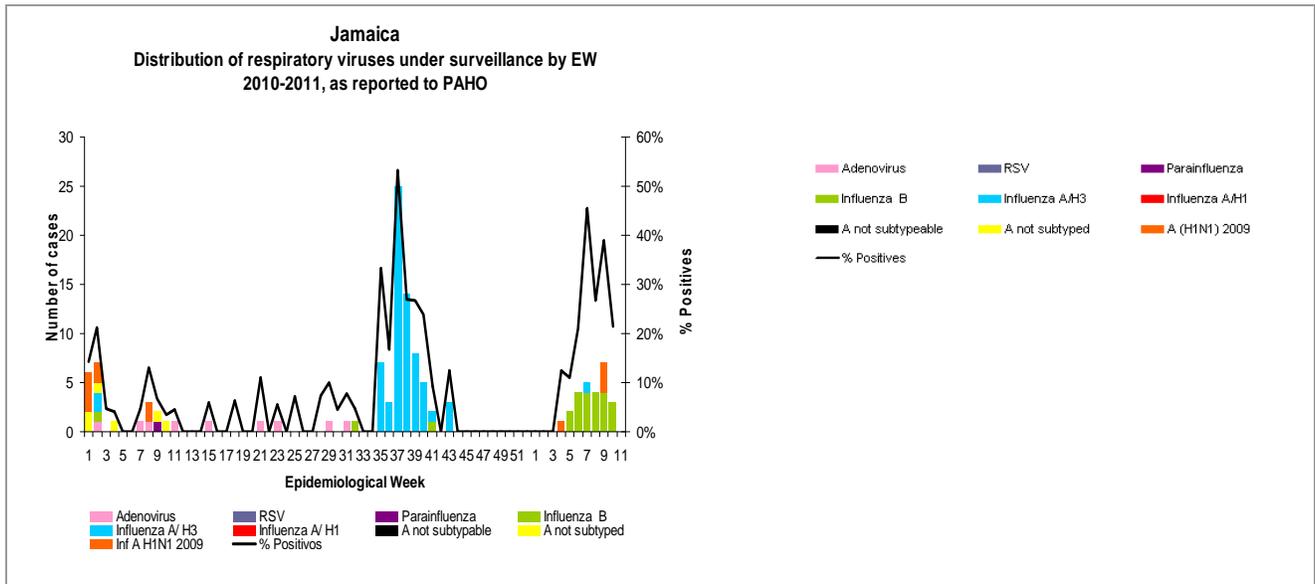
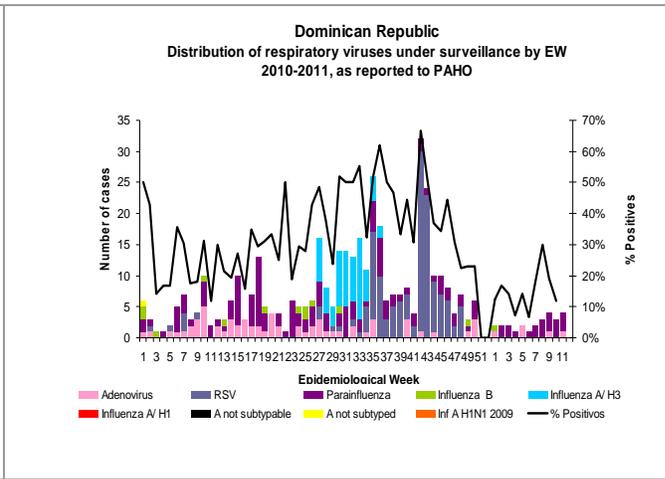
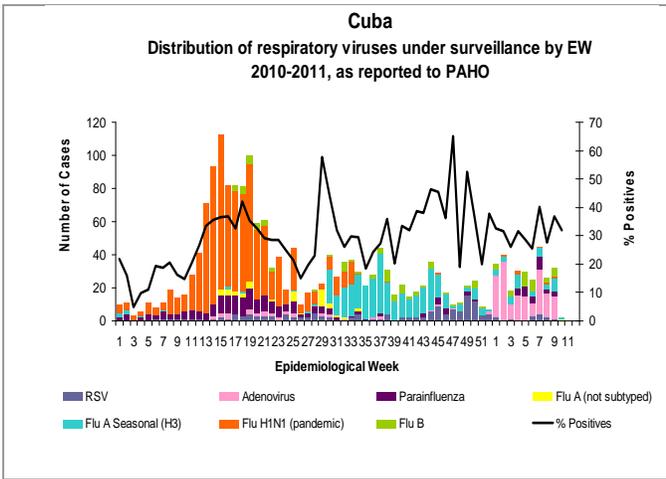
United States



Caribbean

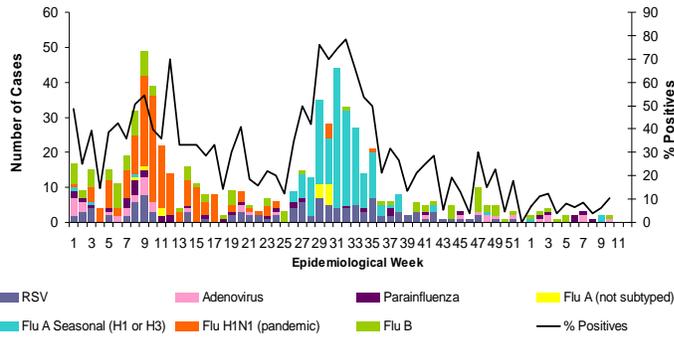
CAREC





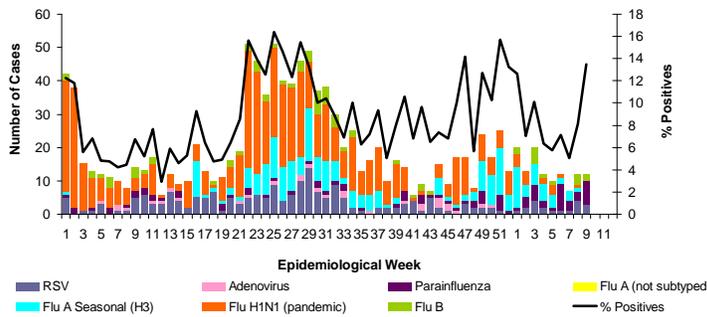
Central America

Honduras
Distribution of respiratory viruses under surveillance by EW
2010-2011, as reported to PAHO



South America - Andean

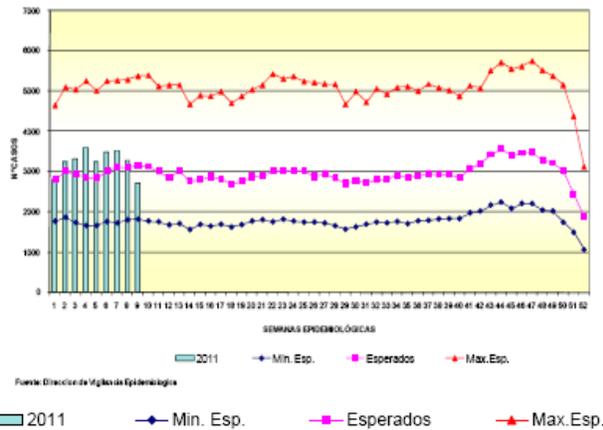
Colombia
Distribution of respiratory viruses under surveillance by EW
2010 - 2011, as reported to PAHO



Venezuela

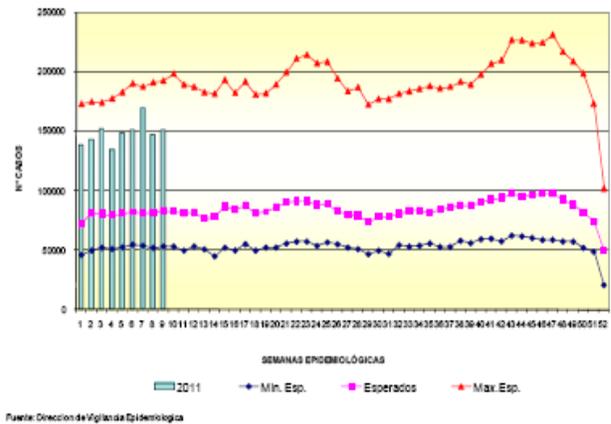
Numbers of Acute Respiratory Disease Cases, Venezuela, 2010-2011

Gráfico N° 5
Neumonías
Canal Endémico 2005 - 2011
Venezuela 2011

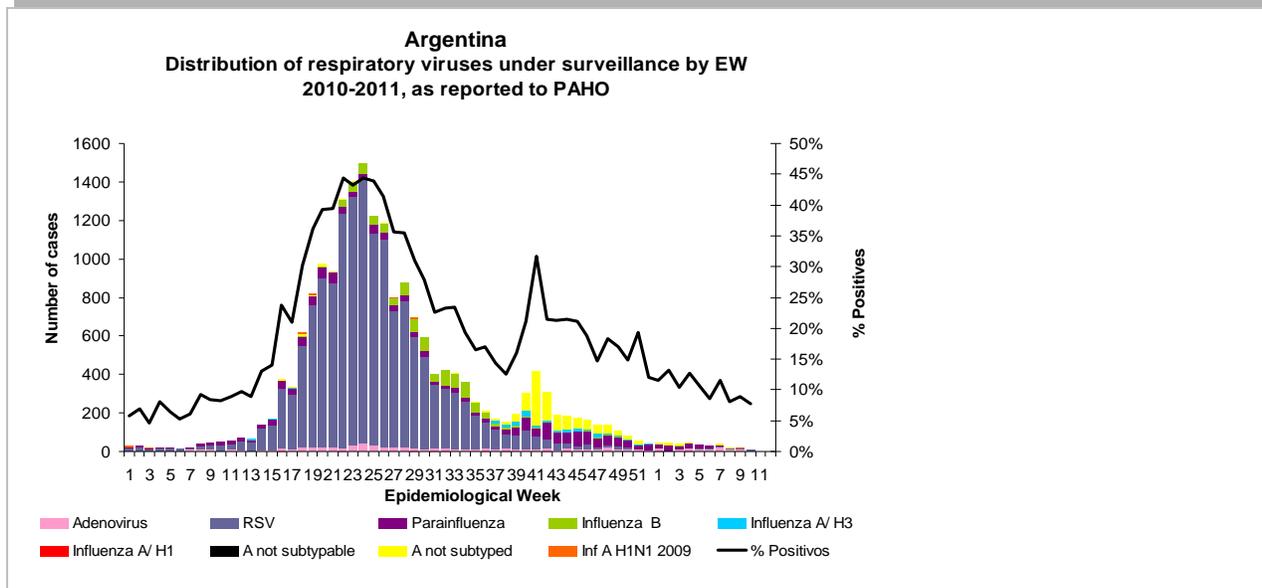


Numbers of Pneumonia Cases, Venezuela, 2010-2011

Gráfico N° 2
Infecciones Respiratorias Agudas
Canal Endémico 2005 - 2011
Venezuela, 2011



South America – Southern Cone



¹ Canada. FluWatch Report. EW 10. <http://www.phac-aspc.gc.ca/fluwatch/>

² USA. Surveillance Summary. Week 10. Centers for Disease Control and Prevention

³ Venezuela. Boletín epidemiológico. SE 09. Ministerio del Poder Popular para la Salud.