



Influenza (June 1st, 2011 - 17 h GMT; 12 h EST)

PAHO interactive influenza data: http://ais.paho.org/phip/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

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, although the activity of influenza remains at a low level, some countries continued to report detection of influenza A/H1N1 2009 (Costa Rica, Jamaica and the Dominican Republic) and influenza A/H3 (Cuba and Guatemala).
- In South America, although the activity of influenza remains at a low level, 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, with respiratory syncytial virus (RSV) as the predominant respiratory virus.

Epidemiologic and virologic influenza update

North America

In Canada¹, in epidemiological week (EW) 20, influenza activity indicators [Influenza-like Illness (ILI) consultation rate, outbreak numbers, pediatric and adult hospitalizations] continued to decrease in the country. The ILI consultation rate was 10 per 1000 consultations, less than observed during the previous week and remained within the expected for this time of year. The percentage of positive samples for influenza continued to decrease; in EW 20 it was 2.9%, less than the previous week (3.8%). Among positive samples (n=51), 66.7% was influenza B and 33.3% was influenza A. Among other respiratory viruses, after a sustained increase of the proportion of positive samples for parainfluenza since EW11, this week such proportion decreased slightly.

In Mexico, between EW 18-20, among all samples tested (n=228), no respiratory viruses were detected.

In the United States², in EW 20, at the national level, the proportion of outpatient consultations for ILI (0.9%) continued below the national baseline. At the regional level, all sub-national regions reported ILI activity to be below their specific baselines. The proportion of deaths attributed to pneumonia and influenza was slightly above its epidemic threshold. This week, no pediatric deaths associated to influenza were notified. During EW 20, 0.8% (n=9) of samples tested were positive for influenza (influenza B, influenza A/H3 and unsubtyped influenza).

Caribbean

CAREC*, between EWs 17-20, reported predominance of rhinovirus as the circulating respiratory virus.

In Cuba, in EW 20, among all samples tested, the percentage of positive samples for respiratory viruses increased from ~55% to ~80%; however the percentage of positive samples for influenza remained at ~4%. In EWs 19-20, influenza A/H3 has been detected as the only circulating influenza virus. Among other respiratory viruses detected, the circulation of rhinovirus was predominant.

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

In the Dominican Republic, in EW 21, among all samples tested, the percentage of positive samples for respiratory viruses decreased to ~30% after a sustained increase in the 5 previous weeks (53% in EW 20). The percentage of positive samples for influenza viruses also decreased to ~10% since the previous week (~25%). Influenza A/H1N1 2009 virus continued to be the predominant influenza virus circulating from EWs 13-21. Among other respiratory viruses, parainfluenza was the predominant virus.

In Jamaica for EW 20, the Acute Respiratory Infection (ARI) consultations proportion remained similar to the previous week (~4%). 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. The percentage of positive samples for influenza decreased in the last 4 weeks, from ~65% (EW 16) to ~6% (EW 20). Between EW 19 and 20 only 2 influenza A/H1N1 cases were detected.

Central America

In Costa Rica, in EW 21, among all samples tested, the percentage of positive samples for respiratory viruses decreased to ~20% from ~50% (EW 20); adenovirus was the predominant respiratory virus in circulation. In EWs 20-21 the influenza virus detected was influenza A/H1N1 2009.

In Guatemala, in EWs 20-21, influenza A/H3N2 was detected in circulation, which has been the predominant influenza virus up date in 2011.

In Panama, in EW 20, no respiratory viruses were detected. No influenza virus has been detected since EW 15.

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 EW 16-20 and RSV as the predominant respiratory virus, especially between EW 9-16. Among analyzed samples in EW 20, the positivity percentage was ~30% for respiratory viruses and ~20% for influenza viruses. While in the department of Santa Cruz (east of the country), between EWs 19-21, 7 influenza cases were detected (5 influenza A/H1N1 2009 cases and 2 influenza A/H3 cases) after several months of influenza detection absence.

In Colombia, according to the national laboratory, in EWs 19-20, the predominant respiratory viruses cocirculating were influenza A/H3N2 and influenza A/H1N1. The percentage of positive samples to respiratory viruses increased from \sim 5% (EW 17) to \sim 20% (EW 20) and the percentage of positive samples to influenza increased from \sim 3% (EW 16) to \sim 20% (EW 21).

In Ecuador, in EW 20, at the national and regional level (Quito, Guayaquil, Cuenca and Azoguez), the percentage of SARI hospitalizations, ICU admissions for SARI and SARI deaths remained low and relatively similar to the previous week (<7%). This week, the percentage of positive samples for respiratory viruses remained at ~20%. No influenza viruses have been detected since EW 11. RSV has been the predominant respiratory virus in circulation since EW 9, especially in children less than 5 years of age.

In Peru³, in EW 19, 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 similar to the previous week and remained within the endemic channel for this time of year. To date in 2011, 108 pneumonia deaths were reported in children less than 5 years old, which represented less cases than that of 2010 for this time of year; finding the highest recounts in Loreto, Puno, Lima and Junin.

South America - Southern Cone

In Brazil⁴, in EW 17, among samples tested the percentage of positive samples for respiratory viruses and for the influenza virus was 17% and 9%, respectively. Among the respiratory viruses, RSV has been the predominant virus in circulation between EWs 12-17. Among influenza viruses, the predominant virus those weeks was influenza A/H3, followed by influenza B.

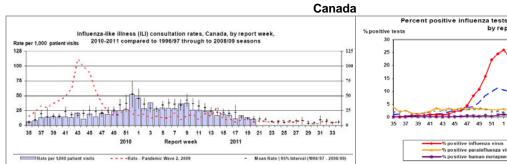
In Chile⁵, in EW 20, the ILI activity (6.1 consultations per 100,000 inhabitants) at the national level was slightly higher than the previous week (4.9 per 100,000 inhabitants) and remained within the expected levels for this time of year and less than that observed during 2009 and 2010; whilst at the regional level, an

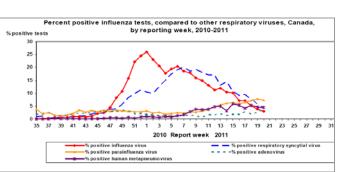
increase in the notification of ILI cases was observed in Maule, Puerto Montt and Collipulli in Araucania. The percentage of emergency department admissions for respiratory cases in children less than 15 years old continued to increase to 46% since EW 15 (~30%) which was higher than observed in 2010. In EW 20, no deaths associated to influenza were reported. The number of positive cases for respiratory viruses showed an increasing trend between EW 13-20, with increasing RSV as the predominant virus in circulation. In EW 20, some positive cases of influenza A/H1N1 2009 and influenza A/H3 were detected.

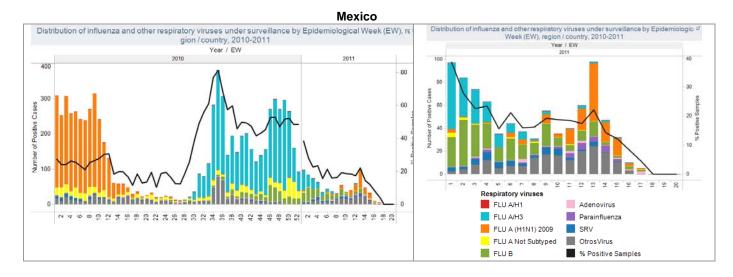
In Paraguay⁶, the proportion of ILI outpatient consultations, among all consultations, increased in the last 3 weeks, from 5% (EW 17) to 8.3% (EW 20), having the highest increase in the children less than 5 years old group. The proportion of admissions for SARI among admissions for all causes, remained similar to the previous week at <5%; however, in EW 20, there was an increase compared to the previous week in the proportion of ICU admission for SARI (from 6% to 15%) and in the proportion of SARI deaths (from 1.5% to 4.6%). 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.

Graphs

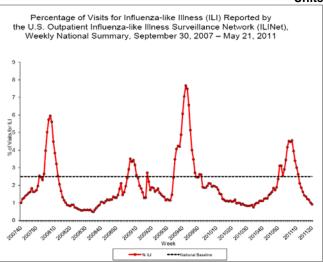
North America

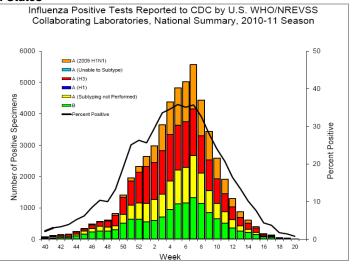






United States

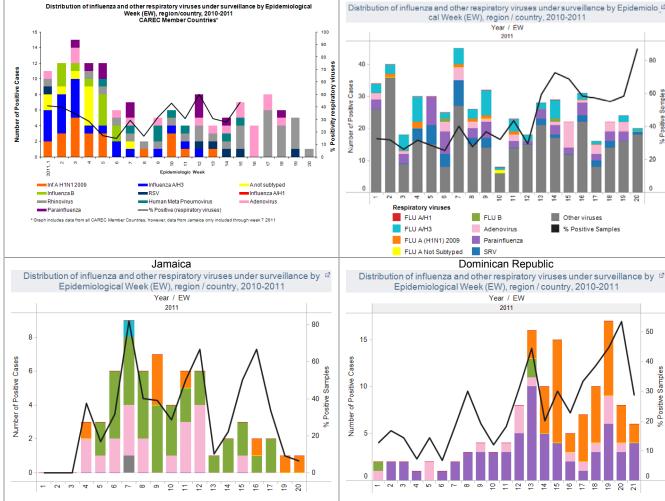




Cuba

Caribbean





FLU B

Adenovirus

Parainfluenza

Other viruses

% Positive Samples

Respiratory viruses FLU A/H1

FLU A/H3

FLU A (H1N1) 2009

FLU A Not Subtyped

80

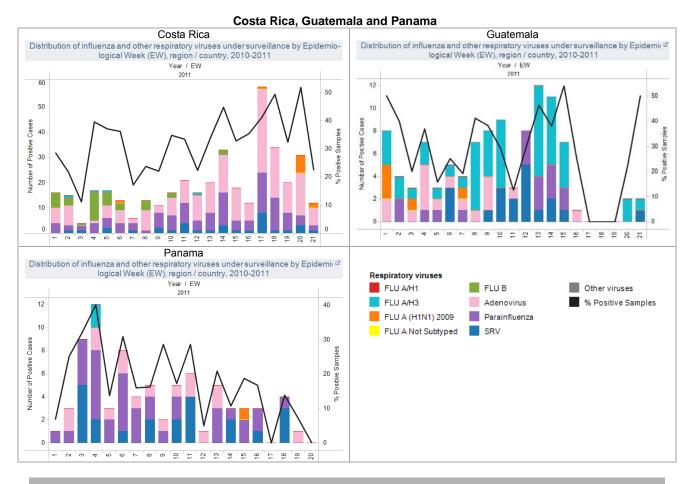
Samples

50

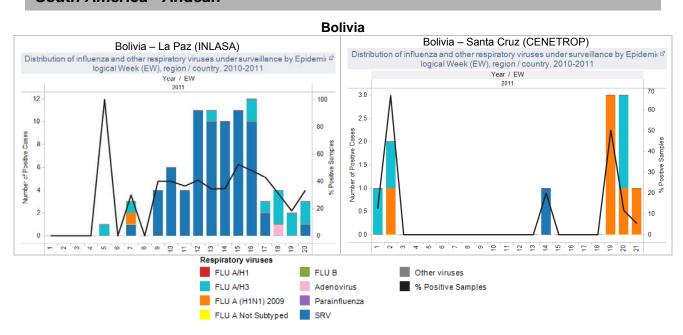
40

10

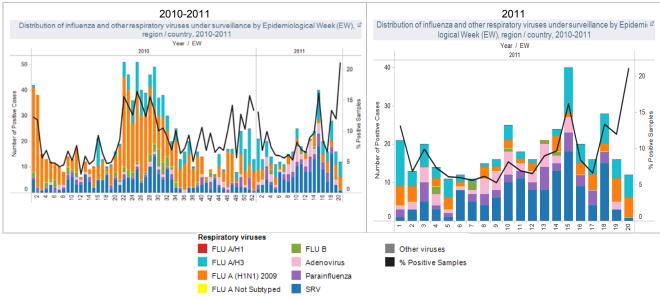
Central America



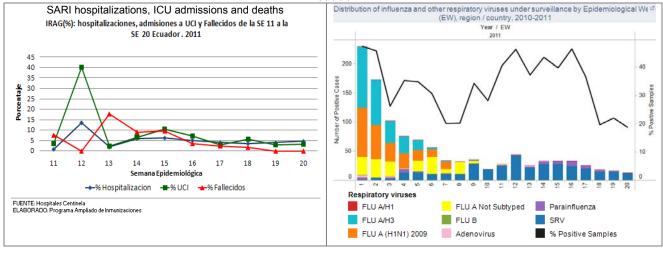
South America - Andean

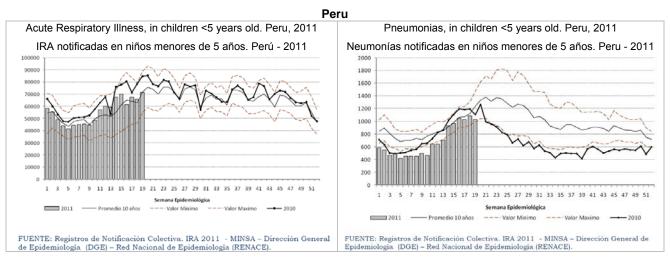


Colombia

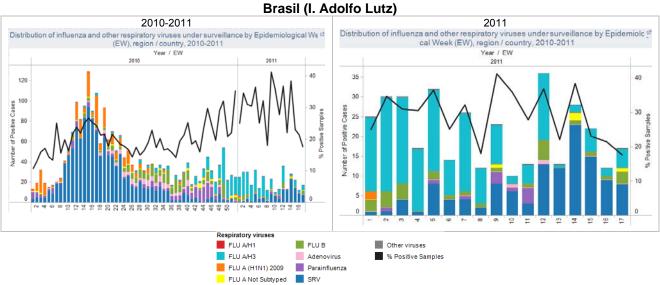


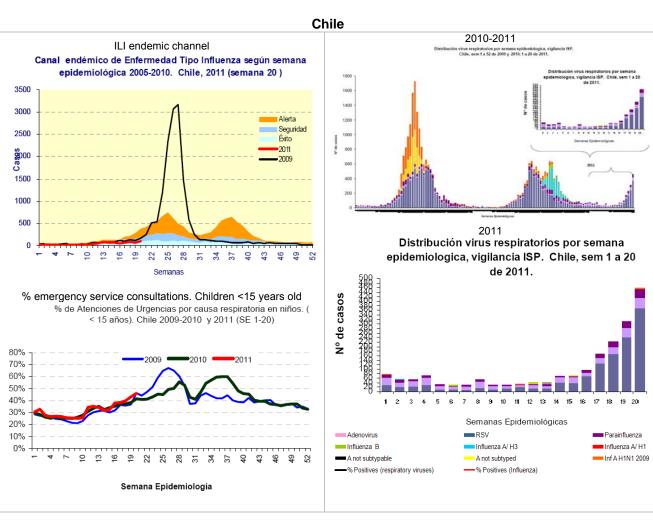
Ecuador

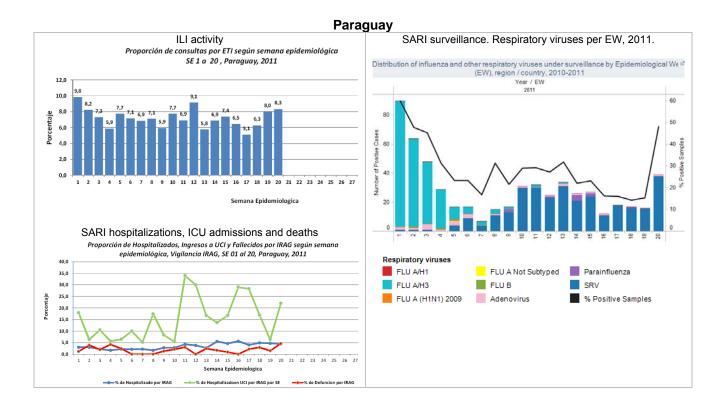




South America - Southern Cone







¹ FluWatch Report. EW 20. http://www.phac-aspc.gc.ca/fluwatch/

² USA. Surveillance Summary. Week 20. Centers for Disease Control and Prevention

³ Perú. Sala de Situación de Salud. SE 19. Ministerio de Salud. Dirección General de Epidemiología

⁴ Brasil. NIC - Instituto Adolfo Lutz.

⁵ Chile. Informe de situación. SE 20. <u>www.pandemia.cl</u>

⁶ Paraguay. Boletín epidemiológico semanal. SE 21. Ministerio de Salud Pública y Bienestar Social