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, most of the regions from these countries reported the absence of influenza activity. The detection of influenza in laboratories is low and/or continues to decrease.

- In Central America and the Caribbean, even though in the Dominican Republic the circulation of influenza A/H1N1 2009 persists; in most countries the detection of influenza is none or low (influenza A/H3N2 in Cuba, influenza A/H1N1 2009 in Panama and influenza B in Honduras).

- In South America, even though 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 continued to increase, mainly in children, where the respiratory syncytial virus (RSV) continues to be the predominant virus in circulation, with sporadic detection of influenza.

**Epidemiologic and virologic influenza update**

**North America**

In the United States\(^1\), in EW 23, at the national level, the proportion of outpatient consultations for Influenza-like Illness (ILI) (0.7%) continued to decrease and was below the national baseline. The proportion of deaths attributed to pneumonia and influenza was above its epidemic threshold. This week two pediatric deaths attributed to pneumonia and influenza were notified. During EW 23, the percentage of positive samples to influenza among tested samples (0.3%) continued to decrease and is at the lowest level so far this year.

In Mexico, in EW 23, the percentage of samples positive to influenza among analyzed samples increased compared to the past week, but remains <10%. This week, few positive samples (n=2) to influenza were detected (influenza A/H3N2).

**Caribbean**

In Cuba, in EW 23, among all analyzed samples, the percentage of positive samples for respiratory viruses increased slightly to ~70%; and the percentage of positives to influenza increased to 8% from 0% (EW22). Among the influenza virus, influenza A/H3N2 and influenza B were detected. Among other prominent respiratory viruses, this week rhinovirus remained as the primary virus in circulation.

In the Dominican Republic, in EW 24, among all samples tested, the percentage of positive samples for respiratory viruses decreased slightly to ~35 from ~45% (EW 23), while the positivity percentage to influenza was 27%. According to laboratory data, influenza A/H1N1 2009 has been the primary influenza virus between EW 13-24, with sporadic detections of influenza B. Among other respiratory viruses, parainfluenza continued to be detected.

In Jamaica, in EW 23, the proportion of consultations for Acute Respiratory Infection (ARI) remained similar to the previous week. The proportion of SARI admissions was less than 1% and remained stable compared to the previous week. In EW 23, no SARI deaths were reported. According to laboratory data, no influenza cases were detected between EWs 21-23.
Central America

In Costa Rica, in EW 23, among all samples tested the percentage of positive samples for respiratory viruses remained at ~30%; being adenovirus the primary respiratory virus in circulation. In the last two weeks no positive samples to influenza were detected.

In Honduras, in EW 23, at the national level, the proportion of outpatient consultations for ILI was 4.2% (508/12,086), less than that observed during EW 22 (6.68%). The proportion of Severe Acute Respiratory Infection (SARI) hospital admissions was 2.84% (12/422) less than observed in EW 22 (4%). At the regional level, no major differences were observed between the sentinel surveillance of San Pedro Sula and Tegucigalpa. According to National Laboratory data, circulation of influenza B was detected in the last 2 weeks. Among other respiratory viruses, adenovirus was the predominant virus in the last two weeks, followed by parainfluenza.

In Panama, in EW 23, the percentage of positive samples to respiratory viruses was ~10%, and to influenza viruses was ~5%. This week, circulation of influenza A/H1N1 2009 was detected after 7 weeks. Among other respiratory viruses, the primary virus in circulation is RSV.

South America – Andean

In Bolivia, in EW 23, in the department of La Paz (west of the country), the percentage of samples positive to influenza maintained a sustained increase from EW 20 (17%) to EW 23 (64%), with predominant circulation of influenza A/H3N2 as the only influenza virus between EW 16-23. In the department of Santa Cruz (east of the country), the percentage of samples positive to influenza remained at ~5%, with predominance of influenza A/H3N2 in the last two weeks, posterior to detection of influenza A/H1N1 2009.

In Ecuador, in EW 22, the percentage of samples positive to respiratory viruses increased slightly to ~20%. There was no detection of influenza virus since EW 11. RSV has been the primary respiratory virus in circulation since EW 9, especially in children less than 5 years of age.

In Colombia, in EW 23, co-circulation of influenza A/H1N1 2009 and influenza A/H3N2 was detected in the last weeks.

In Peru2, in EW 22, ARI and pneumonia activity indicators (number of ARI cases in less than 5 years old and the number of children less than 5 years old with pneumonia, respectively) were lower and equal, respectively, compared to the previous week and both remained within the endemic channel for this time of year. To date in 2011, 129 pneumonia deaths were reported in children less than 5 years old, which represents a lower recount than that observed in 2008-2010, for this time of year. Regionally, during 2011, the greatest recounts of deceased children less than 5 years old were in Loreto (20), Puno (15), Junin (10), Lima (10), Amazonas (9).

In Venezuela3, in EW 22, the endemic channel for ARI and pneumonia cases remained similar to the previous week and within the expected level for this time of year.

South America – Southern Cone

In Argentina, by EW 19, ILI and pneumonia endemic channel shows a number of cases slightly lower that the previous week and below the expected for this time of year. The number of hospitalized cases (SARI) in EW 19 remains stable and lower than that observed during 2010. According to laboratory data, by EW 23, the predominant respiratory virus continued to be RSV since EW 10. Among influenza viruses, few cases positive to influenza A/H1N1 2009 were detected.

In Chile4, in EW 23, ILI activity (11.7 consultations per 100,000 inhabitants) at the national level, was higher than the previous week (6.1 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, a discrete increase in the regions of Valparaiso, Metropolitana, Maule, Bio Bio, Los Rios and Magallanes. This week the percentage of emergency department admissions for respiratory cases in children less than 15 years old (50%) was similar to the previous week, after a continuous increase since EW 15 (~30); moreover, it was higher than observed in 2010 and 2009. By EW 23 no deaths associated to influenza have been reported. The number of cases positive to respiratory viruses show an increasing trend in EWs 13-23, with increase of RSV as the primary virus in circulation, followed by adenovirus and parainfluenza. The circulation of influenza continued in a very low proportion.
In Paraguay\(^5\), in EW 22, in SARI surveillance, the proportion of SARI hospitalizations among all hospitalizations, the proportion of ICU admissions for SARI among all ICU admissions, and the proportion of SARI deaths among deaths for all causes, remained below 10%. According to laboratory data at the national level in EW 22, the percentage of positive samples to respiratory viruses decreased from 34% (EW 20) to 12% (EW 22). RSV continued being the primary respiratory virus since EW 6. No influenza viruses have been detected since EW 13.

In Uruguay\(^6\), in EW 25, in SARI surveillance, the proportion of SARI hospitalizations among all hospitalizations, the proportion of SARI ICU admissions among all ICU admissions and the proportion of SARI deaths among deaths for all causes, remained below 10%. This week, the percentage of deaths associated to SARI increased to ~2%. In laboratory, in EW 23, the detection of other respiratory viruses (RSV, followed by parainfluenza and adenovirus) predominated, with few sporadic detections of influenza B and influenza A/H1N1 2009.

**Graphs**

**North America**

**United States**

**Mexico**
Central America

Costa Rica and Panama

Honduras
Argentina

ILI endemic channel
Corredor Endémico Semanal de 2011
Enfermedad Tipo Influenza (ETI), Argentina
Históricos de 5 años: 2005 a 2010 (excluyendo 2009)

Distribution of respiratory viruses by EW, 2010-2011
Distribución virus respiratorios por semana epidemiológica
SE 1 a 23 de 2011. Argentina n=5259

Pneumonia endemic channel
Corredor Endémico Semanal de 2011
Neumonía, Argentina
Históricos de 5 años: 2006 a 2010

Chile

ILI endemic channel
Canal endémico de Enfermedad Tipo Influenza según semana epidemiológica 2005-2010. Chile, 2011 (semana 23)

Distribution of respiratory viruses by EW, 2010-2011
Distribución virus respiratorios por semana epidemiológica (SE), vigilancia ISP. Chile, sem 1 a 23 de 2009 y 2010, 1 a 23 de 2011.

% emergency service consultations. Children <15 years old
% de Atenciones de Urgencias por causa respiratoria en niños, ( < 15 años), Chile 2009-2010 y 2011 (SE 1-23)

Distribution of respiratory viruses by EW, 2011
Distribución virus respiratorios por SE, vigilancia ISP. Chile, sem 1 a 23 de 2011.
Paraguay

**SARI hospitalizations, ICU admissions and deaths**

Parroquia Hospitalizaciones, Ingresos e IU y Felicitaciones por IRAG según semana epidemiológica, Vigencia IRAG, SE 24 de 23, Paraguay, 2011

**Distribution of respiratory viruses by EW, 2011.**

Paraguay, SE 24 de 2011, (MH42)

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Uruguay

**Proporción de IRAG en ingresos hospitalarios, ingresos a UCI y defunciones hospitalarias**

**Distribución de virus respiratorios en vigilancia por SE**

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1. USA. Surveillance Summary. Week 23. Centers for Disease Control and Prevention
4. Chile. Informe de situación. SE 23. [www.pandemia.cl](http://www.pandemia.cl)