Influenza Regional Reports: [www.paho.org/influenzareports](http://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 remained low.
- In Central America and the Caribbean there was a mixed circulation of respiratory viruses. In Cuba, influenza B predominated.
- In South America, respiratory disease activity appears to have peaked (Chile, Paraguay). In Bolivia, Colombia, and Peru there was low circulation of influenza. In Chile and Paraguay, RSV continues to predominate. In Brazil this year, 20.9% of SARI cases were attributed to the influenza.

### Epidemiologic and virologic influenza update

#### North America

In the United States\(^1\), in EW 29, nationally, the proportion of ILI consultations (0.9%) was below the baseline (2.4%). Nationally, the proportion of deaths attributed to pneumonia and influenza for EW 29 (5.6%) was below the epidemic threshold for this time of year (6.6%). In EW 29, one pediatric death associated with influenza B was reported. Among all samples tested during EW 29 (n=1248), the percentage of samples positive for influenza (3.0%) decreased as compared to the previous week. Nationally, among the positive samples, 36.8% were influenza A [among the subtyped influenza A viruses, mainly influenza A(H3N2)] and 63.2% were influenza B.

In Mexico, according to laboratory data, in EW 29, of the samples analyzed (n=20), only one case of influenza A was detected.

#### Caribbean

CAREC*, in EW 29, received epidemiological information from 6 countries: Barbados, Belize, Jamaica, St. Vincent & the Grenadines, Suriname and Trinidad & Tobago. In EW 29, the proportion of severe acute respiratory infection (SARI) hospitalizations was 2.9% which is slightly higher than what was seen in the prior week (2.8%). The rate of SARI admissions increased or stayed the same in 5 of the 6 countries. Children aged 6 months to 4 years had the highest rates of SARI hospitalization. No SARI-related deaths were reported in EW 29. In the last 4 weeks, RSV (Barbados), influenza A (H1N1)pdm09 (Belize and Jamaica), influenza A/H3 (St Lucia), parainfluenza (St. Lucia), influenza B (Jamaica) and rhinovirus (Anguilla, Belize and Trinidad and Tobago) were detected. To date in 2012, the overall percentage positivity for samples tested was 38%, with a 21% positivity for influenza.

In Jamaica for EW 29, sentinel site data showed that the proportion of consultations for Acute Respiratory Illness (ARI) was 4.0% which was similar to the previous week. The proportion of admissions due to SARI was 1.0% which was similar to the previous week. There were no SARI deaths reported for EW 28. There were no respiratory viruses detected in EW 29.

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\(^{1}\) Includes Barbados, Belize, Dominica, Jamaica, St Vincents and the Grenadines, St Lucia, Suriname and Trinidad and Tobago
In Cuba, according to laboratory data in EW 29, among the samples analyzed (n=38), the percent positivity for respiratory viruses was 31.6% and the percent positive for influenza, among all samples analyzed, was 23.7%. Influenza B predominated.

In the Dominican Republic, according to laboratory data from EW 30, among the samples analyzed (n=15), the percent positivity for respiratory viruses was 33.3%. RSV predominated.

Central America
In Costa Rica, in EW 29, according to laboratory data, among all samples tested (n=83), the percentage of positive samples for respiratory viruses was 36.1%, which was lower than the previous week (45.1%). Parainfluenza, adenovirus, influenza A(H3), influenza B, and RSV were detected.

In Honduras, in EW 29, of the total samples analyzed (n=14), the percent positivity was 21.4%, with influenza A(H1N1)pdm09, parainfluenza, and RSV detected.

In Nicaragua, in EW 29, according to laboratory data, among all samples tested (n=31), the percentage of positive samples for respiratory viruses was 41.9%, which was higher than the previous week (33.3%). RSV, parainfluenza, and influenza B were detected.

South America – Andean
In Santa Cruz, Bolivia, according to data from Cenetrop, viral circulation showed a decreasing trend since EW 26 with a positivity of 9.5% in EW 29, although a low number of samples were analyzed (n=21). In the SARI surveillance from La Paz, in EW 29, the proportion of SARI hospitalizations (8.1%) decreased as compared to the previous week; no SARI deaths were reported. In this Department, viral circulation showed a decrease in the positivity since EW 23, reaching 16.3% among the 43 samples analyzed, with a predominance of influenza A(H1N1)pdm09 (4/7).

In Colombia, according to laboratory data in EW 28, among the samples analyzed (n=21), the percent positivity for respiratory viruses was 4.8% and one case of influenza A/H3 was detected.

In Peru at the national level, through EW 27, at the national level, among the samples analyzed (n=45), the percent positivity was 24.4% for any respiratory virus and no virus predominated.

América del Sur – Cono Sur
In Brazil\textsuperscript{2}, as of EW 29, a total of 11,232 cases of SARI were reported of which 20.9% (n=2,346) were attributed to the influenza, of which 75% (n=1,762) were attributed to influenza A(H1N1)pdm09.

In Chile, in EW 29 at the national level, ILI activity decreased with respect to the previous week, remaining in the alert zone of the endemic channel (14.5/100,000 population). The percent of emergency visits for respiratory causes, showed a decrease and reached 31.5% in EW 29, but superseding values expected for this time of year. According to laboratory data at the national level, in the same week, among the samples analyzed (n=1,598), the percent positivity for respiratory viruses was 48.3%, which was lower than the previous week, with a predominance of RSV (84%). According to the SARI surveillance system, the proportion of hospitalizations reached 5.7% in EW 28, which was unchanged with respect to the previous week. Since the beginning of the year, 37 SARI deaths have been reported and in three, influenza A/H3 was confirmed, in one, influenza A not subtyped and in one, influenza B. also showed an increase since EW 19, reaching 5.9% in EW 27. There has been an increase in the percent positivity of SARI samples in the last weeks, reaching 79.2% in EW 28 among all samples analyzed (n=96) with a predominance of RSV (57%).

In Paraguay, at the national level, in EW 29, the proportion of ILI consultations did not show significant changes with respect to the prior week. The ILI rate was the same this week (218/100,000 population). According to the laboratory data, at the national level, in EW 29, among all samples analyzed (n=154), the positivity was 45% with a predominance of RSV (58%) and influenza A(H1N1)pdm09 (30%). In the SARI surveillance system, the proportion of hospitalizations (11%), ICU admissions (35.5%), and deaths (9.3%)
did not change much with respect to the previous week. Since the beginning of the year, a total of 117 SARI-deaths were reported of which 15 were confirmed for some virus, of which 10 were for influenza A(H1N1)pdm09. For the same week, among the samples analyzed from SARI cases (n=53), the percent positivity was lower than the previous week with a predominance of RSV (24/25).

Graphs

**North America**

**United States**

**Mexico**

**Distribution of respiratory viruses by EW, 2011-2012**
Caribbean

CAREC

**SARI Admissions and SARI Admissions Rate per 100 Hospital Medical Admissions from Selected Sites in CAREC Member Countries**

*Note: Graphs include data from Antigua, Barbados, Bahamas, Bermuda, Dominican Republic, St. Lucia, St. Vincent and the Grenadines, Suriname and Trinidad & Tobago.*

**Distribution of respiratory viruses, 2011-2012, Cuba**

**Distribution of respiratory viruses, 2011-2012, Dominican Republic**

**Respiratory viruses**

- FLU A
- FLU A/H1N1 2009
- FLU B
- Parainfluenza
- Other viruses
- % Positive Samples

Jamaica

**Percentage of Hospital Admissions for Severe Acute Respiratory Illness (SARI), Jamaica, 2011-2012**

**Distribution of Respiratory Viruses**

- FLU A
- FLU B
- Parainfluenza
- Other viruses
- % Positive Samples
Central America

Costa Rica, Honduras, and Nicaragua

Costa Rica
Distribution of respiratory viruses, 2012

Honduras
Distribution of respiratory viruses, 2012

Nicaragua
Distribution of respiratory viruses, 2012

South America - Andean

Colombia
Distribution of respiratory viruses by EW-2012
**Bolivia**

**Distribution of respiratory viruses-Cenetrop, 2011-12**

**Distribution of respiratory viruses -La Paz, 2011-12**

**Peru**

**Distribution of respiratory viruses by EW 2012**
Brazil
Distribution of deaths among SARI cases-Brazil, through 12/07/2012.

Figura 2: Distribuição do total de óbitos por SARI segundo vírus identificado e semana epidemiológica (SE) de início dos sintomas. Brasil, até SE 29 (encerrada em 21/07/2012).

Chile
ILI cases by EW 2012

Distribution of respiratory viruses by EW, 2011-2012

SARI cases: Distribution of respiratory viruses by severity, 2012

SARI cases: Distribution of respiratory viruses, 2012
**Paraguay**

ILI endemic channel

![ILI endemic channel](image1)

Distribution of respiratory viruses by EW, 2012

![Distribution of respiratory viruses by EW, 2012](image2)

SARI cases (%) by EW 2012

![SARI cases (%) by EW 2012](image3)

SARI cases: distribution of respiratory viruses by EW, 2012

![SARI cases: distribution of respiratory viruses by EW, 2012](image4)

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1. US Surveillance Summary. EW 29. Centers for Disease Control and Prevention