

Regional Update

Pandemic (H1N1) 2009

(March 1, 2010 - 17 h GMT; 12 h EST)

The information contained within this update is obtained from data provided by Ministries of Health of Member States and National Influenza Centers through reports sent to Pan American Health Organization (PAHO) or updates on their web pages.

I- Evolution of the pandemic

North America

In Canada, in EW 07 the national influenza-like illness (ILI) consultation rate was similar to the previous week and was still below the historical average. 22 hospitalized cases and one death were reported retrospectively this week. A total of 13 oseltamivir-resistant isolates have been reported since April 2009.

In Mexico, from EW 05 to EW 06 there was a 6% increase in the number ILI and severe acute respiratory illness (SARI) cases

In the United States, the proportion of outpatient consultations for ILI has remained below the national baseline for seven consecutive weeks. Three of ten sub-national surveillance regions reported the proportion of outpatient visits for ILI to be above their region specific baseline. Laboratory-confirmed influenza hospitalization rates remained stable, but high, especially in children 0–4 years of age. The proportion of deaths attributed to pneumonia and influenza was below the epidemic threshold. A total of three influenza-associated pediatric deaths were reported. One death was associated with the pandemic virus. A total of 60 oseltamivir-resistant isolates have been detected since April 2009.

Caribbean

In countries providing these data SARI hospitalization incidence increased from EW 5 to EW 6, and remained much lower than the peak

levels seen in EW 40 and 41. From EW 01 to 06, two hospitalizations associated with the pandemic virus and no deaths were reported.

Jamaica reported widespread influenza activity, Bahamas reported regional influenza activity and Dominica reported no activity. Jamaica reported an increasing trend in acute respiratory disease while Bahamas and Dominica reported unchanged trends. These countries reported low/moderate intensity of acute respiratory disease and low impact of acute respiratory disease on health care services.

Weekly Summary

- In North America, acute respiratory disease activity remained stable and is lower than expected in most areas
- In the Caribbean, Jamaica reported an increasing trend in acute respiratory disease
- Central American countries reported decreasing or unchanged trends in acute respiratory disease, except Panama which reported an increasing trend
- South American countries reported unchanged trends in acute respiratory disease.
- In North America, a median of 87.3% of subtyped influenza A viruses were pandemic (H1N1) 2009
- 55 new confirmed deaths in 4 countries were reported; in total there have been 7,539 cumulative confirmed deaths

¹ Participating CAREC member countries, which include, Barbados, Bahamas, Dominica, Jamaica, St Vincent and the Grenadines, and Trinidad and Tobago, were assessed together

Central America

El Salvador and Panama reported no influenza activity while Guatemala reported localized influenza activity. El Salvador and Guatemala reported unchanged or decreasing trends in acute respiratory diseases while Panama reported an increasing trend. All these countries reported low/moderate intensity of acute respiratory disease and low impact of acute respiratory disease on the health care services.

South America

Andean

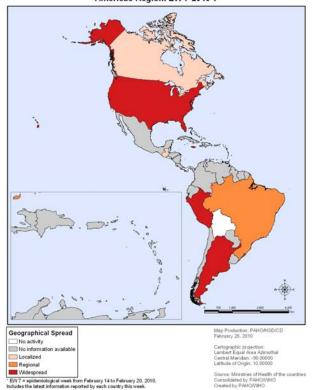
Peru reported widespread influenza activity and Bolivia reported no influenza activity. Both countries reported unchanged trends in acute respiratory disease, low/moderate intensity of acute respiratory disease and low impact of acute respiratory disease on health care services.

Southern Cone

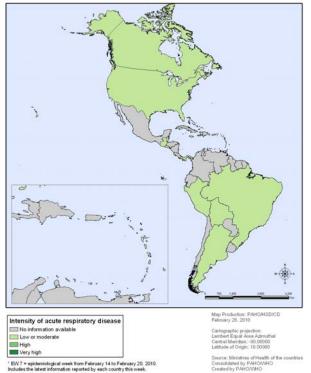
Influenza activity was reported as widespread in Argentina and regional in Brazil. These countries reported unchanged trends of acute respiratory disease, low/moderate intensity of acute respiratory disease, and low impact of acute respiratory disease on health care services.

Argentina reported a low incidence of ILI this week (less than 0.5 per 100,000 population).

Map 1. Pandemic (H1N1) 2009, Geographical Spread by Country. Americas Region. EW 7 2010*.



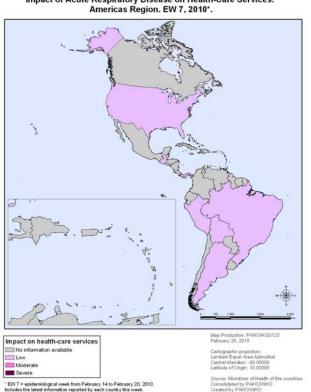
Map 3. Pandemic (H1N1) 2009, Intensity of Acute Respiratory Disease in the Population. Americas Region. EW 7, 2010*.



Map 2. Pandemic (H1N1) 2009, Trend of respiratory disease activity compared to the previous week. Americas Region. EW 7, 2010*.



Map 4. Pandemic (H1N1) 2009, Impact of Acute Respiratory Disease on Health-Care Services. Americas Region. EW 7, 2010*.



II- Description of hospitalizations and deaths among confirmed cases of pandemic (H1N1) 2009

A table containing the number of deaths reported to PAHO is included in Annex 2.

The ratio of males to females among hospitalized cases was approximately one (Table 1). Hospitalizations were highest in children and young adults. Underlying comorbidities were present in approximately 55% of hospitalized cases.

Table 1: Description of hospitalizations and severe cases—selected countries

	Argentina	Canada	
Reporting period	Until EW 6	April 12, 2009–February 20, 2010	
Type of cases reported	Hospitalized	Hospitalized, confirmed	
Number of cases	14,150	8,162*	
Percentage of women	-	50	
Age	Most affected age group: 0–4 years (incidence 76.4/ 100,000 population)	Median 29 years	
Percent with underlying co- morbidities	-	55.1	
Co-morbidities most frequently reported (%)	-	Chronic respiratory disease (36.6%), diabetes (15.2%), immunosuppression (15.1%)	
Percent pregnant among women of child-bearing age	-	20.4**	

^{*} This number represents 94.5% among all hospitalized cases (n=8,637)

^{**} Percent of pregnant women among women 15 to 44 years of age

Overall, approximately half of deceased cases were among women (Table 2). The percentage of cases with underlying co-morbidities varied from 60 to 82%.

Table 2: Description of deaths among confirmed cases of pandemic (H1N1) 2009 in selected countries

- Countries			
	Argentina	Canada	Mexico
Reporting period	Until EW 6	April 12, 2009–February 20, 2010	Until February 24, 2010
Number of confirmed deaths	626	423*	1,076
Percentage of women	No gender differences	49.6	48.3
Age	Highest rate in 50–59 year age group	Median 53 years	Highest percentage (69.5%) in 20–54 year age group
Percent with underlying co- morbidities	-	81.9	60.1
Co-morbidities most frequently reported (%)	-	Chronic respiratory disease (51.3%), chronic heart disease (35.5%), immunoppression (34.7%)	-
Percent pregnant among women of child-bearing age	-	8**	-

^{*} This number represents the 98.8% among all deaths cases (n=428)
** Percent of pregnant women among women 15 to 44 years of age

III- Viral circulation

Turks and Caicos Islands

For the purpose of this analysis, only countries which reported data on influenza A subtypes were considered. We excluded from the calculations of the percentages, results from samples of influenza A that were not subtyped or were unsubtypeable.

Currently, in North America, pandemic (H1N1) 2009 continues to predominate among circulating subtyped influenza A viruses in the Region (Table 3).

Table 3: Relative circulation of pandemic (H1N1) 2009 for selected countries—last EW available

Country	Epidemiologic Week	Percentage of pandemic (H1N1) 2009*
Canada	07	75**
USA	07	100
MEDIAN percentage pandemic (H1N1) 2009		87.3

^{*}Percentage of pandemic (H1N1) 2009 virus = Pandemic (H1N1) 2009 virus / All subtyped influenza A viruses

Table 4: Cumulative relative circulation of pandemic (H1N1) 2009 for selected countries

Country	Time Period	Percentage of pandemic (H1N1) 2009*
Canada	August 30, 2009- February 20, 2010	99.8
CAREC ²	Epidemiologic Week 1, 2009 – Week 6, 2010	95.6
MEDIAN percentage pandemic (H1N1) 2009		97.7

^{*}Percentage of pandemic (H1N1) 2009 virus = Pandemic (H1N1) 2009 virus / All subtyped influenza A viruses

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^{** 3} samples were positive for pandemic (H1N1) 2009 virus and one sample was positive for seasonal influenza subtype.

CAREC countries and territories include Anguilla, Antigua, Barbados, Belize, Bermuda, Cayman Islands, Dominica, Grenada, Guyana, Jamaica, Netherlands Antilles, St. Kitts and Nevis, St. Lucia, St. Vincent and the Grenadines, Suriname, Trinidad and Tobago, and

IV. Topics

Recommended viruses for influenza vaccines for use in the 2010-2011 northern hemisphere influenza season

On 18 February 2010 , the World Health Organization (WHO), published recommendations for the composition of influenza virus vaccines for the upcoming 2010–2011 influenza season in the northern hemisphere.

They recommended a trivalent vaccine, which includes the influenza A/pandemic (H1N1) 2009 strain. The recommended vaccine composition is as follows:

- an A/California/7/2009 (H1N1)-like virus
- an A/Perth/16/2009 (H3N2)-like virus*
- a B/Brisbane/60/2008-like virus
- * A/Wisconsin/15/2009 is an A/Perth/16/2009 (H3N2)-like virus and is a 2010 southern hemisphere vaccine virus.

References

World Health Organization (WHO)

Recommended viruses for influenza vaccines for use in the 2010-2011 northern hemisphere influenza season.

Available from: http://www.who.int/csr/disease/influenza/recommendations2010_11north/en/index.html

Annex 1: Weekly monitoring of pandemic epidemiological indicators for countries that provided updated information—Region of the Americas, Epidemiologic Week 07, 2010

Country	Geographic spread	Trend	Intensity	Impact on Health Care Services	EW
Antigua and Barbuda					
Argentina	Widespread	Unchanged	Low or moderate	Low	6
Bahamas	Regional	Unchanged	Low or moderate	Low	6
Barbados					
Belize					
Bolivia	No activity	Unchanged	Low or moderate	Low	7
Brazil	Regional	Unchanged	Low or moderate	Low	7
Canada	Localized	Unchanged	Low or moderate	NIA	7
Chile					
Colombia					
Costa Rica					
Cuba					
Dominica	No activity	Unchanged	Low or moderate	Low	7
Dominican Republic					
Ecuador	1				
El Salvador	No activity	Unchanged	Low or moderate	Low	7
Grenada	1				
Guatemala	Localized	Decreasing	Low or moderate	Low	7
Guyana					
Haiti					
Honduras					
Jamaica	Widespread	Increasing	Low or moderate	Low	6
Mexico					
Nicaragua					
Panama	No activity	Increasing	Low or moderate	Low	7
Paraguay					
Peru	Widespread	Unchanged	Low or moderate	Low	7
Saint Kitts and Nevis					
Saint Lucia					
Saint Vincent and the Grenadines					
Suriname					
Trinidad and Tobago					
United States of America	Widespread	Unchanged	Low or moderate	Low	7
Uruguay					
Venezuela					

NIA: No information Available

Annex 2: Number of deaths confirmed for the pandemic (H1N1) 2009 virus Region of the Americas. Updated as of February 26, 2010 (17 h GMT; 12 h EST). Source: Ministries of Health of the countries in the Region.

	e. Ministries of Health of the countries in the Regio		
Country	Cumulative number of deaths	New deaths (since Feb 19, 2010, 12 h EST)	
Southern Cone			
Argentina	626	0	
Brazil	1,632		
Chile	155		
Paraguay	47		
Uruguay	20		
Andean Area			
Bolivia	59	0	
Colombia	205		
Ecuador	120		
Peru	217	2	
Venezuela	133		
Caribbean Countries			
Antigua & Barbuda	0	0	
Bahamas	1	0	
Barbados	3	0	
Cuba	53		
Dominica	0	0	
Dominican Republic	23		
Grenada	0	0	
Guyana	0	0	
Haiti	0	v	
Jamaica	7	0	
Saint Kitts & Nevis	2	0	
Saint Lucia	1	0	
Saint Vincent & Grenadines	0	0	
Suriname	2	0	
Trinidad & Tobago	5	0	
Central America	3		
Belize	0		
	47		
Costa Rica El Salvador	33		
	33 18	0	
Guatemala		0	
Honduras	16 11		
Nicaragua			
Panama North America	12	0	
North America	100		
Canada	428	1	
Mexico	1,076	24	
United States	2,587	28	
TOTAL	7,539	55	

As of 26 February, 2010, a total of 7,539 deaths have been reported among the confirmed cases in 28 countries of the Region.

In addition to the figures displayed in Annex 2, the following overseas territories have confirmed deaths of pandemic (H1N1) 2009: United Kingdom Overseas Territories; Cayman Islands (1 death); French Overseas Communities: Guadeloupe (5 deaths), French Guiana (1 death) and Martinique (1 death).