



## Regional Update EW 05

Influenza  
(February 15, 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, overall influenza activity increased in Ontario and the Atlantic provinces, the ILI consultation rate remained within the expected levels for this time of year. In the United States, at the national level, ILI activity increased as compared to the previous week and the proportion of deaths attributed to pneumonia and influenza was at the epidemic threshold. In Canada, influenza A/H3 has predominated since the beginning of the influenza season, while 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
- In Paraguay, the ILI activity has been decreasing over the last five epidemiologic weeks. To date in 2011, the predominant circulating virus was influenza A/H3

### Epidemiologic and virologic influenza update

#### *North America*

In Canada<sup>1</sup>, in epidemiological week (EW) 05, influenza activity increased in Ontario and the Atlantic provinces. In EW 05, no region reported widespread influenza activity, 18 regions reported localized activity, 27 regions reported sporadic activity, and 11 regions reported no activity. During EW 05, the national ILI consultation rate remained within expected levels and was 29.9 per 1,000 consultations—which is similar to EW 04 (26.6 per 1,000 consultations). Children under 5 years of age had the highest ILI consultation rates (72.5 per 1,000 consultations). The percentage of samples positive for influenza was 19.8%, which represents a slight increase from the prior week (17.7%) likely due to an increase in the proportion of positive tests in Ontario and the Atlantic provinces. Since the beginning of the influenza season, influenza A/H3N2 has been the predominant strain circulating in Canada (88% of the subtyped positive influenza A cases). Among other respiratory viruses, the proportion of specimens testing positive for respiratory syncytial virus (RSV) increased from EW 04 (15%) to EW 05 (16.9%).

In Mexico, in EW 05, of all samples tested, the percentage of positive samples for respiratory viruses decreased to less than 15%. In EW 05, the predominant circulating virus was influenza B (60% of all positive samples).

In the United States<sup>2</sup>, in EW 05, at the national level, the proportion of outpatient consultations for ILI (4.6%) was above the national baseline. At the regional level, nine of ten regions reported ILI activity to be at or above their region-specific baseline. The proportion of deaths attributed to pneumonia and influenza was at the epidemic threshold. Eleven influenza-associated pediatric deaths were reported this week. During EW 05, 31.7% of samples tested were positive for influenza [unsubtyped influenza A (33.4%), followed by influenza type B (22.4%), influenza A/H1N1 2009 (22.1%) and influenza A/H3 (22%)]. Of characterized influenza B viruses, 93% belong to the B/Victoria lineage, which is included in the 2010-2011 Northern Hemisphere vaccine and 7% belong to the B/Yamagata lineage.

#### *Caribbean*

CAREC<sup>\*</sup>, in EW 05, reported that the proportion of admissions for severe acute respiratory infection (SARI) decreased to 0.7% as compared to EW 04 (1.4%). Children between 6-48 months of age had the highest

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

SARI admission rate (2.03 per 100 hospitalizations). No SARI deaths have been reported in the last six EWs. During 2011, co-circulation of influenza A/H1N1 2009, influenza A/H3 and influenza B were detected. To date in 2011, 24 positive respiratory cases have been identified among residents in Suriname, St. Kitt's, Barbados, Turks & Caicos Islands, and Jamaica. Among the 24 cases, 42% (10) were influenza A/H3N2, 38% (9) were influenza A/H1N1 2009, 12% (3) were influenza B and 8% (2) were parainfluenza type 3.

In Cuba, in EW 05, of all samples tested, the percentage of samples positive for respiratory viruses remained stable (~30%) and no influenza virus was detected. To date in 2011, influenza A/H3 has been the predominant influenza virus circulating. According to the laboratory data, in EW 05, RSV and parainfluenza virus were the predominant viruses in children under 5 years of age and rhinovirus was the predominant virus in ≥15 years old.

In Dominican Republic, in EW 06, of all samples tested, the percentage of positive samples for respiratory viruses was 6.7%. To date in 2011, the predominant circulating viruses were parainfluenza and adenovirus. No influenza virus has been detected since EW 01, 2011.

In Jamaica, in the EW 05, two cases of influenza B were detected.

### *Central America*

In Costa Rica, in EW 06, of all samples tested, the percentage of positive samples for respiratory viruses remained in ~36% and the percentage of positive for influenza remained similar in ~11% as compared to the previous week. To date in 2011, the predominant circulating influenza virus was influenza B.

In Honduras and Nicaragua, from EW 01-05, small numbers of respiratory viruses were detected. Influenza B has been the predominant influenza virus circulating in 2011.

In Panama, from EW 01-04, small numbers of respiratory viruses were detected. Parainfluenza virus and RSV have been the predominant respiratory viruses circulating in the last 2 weeks.

### *South America – Andean*

In Colombia<sup>3</sup>, from EW 01-03, the overall trend of the acute respiratory illness (ARI) was decreasing and the number of ARI cases in EW 05 is one fourth as compared to the same period in 2010. Influenza B has been the predominant influenza virus circulating in 2011. Influenza A/H3 and influenza A/H1N1 2009 were also detected.

In Ecuador, in EW 03, of all samples tested, the percentage of positive samples for respiratory viruses decreased to ~40% as compare to EW 02 (~80%). From EW 01 – 03, influenza A/H1N1 2009 has been the predominant circulating virus. Influenza A not subtyped and influenza A/H3 were also reported.

### *South America – Southern Cone*

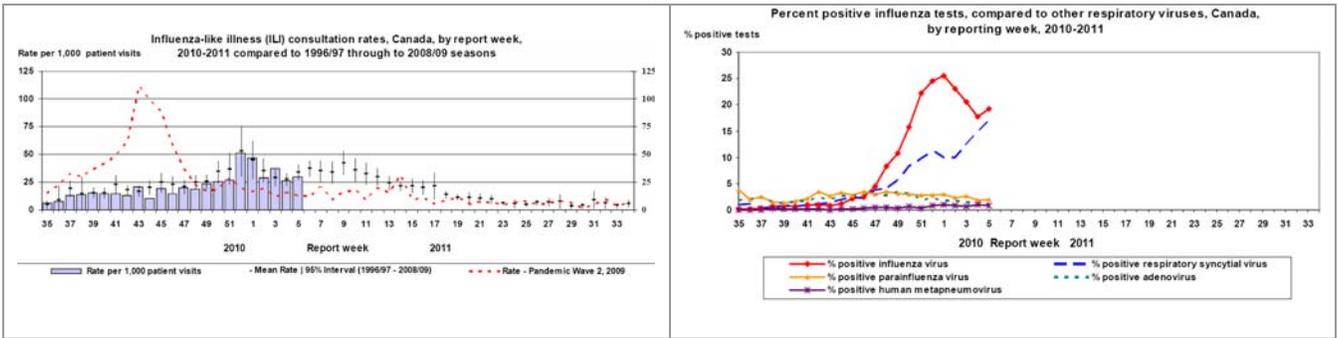
In Paraguay<sup>4</sup>, in EW 05, the proportion of ILI consultations was 3%; from EW 01-05 the overall trend is decreasing. In EW 05, the proportion of SARI cases among the total hospitalized and the proportion of SARI deaths among the total deaths were below 2%, which remains similar as compared to EW 03. The proportion of SARI ICU cases among all ICU admissions decreased from ~14% (EW 04) to ~7% (EW 05). During 2011, of all samples tested, the percentage positive for respiratory viruses was 45,7%. Influenza A/H3 has been the predominant circulating virus in 2011 (94.5% among all the positives respiratory viruses).

In Uruguay<sup>5</sup>, from EW 01 – 07, the proportions of SARI cases among the total number of hospitalizations, intensive care units (ICU) admissions, and deaths associated to SARI have remained less than 2%. To date in 2011, influenza A/H3 has been the predominant circulating virus among SARI cases.

Graphs

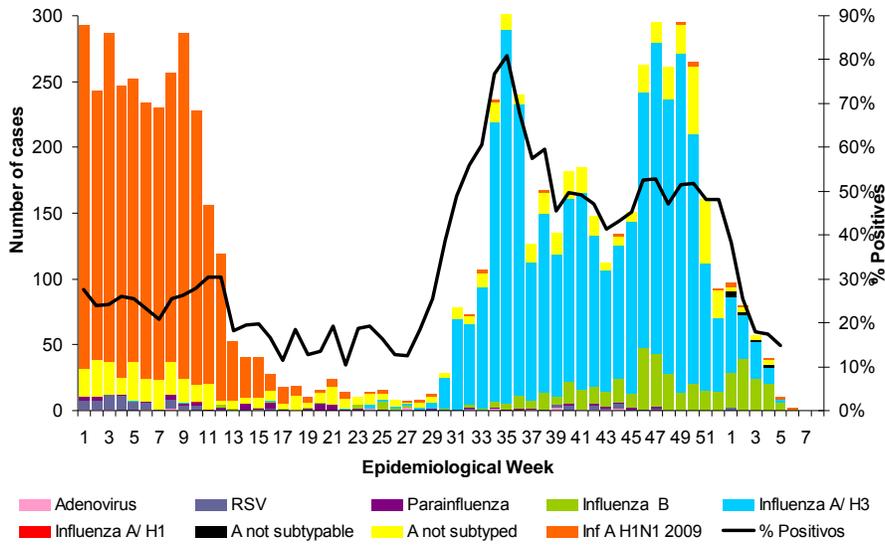
North America

Canada

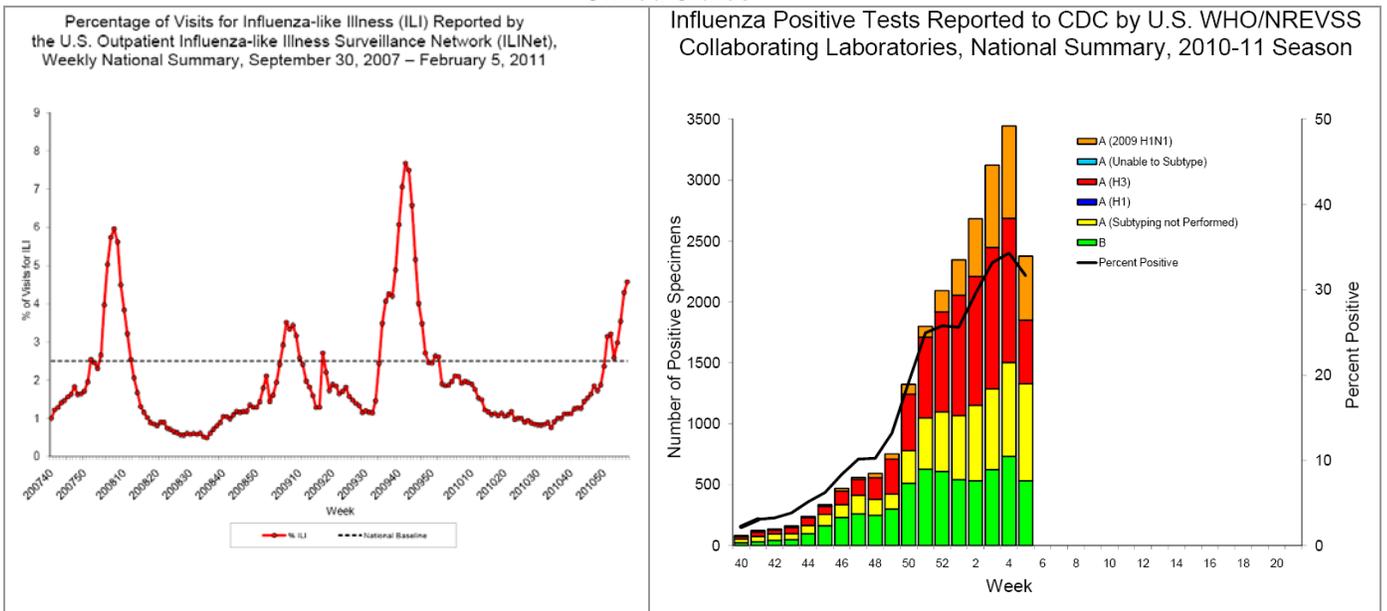


Mexico

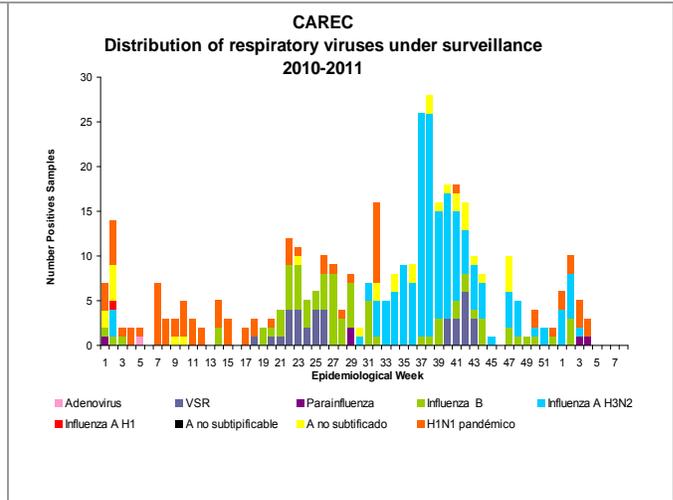
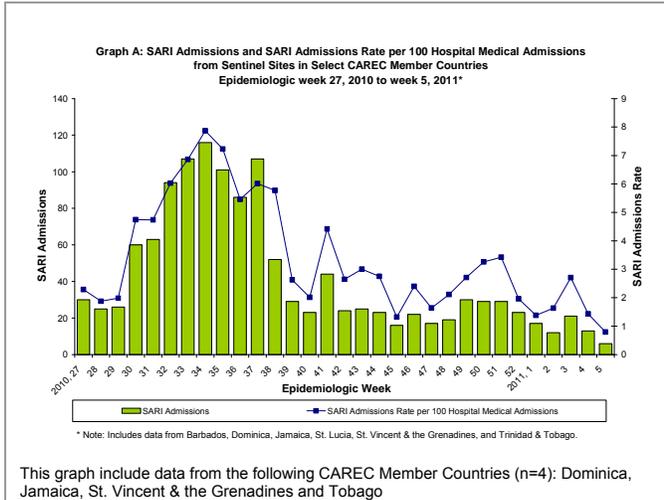
Distribution of respiratory viruses under surveillance by EW 2010-2011 as reported to PAHO



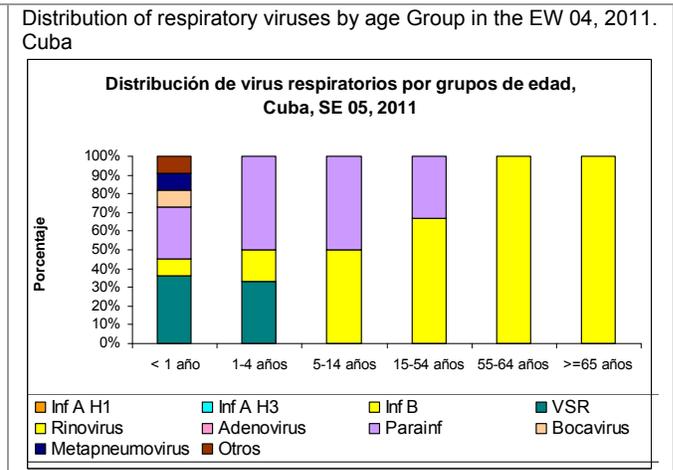
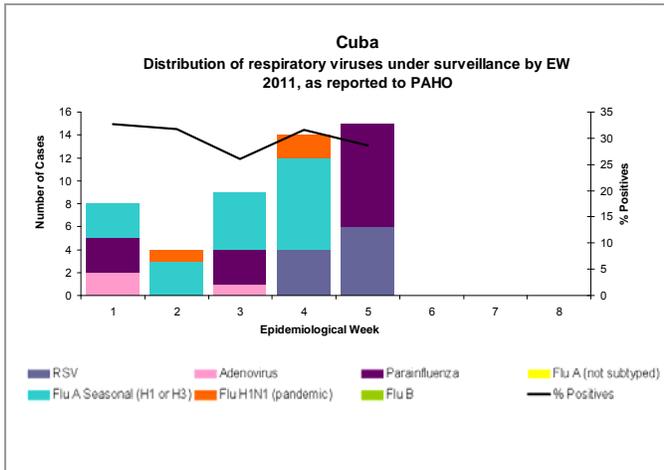
United States



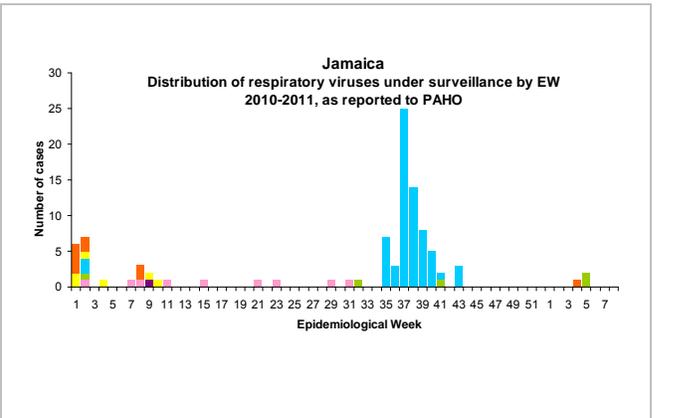
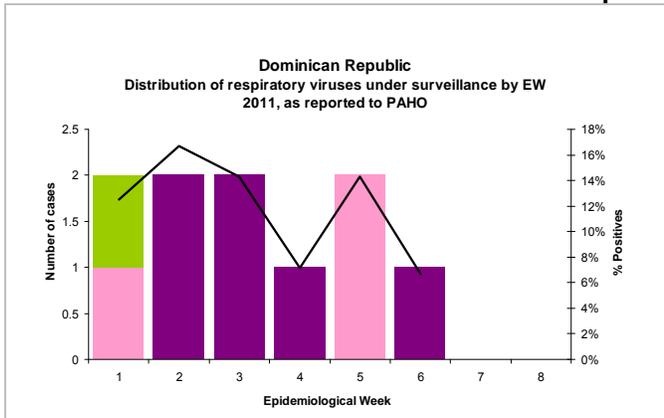
CAREC



Cuba

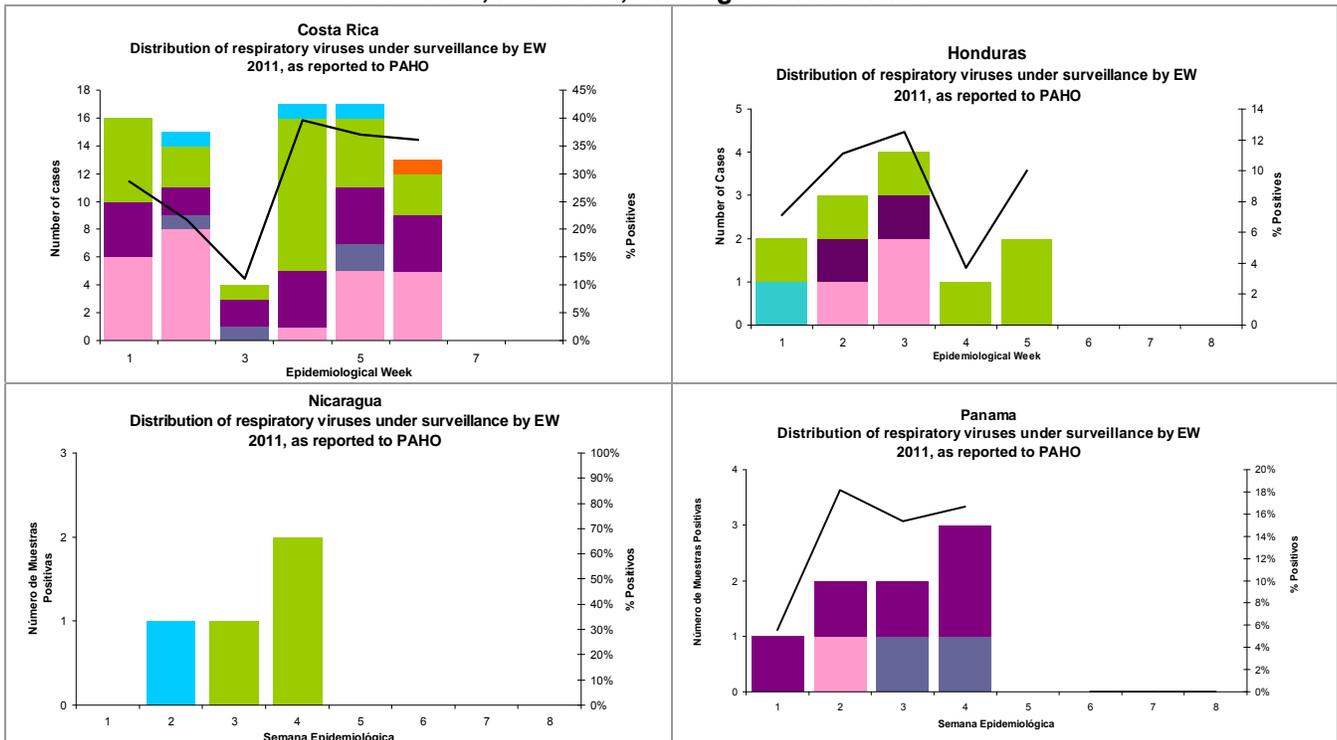


Dominican Republic and Jamaica



# Central America

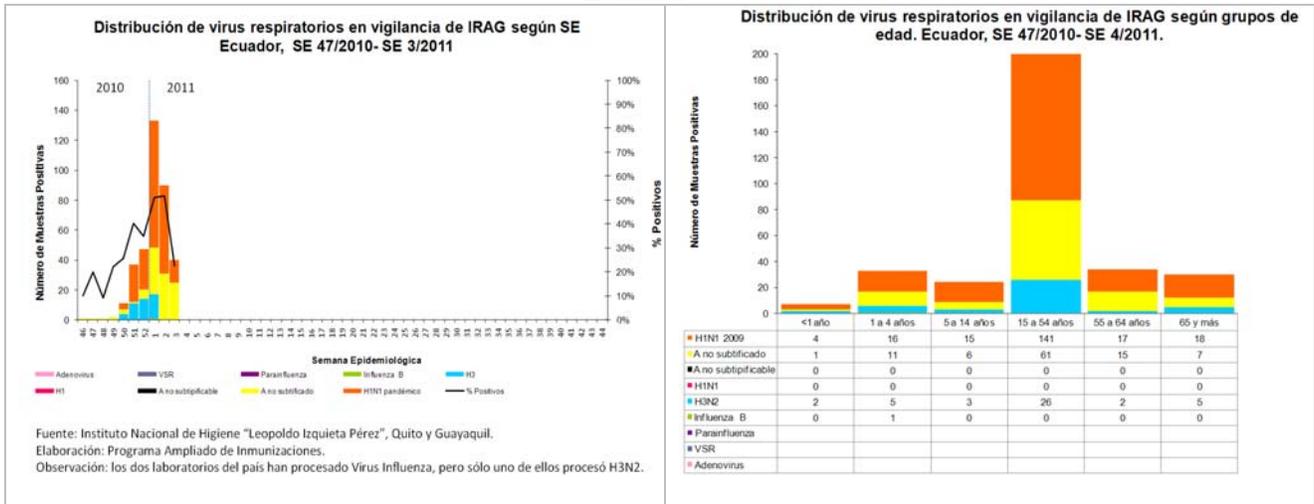
## Costa Rica, Honduras, Nicaragua and Panama



- RSV
- Adenovirus
- Parainfluenza
- Flu A (not subtyped)
- Flu A Seasonal (H1 or H3)
- Flu H1N1 (pandemic)
- Flu B
- % Positives

# South America - Andean

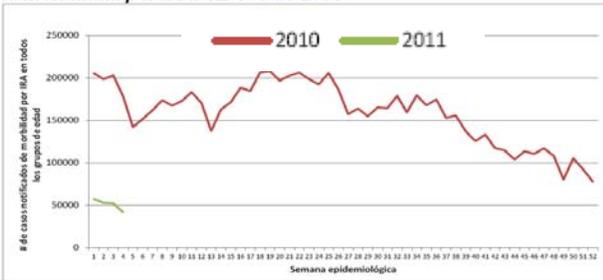
## Ecuador



## Colombia

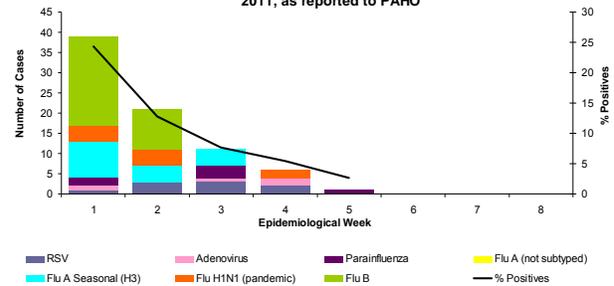
### Numbers of Acute Respiratory Disease Cases, Colombia, 2010-2011

Gráfica 7. Comportamiento de la notificación de la morbilidad por IRA. SE 1- 4 de 2011



Fuente: Sivigila 2011, Instituto Nacional de Salud

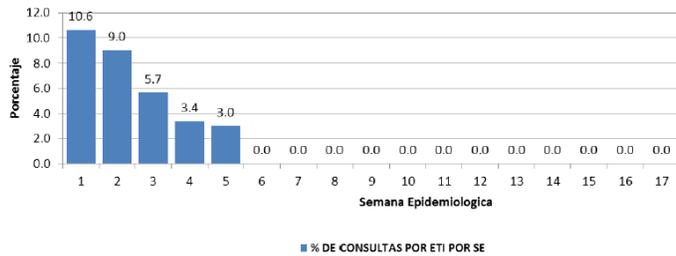
### Colombia Distribution of respiratory viruses under surveillance by EW 2011, as reported to PAHO



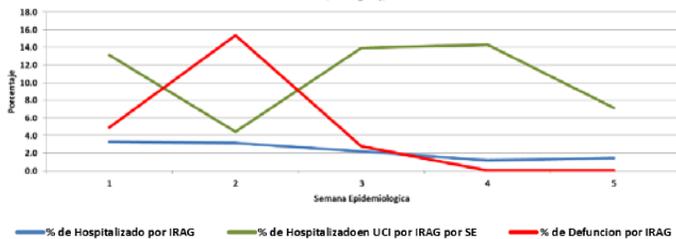
## South America – Southern Cone

## Paraguay

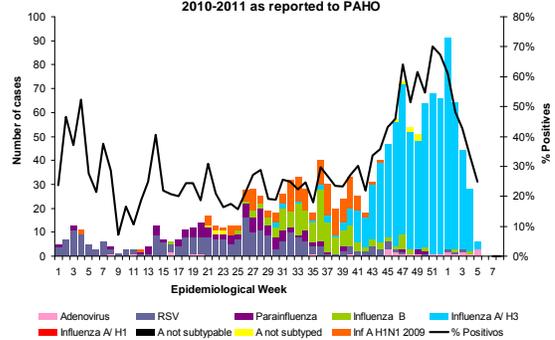
### Proporción de consultas por ETI según semana epidemiológica, Vigilancia Centinela, SE 01 a 05, Paraguay, 2011



### Proporción de hospitalizados, ingresos a UCI y fallecidos por IRAG según SE, Vigilancia IRAG, SE 01 al 05, Paraguay, 2011

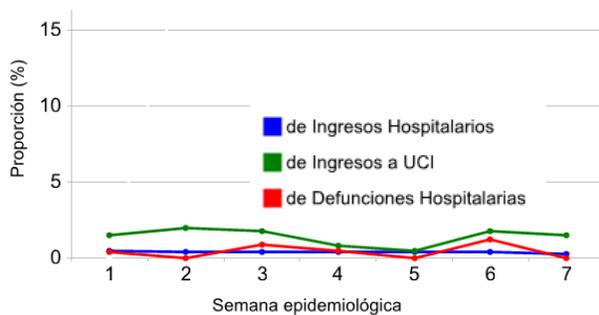


### Paraguay Distribution of respiratory viruses under surveillance by EW 2010-2011 as reported to PAHO

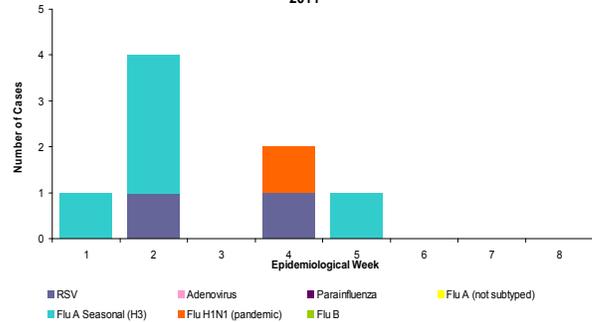


## Uruguay

### Proportion of SARI hospitalizations, SARI hospitalizations in ICU, and SARI deaths Proporción de IRAG en ingresos hospitalarios, ingresos a UCI y defunciones hospitalarias



### Uruguay Distribution of respiratory viruses under SARI surveillance by EW 2011



<sup>1</sup> Canada. FluWatch Report. EW 05. <http://www.phac-aspc.gc.ca/fluwatch/>

<sup>2</sup> USA. Surveillance Summary. Week 05. Centers for Disease Control and Prevention

<sup>3</sup> Colombia. Boletín epidemiológico semanal. SE 04. Instituto Nacional de Salud

<sup>4</sup> Paraguay. Boletín epidemiológico semanal. SE 06. Ministerio de Salud Pública y Bienestar Social

<sup>5</sup> Uruguay. Vigilancia de IRAG. <https://trantor.msp.gub.uy/epidemiologia/servlet/iraggrafmenu>