



## Regional Update EW 52

Influenza  
(January 11, 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 as compared to the previous week, but remained within the expected levels for this time of year. In the United States, at the national level, the ILI activity decreased slightly as compared to the previous week. In Canada and Mexico, influenza A/H3 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 and South America continued to remain low
- Influenza virus A/H3 and influenza B are co-circulating in the Americas Region

### Epidemiologic and virologic influenza update

#### North America

In Canada<sup>1</sup>, in epidemiological weeks (EW) 51 & 52, overall influenza activity increased as compared to the previous weeks. In EW 52, one region reported widespread influenza activity, 8 regions reported localized activity, 22 regions reported sporadic activity and 24 regions reported no activity. During EW 51, the national ILI consultation rate was 27.5 per 1,000 consultations, and it increased during EW 52 (49.8 per 1,000 consultations), but remained within the expected levels for this time of year. Children under 5 years of age had the highest ILI consultation rates (63.3 per 1,000 consultations). The percentage of samples positive for influenza (EW 51: 23% & EW 52: 25%) increased as compared to the previous weeks. Since the beginning of the influenza season, A/H3N2 has been the predominant influenza strain circulating in Canada. Among other respiratory viruses, the proportion of specimens testing positive for respiratory syncytial virus (RSV) increased in EWs 51 & 52 as compared to the previous weeks.

In Mexico, in EW 51, of all samples tested, the percentage of samples positive for influenza was ~48%. Influenza A/H3 has predominated since EW 30.

In the United States<sup>2</sup>, in EW 52, at the national level, the proportion of outpatient consultations for ILI decreased slightly as compared to the previous week; however, this proportion has been above the national baseline for the last two EW. At the regional level, four regions, mostly in the eastern part of the country, reported ILI activity to be above the region-specific baseline, and the remaining six reported ILI activity to be below the region-specific baseline. The proportion of deaths attributed to pneumonia and influenza was below the epidemic threshold. One influenza B-associated pediatric death was reported this week. During EW 52, 20.3% of samples tested were positive for influenza [unsubtyped influenza A (34.5%), followed by influenza type B (34.1%), and influenza A/H3 (27%)].

#### Caribbean

CAREC<sup>\*</sup> reported a decreasing trend in the severe acute respiratory infection (SARI) admission proportion (SARI admissions among 100 hospital medical admissions) from 2.7% (EW 51) to 1.4% (EW 52). Children between 6-48 months had the highest proportion of hospitalizations for SARI (3.4%). No SARI deaths were reported during EW 52. Virological data shows a cocirculation of influenza A/H3 and influenza B from EW 37-50.

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

In Cuba, among the influenza viruses, influenza A/H3 was the predominant virus circulating between EWs 30–52. In EW 52, low levels of adenovirus and RSV were also reported.

In the Dominican Republic, from EW 50-52, no influenza viruses were detected. Low numbers of RSV and adenovirus were detected this week.

In Jamaica, no influenza viruses have been detected since EW 43.

**Central America**

In Costa Rica, influenza type B was the predominant influenza virus circulating between EWs 40-52. Small numbers of adenovirus, parainfluenza and RSV continued to be detected.

In El Salvador, RSV has been the predominant circulating respiratory virus from EW 40 to EW 50. No influenza viruses have been detected since EW 46.

In Honduras, in EW 52, no samples tested positive for respiratory viruses.

**South America – Andean**

In Colombia, from EW 48–51, influenza A/H3 was the predominant circulating respiratory virus. In EW 52, one case of pandemic influenza A (H1N1) 2009 was detected.

In Ecuador, the Ministry of Health reported this week, that even though the number of hospitalizations due to pneumonia and influenza was in its highest level of the year (2010), it was within the endemic channel. The predominant circulating virus in Quito is influenza A (H1N1) 2009 and in Guayaquil is influenza A/H3N2.

**South America – Southern Cone**

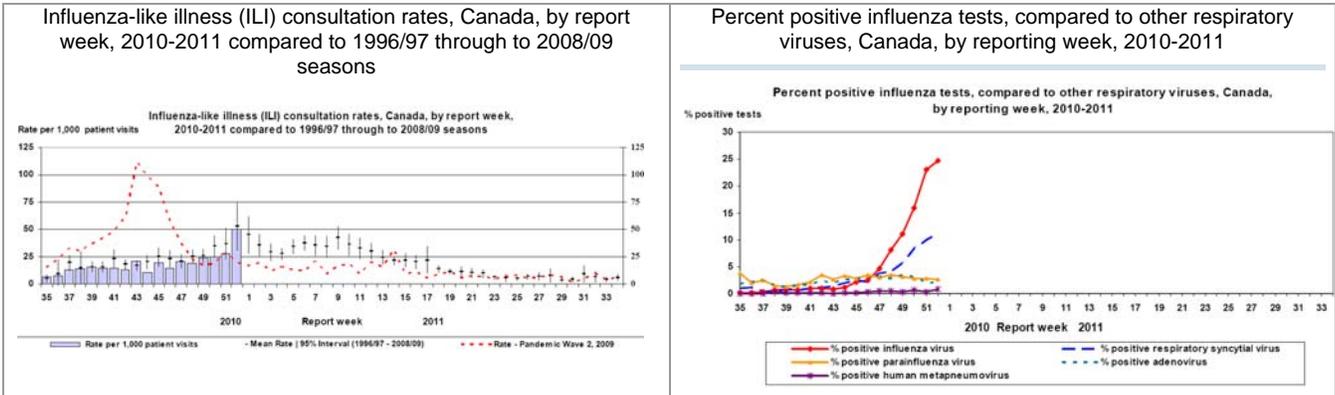
In Argentina, in EW 51, of all samples tested, the percentage of samples positive for influenza was 4.2%. From EW 48–51, influenza A untyped was reported as the predominant respiratory virus circulating. Low levels of adenovirus and RSV were also reported.

In Uruguay<sup>3</sup>, the proportion of SARI cases admitted to intensive care units (ICU) increased in the EWs 51 & 52; but, remained under 4%. The SARI cases among the total number of hospitalizations and deaths associated to SARI remained <1%. From EW 41–47, the predominant virus circulating among sampled SARI cases was influenza A/H3.

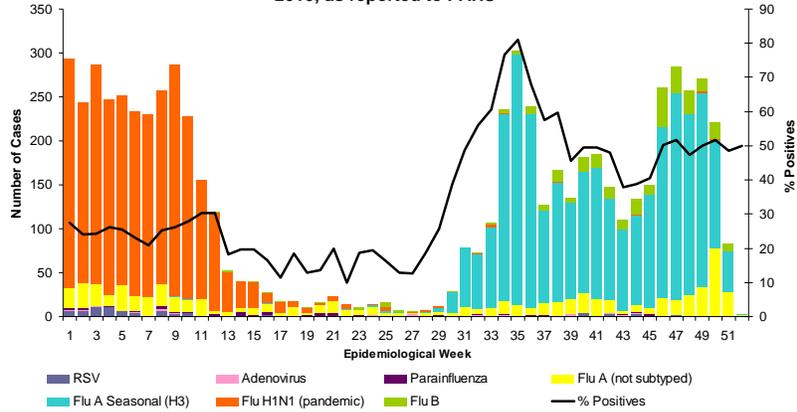
**Graphs**

**North America**

**Canada**

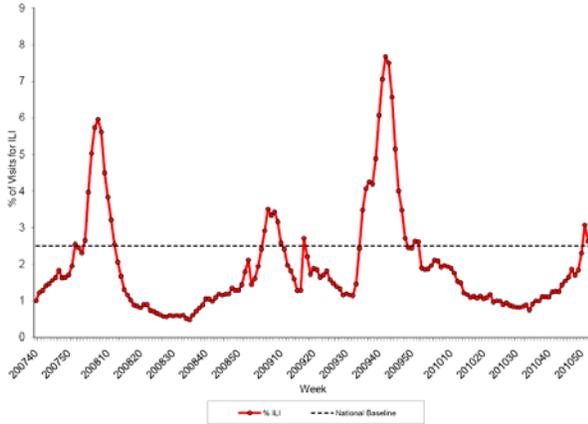


**Mexico**  
Distribution of respiratory viruses under surveillance by EW  
2010, as reported to PAHO

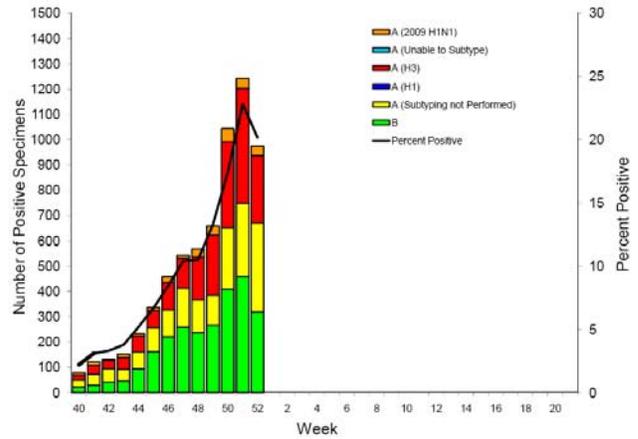


**United States**

Percentage of Visits for Influenza-like Illness (ILI) Reported by the U.S. Outpatient Influenza-like Illness Surveillance Network (ILINet), Weekly National Summary, September 30, 2007 – January 1, 2011



Influenza Positive Tests Reported to CDC by U.S. WHO/NREVSS Collaborating Laboratories, National Summary, 2010-11 Season

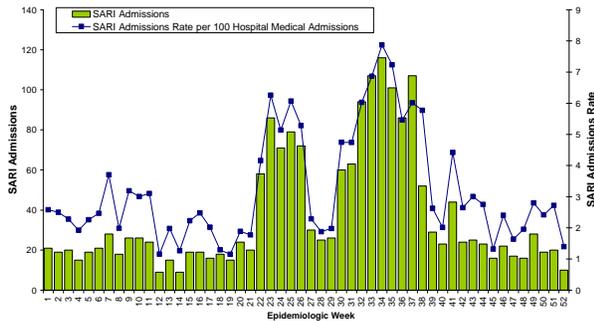


**Caribbean**

**CAREC**

(Barbados, Dominica, Jamaica, St Vincent and the Grenadines, and Trinidad and Tobago)

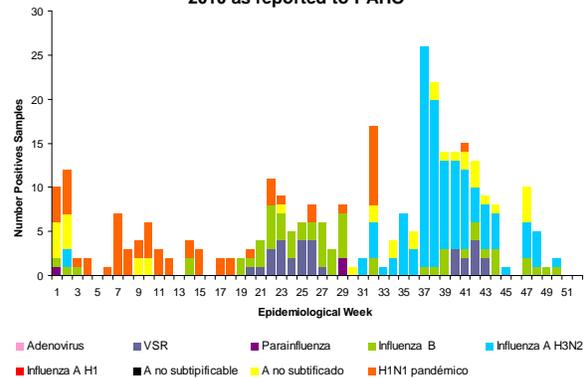
Graph A: SARI Admissions and SARI Admissions Rate per 100 Hospital Medical Admissions from Sentinel Sites in Select CAREC Member Countries Epidemiologic weeks 1-52 2010\*



\* Note: Data from week 52 from Jamaica, Dominica and Tobago

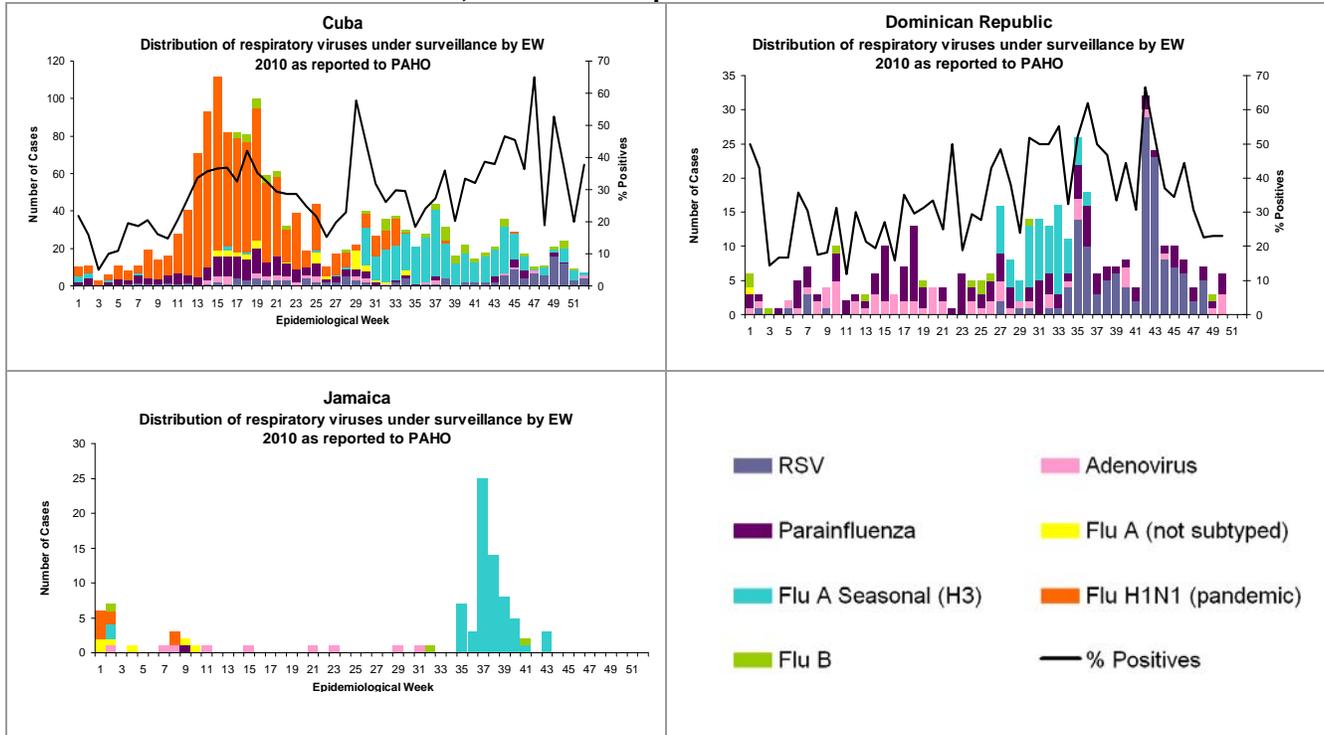
This graph includes data from Jamaica, Dominica and Tobago.

**CAREC**  
Distribution of respiratory viruses under surveillance  
2010 as reported to PAHO



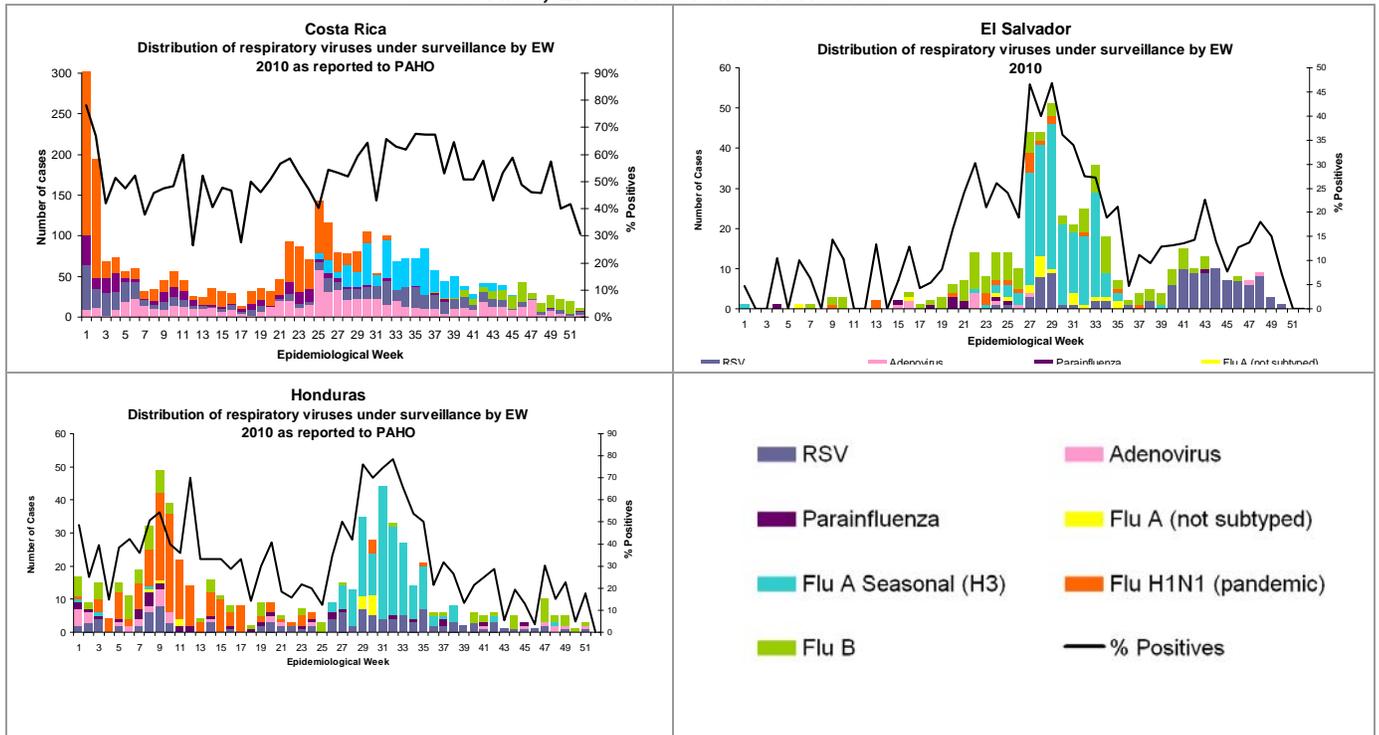
This graph includes data from the CAREC Lab, Dominica, Jamaica and Barbados

## Cuba, Dominican Republic and Jamaica



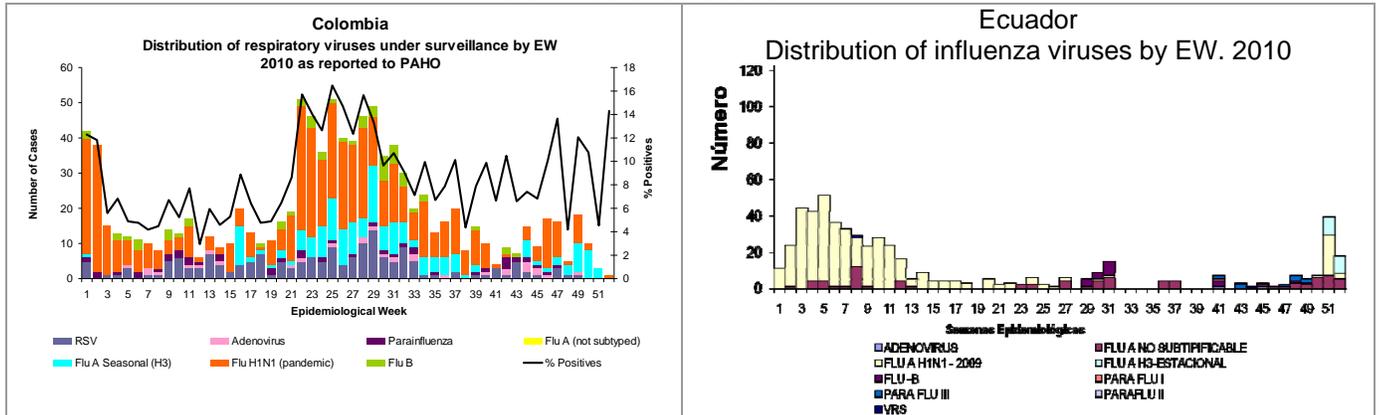
## Central America

### Costa Rica, El Salvador and Honduras

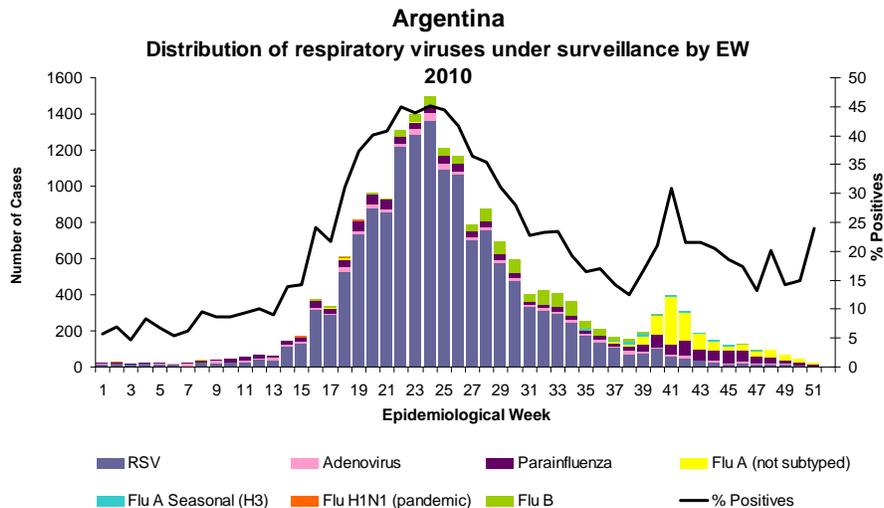


## South America - Andean

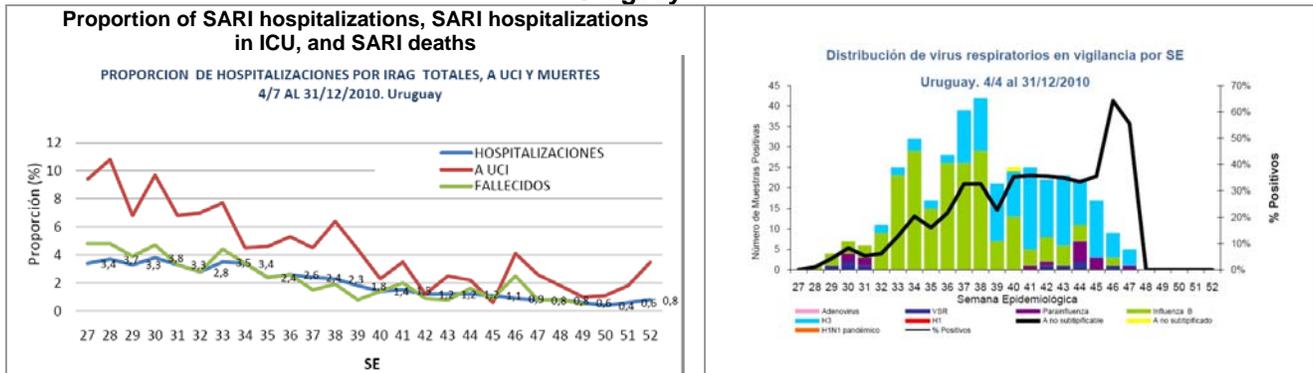
### Colombia and Ecuador



## South America – Southern Cone



### Uruguay<sup>3</sup>



<sup>1</sup> Canada. FluWatch Report. EW 52. <http://www.phac-aspc.gc.ca/fluwatch/>

<sup>2</sup> USA. Surveillance Summary. Week 52. Centers for Disease Control and Prevention

<sup>3</sup> Uruguay. Informe de la Vigilancia Nacional, Universal de IRAG. Ministerio de Salud de Uruguay. 2010.