



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 02 the national influenza-like illness (ILI) consultation rate increased slightly when compared to the previous week but remained below the historical average. The overall number of hospitalizations, ICU admissions, and deaths associated with the pandemic virus remained low, as compared to the levels seen in October and November 2009. A total of eleven oseltamivir-resistant isolates have been reported to date.

In Mexico, from EW 52 to EW 01, there was a 15.4% increase in the number ILI and Severe Acute Respiratory Illness (SARI) cases, and activity has increased after decreasing for ten consecutive weeks.

In the United States, the proportion of outpatient consultations for ILI decreased slightly in EW 02, remaining below the national baseline for two consecutive weeks. Just one out of ten sub-national surveillance regions reported the proportion of outpatient visits for ILI to be above its 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 above the epidemic threshold. A total of nine influenza-associated pediatric deaths were reported, of which three were associated with the pandemic virus. A total of 54 oseltamivir-resistant isolates have been detected since April 2009.

Caribbean

These countries reported variable spread of influenza. Dominica and Saint Lucia reported no influenza activity this week. Most of the countries reported decreasing or unchanged trends except Jamaica which reported an increasing trend of respiratory disease activity in EW 01 compared to the previous week. Low/moderate intensity of acute respiratory disease and low impact on health care systems was reported by these countries.

Netherlands Antilles reported no hospitalized pandemic influenza patients for EW 01 and 02.

Weekly Summary

- In North America, acute respiratory disease activity continued to decrease and is lower than expected in most areas
- In the Caribbean, all countries reported unchanged and decreasing trends in acute respiratory disease, except Jamaica which reported an increasing trend
- Central American countries reported decreasing or unchanged trends in acute respiratory disease except El Salvador, which reported an increasing trend
- South American countries reported mostly decreasing or unchanged trends of acute respiratory disease, except Paraguay which reported an increasing trend
- A median of 99.3% of subtyped influenza A viruses were pandemic (H1N1) 2009
- 72 new confirmed deaths in 7 countries were reported; in total there have been 7,166 cumulative confirmed deaths

Central America

Influenza activity was reported as widespread in Panama, localized in Nicaragua and El Salvador and with no activity in Guatemala. Most of the countries reported decreasing or unchanged trends, except El Salvador which reported increasing trends. Low/moderate intensity of acute respiratory disease and low impact of acute respiratory disease on health care services was reported by these countries.

South America

Andean

Colombia reported (EW 02) regional influenza activity and Peru reported activity as being widespread (EW 01). Acute respiratory disease trends were noted as decreasing. The intensity of acute respiratory disease and the impact of acute respiratory disease on health-care services were reported as low or moderate for these countries.

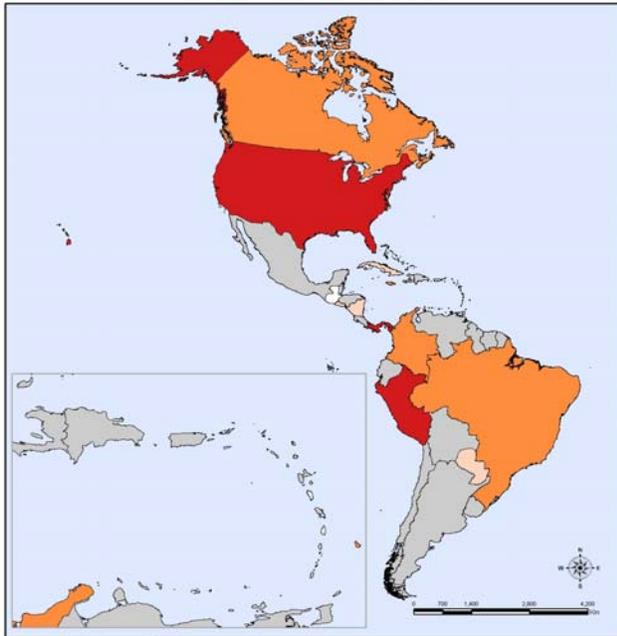
In Peru (EW 01), the number of pneumonia cases has decreased compared to the previous week, especially in children 0–4 years of age.

Southern Cone

Influenza activity was reported as regional in Brazil and localized in Paraguay. The trends of acute respiratory disease were reported as decreasing in Brazil but increasing in Paraguay for two consecutive weeks. High intensity of acute respiratory disease was reported by Paraguay and low/moderate by Brazil.

Paraguay (EW 02) reported an increased number of consultations for ILI and SARI (25.4% and 73.4%, respectively) as compared to EW 01. Six of seventeen departments reported increasing trends of acute respiratory disease and eleven of seventeen departments reported high or very high intensity of acute respiratory disease.

Map 1. Pandemic (H1N1) 2009, Geographical Spread by Country. Americas Region. EW 2, 2010*.



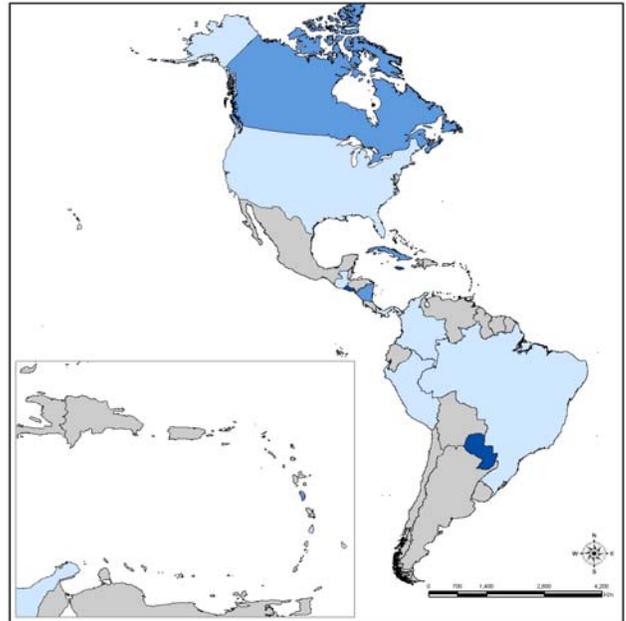
Geographical Spread

- ☐ No activity
- ☐ No information available
- ☐ Localized
- ☐ Regional
- ☐ Widespread

Map Production: PAHO/MSD/CD
January 22, 2010
Cartographic projection:
Lambert Equal Area Azimuthal
Central Meridian: -90.00000
Latitude of Origin: 10.00000
Source: Ministries of Health of the countries
Consolidated by PAHO/WHO
Created by PAHO/WHO

* EW 2 = epidemiological week from January 10 to January 16, 2010. Includes the latest information reported by each country this week.

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



Trend

- ☐ No information available
- ☐ Decreasing
- ☐ Increasing

Map Production: PAHO/MSD/CD
January 22, 2010
Cartographic projection:
Lambert Equal Area Azimuthal
Central Meridian: -90.00000
Latitude of Origin: 10.00000
Source: Ministries of Health of the countries
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Map 3. Pandemic (H1N1) 2009, Intensity of Acute Respiratory Disease in the Population. Americas Region. EW 2, 2010*.



Intensity of acute respiratory disease

- ☐ No information available
- ☐ Low or moderate
- ☐ High
- ☐ Very high

Map Production: PAHO/MSD/CD
January 22, 2010
Cartographic projection:
Lambert Equal Area Azimuthal
Central Meridian: -90.00000
Latitude of Origin: 10.00000
Source: Ministries of Health of the countries
Consolidated by PAHO/WHO
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Map 4. Pandemic (H1N1) 2009, Impact of Acute Respiratory Disease on Health-Care Services. Americas Region. EW 2, 2010*.



Impact on health-care services

- ☐ No information available
- ☐ Low
- ☐ Moderate
- ☐ Severe

Map Production: PAHO/MSD/CD
January 22, 2010
Cartographic projection:
Lambert Equal Area Azimuthal
Central Meridian: -90.00000
Latitude of Origin: 10.00000
Source: Ministries of Health of the countries
Consolidated by PAHO/WHO
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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 50% of hospitalized cases.

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

	Countries	
	Canada	Paraguay
Reporting period	April 12, 2009–January 16, 2010	Until EW 02, 2010
Type of cases reported	Hospitalized, confirmed	Severe, confirmed
Number of cases	8,093	170
Percentage of women	50	55 (SARI cases)
Age	Median 28 years	Median 23
Percent with underlying co-morbidities	51.3	-
Co-morbidities most frequently reported (%)		-
Percent pregnant among women of child-bearing age	20.4*	-

* 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 76%.

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

	Countries			
	Canada	Mexico	Paraguay	Peru
Reporting period	April 12, 2009 – January 16, 2010	Until January 18, 2010	Until EW 02, 2010	Until January 18, 2010
Number of confirmed deaths	417	931	47	210
Percentage of women	49.9	49.1	43	52
Age	Median 53 years	Highest percentage (59.9%) in 20–49 year age group	Median 37 years	Mean: 37.7 years, Highest percentage (18.3%) in 50–59 year age group
Percent with underlying co-morbidities	75.9	60.6	74	75.2
Co-morbidities most frequently reported (%)	-	-	Chronic Cardiopathy (20%), metabolic (17%), immunologic (12%), neurologic (6%)	Metabolic (22.8%), cardiovascular (19.5%), respiratory (12.4%), neurologic (8.6%)
Percent pregnant among women of child-bearing age	8*	-	12**	-

* Percent of pregnant women among women 15 to 44 years of age

** The denominator used was all deaths as information was not provided about women of child-bearing age

III- Viral circulation

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, 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	02	100
Cuba	01	62.5
El Salvador	01	100**
USA	02	98.5
MEDIAN percentage pandemic (H1N1) 2009		99.3

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

**Only one specimen was tested

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

Country	Epidemiologic Week	Percentage of pandemic (H1N1) 2009
Canada	August 30, 2009 – January 16, 2010	99.8

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

Annex 1: Weekly monitoring of pandemic epidemiological indicators for countries that provided updated information—Region of the Americas, Epidemiologic Week 02, 2010

Country	Geographic spread	Trend	Intensity	Impact on Health Care Services	EW
Antigua and Barbuda					
Argentina					
Bahamas					
Barbados	Regional	Decreasing	Low or moderate	Low	1
Belize					
Bolivia					
Brazil	Regional	Decreasing	Low or moderate	Low	2
Canada	Regional	Unchanged	Low or moderate		2
Chile					
Colombia	Regional	Decreasing	Low or moderate	Low	2
Costa Rica					
Cuba	Localized	Unchanged	Low or moderate	Low	1
Dominica	No activity	Unchanged	Low or moderate	Low	2
Dominican Republic					
Ecuador					
El Salvador	Localized	Increasing	Low or moderate	Low	1
Grenada					
Guatemala	No activity	Decreasing	Low or moderate	Low	2
Guyana					
Haiti					
Honduras					
Jamaica	Regional	Increasing	Low or moderate	Low	1
Mexico					
Nicaragua	Localized	Unchanged	Low or moderate	Low	2
Panama	Widespread	Decreasing	Low or moderate	Low	2
Paraguay	Localized	Increasing	High		2
Peru	Widespread	Decreasing	Low or moderate	Low	1
Saint Kitts and Nevis					
Saint Lucia	No activity	Decreasing	Low or moderate		2
Saint Vincent and the Grenadines					
Suriname					
Trinidad and Tobago					
United States of America	Widespread	Decreasing	Low or moderate	Low	2
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 January 22, 2010 (17 h GMT; 12 h EST).**

Source: Ministries of Health of the countries in the Region.

Country	Cumulative number of deaths	New deaths (since Jan 15, 2010, 12 h EST)
Southern Cone		
Argentina	617	
Brazil	1,632	
Chile	153	
Paraguay	47	1
Uruguay	20	
Andean Area		
Bolivia	59	
Colombia	201	3
Ecuador	117	
Peru	210	2
Venezuela	129	
Caribbean Countries		
Antigua & Barbuda	0	
Bahamas	1	
Barbados	3	
Cuba	53	
Dominica	0	
Dominican Republic	23	
Grenada	0	
Guyana	0	
Haiti	0	
Jamaica	7	1
Saint Kitts & Nevis	1	
Saint Lucia	1	
Saint Vincent & Grenadines	0	
Suriname	2	
Trinidad & Tobago	5	
Central America		
Belize	0	
Costa Rica	47	
El Salvador	31	
Guatemala	18	0
Honduras	16	
Nicaragua	11	0
Panama	11	
North America		
Canada	422	4
Mexico	931	35
United States	2,398	26
TOTAL	7,166	72

As of **22 January, 2010**, a total of **7,166 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).