



EID Weekly Updates:

Emerging and Reemerging Infectious Diseases, Region of the Americas

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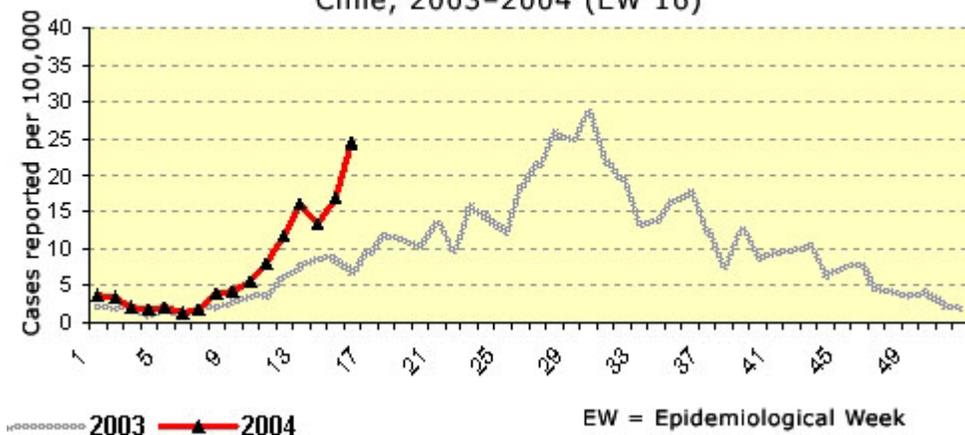
Influenza Activity in Chile

The modality of sentinel surveillance of influenza morbidity is implemented in Chile since 2002: currently there are 31 sentinel centers, located primary health care center in 27 Health Regions (*Servicios de Salud*), with one million people under surveillance.

In 2003, the etiological component was incorporated in five sentinel centers, with the support of the Ministry of Health, Institute Public Health (ISP) (laboratory), Thorax

Hospital, and the Virology Laboratory at the Catholic University of Chile.

Table 1: Reported Cases of Influenza, Sentinel Surveillance in 27 Health Sectors, Chile, 2003–2004 (EW 16)



The reports correspond to clinical cases of influenza in

accordance with the definition established in the current regulation.

All the Health Regions have reported clinical cases of Influenza in 2004, except for Antofagasta and M. Sur Oriente, with a marked trend towards seasonal increase being observed. In Valparaiso, Talcahuano, Concepción, and Valdivia—as well as in some services of the Metropolitan Region—this increase coincides with the identification of Influenza A by the Network of Laboratories for Respiratory Viruses mentioned below.

The sentinel centers with an etiological component have confirmed 36 outpatient cases of Influenza A and 2 cases of Influenza B.

Furthermore, the Institute of Public Health (ISP), national reference for Influenza and other respiratory viruses, maintains a Laboratory Network for Respiratory Viruses in 17 sentinel hospitals, which detected during the first 2 months of this year a localized outbreak of Influenza A in Castro and several isolated cases in Viña del Mar, Valparaiso, and Santiago.

To date, 36 cases have been subtyped Hemoagglutination Inhibition as Influenza A (H3N2).

The early beginning of the activity of influenza and the detection of some localized outbreaks indicates that the country is facing an early seasonal outbreak with greater magnitude with regard to the previous two years.

Sources

- Report to PAHO on Surveillance of Influenza from the Ministry of Health of Chile, 4 May 2004.
- [*Index of /epi/html/bolets/reportes/ISP, Informe de vigilancia de influenza, Departamento de Epidemiología. MINSAL, 17 Mayo de 2004*](#) (*Report on Influenza Surveillance, Department of Epidemiology, MINSAL, 17 May 2004*). Santiago: Ministry of Health of Chile, Department of Epidemiology, Bulletins (*Ministerio de Salud/MINSAL de Chile, Departamento de Epidemiología, Boletines*). (site in Spanish)

Avian Influenza Virus A (H10N7) Circulating among Humans in Egypt

The National Influenza Center (NIC) in Egypt and the WHO Influenza Collaborating Centre in the UK reported the isolation of Avian Influenza A (H10N7) from two human specimens. They refer to two one-year-old infants, residents of Ismailia, who recovered after presenting a fever and cough. The father of one of them is a poultry merchant who frequently traveled between Ismailia and Damietta. In the latter town, five cases of the same virus were isolated from wild ducks between 18 and 22 April 2004, from samples taken from a market of hunted migratory birds. Additional preliminary investigation tested negative in 75 human samples collected in Ismailia and in 13 samples from migratory birds from the same market. No influenza outbreak has been reported among poultry in Egypt. At present, there are no public-health implications from this event.

Source: Report to PAHO by WHO/CDS/CSR/RMD (Geneva: World Health Organization, Communicable Diseases, Communicable Disease Surveillance and Response, Risk Containment, Mapping and Drug Resistance).