



PAHO interactive influenza data: http://ais.paho.org/phis/viz/ed_flu.asp

Influenza Regional Reports: http://new.paho.org/hq/index.php?option=com_content&task=view&id=3352&Itemid=2469&to=2246

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 North America, most of the influenza activity indicators continued to decrease, except by some localized influenza activity persisting in some regions of Canada (Nova Scotia and Newfoundland). The percentage of positive samples to influenza continued to decrease, being influenza type B slightly predominant with regards to influenza A.
- In Central America, the Caribbean, the Andean region, and the Southern Cone the influenza activity remained low. Several countries in South America reported an increase of respiratory infection activity, being the respiratory syncytial virus (RSV) the predominant circulating respiratory virus.

Epidemiologic and virologic influenza update

North America

In Canada¹, in epidemiological week (EW) 18, influenza activity continued to decrease in most part of the country, except for some localized influenza activity persisting in some regions of Nova Scotia and Newfoundland. The national influenza-like illness (ILI) consultation rate was 15.1 per 1000 consultations, higher than that observed last week, but remained within the expected for this time of year. The percentage of positive samples for influenza continued to decrease; in EW 18 it was 5.2%, less than previous week (7.1%). Influenza B virus (71.7%) was more frequent than Influenza A (28.3%). Among other respiratory viruses, the syncytial respiratory virus (RSV) continued to decrease and the proportion of positive samples for parainfluenza continued to increase in several regions of the country.

In Mexico, in EW 18, among all samples tested (n=23), no respiratory viruses were detected.

In the United States², in EW 18, at the national level, the proportion of outpatient consultations for ILI (1.1%) was below the national baseline. At the regional level, all sub-national regions reported ILI activity to be below their specific baselines. The proportion of deaths attributed to pneumonia and influenza was on its epidemic threshold. This week two pediatric deaths associated to influenza were notified. During EW 18, 1.9% of samples tested were positive for influenza; being predominant influenza B, influenza A/H3 and untyped influenza A.

Caribbean

CAREC^{*}, in EW 18, reported that the proportion of admissions for severe acute respiratory illness (SARI) remained below 1%. Two deaths associated to SARI were reported in the last month (EWs 15 and 16) In EW 18, among all samples tested, the predominant virus in circulation was rhinovirus, followed by RSV and adenovirus. The influenza virus has not been detected since EW 13.

In Cuba, in EW 18, among all samples tested, the percentage of positive samples for respiratory viruses remained in ~50%; however no influenza samples were detected. According to laboratory data, in 2011 to the present date, influenza A/H3 has been the predominant influenza virus in circulation. Other respiratory viruses (RSV, adenovirus and parainfluenza) co-circulated in EW 18.

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

In the Dominican Republic, in EW 19, among all samples tested, the percentage of positive samples for respiratory viruses increased slightly to ~40% and the percentage of positive samples for influenza viruses remained in ~20%. Influenza A/H1N1 2009 has been the predominant influenza virus circulating from EWs 14-19. Other respiratory viruses (adenovirus and parainfluenza) were also detected.

In Jamaica for EW 18, sentinel centers reported that the proportion of consultations for Acute Respiratory Illness (ARI) decreased by 0.5% compared to the previous week. The proportion of admissions due to SARI was less than 1% and remained stable compared to the previous week. The percentage of samples positive for influenza was ~30% which represents a decrease compared to the previous week (66%). From EWs 5-17, influenza B has been the predominant circulating virus, with sporadic detections of influenza A/H1N1 2009.

Central America

In Costa Rica, in EW 19, among all samples tested, the percent positivity for respiratory viruses decreased to ~30% from ~40% (EW 18); however, no influenza viruses were detected in the last two weeks. Adenovirus has been the predominant respiratory virus in circulation since EW 10, followed by parainfluenza.

In Honduras³, in EW 18, the percentage of outpatient consultations for ILI was 6.6%, slightly higher than that observed in the previous week (5%). The proportion of admissions for SARI was 2%, less than that observed in EW 17 (3%). This week, 5 SARI deaths were reported in San Pedro Sula. During the present year, few cases of respiratory virus were detected. No influenza viruses were detected since EW 14.

In Panama, in EW 18, among all samples tested, the percent of positive samples for respiratory viruses remained low (~5%), no influenza viruses were detected in the last 3 weeks.

South America – Andean

In Venezuela⁴, according to the EW 17 epidemiologic report, the number of ARI cases and the number of cases with pneumonia increased compared to the previous week (increase of 28% and 29% respectively), however, these remained among the expected for this time of year. According to the influenza report, to date in 2011 until May 4, 2014 positive cases of influenza A/H1N1 have been detected, with a decreasing trend between EW 12, when it seemed to be the epidemic peak (n=595) until EW 17 (n=46). The greatest numbers of positive cases for influenza A/H1N1 2009 between EW 17-18 were observed in Miranda, followed by the Capital District.

South America – Southern Cone

In Argentina, among all samples tested, the percentage of positivity for respiratory viruses has increased in from EW 10 (11%) to EW 17 (~40%); however, in EW 18 it decreased to ~20%. The percentage of positive samples for influenza viruses remained <1%. RSV has been the predominant respiratory virus in circulation since EW 10.

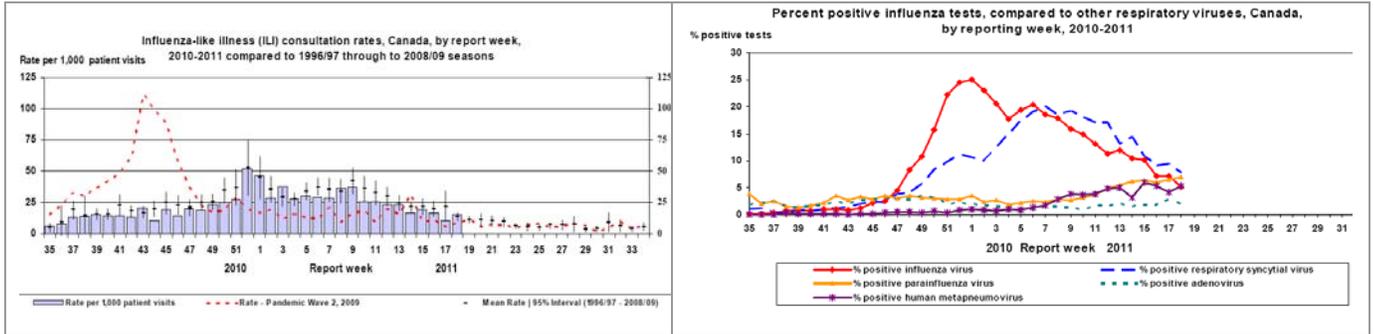
In Chile⁵, in EW 18, the ILI activity increased slightly (4.9 consultations per 100,000 inhabitants) compared to the previous week (4.1) even though it remained within the expected levels for this time of year and less than that observed during 2009 and 2010. The percentage of emergency service consultations for respiratory illness in less than 15 years old increased slightly to 40% since the previous week (38%), which is slightly higher than that observed in the last 2 years. The number of positive cases for respiratory viruses showed an increasing trend between EWs 13-18, RSV being the predominant circulating virus.

In Paraguay⁶, the proportion of ILI outpatient consultations among all consultations showed a fluctuating trend during 2011, with an increase in EW 18 (7.3%) compared to the previous week (5.1%), having the highest increase in the <5 years age group. Concerning the proportion of admissions for SARI among admissions for all causes, EW 18 reached 4.3%, showing an increase in the last week of less than 1%. The proportion of ICU admission for SARI among all ICU admissions decreased to ~15% from ~25% the previous week. The proportion of SARI deaths among all deaths for other causes remained below 3%. According to virological data, RSV has been the predominant respiratory virus in EWs 6-17. No influenza virus has been detected in SARI patients in the last 8 weeks.

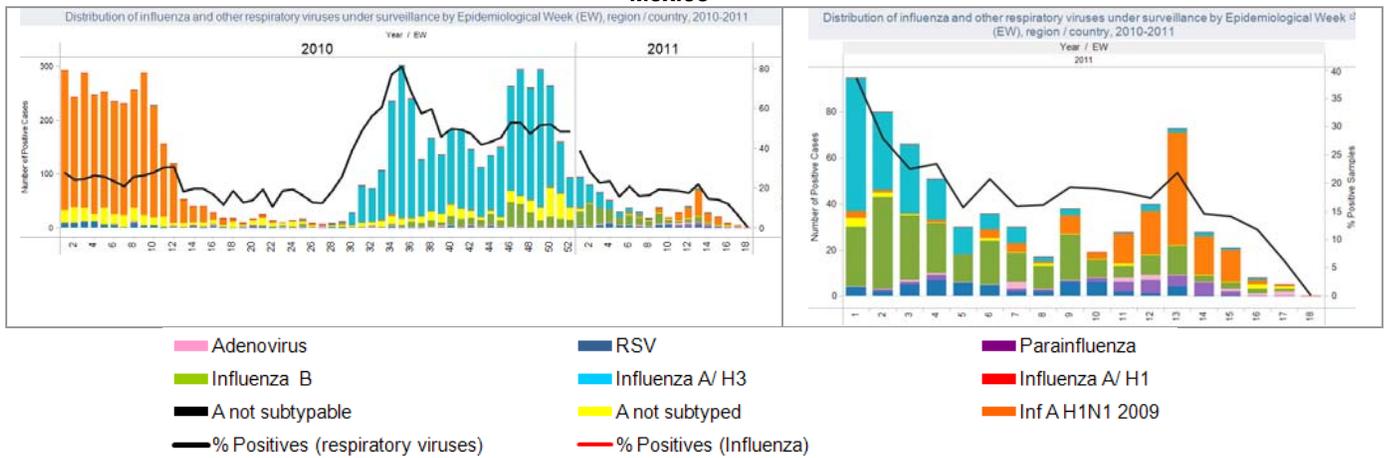
Graphs

North America

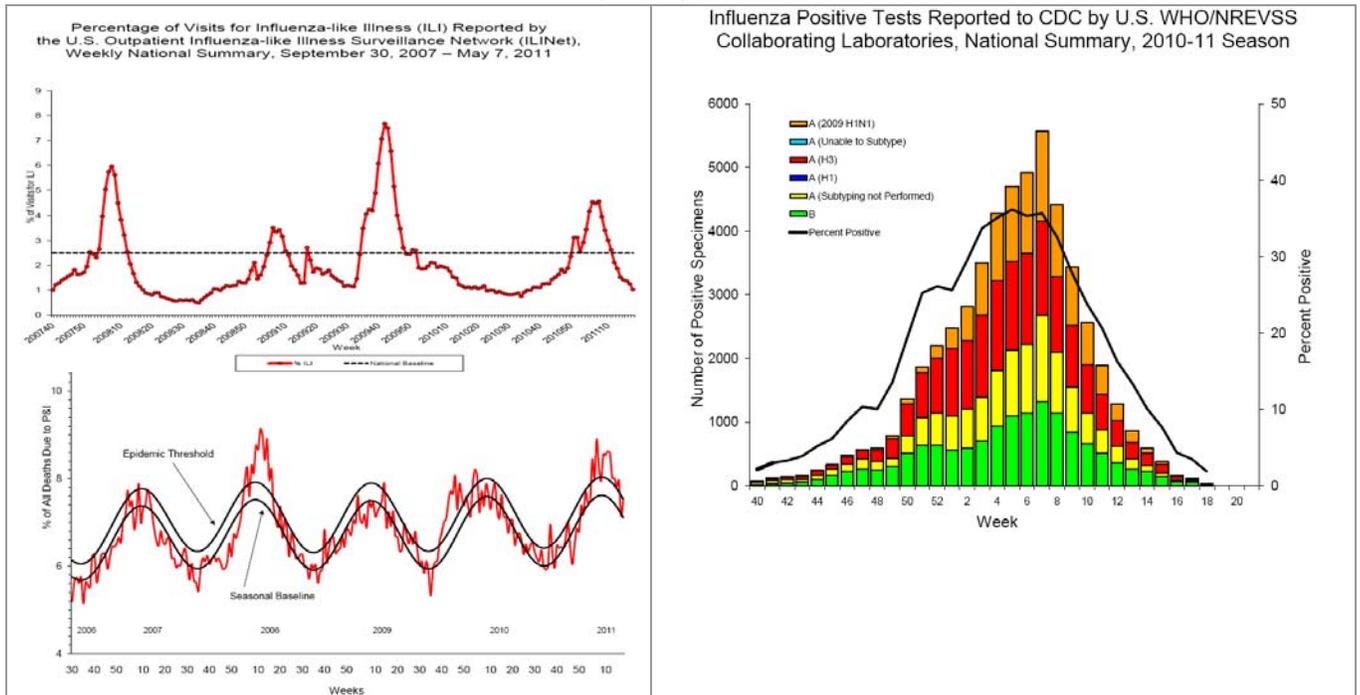
Canada



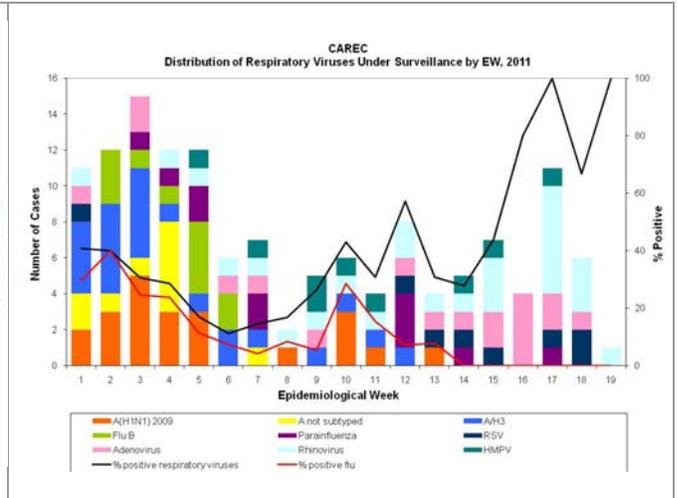
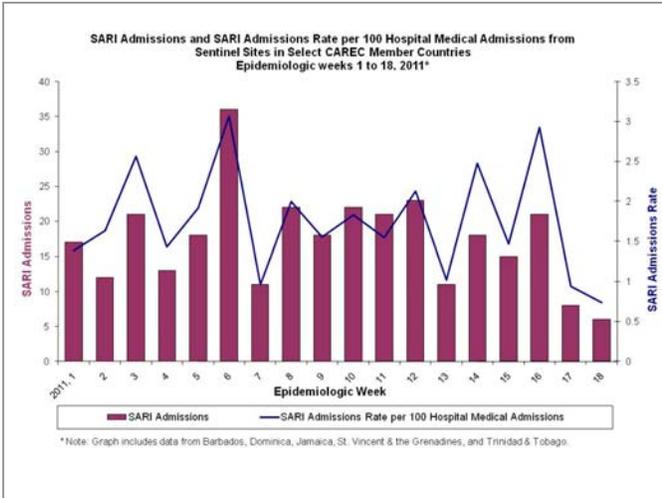
Mexico



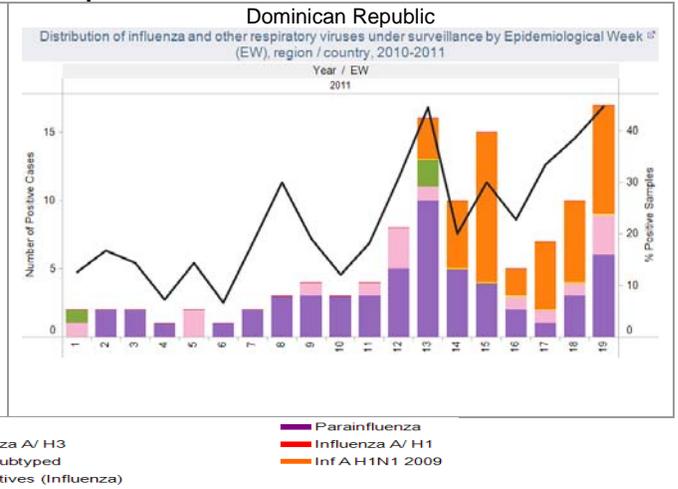
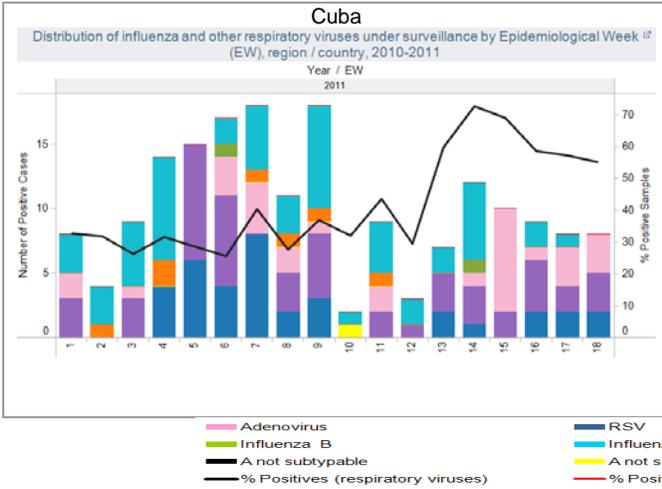
United States



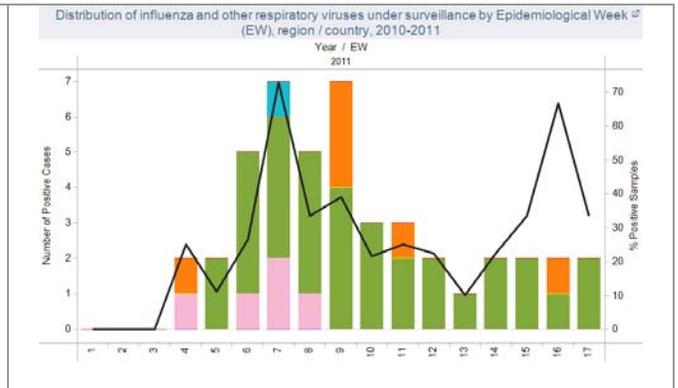
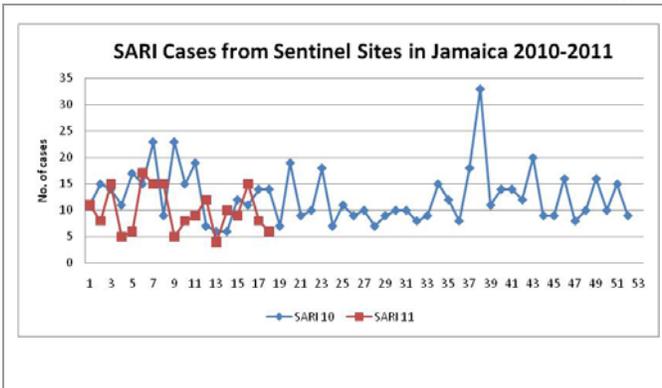
CAREC



Cuba & Dominican Republic

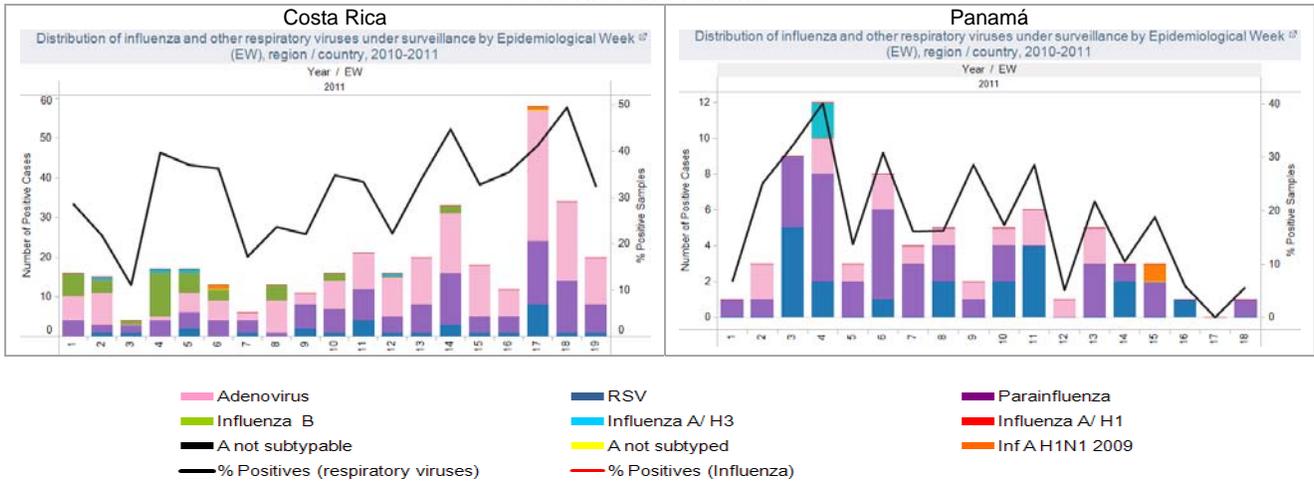


Jamaica

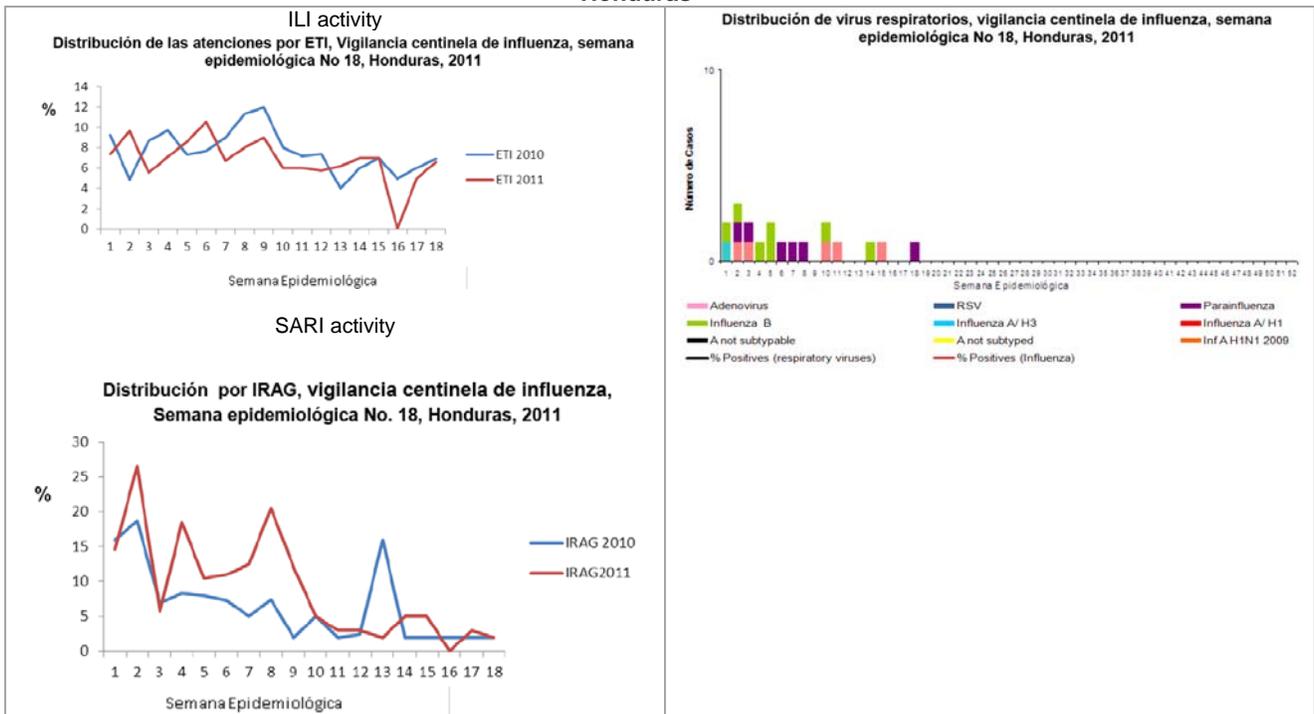


- Adenovirus
- RSV
- Parainfluenza
- Influenza B
- Influenza A/ H3
- Influenza A/ H1
- A not subtypable
- A not subtyped
- Inf A H1N1 2009
- % Positives (respiratory viruses)
- % Positives (Influenza)

Costa Rica and Panama

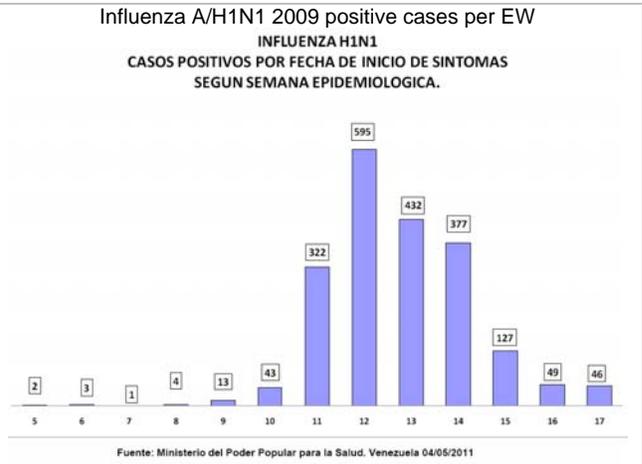
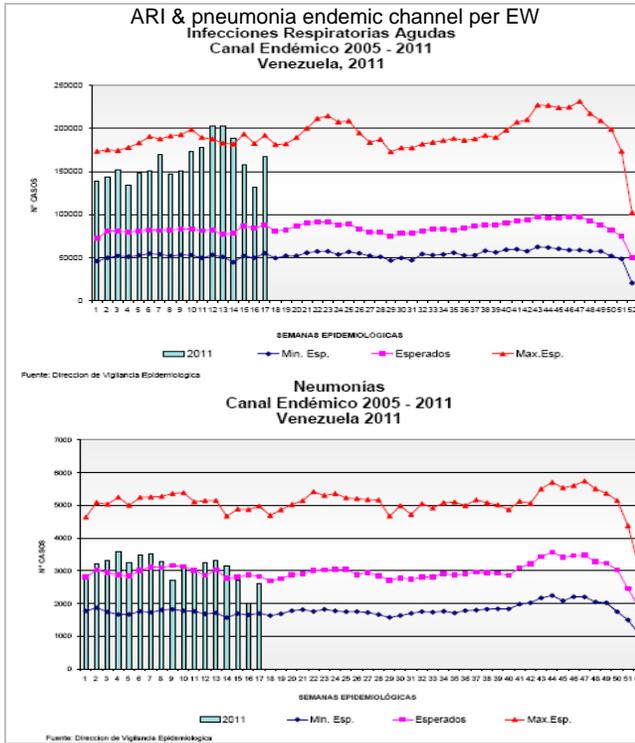


Honduras



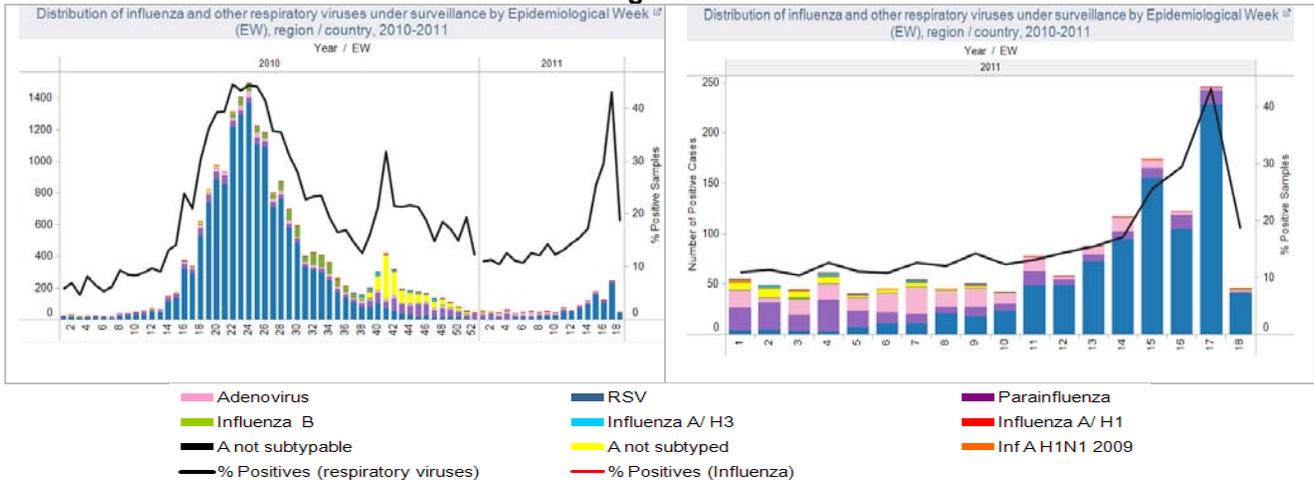
South America - Andean

Venezuela

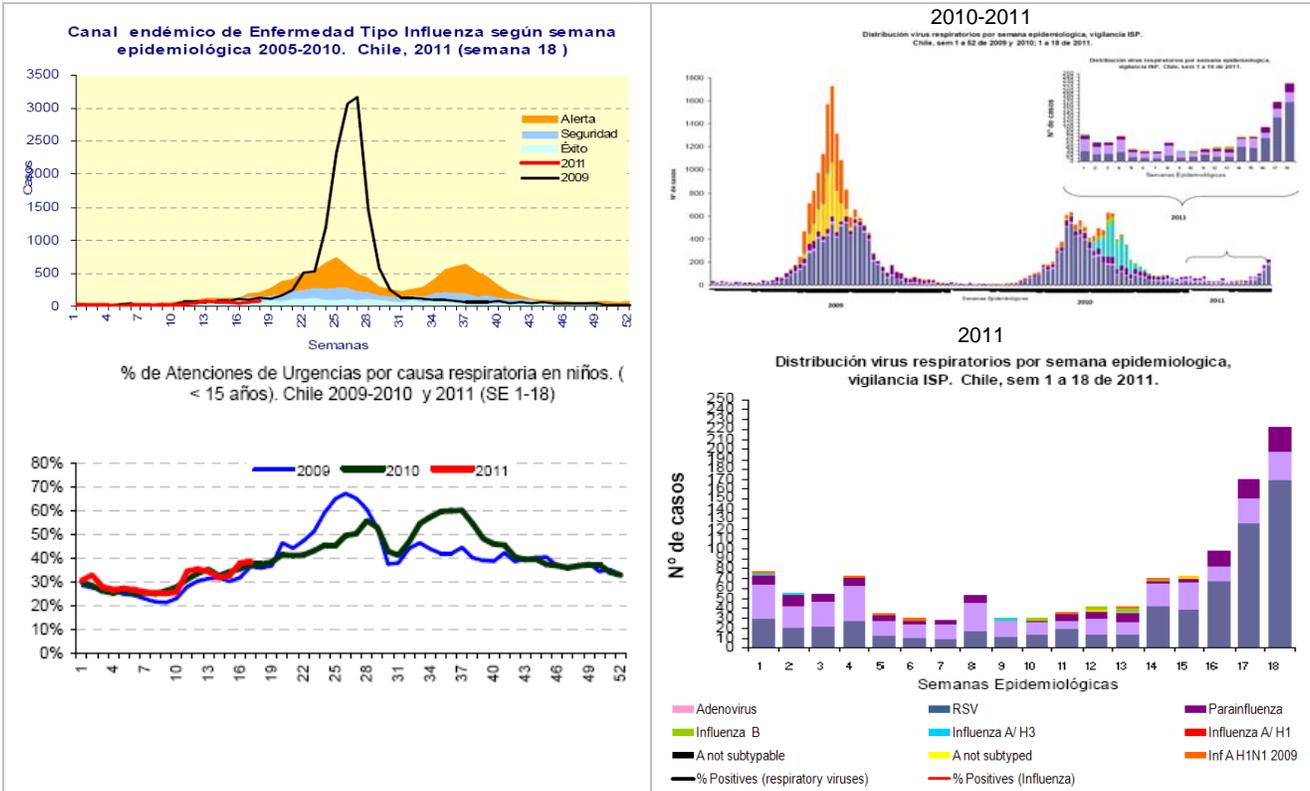


South America – Southern Cone

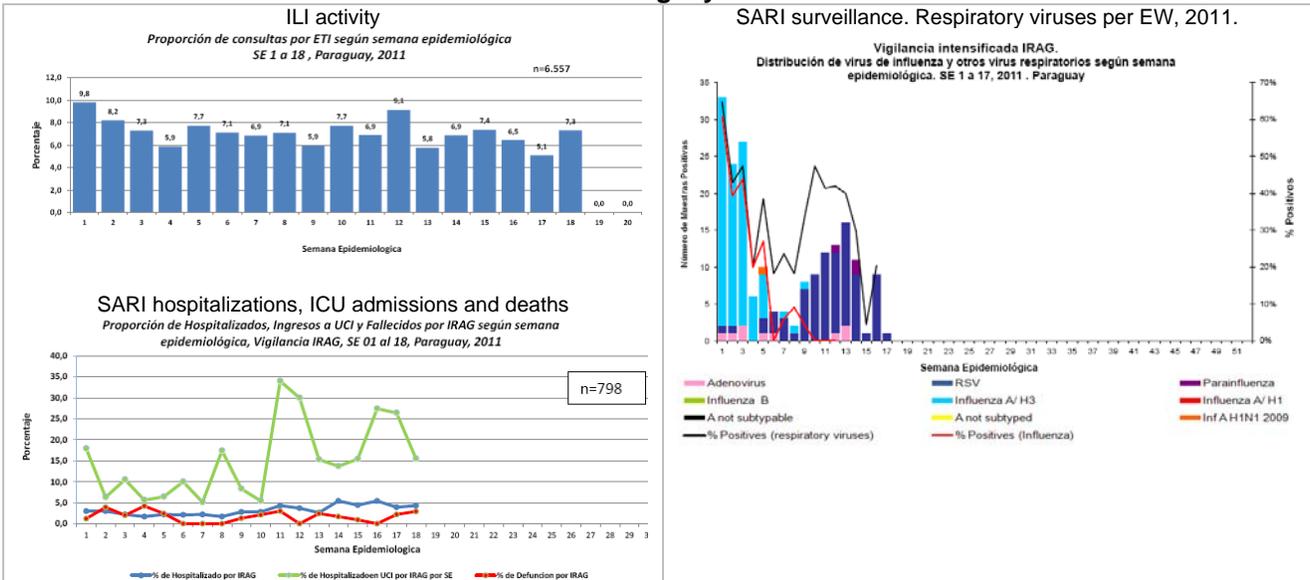
Argentina



Chile



Paraguay



¹ Canada. FluWatch Report. EW 18. <http://www.phac-aspc.gc.ca/fluwatch/>

² USA. Surveillance Summary. Week 18. Centers for Disease Control and Prevention

³ Honduras. Boletín de la vigilancia de influenza y otro virus respiratorios. Week 18.

⁴ Venezuela. Reporte influenza A H1N1, actualizado al 4 de mayo del 2011. Y Boletín Epidemiológico SE 17. Ministerio del Poder Popular para la Salud.

⁵ Chile. Informe de situación. SE 18. www.pandemia.cl

⁶ Paraguay. Boletín epidemiológico semanal. SE 19. Ministerio de Salud Pública y Bienestar Social