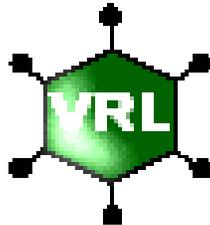


# Weekly Influenza Surveillance Report



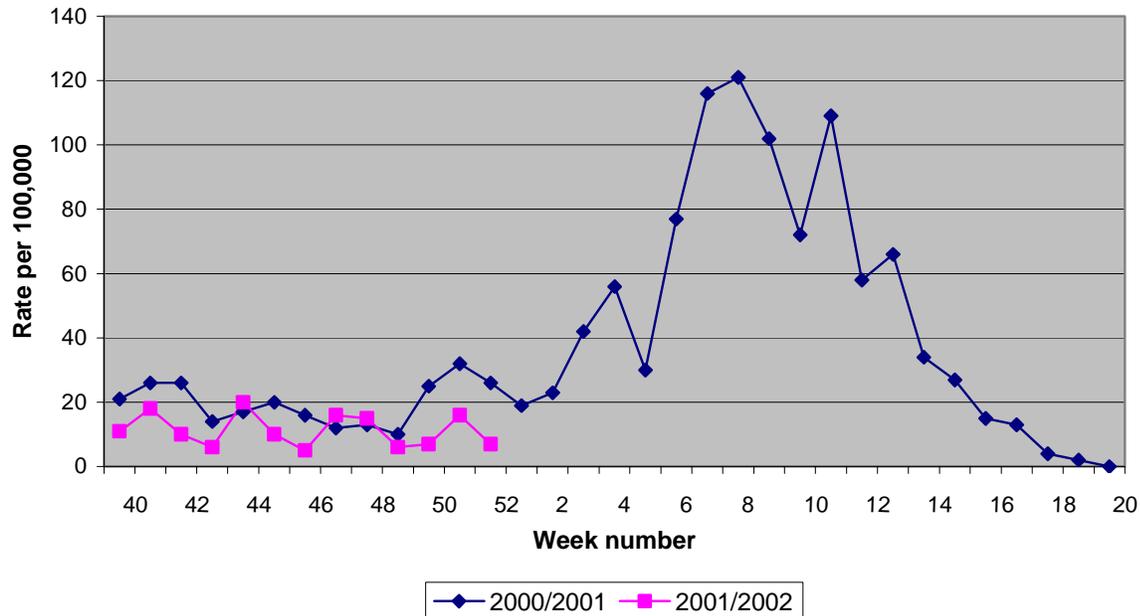
**Weeks 51 & 52 2001**

**Report produced: 03/01/2002**

**This report is produced in collaboration with the Departments of Public Health**

### Influenza Activity in Ireland

During week 51, week ending the 23<sup>rd</sup> December 2001, 9 cases of influenza-like illness (ILI) were reported from sentinel general practices. This corresponds to a consultation rate of 16 per 100,000 population. Twenty-six GPs sent in reports during week 51, only 4 of which reported ILI. During week 52, week ending the 30<sup>th</sup> December 2001, 5 ILI cases were reported from sentinel GPs. This corresponds to a consultation rate of 7 per 100,000 population. Only 5 of 26 sentinel GPs reported ILI cases.



**Figure 1:** GP consultation rate for influenza-like illness per 100,000 population by report week, during the 2000/2001 and 2001/2002 influenza seasons.

### Virological Data from the Virus Reference Laboratory (VRL)

During weeks 51 and 52, the VRL received 3 swabs from sentinel GPs. The results for these swabs are pending. Since the start of the 2001/2002 influenza season, the VRL has received 60 swabs from sentinel GPs; influenza virus has not been detected in any of these swabs to date (table 1).

Since October 1<sup>st</sup> 2001, the VRL have tested 203 respiratory samples from non-sentinel sources (hospitals and GPs). Twenty-eight were positive for RSV, 1 was positive for adenovirus, and 1 was positive for parainfluenza virus type 3. No influenza virus has been detected in these specimens to date. During weeks 51 and 52, 11 specimens were positive for RSV.

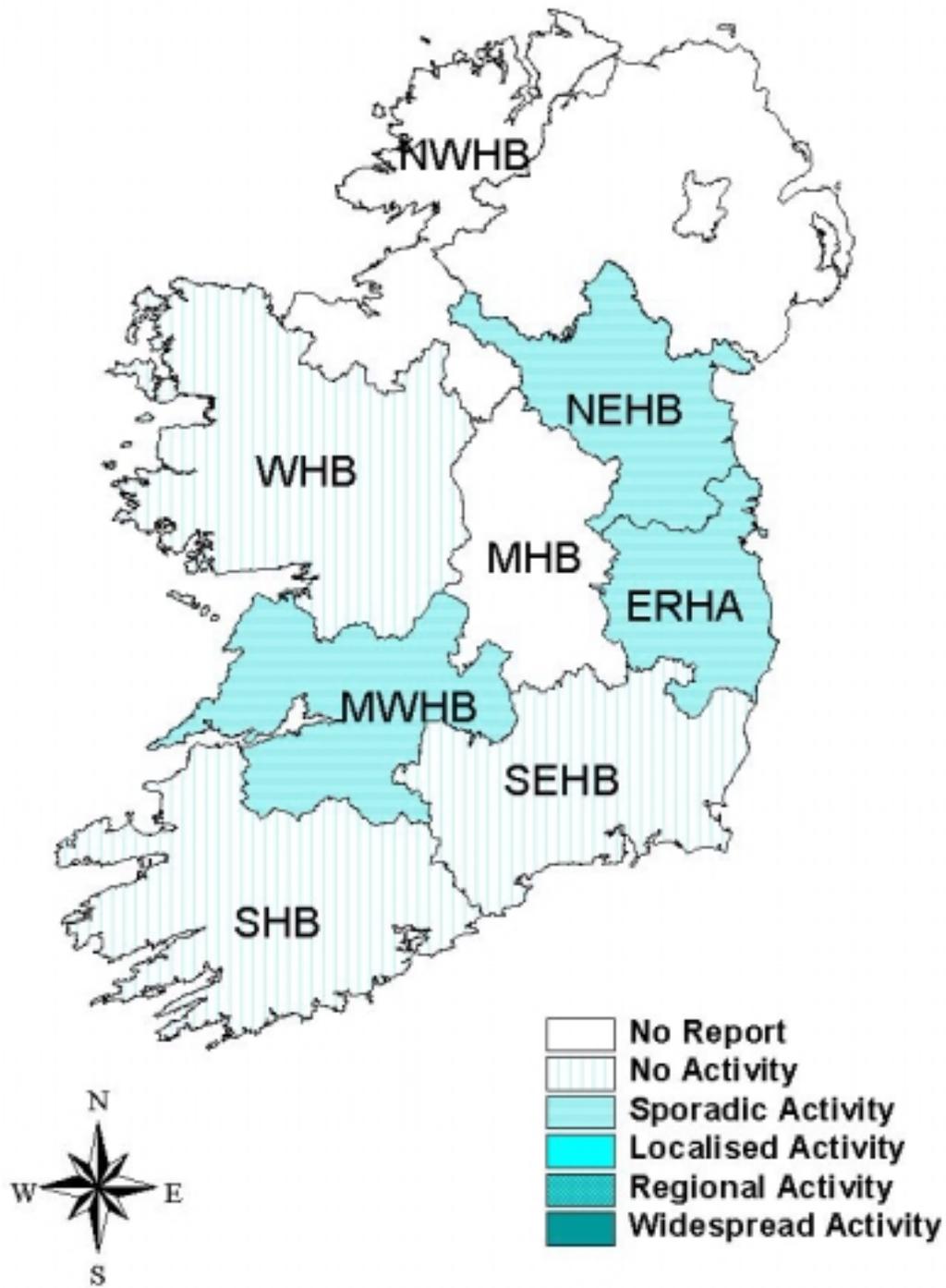
**Table 1: Sentinel influenza results by type, subtype and report week for 2001/2002**

<i>Week number</i>	<i>Number of swabs</i>	<i>Percentage Positive</i>	<i>Influenza A (unsubtyped)</i>	<i>Influenza A (H1N1)</i>	<i>Influenza A (H3N2)</i>	<i>Influenza B</i>
40	5	0%				
41	4	0%				
42	4	0%				
43	2	0%				
44	2	0%				
45	6	0%				
46	3	0%				
47	10	0%				
48	8	0%				
49	5	0%				
50	8	0%				
51	2					
52	1					
<b>Total</b>	<b>60</b>					

### **Influenza Activity by Health Board/Authority**

Influenza activity for week 50 (week ending the 16<sup>th</sup> of December 2001) was reported from the Departments of Public Health. Influenza activity is based on sentinel GP ILI consultation rates, laboratory confirmed cases of influenza, school absenteeism levels and hospital admissions data. Three health boards/authority reported no activity and 3 reported sporadic activity. Data for weeks 51 and 52 will be updated next week.

# Influenza Activity - Week 50



### **Influenza Activity in Northern Ireland, England, Scotland and Wales**

No data is currently available from Northern Ireland for weeks 51 and 52. In England during week 51, the GP consultation rate for influenza and ILI increased to 28 per 100,000. In Scotland, the consultation rate for ILI decreased during week 51, to a rate of 26 per 100,000. In Wales, the consultation rate for influenza and ILI also decreased to a rate of 1 per 100,000. Deaths attributed to respiratory causes (influenza, bronchitis, and pneumonia) remain low for the time of year. During week 51, the ERNVL detected influenza A (H3N2) by PCR in a community-derived specimen. During the same week, 5 further community-derived specimens tested positive for RSV.

### **Influenza Activity in Europe**

During week 50, thirteen networks in the European Influenza Surveillance Scheme (EISS) reported no influenza activity. Belgium, France, Norway, Romania and Slovenia all reported sporadic activity. Influenza viruses were detected from sentinel swabs in Belgium, the Czech Republic, France, Romania, and Slovenia. There were also detections of influenza in non-sentinel sources (England, France, Norway, Slovenia and Spain). During the same week, both influenza A and B were detected, influenza A was reported more frequently than influenza B. However in South France, influenza B was the dominant type. During week 51, 6 networks reported no influenza activity and 3 reported sporadic activity. Influenza A was the dominant influenza virus in Belgium, the Czech Republic, Norway and Switzerland. In France, the dominant influenza virus was A in the North and B in the South.

### **Influenza Activity in Canada**

During weeks 50 and 51, influenza activity remained limited across Canada, with most regions reporting no influenza activity. Sentinel physicians reported an increase in patient visits, from 18 to 23 ILI cases per 1000 patient visits during weeks 50 and 51, respectively. During week 50, 5 swabs were positive for influenza A and one was positive for influenza B. During week 51, 3 swabs were positive for influenza A. All influenza viruses characterised to date have been A/Panama/2007/99(H3N2)-like, a strain contained in this year's vaccine.

### **Influenza Activity in the United States**

During weeks 50 and 51, the overall proportion of patient visits to sentinel physicians for ILI was 1.2% and 1.5%, respectively, less than the national baseline. During week 50, 6 influenza A (H3N2) viruses and 19 influenza A (unsubtyped) viruses were identified. During week 51, 6 influenza A (H3N2) viruses, 1 influenza A (H1N1) virus and 11 influenza A (unsubtyped) viruses were identified.

### **Influenza Activity Worldwide**

Paraguay reported no influenza activity during weeks 50 and 51. Israel and Hong Kong reported sporadic activity, and the Russian Federation reported localised influenza activity during week 50. In week 51, Hungary reported a minor outbreak of ILI among school children. In Hong Kong sporadic activity was reported, with 3 influenza A (unsubtyped) and 2 influenza A (H3N2) viruses isolated. The first cases of influenza B were reported in Austria. The Russian Federation reported ILI morbidity exceeding epidemic thresholds in 4 cities, mainly among school children. Serologic tests confirmed cases of influenza A (H3N2), influenza A (H1N1) and influenza B in the Russian Federation.