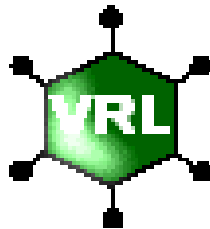


Weekly Influenza Surveillance Report



Week 7 2002

Report produced: 21/02/2002

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

Influenza Activity in Ireland

During week 7, the week ending the 17th of February 2002, the GP consultation rate for influenza-like illness (ILI) has increased. Seventeen ILI cases were reported from sentinel general practices, corresponding to a consultation rate of 33 per 100,000 population; this is the highest rate this season. Reports were received from 23 sentinel GPs, with 12 reporting ILI cases. The GP consultation rate for ILI has been updated for week 6, to 21 per 100,000.

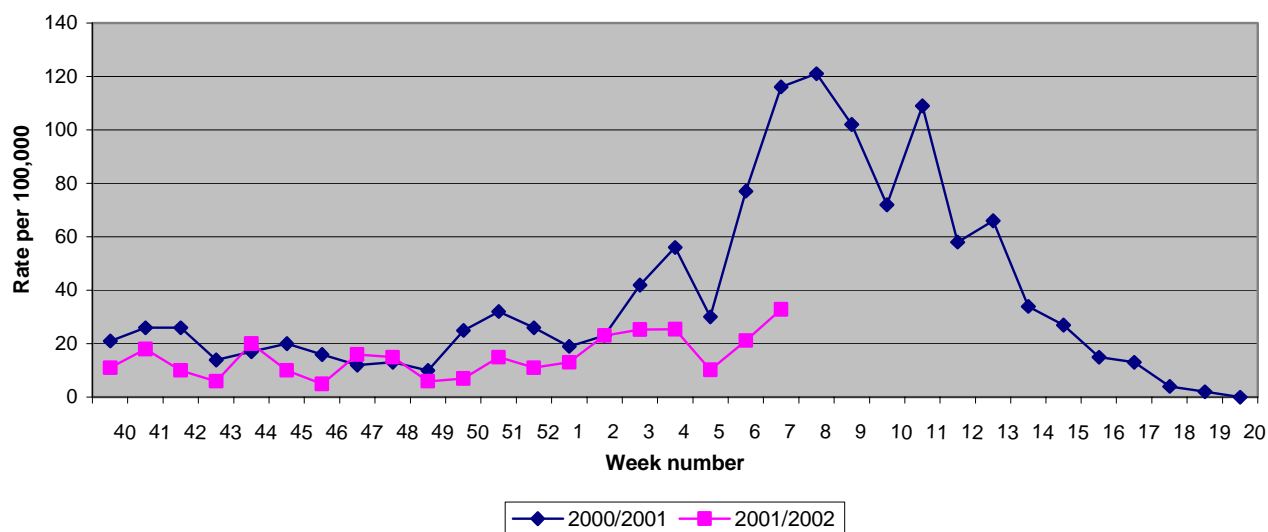


Figure 1: GP consultation rate for influenza-like illness per 100,000 population by report week, during the 2000/2001 and 2001/2002 influenza seasons.

Virological Data from the Virus Reference Laboratory (VRL)

During week 7 2002, 15 swabs were received from sentinel GPs, 3 of these were positive for influenza A (unsubtyped). Data for week 6 has been updated, 8 swabs were positive for influenza A (unsubtyped) and 3 were positive for influenza A (H3N2). No influenza B viruses have been detected this season. To date, there have been no laboratory confirmed cases of influenza A (H1N2) in Ireland.

The VRL have tested 471 respiratory specimens from non-sentinel specimens (hospitals and GPs), since the start of the influenza season. During week 7, 17 specimens were positive for RSV, bringing the total RSV cases detected this season to 153. No influenza viruses have been isolated from non-sentinel specimens.

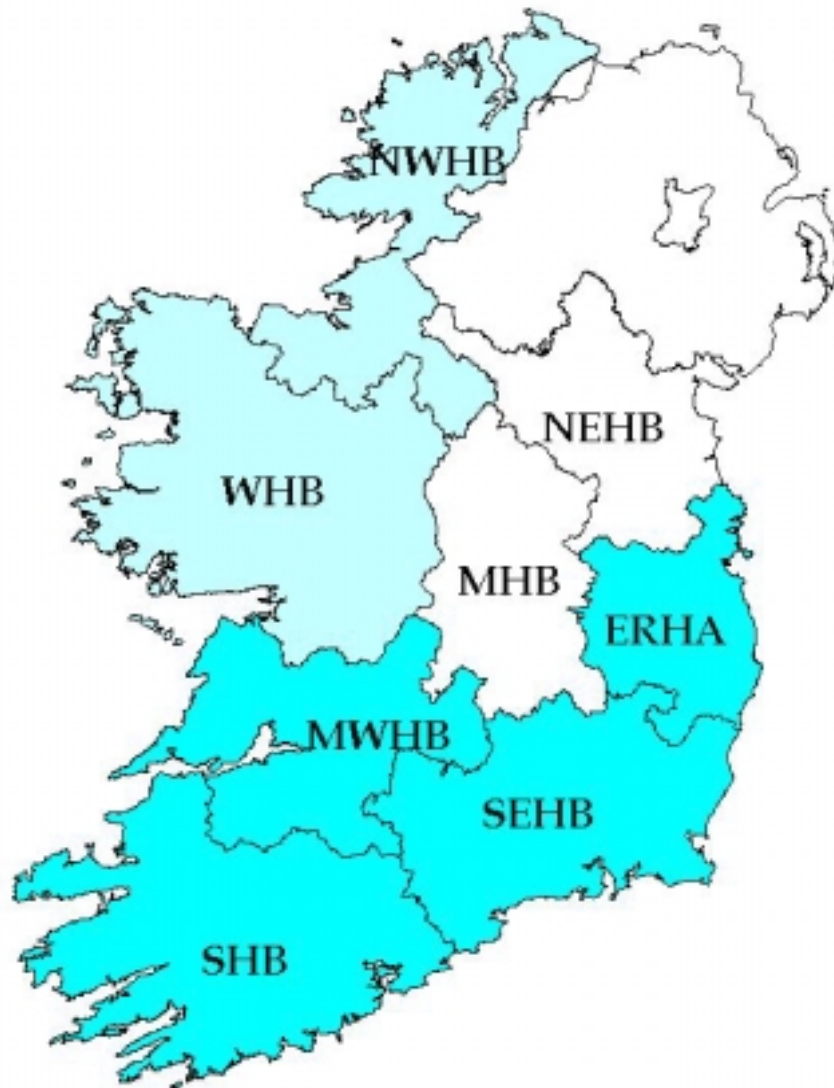
Table 1: Sentinel influenza results by type, subtype and report week for 2001/2002

<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%	0	0	0	0
41	4	0%	0	0	0	0
42	4	0%	0	0	0	0
43	2	0%	0	0	0	0
44	2	0%	0	0	0	0
45	6	0%	0	0	0	0
46	3	0%	0	0	0	0
47	10	0%	0	0	0	0
48	8	0%	0	0	0	0
49	6	0%	0	0	0	0
50	8	0%	0	0	0	0
51	9	0%	0	0	0	0
52	1	0%	0	0	0	0
1	7	0%	0	0	0	0
2	9	0%	0	0	0	0
3	12	33%	0	1	3	0
4	14	43%	0	0	6	0
5	15	20%	1	1	1	0
6	16	69%	8	0	3	0
7	15	20%	3	0	0	0
Total	156	17%	12	2	13	0

Influenza Activity by Health Board/Authority

Influenza activity for week 6 (week ending the 10th of February 2002) was reported from the Departments of Public Health. Influenza activity is based on sentinel GP ILI consultation rates, laboratory confirmed cases of influenza, hospital admissions data, and/or school absenteeism levels. During week 6, four health boards reported sporadic activity and two reported no activity.

Influenza Activity - Week 6



Influenza Activity in Northern Ireland

The GP consultation rate for combined influenza and ILI increased to a rate of 36 per 100,000 in week 7. One influenza A (H3N2) virus and one influenza A (H1) virus were isolated from spotter swabs during week 7. These are the first positive detections of influenza in the community this season. Four influenza A (H3N2) viruses have been detected in hospital paediatric cases.

Influenza Activity in England, Scotland and Wales

During week 7, the GP consultation rate for influenza and ILI has decreased in England and Wales, to rates of 32 and 7 per 100,000, respectively. In Scotland, in week 7, the GP consultation rate for ILI remained stable, with a rate of 28 per 100,000. Influenza A (H3N2) is the predominant strain detected by the ENVRL, mainly affecting adults. Influenza A (H1N2) continues to be isolated from hospitals and community sources. The majority of cases are in children less than 158 years of age.

Influenza Activity in Europe

During week 6, the geographical spread of influenza was reported as widespread in Belgium, France, Italy, Norway, Portugal, Spain and Switzerland. Influenza activity was regional in the Netherlands and Sweden. Local outbreaks of influenza were reported in Germany and Romania. In the Czech Republic, Denmark, Slovakia and Slovenia influenza activity was sporadic. The dominant influenza type across Europe was influenza A. Among the networks reporting influenza A as the dominant type to the European Influenza Surveillance Scheme, seven reported influenza A (H3N2) as the dominant subtype. To date this season, two cases of influenza A (H1N2) have been detected in France.

Influenza Activity in Canada

During week 6, sentinel physicians reported 62 cases of ILI per 1000 patient visits, which is an expected rate for the time of year. Health Canada received 2541 reports of laboratory tests for influenza: 19% were positive for influenza A and 2% were positive for influenza B. One influenza A (H1) isolate has been identified as influenza A (H1N2). Eighty-two influenza B/Hong Kong/22/01-like viruses have been characterised, these belong to the B/Victoria/02/87 lineage of influenza B viruses. The current vaccine is expected to provide limited cross protection against this influenza B strain.

Influenza Activity in the United States

During week 6, the overall proportion of patient visits to sentinel physicians for ILI was 3%, which is above the national baseline. 157 influenza A (H3N2), 200 influenza A (unsubtyped) and 6 influenza B viruses were identified in week 6. The CDC has also identified influenza A (H1N2) from patient specimens collected in July, September and December 2001. All influenza viruses antigenically characterised by the CDC are similar to this season's vaccines.

Influenza Activity Worldwide

Regional influenza activity was reported in Iceland during week 6 and widespread activity in the Russian Federation, which was mainly associated with influenza B in 0-2 year old children. Sporadic influenza activity was reported in Australia, Hong Kong

and Mexico. Influenza activity in Hong Kong is increasing with 3 influenza A (unsubtyped), 11 influenza A (H1N1), 90 influenza A (H3N2) and 40 influenza B viruses detected. Avian influenza A (H5N1) has been confirmed in a number of farms and retail markets in Hong Kong, resulting in the culling of 180,000 chickens on farms and 6000 in markets.

This report was prepared by Lisa Domegan, Surveillance Scientist, NDSC.