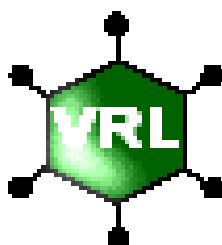


# Weekly Influenza Surveillance Report



**Week 48 2002**

**Report produced: 5/12/2002**

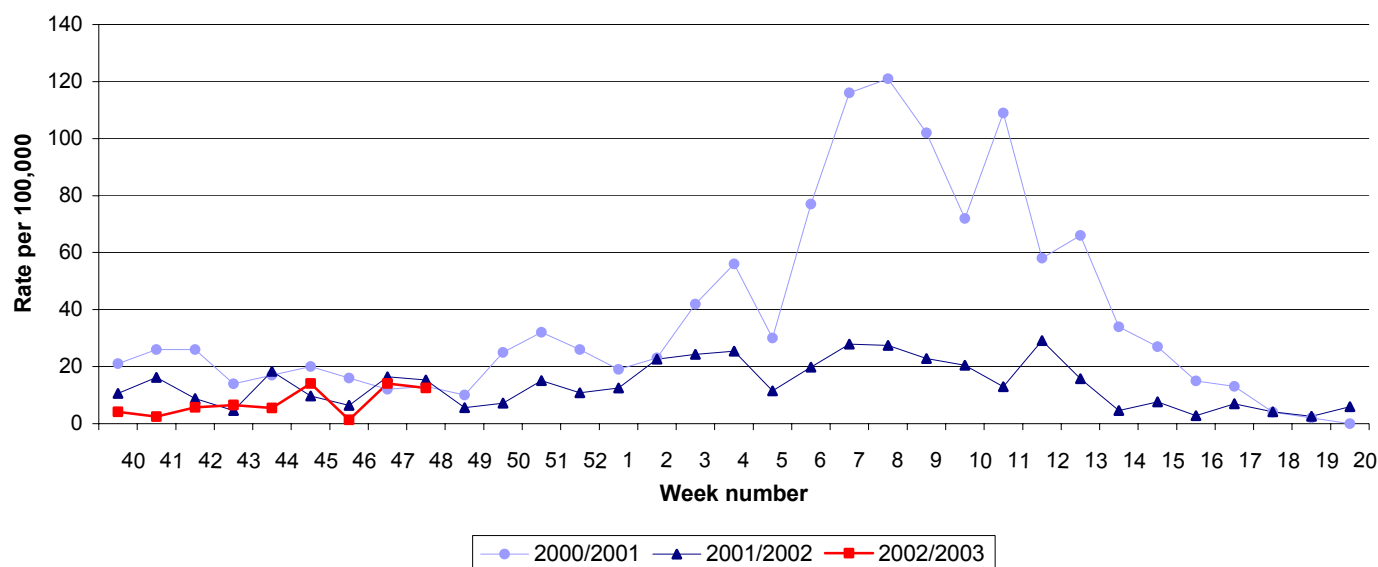
**This report is produced in collaboration with the Departments of Public Health**

## Summary

The sentinel GP consultation rate for influenza-like illness remains at low levels. There have been no positive detections of influenza virus this season. The number of positive respiratory syncytial virus specimens from non-sentinel sources has continued to increase.

## Clinical data from sentinel GPs

During week 48 (the week ending the 1<sup>st</sup> of December 2002), 8 influenza-like illness (ILI) cases were reported from sentinel general practices, corresponding to an ILI consultation rate of 12.5 per 100,000 population (figure 1). Twenty-nine (87.9%) of the 33 sentinel general practices reported during week 48, with 8 sentinel GPs reporting ILI.



**Figure 1:** GP consultation rate for influenza-like illness per 100,000 population by report week, during the 2000/2001, 2001/2002 and 2002/2003 influenza seasons.

## Virological data

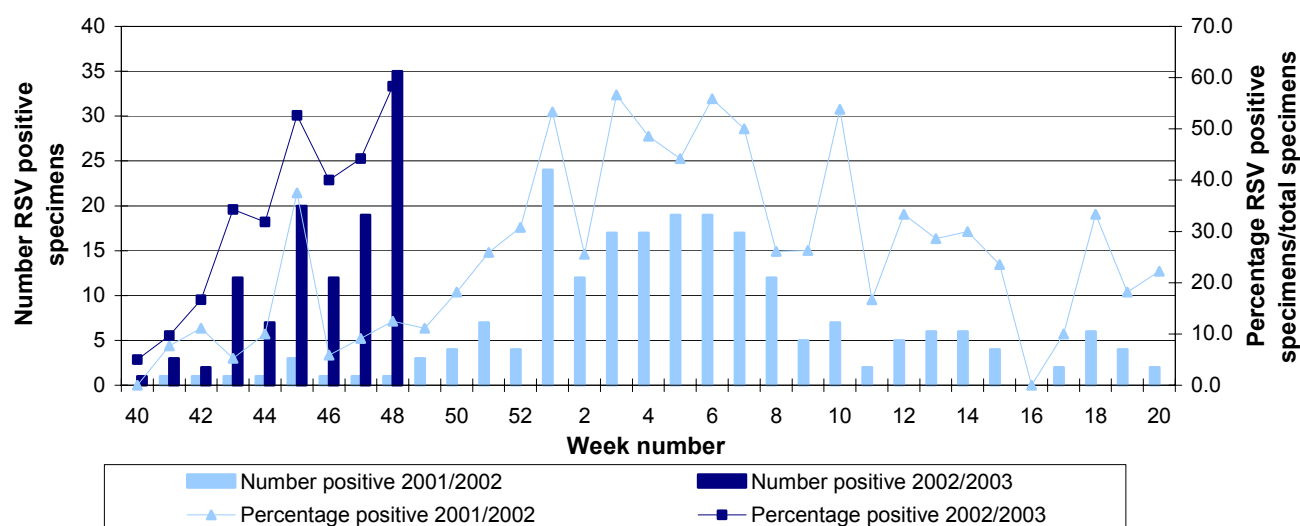
The National Virus Reference Laboratory (NVRL) received 6 swabs from sentinel GPs during week 48, which were negative for influenza virus (table 1). There have been no positive detections of influenza virus this season.

The NVRL also tested 60 respiratory specimens from non-sentinel sources (GPs and hospitals) during week 48. No specimens were positive for influenza A or B, parainfluenza virus type 1, 2 or 3 or adenovirus. Thirty-five (58.3%) non-sentinel respiratory specimens were positive for respiratory syncytial virus (RSV; figure 2) during week 48. Five (14.3%) cases were less than 1 month old, 21 (60%) were aged between 1 and 6 months old, 5 (14.3%) were aged between 7 and 12 months and 4 (11.4%) were over 12 months of age. Twenty-six (74.3%) cases were reported from the Eastern Regional Health Authority. Since the start of the 2002/2003-influenza season, 111 (38.1%) of 291 respiratory specimens were positive for RSV. This is compared to 10 (8.8%) of 114 respiratory specimens positive for RSV during the same period in the 2001/2002 influenza season. RSV positive specimens for the month of October and November are at their highest level ever recorded; the NVRL

have been collecting data on RSV since 1988. (<http://www.ndsc.ie/Publications/EPI-Insight/2002Issues/> Respiratory syncytial virus. Epi-insight Dec 2002 issue)

**Table 1: Sentinel influenza results by type, subtype and report week for 2002/2003**

<i>Week number</i>	<i>Total swabs</i>	<i>Positive swabs</i>	<i>Percentage positive</i>	<i>A (unsubtyped)</i>	<i>A (H1N1)</i>	<i>A (H1N2)</i>	<i>A (H3N2)</i>	<i>B</i>
40	4	0	0%	0	0	0	0	0
41	1	0	0%	0	0	0	0	0
42	4	0	0%	0	0	0	0	0
43	3	0	0%	0	0	0	0	0
44	3	0	0%	0	0	0	0	0
45	7	0	0%	0	0	0	0	0
46	1	0	0%	0	0	0	0	0
47	3	0	0%	0	0	0	0	0
48	6	0	0%	0	0	0	0	0
<b>Total</b>	<b>32</b>	<b>0</b>	<b>0%</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>



**Figure 2:** Number and percentage of non-sentinel RSV positive specimens detected during the 2001/2002 and 2002/2003 influenza seasons.

### **Influenza activity in Northern Ireland**

During week 48, 23 of the 24 sentinel GPs in Northern Ireland reported a combined rate for influenza and ILI of 18.3 per 100,000. No swabs were submitted from sentinel GPs during week 48 and there were no positive swabs identified from non-sentinel or routine laboratory testing.

### **Influenza activity in England, Scotland and Wales**

During week 48, in England, the GP consultation rate for ILI remained little changed at 13.2 per 100,000. In Wales and Scotland, the GP consultation rates for ILI increased slightly during week 48 to 3.7 and 23 per 100,000 population, respectively. No isolates of influenza virus have been reported in the UK. There was a rise in laboratory reports of RSV during week 48, coinciding with a sharp rise in GP consultation rates for acute bronchitis in the 0-4 year age group.

### **Influenza activity in Europe**

During week 47, 19 networks reporting to the European Influenza Surveillance Scheme (EISS) reported no influenza activity with England and France reporting sporadic activity. Sporadic cases of influenza A and B were detected from sentinel specimens from the Czech Republic, France, Portugal and Spain. In Spain, 3 influenza B viruses were isolated with unusual clinical virulence. Influenza B viruses that have been antigenically characterised this season are covered by this seasons vaccine. RSV is circulating in the Czech Republic, England, France and the Netherlands. RSV activity is higher than normal in the Netherlands.

### **Influenza activity in Canada**

During week 47, Ontario reported localised and sporadic influenza activity (with outbreaks of ILI reported in schools). Quebec reported sporadic activity and 11 provinces/territories reported no influenza activity. Sentinel physicians reported 17 cases of ILI per 1000 patient visits, the expected rate for the time of year. Health Canada received 835 reports of laboratory tests for influenza: five were positive for influenza A and one for influenza B. Other respiratory viruses circulating in Canada remain within expected levels: 4.6% of tests were positive for RSV, 6.6% for parainfluenza viruses and 1.3% for adenovirus.

### **Influenza activity in the United States**

During week 47, the proportion of patient visits to sentinel providers for ILI was 1.3%, less than the national baseline. Two state and territorial health departments reported regional activity, 18 reported sporadic activity and 27 reported no influenza activity. WHO and NREVSS laboratories reported 923 specimens tested for influenza viruses, of which 21 (2.3%) were positive: 2 A (H1) viruses, 3 A (unsubtyped) and 16 B viruses.

### **Influenza activity Worldwide**

During week 47, no influenza activity was reported in Iceland. Sporadic activity was reported in Hong Kong [3 influenza B, 1 A (H3N2) and 2 A (unsubtyped) viruses detected], the Russian Federation [1 influenza B, 2 A (H3N2) and 1 A (H1N1) viruses detected], Latvia (1 influenza B virus detected), Argentina [3 influenza A (unsubtyped) viruses detected], Chile (2 influenza B viruses detected) and Mexico [one influenza A (unsubtyped) virus detected].

**This report was produced by Dr Lisa Domegan, NDSC.**