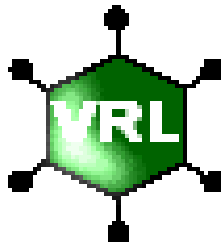


Weekly Influenza Surveillance Report



Week 46 2002

Report produced: 20/11/2002

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 decreased this week but still remains at higher levels than the 2001/2002 influenza season.

Clinical data from sentinel GPs

During week 46 (week ending the 17th of November 2002), 1 influenza-like illness (ILI) case was reported from sentinel general practices (GPs), corresponding to an ILI consultation rate of 1.4 per 100,000 population (figure 1). This is the lowest consultation rate for ILI since week 20 2001. Twenty-six (78.8%) of the 33 sentinel general practices reported during week 46, with only one sentinel GP reporting ILI.

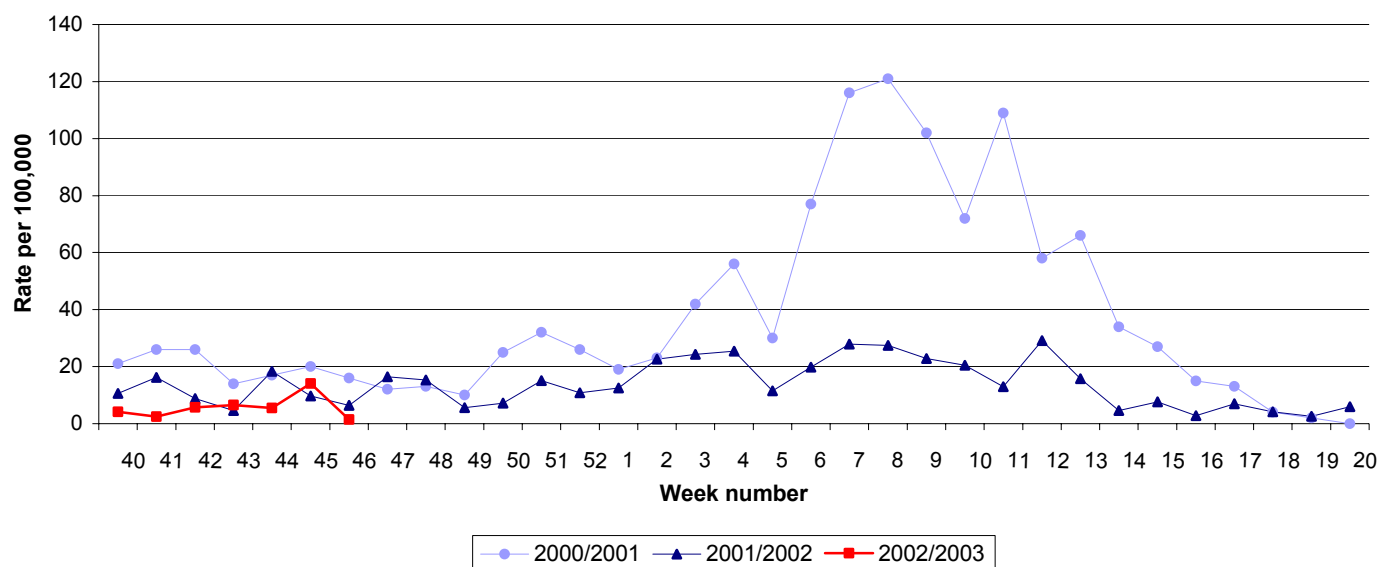


Figure 1: GP consultation rate for influenza-like illness per 100,000 population by report week, during the 2000/2001, 2001/2002 and 2002/2003 influenza seasons.

Virological data

The National Virus Reference Laboratory (NVRL) received 1 swab from sentinel GPs during week 46, which was negative for influenza virus (table 1). There have been no positive detections of influenza virus this season.

The NVRL also tested 30 respiratory specimens from non-sentinel sources (GPs and hospitals) during week 46. No specimens were positive for influenza A or B, parainfluenza virus type 1, 2 or 3 or adenovirus. Eleven (36.7%) non-sentinel respiratory specimens were positive for respiratory syncytial virus (RSV; figure 2) during week 46. All 11 cases were less than 12 months of age and 10 of these cases were reported from the Eastern Regional Health Authority. Since the start of the 2002/2003-influenza season, 56 (29.8%) of 188 respiratory specimens were positive for RSV. This is compared to 8 (8.4%) of 95 respiratory specimens positive for RSV during the same period in the 2001/2002 influenza season.

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
Total	23	0	0%	0	0	0	0	0

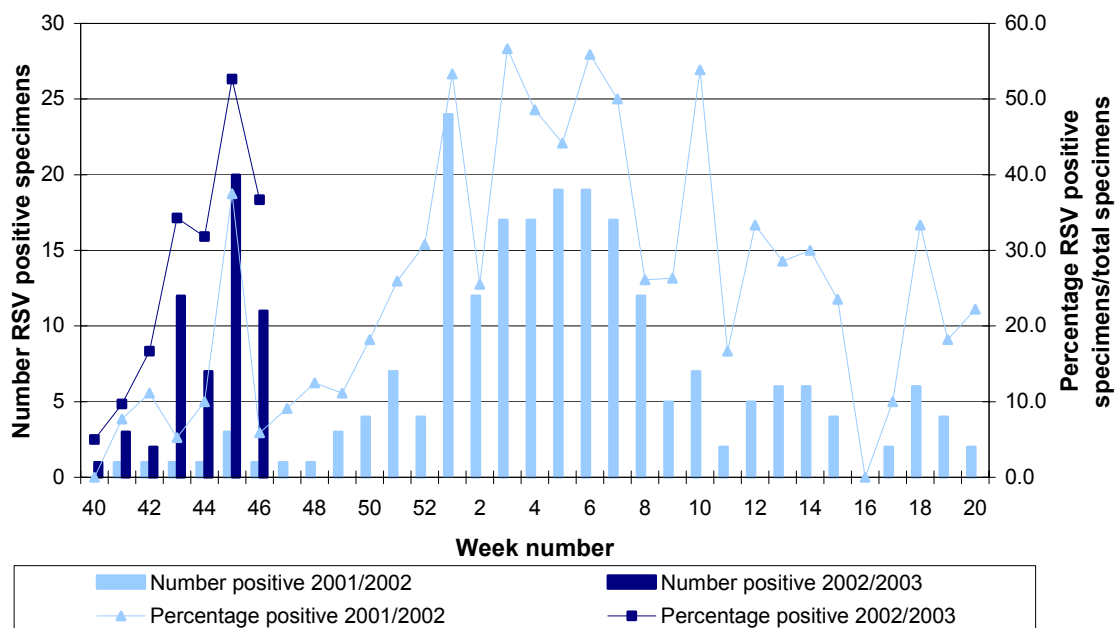


Figure 2: Number and percentage of non-sentinel RSV positive specimens detected during the 2001/2002 and 2002/2003 influenza seasons.

Influenza activity by health board/authority

Influenza activity is reported on a weekly basis from the Departments of Public Health. Influenza activity is based on sentinel GP ILI consultation rates, laboratory confirmed cases of influenza, sentinel hospital admissions data, and/or sentinel school absenteeism data. To date, this season, there have been no indications of influenza activity in any of the health boards.

Influenza activity in Northern Ireland

During week 46 in Northern Ireland, 23 of the 24 sentinel GPs reported. The combined influenza and ILI rate per 100,000 population increased slightly from 24.7 in week 45 to 26.1 in week 46. No swabs were submitted from sentinel GPs during week 46 and there were no positive swabs identified from non-sentinel or routine laboratory testing.

Influenza activity in England, Scotland and Wales

In England, Scotland and Wales, indicators of ILI continue to remain within the range of baseline activity during week 45 and 46. In England, the GP consultation rate for ILI changed little, from a rate of 10.4 per 100,000 in week 45 to 9.7 per 100,000 in week 46. In Wales and Scotland, the GP consultation rates for week 46 were 0.47 and 17 per 100,000, respectively. There have been no other positive influenza detections from any specimens referred to ERNVL, NHS or PHLS laboratories. RSV and *Mycoplasma pneumoniae* numbers remain low.

Influenza activity in Europe

During week 45, 18 networks reporting to the European Influenza Surveillance Scheme (EISS) reported no influenza activity. Thirteen influenza positive respiratory specimens have been reported to EISS this season. Further analysis of three of these specimens (all from non-sentinel sources) has been reported to EISS. Two viruses (in Norway and France) were antigenically related to the A/Panama/2007/99 (H3N2) virus and one virus (in Germany) was related to the B/Hong Kong/330/01 virus. Both of these virus strains are included in the 2002-2003 influenza vaccine.

Influenza activity in Canada

Influenza activity remains at low levels in Canada. During week 45, 10 provinces reported no influenza activity. Sentinel GPs reported 26 cases of ILI per 1000 patient visits, which is within the expected rates. Health Canada received 790 reports of laboratory tests for influenza: none were positive for influenza. Last week, a detection of influenza A was reported from Alberta in a traveller returning from south east Asia. The associated strain was identified as influenza A /Panama/2007/99 (H3N2), which is covered by the current vaccine. Detection of other respiratory viruses circulating in the Canadian population remains at moderate levels for RSV (3.2% of tests positive), parainfluenza viruses (6.3% of tests positive), and adenovirus (1.5% of tests positive).

Influenza activity in the United States

In the US during week 45, the proportion of patient visits to sentinel providers for ILI was 1.3%; less than the national baseline. One state and territorial health department reported regional influenza activity, 17 reported sporadic activity and 32 reported no influenza activity. The WHO and NREVSS laboratories reported 738 specimens tested for influenza viruses; one was positive for influenza B virus.

Influenza activity Worldwide

During week 45, no influenza activity was report in Argentina, the Slovak Republic and the Balkans. Sporadic influenza activity was reported in Hong Kong and the Russian Federation. In Hong Kong, sporadic activity was associated with influenza A (H3N2) and influenza B.

This report was produced by Dr Lisa Domegan, NDSC.