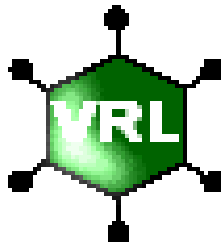


Weekly Influenza Surveillance Report



Week 43 2002

Report produced: 31/10/2002

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

Summary

To date, no laboratory confirmed cases of influenza have been identified during the 2002/2003-influenza season. There was, however, an increase in the number of non-sentinel RSV positive specimens detected during week 43.

Clinical data from sentinel GPs

During week 43 (week ending the 27th of October 2002), 4 influenza-like illness (ILI) cases were reported from sentinel general practices, corresponding to an ILI consultation rate of 6.4 per 100,000 population (figure 1). Twenty-three (69.7 %) of the 33 sentinel general practices reported during week 42 with 3 reporting ILI cases.

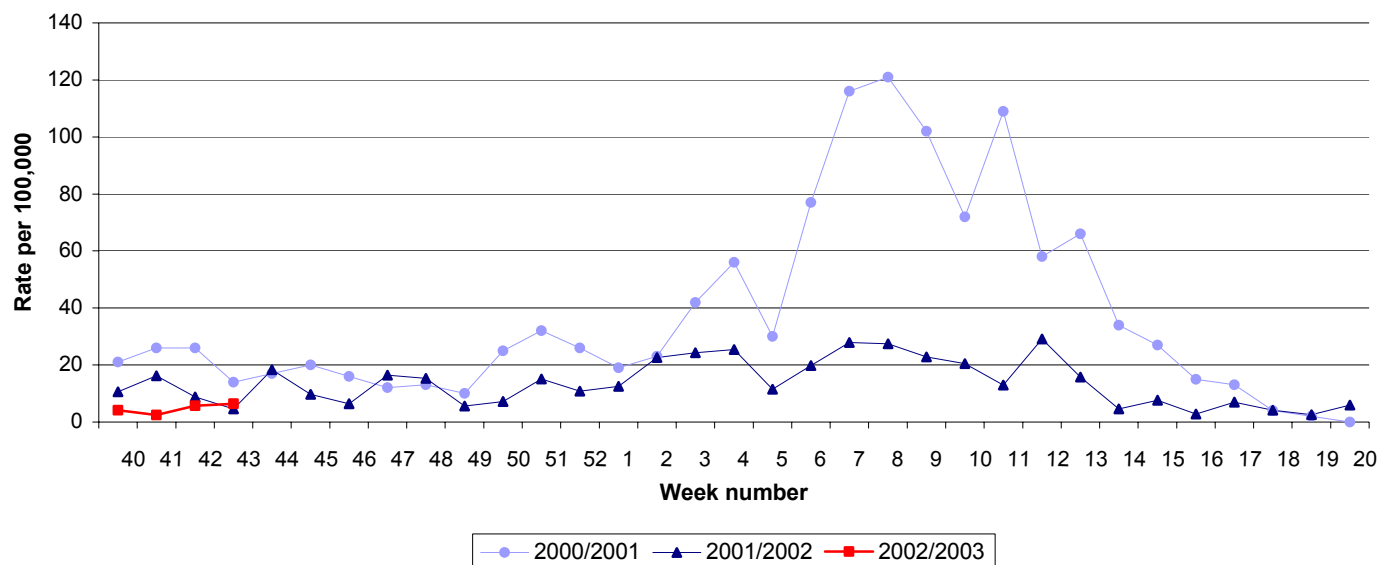


Figure 1: GP consultation rate for influenza-like illness per 100,000 population by report week, during the 2000/2001, 2001/2002 and 2002/2003 influenza seasons.

Virological data

The National Virus Reference Laboratory (NVRL) received 3 swabs from sentinel GPs during week 43; all 3 swabs were negative for influenza virus (table 1).

The NVRL also tested 35 specimens from non-sentinel sources (GPs and hospitals) during week 43. Twelve of these were positive for respiratory syncytial virus (RSV; figure 2) and one was positive for parainfluenza type 1 virus. Increased RSV activity is normal during the winter months. The peak of activity usually occurs later in the season, as in the 2001/2002 season (figure 2). It is too early to tell if this increase in positive swabs represents a true increase in RSV activity in the community: non-sentinel virology data will be closely monitored over the coming weeks.

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

Week number	Total swabs	Positive swabs	Percentage positive	A (unsubtyped)	A (H1N1)	A (H1N2)	A (H3N2)	B
40	4	0	0%	0	0	0	0	0
41	1	0	0%	0	0	0	0	0
42	2	0	0%	0	0	0	0	0
43	3	0	0%	0	0	0	0	0
Total	7	0	0%	0	0	0	0	0

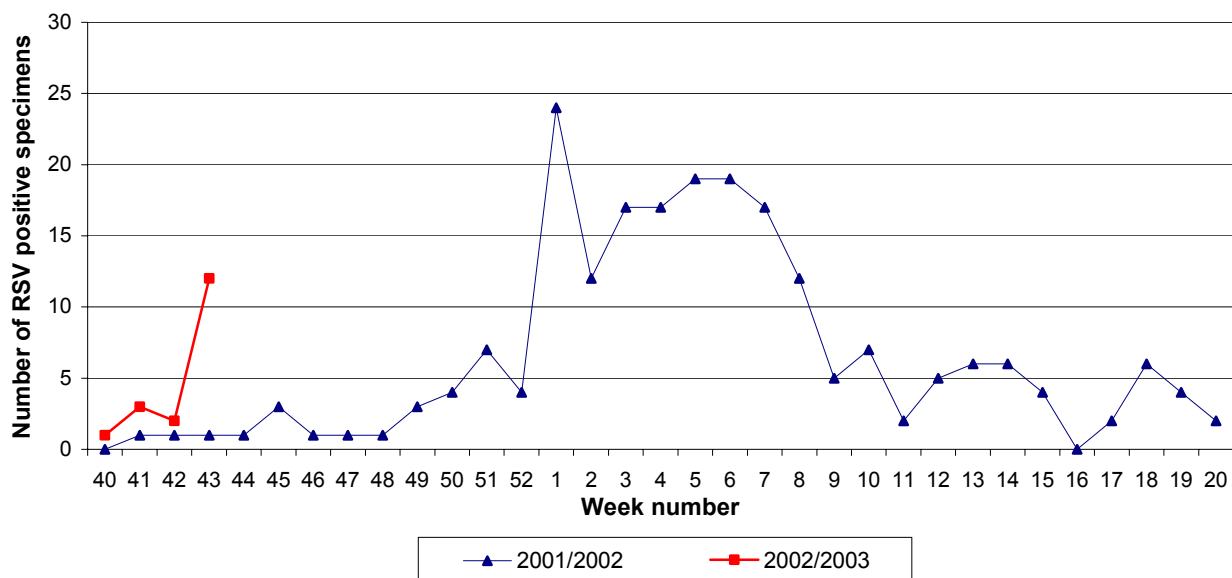


Figure 2: Non-sentinel RSV positive specimens detected during the 2001/2002 and 2002/2003 influenza seasons.

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, hospital admissions data, and/or school absenteeism data. To date, this season, there have been no indications of influenza activity in any of the health boards.

2002-2003 influenza vaccine

The EU recommendation for the influenza trivalent vaccine composition for the 2002-2003 season is as follows:

- A/Moscow/10/99 (H3N2)-like strain
- A/New Caledonia/20/99 (H1N1)-like strain
- B/Hong Kong/330/2001-like strain.

The complete text of the EU recommendations can be located at:

<http://www.emea.eu.int/pdfs/human/bwp/085202en.pdf>

Influenza activity in Northern Ireland

During week 43 in Northern Ireland, 23 of the 24 general practices reported, covering 8.4 % of the population. The combined influenza and ILI rate per 100,000 increased to 38.7 per 100,000. No swabs were submitted from sentinel GPs during week 43 and there were no positive swabs identified from non-sentinel or routine laboratory testing.

Influenza activity in England, Scotland and Wales

Indicators of influenza-like illness continue to remain within the range of baseline activity in England, Scotland and Wales. In England, the GP consultation rate showed little change from 11.7 per 100,000 in week 42 to 10.7 per 100,000 in week 43. The

consultation rate for acute bronchitis remains within the expected range for the time of year. In Wales, the consultation rate remained low at 0.47 per 100,000 in week 43. In Scotland, the consultation rate also remained low at 17 per 100,000 in week 42. There has been one positive detection of influenza A H1 by PCR from a hospital source by the ENVRL reference Laboratory in week 43. No other positive detections have been made from any specimens referred to ENVRL or in NHS or PHLS laboratories and RSV numbers are low for this time of year.

Influenza activity in Europe

During weeks 40, 41 & 42, all of the networks reporting to the European Influenza Surveillance Scheme (EISS) reported no influenza activity. Eleven networks reported virological data to EISS during week 42. None of the specimens collected by sentinel physicians (58 swabs in total) were positive for influenza A or B.

Influenza activity in Canada

Across Canada, influenza activity remained low during week 42. Eleven regions reported no influenza activity, one region (Nunavut) reported sporadic activity and one region did not report. Sentinel physicians reported 13 cases of influenza-like illness (ILI) per 1000 patient visits, which is below the expected rate for the time of year. Health Canada received 597 reports of laboratory tests for influenza during week 42: one test was positive for influenza A. This brings to 5, the total number of positive tests for influenza A in Canada since August 25th, 2002 (No tests have been positive for influenza B over this period). Detection of other respiratory viruses circulating in the Canadian population was at low levels during week 42: RSV (2.3% of tests positive), parainfluenza viruses (5.1% of tests positive) and adenovirus (0.7% of tests positive).

Influenza activity in the United States

During week 42, the proportion of patient visits to sentinel providers for influenza-like illness (ILI) overall was 1.1%, which is less than the national baseline of 1.9%. Ten state and territorial health departments reported sporadic influenza activity while 39 reported no influenza activity. During week 42, none of the specimens tested by WHO and NREVSS laboratories were positive for influenza.

Influenza activity Worldwide

During week 42, sporadic influenza activity was reported in Madagascar, Hong Kong and Argentina. In Madagascar, 6 influenza B isolates were detected. In Hong Kong, 3 influenza A (H3N2) and 5 influenza B were detected. In Argentina 7 influenza A (not typed) and 1 influenza B were detected.

An outbreak of influenza B was also confirmed in Argentina between 1st and 26th August 2002 where 890 cases were reported primarily among school-age children. Influenza type B was confirmed in 12 of 18 patients studied and subsequently characterised as similar to that of B/Hong Kong/330/01. Two patients showed evidence of a mixed infection by influenza B and A (H3) viruses.

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