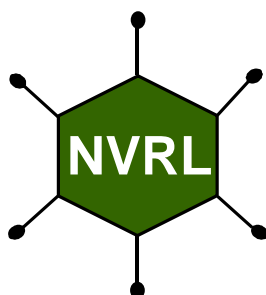


Weekly Influenza Surveillance Report



Week 41 2003

Report produced: 16/10/2003

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

Summary

The first positive cases of influenza virus (4 influenza A H3N2) reported through the GP sentinel surveillance scheme for the 2003/2004 season were identified in week 41. GP consultation rates for influenza-like illness increased during week 41.

Clinical data

During week 41 2003 (the week ending the 12th of October 2003), 22 influenza-like illness (ILI) cases were reported from sentinel general practices, corresponding to an ILI consultation rate of 35.4 per 100,000 population, increasing from 13.8 per 100,000 in week 40. Twenty-four of the 34 (70.6%) sentinel practices reported during week 41, with 7 reporting ILI (figure 1). One ILI case was aged between 0 and 4 years, 1 case was aged between 5 and 14 years, 16 cases were in the 15-64 year age group and 4 cases were aged 65 years or older.

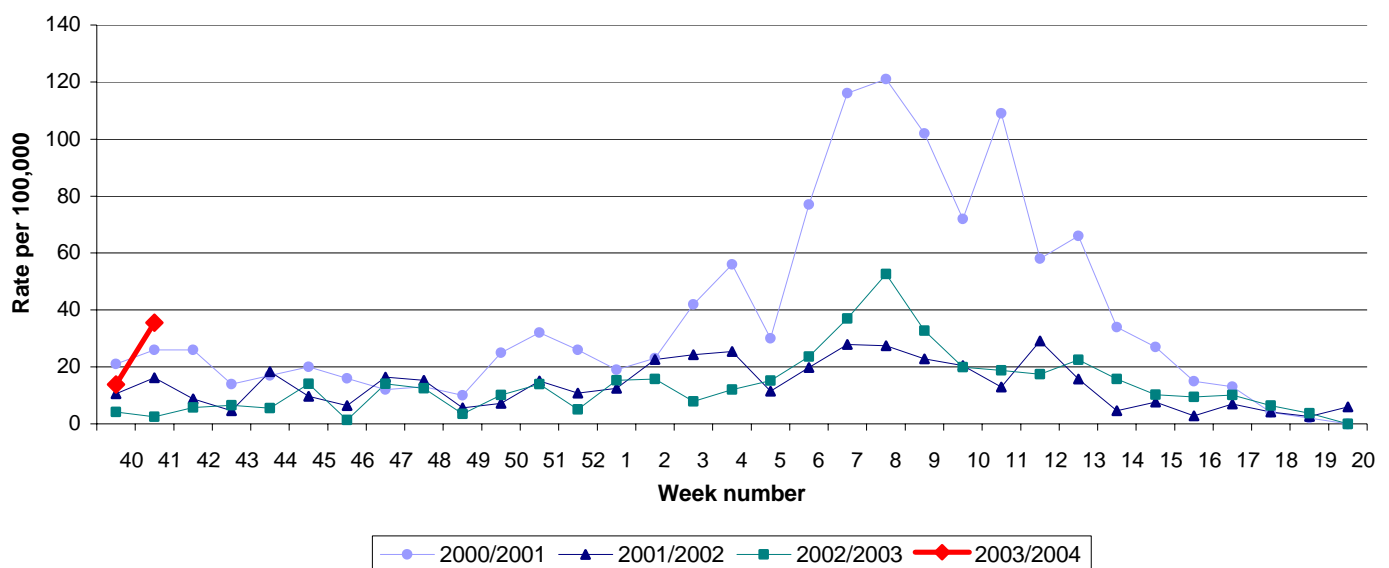


Figure 1: GP consultation rate for influenza-like illness per 100,000 population by report week, during the 2000/2001, 2001/2002, 2002/2003 & 2003/2004-influenza seasons.

Virological data

During week 41, the National Virus Reference Laboratory (NVRL) received 12 swabs from sentinel GPs (table 1). Four swabs were positive for influenza A (H3N2); all were aged between 15 and 64 years of age. These are the first detections of influenza virus through the GP sentinel surveillance scheme for the 2003/2004 season. The NVRL also tested 20 respiratory specimens mainly from hospitals, none of these were positive for influenza virus.

Table 1: Sentinel GP influenza results by type, subtype and report week for the 2003/2004 influenza season

Week number	Total swabs	Positive swabs	Percentage positive	Influenza A (H1)	Influenza A (H3N2)	Influenza B
40	9	0	0.0	0	0	0
41	12	4	33.3	0	4	0
Total	21	4	19.0	0	4	0

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, and/or sentinel hospital admissions data, and/or sentinel school absenteeism data. During week 40, 4 health boards reported sporadic influenza activity (ERHA, MWHB, NEHB and NWHB); all other health boards reported no influenza activity (figure 2).

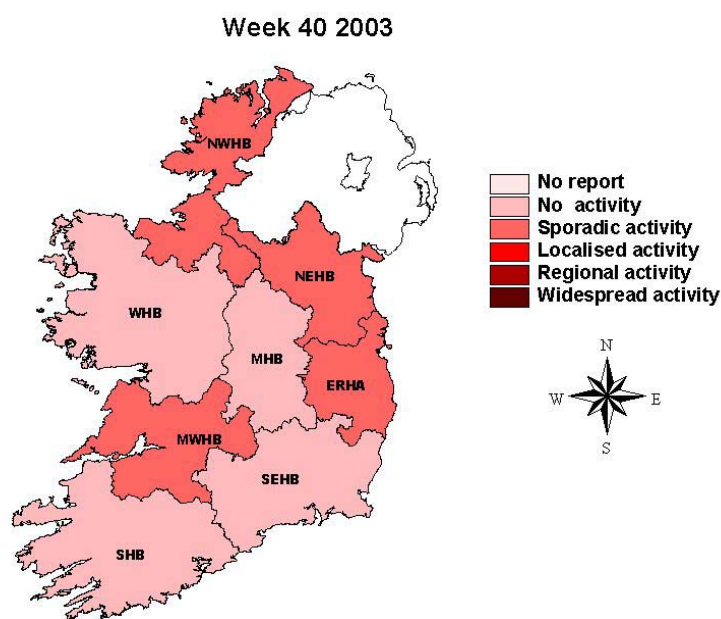


Figure 2: Map of influenza activity by health board during week 40 2003.

Influenza activity in Northern Ireland

In Northern Ireland during week 41, 20 of 23 sentinel general practices reported a GP consultation rate for combined influenza and ILI of 42.2 per 100,000 population. Of 7 sentinel specimens tested for influenza, one was positive for influenza A (H3N2), another influenza A (H3N2) was also detected in a hospitalised patient. <http://www.cdscni.org.uk//>

Influenza activity in England, Scotland and Wales

Clinical indicators of influenza activity remain within baseline levels across the UK, although GP consultation rates for ILI have increased during week 41. An outbreak of respiratory illness in a Scottish school occurred at the end of September, affecting 100 people with some patients admitted to hospital with pneumonia. There are no laboratory confirmations of this outbreak, however 5 influenza A detections were confirmed in the same town. Sporadic detections of influenza A have been reported from England, Scotland and Wales, the indications are that influenza A viruses are circulating at low levels in the population.

http://www.hpa.org.uk/infections/topics_az/influenza/fluactivity0304.htm

Influenza activity in Europe

No influenza activity was reported in Denmark, France or Latvia during week 41. Portugal reported sporadic influenza activity with one influenza A (H1N2) and 3 influenza A (H3N2) viruses detected. A widespread outbreak of influenza A (H3N2) was reported in Iceland during week 41 with 14 A (H3N2) detections. <http://rhone.b3e.jussieu.fr/flunet/www/activity.html>. The European Influenza Surveillance Scheme (EISS) will begin publishing its seasonal Weekly Electronic Bulletin in week 42 2003 <http://www.eiss.org>

Influenza activity in Canada

During week 40 in Canada, sporadic activity was reported in parts of Ontario and localised activity in Alberta and Saskatchewan. Sentinel physicians reported 26 cases of ILI per 1000 patient visits in week 40. During the two-week period, September 21 to October 4, Health Canada received 1588 reports of laboratory tests for influenza, 40 (2.5%) were positive for influenza A. <http://www.hc-sc.gc.ca/pphb-dgsp/fluwatch/index.html>

Influenza activity in the United States

During week 40, the proportion of patient visits to sentinel providers for ILI was 0.9%, less than the national baseline. One state and territorial health department reported localised influenza activity, 2 reported sporadic activity and 40 states reported no influenza activity. WHO and NREVSS laboratories reported 530 specimens tested for influenza viruses, one was positive for influenza A (H3N2). Influenza A (H3N2) viruses were also detected in August and September 2003. <http://www.cdc.gov/ncidod/diseases/flu/fluvirus.htm>

Influenza activity Worldwide

Sporadic influenza activity was reported in Hong Kong, the Russian Federation, Australia and Chile during week 41. In Hong Kong, 10 influenza A (unsubtyped), 31 influenza A (H3N2) and 4 influenza B viruses were detected. In Australia, 5 influenza A (unsubtyped) viruses were detected, 7 were detected in Israel and 2 in Chile, along with one influenza A (H3N2). <http://oms2.b3e.jussieu.fr/flunet/>

Northern Hemisphere influenza vaccine for the 2003/2004

On February the 28th 2003, WHO published a recommendation on the composition of influenza vaccines for use in the 2003-2004 Northern Hemisphere influenza season.

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

* The widely used vaccine strain is A/Panama/2007/99

** Currently used vaccine strains include B/Shandong/7/97, B/Hong Kong/330/2001, B/Hong Kong/1434/2002

<http://www.who.int/csr/disease/influenza/vaccinerecommendations1/en/>

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