

# Influenza Weekly Surveillance Report



A REPORT BY THE HEALTH PROTECTION SURVEILLANCE CENTRE IN COLLABORATION WITH THE IRISH COLLEGE OF GENERAL PRACTITIONERS, THE NATIONAL VIRUS REFERENCE LABORATORY & THE DEPARTMENTS OF PUBLIC HEALTH.

**Week 41 2005 (10<sup>th</sup> to 16<sup>th</sup> Oct 2005)**

## Summary

During week 41 2005, influenza activity was at low levels in Ireland, with 12 influenza-like illness (ILI) cases reported by sentinel GPs. To date this season, no positive influenza specimens have been detected by the NVRL.

## Background

This is the sixth season of influenza surveillance using computerised sentinel general practices in Ireland. The Health Protection Surveillance Centre (HPSC) is working in collaboration with the Irish College of General Practitioners (ICGP), the National Virus Reference Laboratory (NVRL) and the Departments of Public Health on this sentinel surveillance project. Thirty-eight sentinel general practices have been recruited to report on the number of patients with ILI on a weekly basis. ILI is defined as the sudden onset of symptoms with a temperature

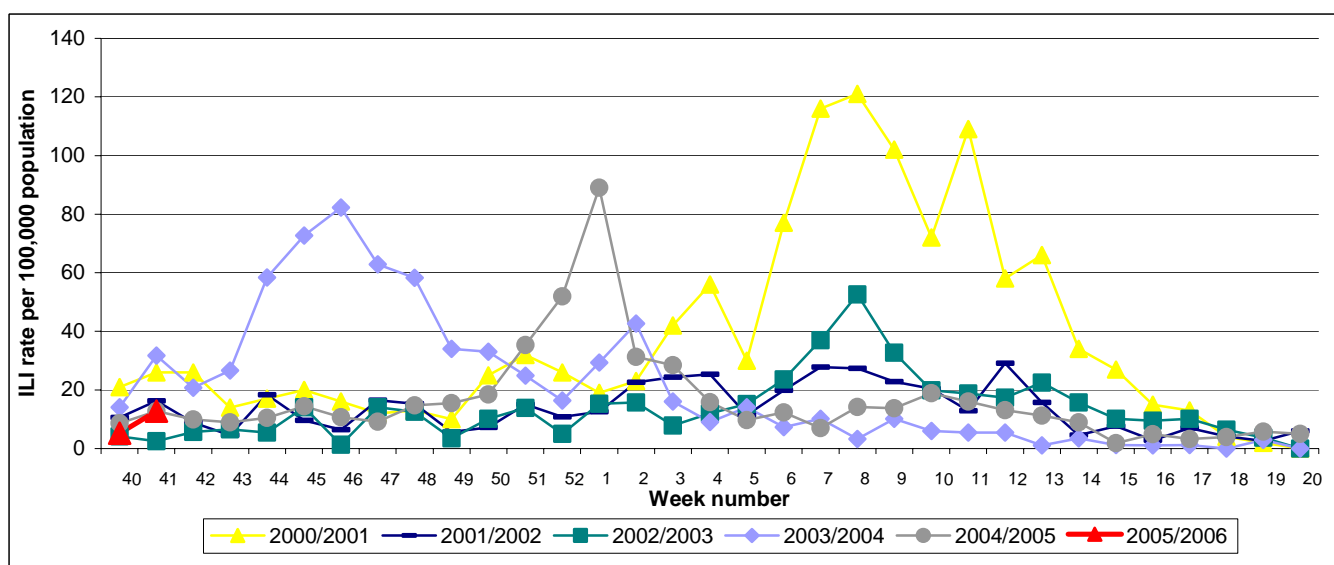
of 38<sup>0</sup>C or more, with two or more of the following: headache, sore throat, dry cough and myalgia.

Sentinel GPs send a combined nasal and throat swab, to the NVRL, on at least one patient per week where a clinical diagnosis of ILI is made. This report includes data on ILI cases reported by sentinel GPs, influenza test results from the NVRL, influenza notifications, registered deaths attributed to influenza, and regional influenza activity reported by the Departments of Public Health.

## Results

### Clinical Data

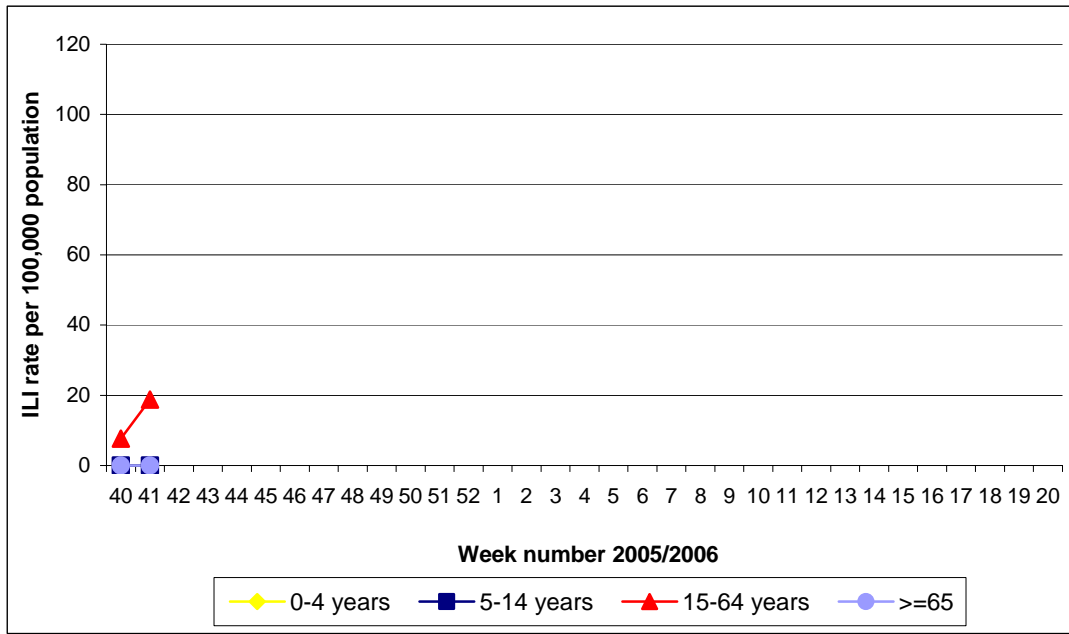
Twelve ILI cases were reported from sentinel GPs during week 41 2005, corresponding to an ILI consultation rate of 12.8 per 100,000 population, an increase from the updated rate of 5.2 per 100,000 population (figure 1).



**Figure 1:** GP consultation rate for ILI per 100,000 population by week, during the 2000/2001, 2001/2002, 2002/2003, 2003/2004, 2004/2005 & 2005/2006 influenza seasons.

## Results (continued)

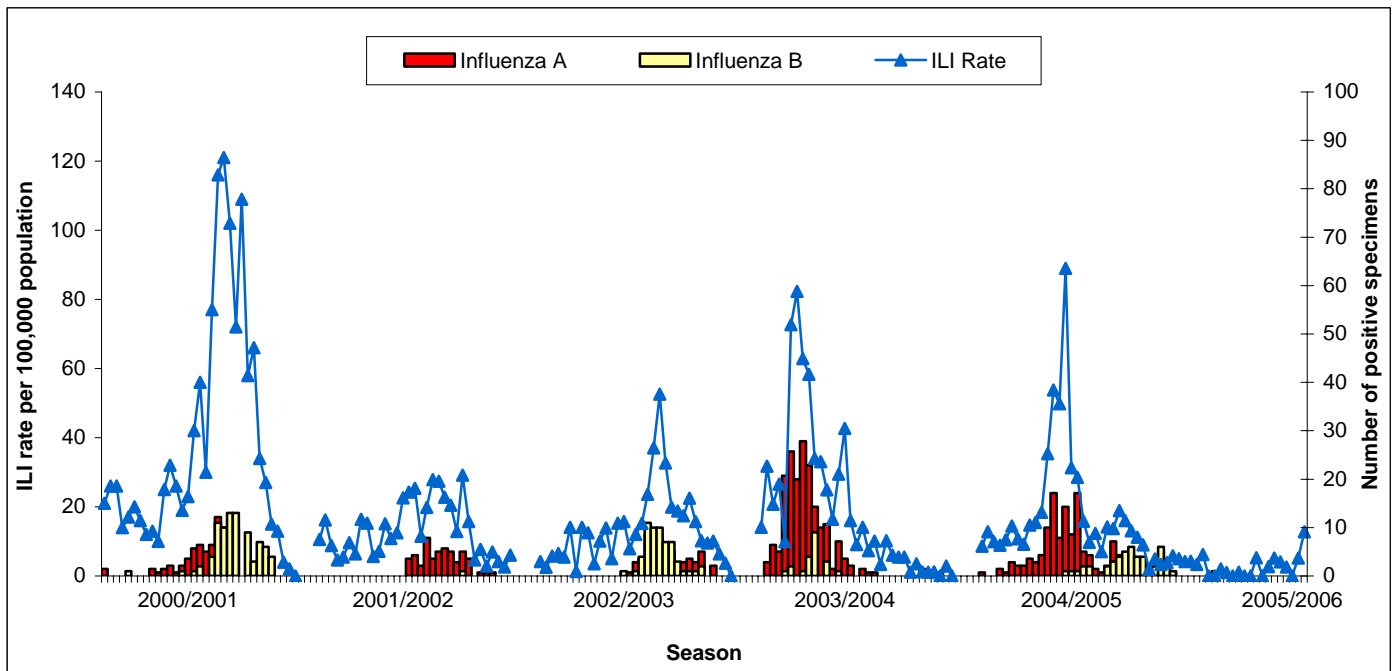
All twelve ILI cases were aged between 15-64 years (figure 2). Twenty-eight of the 38 (73.7%) sentinel general practices reported during week 41 2005, with seven reporting ILI.



**Figure 2:** Age specific GP consultation rate\* for ILI per 100,000 population by week during the 2005/2006 influenza season. \*Please note the denominator used in the age specific consultation rate is from the 2002 census data; this assumes that the age distribution of the sentinel general practices is similar to the national age distribution.

### *Virological Data from the National Virus Reference Laboratory (NVRL)*

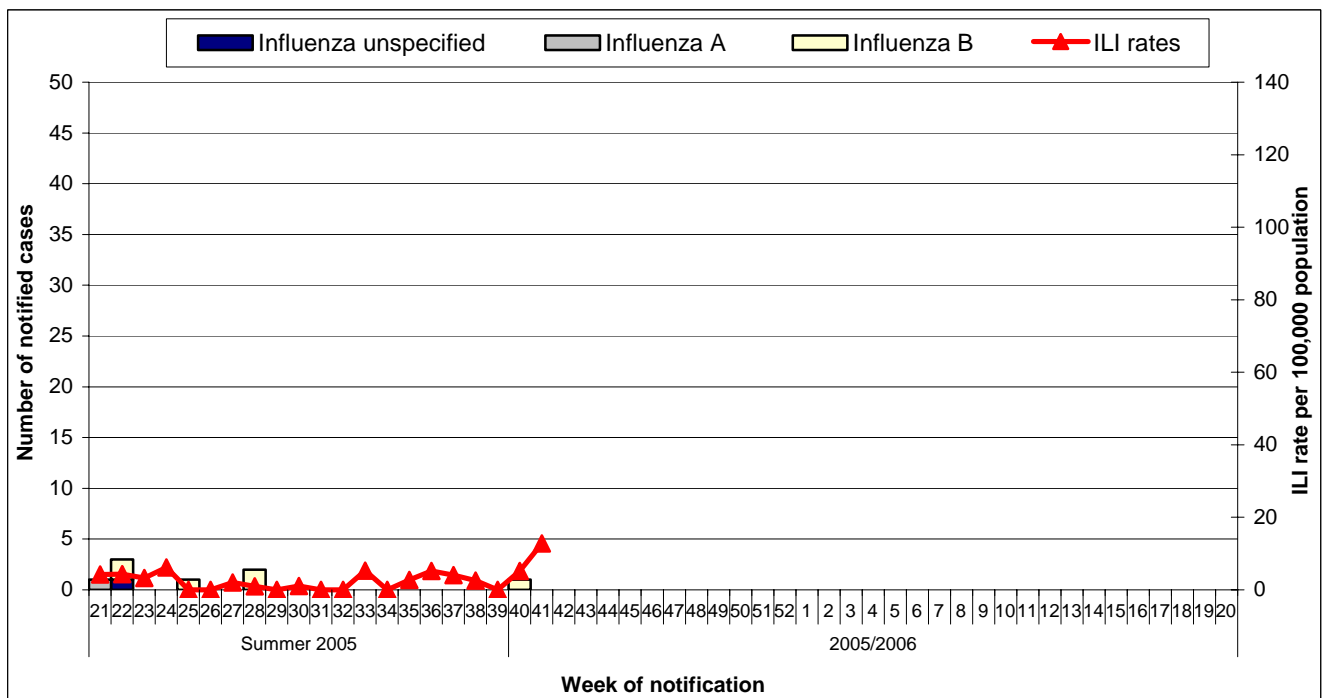
To date this season, no positive influenza specimens have been detected by the NVRL. The NVRL tested seven specimens taken by sentinel GPs during week 41 2005, all 7 specimens were negative for influenza virus. The NVRL also tested 33 non-sentinel specimens, taken during week 41 2005, mainly from hospitalised paediatric cases. All non-sentinel specimens were negative for influenza virus. Three non-sentinel specimens were positive for respiratory syncytial virus (RSV), three were positive for Parainfluenza virus type 1 (PIV-1) and one for PIV-2. Figure 3 compares the ILI consultation rates by season and the number of positive influenza specimens tested by the NVRL.



**Figure 2:** ILI rate per 100,000 population and the number of positive influenza specimens detected by the NVRL during the 2000/2001, 2001/2002, 2002/2003, 2003/2004 & 2004/2005 seasons, summer 2005 and the 2005/2006 season.

### Weekly Influenza Notifications

No influenza notifications were reported to HPSC during week 41 2005. One influenza B case was notified to HPSC during week 40 2005, however this was a late notification from April 2005. Influenza cases notified to HPSC during the summer of 2005 and during the 2005/2006 influenza season are shown in figure 3, and compared to ILI consultation rates.



**Figure 3:** Number of notifications\* of influenza (possible & confirmed) by type and by week of notification compared to sentinel GP ILI consultation rates per 100,000 population during the summer of 2005 and the 2005/2006 influenza season.  
 \*Notification data are provisional and were extracted from [CIDR](#) on the 20/10/2005 at 10.26am.

### ***Mortality Data***

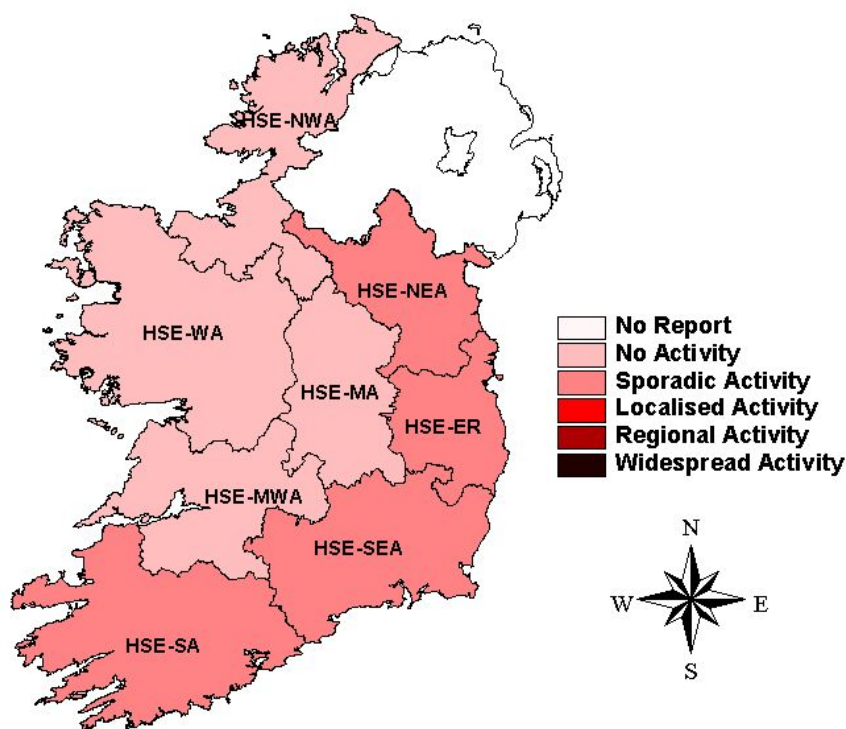
No deaths registered to date this season were attributed to influenza.

### ***Outbreak Reports***

No influenza/ILI outbreaks were reported to HPSC to date this season.

### ***Regional Influenza Activity by HSE-Health Area***

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 influenza cases and influenza/ILI outbreaks. Each Department of Public Health has established one sentinel hospital in each HSE-Health Area, to report total hospital admissions, accident and emergency admissions and respiratory admissions data on a weekly basis. Sentinel primary and secondary schools were also established in each HSE-Health Area in close proximity to the sentinel GPs, reporting absenteeism data on a weekly basis. Four HSE-Health Areas reported sporadic influenza activity during week 40 2005 (figure 4), based on isolated cases of ILI. No increases in hospital admissions or sentinel school absenteeism were reported to HPSC for week 40 or 41 2005.



**Figure 4:** Map of influenza activity by HSE-Health Area during week 12 2005

### ***Influenza Activity in Northern Ireland***

Twenty-seven ILI cases were reported from sentinel GPs in Northern Ireland during week 41 2005, corresponding to a rate of 20.1 per 100,000 population, a slight decrease from the rate of 21.3 per 100,000 in week 40. There have been no laboratory detections of influenza to date this season.

<http://www.cdscni.org.uk>

### ***Influenza Activity in England, Scotland & Wales***

Influenza activity remained low during weeks 40 and 41 2005 with a slow rise in clinical indicators for influenza and ILI in the UK. The Respiratory Virus Unit at the HPA Centre for Infections made no positive detections of influenza or other respiratory viruses from specimens referred to the unit and no outbreaks of influenza have been reported to the Centre for Infections during weeks 40 and 41 2005.

[http://www.hpa.org.uk/infections/topics\\_az/influenza/flureports0506.htm](http://www.hpa.org.uk/infections/topics_az/influenza/flureports0506.htm)

### ***Influenza Activity in Europe***

The European Influenza Surveillance Scheme will produce their first report of the 2005/2006 season on the 21<sup>st</sup> October 2005. <http://www.eiss.org/index.cgi> No influenza activity was reported in France, Latvia, Portugal, Spain and Sweden during week 40 2005. <http://gamapserver.who.int/GlobalAtlas/home.asp>

### ***Influenza Activity in Canada***

During week 40, localised influenza activity was reported in Saskatchewan, and sporadic activity was reported in British Columbia, while the rest of Canada reported no activity. The Public Health Agency of Canada received 883 reports of laboratory tests for influenza during week 40, with 8 influenza A reported in Saskatchewan. The ILI rate was reported as 15 per 1000 patient visits in week 40. To date this season, one outbreak in a long-term care facility has been reported in Saskatchewan. Since the start of the 2005/2006 influenza season, the National Microbiology Laboratory has antigenically characterised five influenza viruses; four A/California/07/04-like viruses and one B/Shanghai/361/02-like. <http://www.phac-aspc.gc.ca/fluwatch/index.html>

### ***Influenza Activity in the United States***

During week 40, influenza activity occurred at a low level in the United States. Two (0.3%) specimens tested by U.S. World Health Organisation and National Respiratory and Enteric Virus Surveillance System collaborating laboratories were positive for influenza (1 A H3N2 and 1 A Unsubtyped). The proportion of patient visits to sentinel providers for ILI and the proportion of deaths attributed to pneumonia and influenza were below baseline levels. Four states, New York City, and Puerto Rico reported sporadic influenza activity, and 44 states reported no influenza activity. <http://www.cdc.gov/flu/>

### ***Influenza Activity Worldwide***

During week 40 2005, China (2 A H1 and 3B), Mexico (3A unsubtyped) and Mongolia all reported sporadic influenza activity. No influenza activity was reported in Uruguay for week 40 2005.

<http://gamapserver.who.int/GlobalAtlas/home.asp>

### ***Avian Influenza***

As of the 10<sup>th</sup> of October 2005, 117 confirmed human cases and 60 deaths of avian influenza A (H5N1) cases have been reported to the WHO from Indonesian, Vietnam, Thailand and Cambodia.

Further information on avian influenza is available on the following websites:

WHO [http://www.who.int/csr/disease/avian\\_influenza/en/](http://www.who.int/csr/disease/avian_influenza/en/)

HPSC <http://www.hpsc.ie/A-Z/Respiratory/AvianInfluenza/>

ECDC <http://www.ecdc.eu.int/>

**Further information on influenza can be found on the [HPSC website](#)**

#### **Acknowledgements**

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**This report was produced by Dr Lisa Domegan & Dr Joan O'Donnell, HPSC**