

# Influenza Surveillance in Ireland – Weekly Report

Influenza Week 13 & 14 2021 (29<sup>th</sup> March– 11<sup>th</sup> April 2021)



 **Intensive Care Society of Ireland**

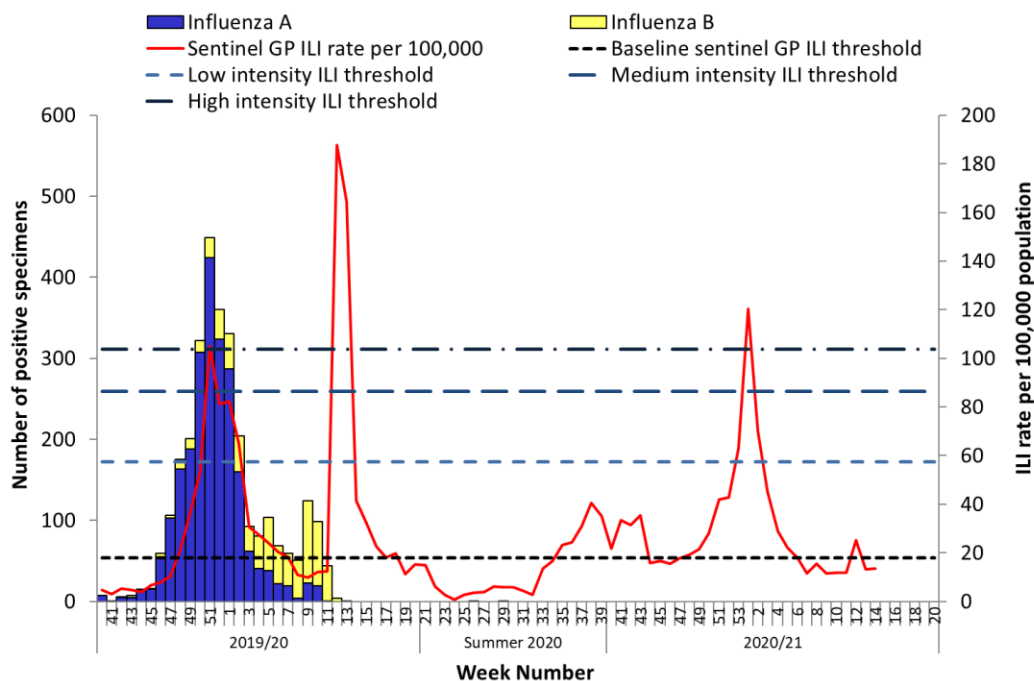
## Summary

There was no evidence of influenza viruses circulating in the community in Ireland during weeks 13 and 14 2021 (weeks ending 04/04/21 and 11/04/2021) or during weeks 40 2020 to 12 2021. Sporadic cases of rhinovirus/enterovirus and respiratory syncytial virus (RSV) were reported in recent weeks. COVID-19 epidemiology reports are published on [www.hpsc.ie](http://www.hpsc.ie).

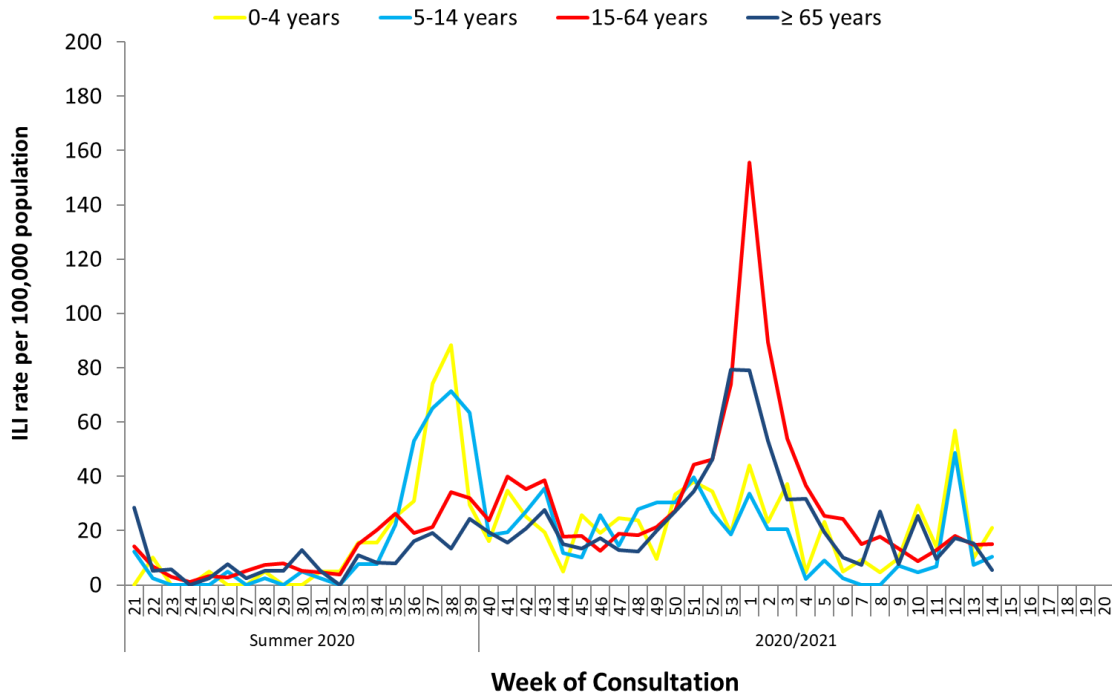
- **Influenza-like illness (ILI):** The sentinel GP influenza-like illness (ILI) consultation rate remained stable at 13.5/100,000 population in week 14 2021, compared to 13.4/100,000 in week 13 2021, a decrease from 25.1/100,000 population in week 12 2021.
  - The sentinel GP ILI consultation rates for weeks 13 and 14 are below the Irish baseline threshold (18.1/100,000 population) after rising above the threshold in week 12 2021 for the first time since week 5 2021.
  - The sentinel GP ILI age specific consultation rates increased slightly in <15 age group, remained stable in 15-64 year age group and decreased in those aged ≥65 years in week 14 2021, compared to the previous week.
  - Sentinel GP ILI consultations for the 2020/2021 season to date are reflecting SARS-CoV-2 activity, rather than influenza activity.
- **GP Out of Hours:** 955 (7.9% of total calls; N=12066) and 1109 (8.3% of total calls; N=13343) self-reported cough calls were reported by a network of GP Out-of-Hours (OOHs) services during weeks 13 and 14 2021 respectively, remaining below baseline and with a slight decrease compared to 1146 (10.1% of total calls; N=11363) in week 12 2021.
- **National Virus Reference Laboratory (NVRL):**
  - Of 1,655 sentinel GP ILI specimens and 2,816 non-sentinel respiratory specimens tested for influenza and RSV this season to date, no positive influenza was reported and one RSV detection was reported in week 13 2021.
  - Rhinovirus/enterovirus positive detections continue to be reported throughout the 2020/2021 season. Sporadic detections of adenovirus, Parainfluenza viruses, human metapneumovirus and bocavirus were also reported this season.
- **Influenza notifications:** No confirmed influenza cases were notified during the 2020/2021 season to date.
- **RSV notifications:** Eight RSV cases have been notified during the 2020/2021 season to date.
- **Hospitalisations and Critical care admissions:** No confirmed influenza hospitalised or critical care cases were notified to HPSC during the 2020/2021 season to date.
- **Mortality:** There were no reports of deaths occurring in notified influenza cases during the 2020/2021 season to date.
- **Outbreaks:** No influenza, RSV or acute respiratory infection (ARI - excluding COVID-19) outbreaks were notified to HPSC during the 2020/2021 season to date.
- **Influenza Vaccinations:** From the 01/09/2020 to 11/04/2021, 1,247,330 influenza vaccinations were provided by GPs and Pharmacists.
- **International:** In the European Region (latest available data up to 04/04/2021), influenza activity remained at inter-seasonal levels with only sporadic detections of influenza A and B reported.

## 1. GP sentinel surveillance system - Clinical Data

- During week 14 2021, 37 influenza-like illness (ILI) consultations were reported from the Irish sentinel GP network, corresponding to an ILI consultation rate of 13.5/100,000 population, the rate remained stable compared to the updated rate of 13.4/100,000 reported during week 13 2021 (Figure 1). On the 09/03/2020, GP ILI consultations changed from face-to-face consultations to phone consultations.
- The sentinel GP ILI consultation rate is below Irish baseline threshold level (18.1/100,000 population) in weeks 13 and 14 2021. The ILI rate rose above the baseline threshold in week 12 2021 for the first time since week 5 2021.
- Sentinel GP ILI consultations are currently reflecting circulation of SARS-CoV-2 in the community, rather than influenza virus circulation.
- The sentinel GP ILI age specific consultation rates increased slightly in the <15 year age group (13.8/100,000 in week 14 2021, from an updated rate of 8.1/100,000 in week 13 2021). Age specific ILI consultation rates remained stable in those aged 15-64 years at 15.1/100,000 in week 14 2021 and 14.7/100,000 in week 13 2021. Age specific ILI consultation rates in those aged ≥65 years decreased to 5.5/100,000 in week 14 2021 from 15.4/100,000 in 13 2021. (Figure 2 & Table 1).
- HPSC in consultation with the European Centre for Disease Prevention and Control (ECDC) has reviewed the Irish sentinel GP baseline ILI threshold for the 2020/2021 influenza season, which will remain at 18.1 per 100,000 population. ILI rates above this baseline threshold combined with sentinel GP influenza positivity >10% indicates the likelihood that influenza is circulating in the community. The Moving Epidemic Method (MEM) is used to calculate thresholds for GP ILI consultations using a standardised approach across Europe. The baseline ILI threshold (18.1/100,000 population), low (57.5/100,000 population) medium (86.5/100,000 population) and high (103.6/100,000 population) intensity ILI thresholds are shown in figure 1. Age specific MEM threshold levels are shown in Table 1



**Figure 1:** Sentinel GP Influenza-like illness (ILI) consultation rates per 100,000 population, baseline ILI threshold, medium and high intensity ILI thresholds and number of positive influenza A and B specimens tested by the NVRL, by week and season. *Source: ICGP and NVRL*



**Figure 2:** Age specific sentinel GP ILI consultation rate per 100,000 population by week of phone consultation during the summer of 2020 and the 2020/2021 influenza season to date. *Source: ICGP.*

Sentinel GP ILI Threshold Levels	Below Baseline	Low	Moderate	High	Extraordinary
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Sentinel GP ILI consultation/100,000 pop.	Week of Consultation																											
	40	41	42	43	44	45	46	47	48	49	50	51	52	53	1	2	3	4	5	6	7	8	9	10	11	12	13	14
All Ages	21.9	33.5	31.4	35.3	15.7	16.8	15.6	17.7	19.2	21.6	28.1	41.9	42.7	63.0	120.4	70.2	45.0	28.9	22.1	18.0	11.5	15.6	11.5	11.9	11.7	25.1	13.4	13.5
<15 yrs	17.6	24.5	26.4	30.2	9.5	15.2	23.5	17.7	26.6	23.6	31.3	39.0	29.3	18.8	37.1	21.4	26.0	3.1	13.8	3.2	3.1	1.6	8.0	12.8	9.2	51.5	8.1	13.8
15-64 yrs	23.8	40.1	35.2	38.6	17.9	18.0	12.7	18.8	18.2	21.3	27.3	44.3	46.2	73.9	155.7	89.4	53.9	36.6	25.3	24.4	15.0	17.7	13.5	8.8	12.9	18.1	14.7	15.1
≥65 yrs	19.4	15.5	20.9	27.6	15.0	13.4	17.3	12.7	12.4	19.9	27.2	34.5	46.2	79.2	78.9	53.1	31.4	31.8	19.4	10.2	7.4	27.2	7.6	25.3	9.7	17.2	15.4	5.5
Number of reporting practices (N=60)	51	55	55	56	57	54	58	57	58	58	58	58	58	58	56	58	58	55	57	54	56	56	55	55	57	56	54	51

**Table 1:** Age specific sentinel GP ILI consultation rate per 100,000 population by week (week 40 2020 – week 14 2021), colour coded by sentinel GP ILI age specific Moving Epidemic Method (MEM) threshold levels. *Source: ICGP.*

## 2. Influenza and Other Respiratory Virus Detections - NVRL

The data reported in this section for the 2020/2021 influenza season refer to sentinel GP and non-sentinel respiratory specimens routinely tested for influenza, respiratory syncytial virus (RSV), adenovirus, parainfluenza virus types 1-4 (PIV-1-4), human metapneumovirus (hMPV) and rhino/enteroviruses by the National Virus Reference Laboratory (NVRL) (tables 2 & 3 and figure 3). The COVID-19 pandemic caused disruption to sentinel GP influenza networks across the globe. In Ireland, virological surveillance and testing for influenza and RSV within the Irish sentinel GP network recommenced on swabs taken from the 18<sup>th</sup> November 2020.

- Of 1655 sentinel GP ILI specimens and 2816 non-sentinel respiratory specimens tested for influenza and RSV this season to date, no positive influenza detections were reported and one positive RSV detection was reported by the NVRL (in week 13 2021) (Table 2).
- The number of sentinel GP ILI and non-sentinel respiratory specimens tested each week are continuously updated, as more data are reported.
- Rhinovirus/enterovirus positive detections increased in September 2020 and have continued to be detected throughout the 2020/2021 season. During week 14 2021, rhinovirus/enterovirus detections decreased to 1.7% (1/60), compared to 25.0% (25/92) in week 13 2021. Sporadic detections of adenovirus, parainfluenza virus, hMPV, and bocavirus were reported during the 2020/2021 season to date.

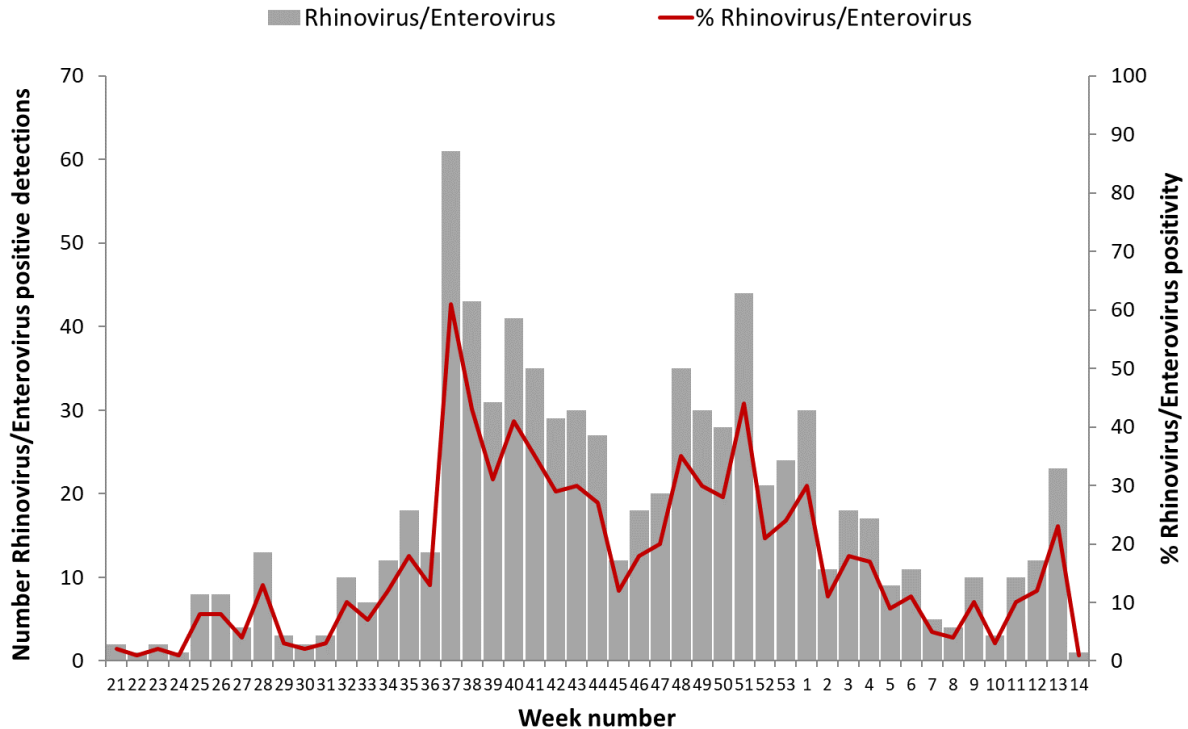
**Table 2:** Number of sentinel GP ILI referrals and non-sentinel\* respiratory specimens tested by the NVRL for influenza and RSV and positive results, for weeks 13 and 14 2021 and the 2020/2021 season to date. *Source: NVRL*

Week	Specimen type	Total tested	Influenza		RSV	
			Number positive	% positive	Number positive	% positive
<b>13 2021</b>	Sentinel GP ILI referral	49	0	0.0	0	0.0
	Non-sentinel	92	0	0.0	1	1.1
<b>14 2021</b>	Sentinel GP ILI referral	29	0	0.0	0	0.0
	Non-sentinel	60	0	0.0	0	0.0
	<b>Total</b>	<b>230</b>	<b>0</b>	<b>0.0</b>	<b>1</b>	<b>0.4</b>
<b>2020/2021</b>	Sentinel GP ILI referral	1655	0	0.0	0	0.0
	Non-sentinel	2816	0	0.0	1	0.0
	<b>Total</b>	<b>4471</b>	<b>0</b>	<b>0.0</b>	<b>1</b>	<b>0.0</b>

**Table 3:** Number of non-sentinel respiratory specimens tested by the NVRL for other respiratory viruses (excluding SARS-CoV-2) and positive results, for week 13 and 14 2021 and the 2020/2021 season to date. *Source: NVRL*

Week	Total tested	Adenovirus	% Adenovirus	Rhino/enterovirus	% Rhino/enterovirus	Bocavirus	% Bocavirus	hMPV	% hMPV	PIV-4	% PIV-4
<b>13 2021</b>	92	1	1.1	23	25	0	0	0	0	0	0
<b>14 2021</b>	60	0	0	1	1.7	0	0	0	0	0	0
<b>2020/2021</b>	2816	109	3.9	558	19.8	12	0.4	13	0.5	2	0.1

\* Please note that non-sentinel specimens relate to specimens referred to the NVRL (other than sentinel specimens) and may include more than one specimen from each case.



**Figure 3:** Number and percentage of non-sentinel Rhinovirus/Enterovirus positive specimens detected by the NVRL during the 2020/2021 season. *Source: NVRL.*

### 3. Regional Influenza Activity by HSE-Area

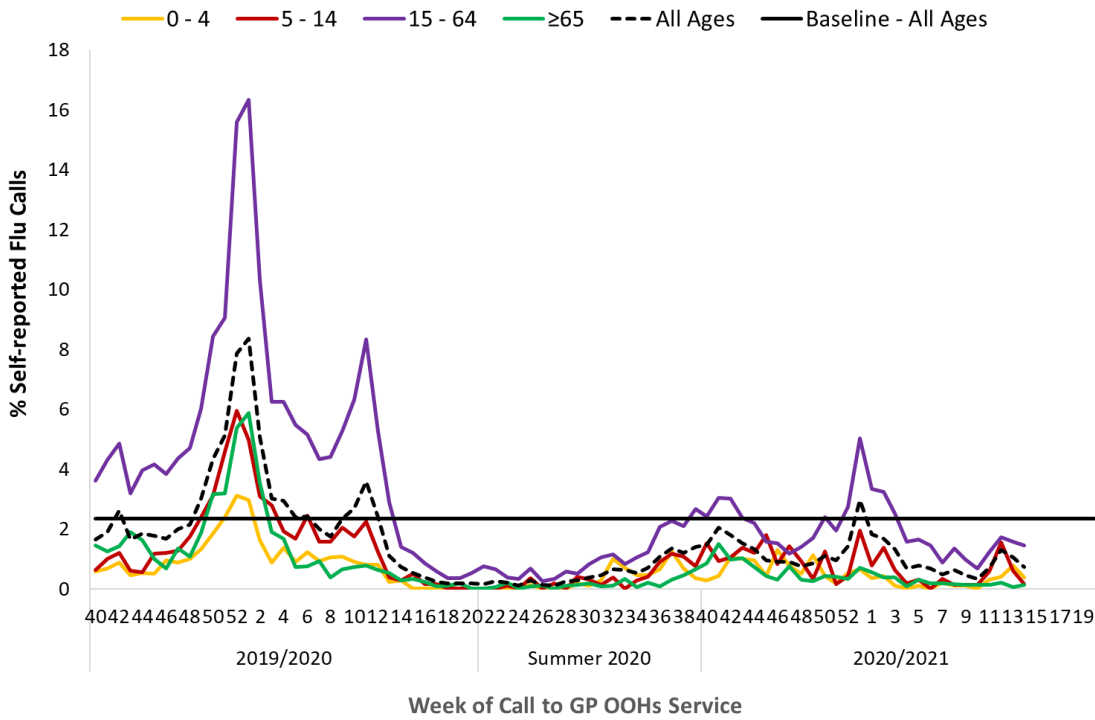
Regional influenza activity levels will be based on laboratory confirmed influenza cases and/or outbreaks.

No confirmed influenza cases or outbreaks were notified in Ireland between week 40 2020 and week 14 2021. Geographic spread of influenza viruses are based on laboratory confirmed influenza case/outbreak data. **No confirmed influenza activity was reported for any HSE-Area during this period.**

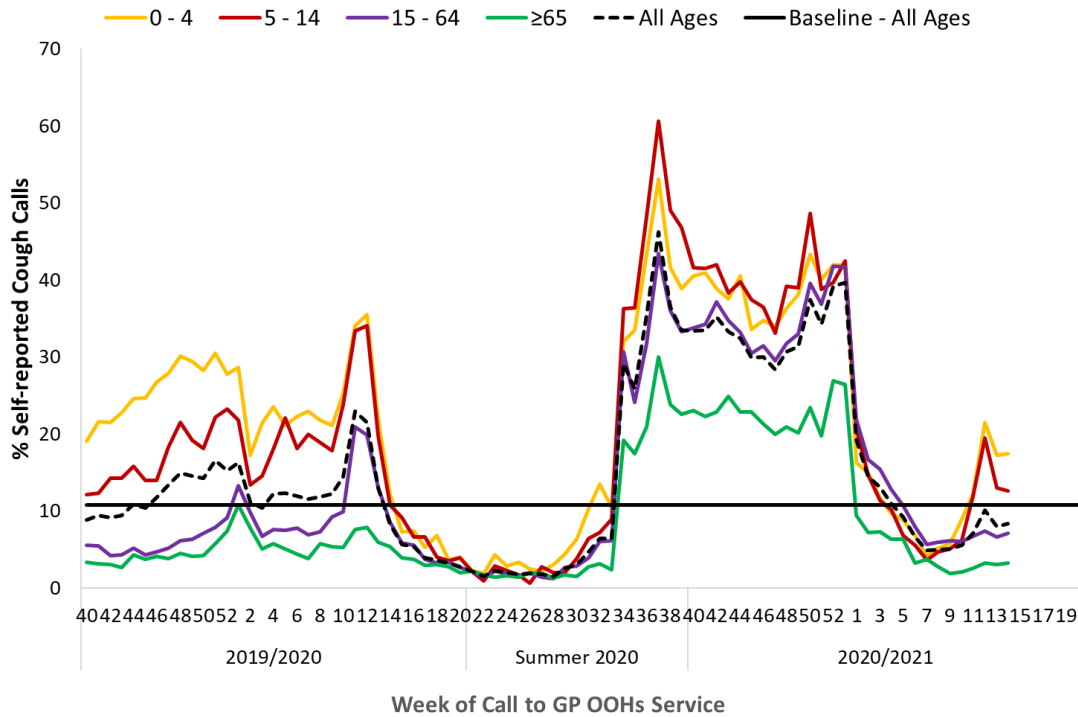
### 4. GP Out-Of-Hours services surveillance

The Department of Public Health in the HSE-NE collates national data on calls to nine of thirteen GP Out-of-Hours (OOHs) services in Ireland. Records with clinical symptoms of self-reported flu/influenza or cough are validated to specifically extract influenza related calls and cough calls from free text patients reported symptoms for analysis. This information may act as an early indicator of circulation of influenza, SARS-CoV-2 or other respiratory viruses. Data are self-reported by callers and are not based on coded diagnoses.

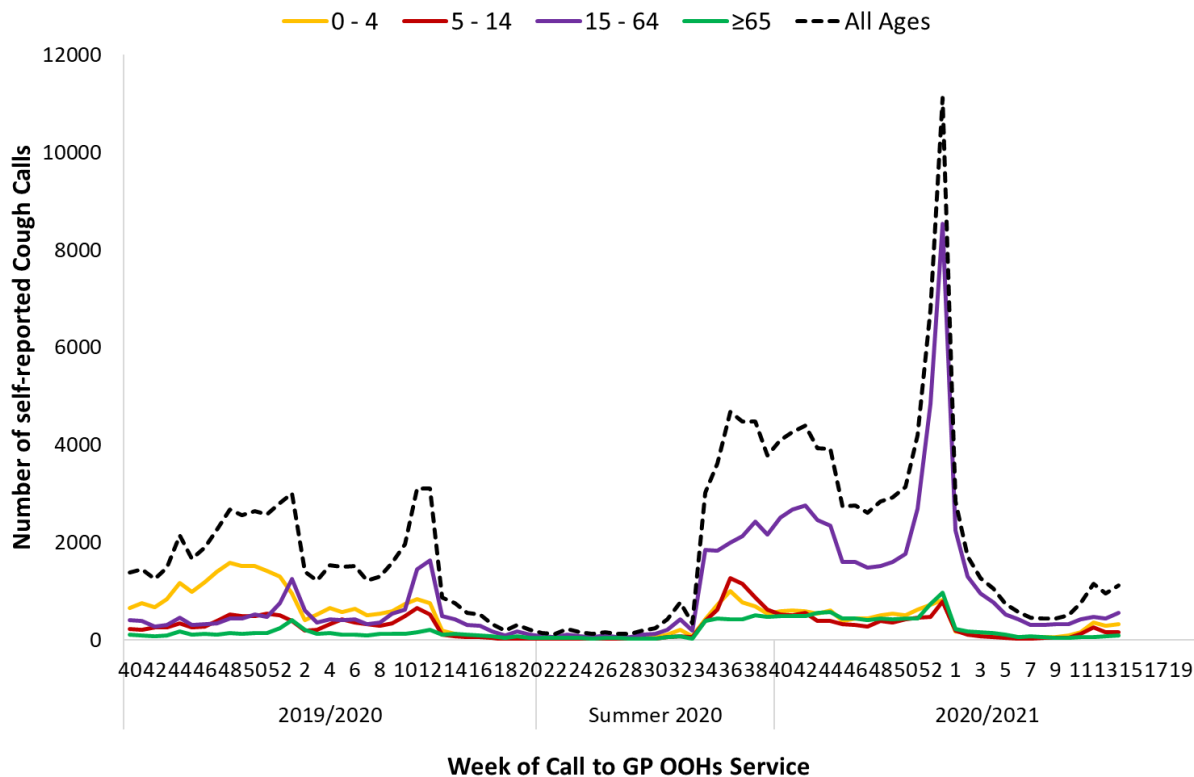
- The proportion of self-reported 'flu' calls to GP OOHs services remained below baseline levels for weeks 13 and 14 2021 at 1.1% (88/8375) and 0.7% (90/12530) respectively, the rates decreased slightly each week compared to 1.3% (109/8374) during week 12 2021 (Figure 4).
- 955 (7.9% of total calls; N=12066) self-reported cough calls were reported by a network of four GP OOHs services during week 13 and 1109 (8.3% of total calls; N=13343) were reported by a network of five GP OOHs services in week 14 2021 (figures 5 & 6), a slight decrease compared to 1146 (10.1% of total calls; N=11363) in week 12 2021. Baseline threshold levels for self-reported cough and 'flu' calls are 10.75% and 2.34%, respectively.
- GP OOHs data are continuously updated as more retrospective data are reported.



**Figure 4:** Percentage of self-reported Influenza/ILI calls for all ages and by age group as a proportion of total calls to Out-of-Hours GP Co-ops by week and season. The % Influenza/ILI calls baseline for all ages calculated using the MEM method on historic data is shown. *Source: GP Out-Of-Hours services in Ireland (collated by HSE-NE) & ICGP.*



**Figure 5:** Percentage of self-reported COUGH calls for all ages and by age group as a proportion of total calls to Out-of-Hours GP Co-ops by week and season. The % cough calls baseline for all ages calculated using the MEM method on historic data is shown. *Source: GP Out-Of-Hours services in Ireland (collated by HSE-NE) & ICGP.*



**Figure 6: Number of self-reported COUGH calls for all ages and by age group to Out-of-Hours GP Co-ops by week and season.**  
 Source: GP Out-Of-Hours services in Ireland (collated by HSE-NE) & ICGP.

## 5. Influenza & RSV notifications

Influenza and RSV cases notifications are reported on Ireland's Computerised Infectious Disease Reporting System (CIDR), including all positive influenza /RSV specimens reported from all laboratories testing for influenza/RSV and reporting to CIDR.

Influenza and RSV notifications are reported in the [Weekly Infectious Disease Report for Ireland](#).

- No confirmed influenza notifications were reported from week 40 2020 to week 14 2021.
- Three RSV cases were notified during week 13 2021 and one RSV case was notified in week 14 2021. For the 2020-2021 season to date there has been a total of eight RSV cases notified to HPSC (one in week 42 2020 and the other 7 cases were notified between weeks 3 and 14 2021).

## 6. Influenza Hospitalisations

No confirmed influenza hospitalised cases were notified to HPSC during week 40 2020 to week 14 2021.



## 7. Critical Care Surveillance

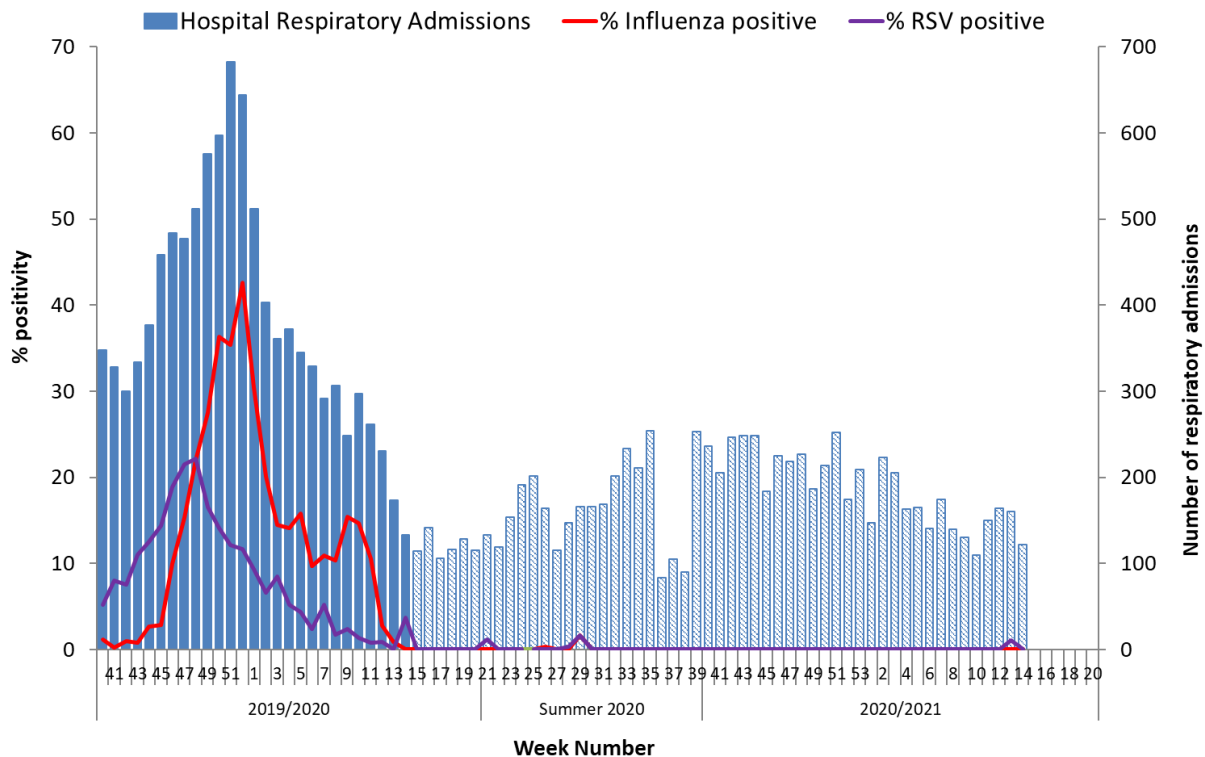
The Intensive Care Society of Ireland (ICSI) and the HSE Critical Care Programme are continuing with the enhanced surveillance system set up during the 2009 pandemic, on all critical care patients with confirmed influenza. HPSC processes and reports on this information on behalf of the regional Directors of Public Health/Medical Officers of Health.

No confirmed influenza cases were admitted to critical care units and reported to HPSC from week 40 2020 to week 14 2021.

## 8. Sentinel Hospital Network – Respiratory Admissions

The Departments of Public Health have established a network of eight sentinel hospitals located around the country, to report data on total, emergency and respiratory admissions on a weekly basis.

Respiratory admissions reported from the sentinel hospital network have remained relatively stable during weeks 40 2020 to 14 2021, with a median of 186 respiratory admissions per week reported during this period. The number of reported respiratory admissions was 160 in week 13 2021 and 122 in week 14 2021. The COVID-19 pandemic has caused disruption to reporting from the sentinel hospital network, with five of the eight hospitals reporting in week 13 2021 and four of the eight hospitals reporting in week 14 2021. Due to priority COVID-19 surveillance work and current capacity issues, sentinel hospital respiratory admissions data are underreported and should be interpreted with caution.



**Figure 7:** Number of respiratory admissions reported from the sentinel hospital network and % positivity for influenza and RSV (reported by the NVRL) by week and season. *Source: Departments of Public Health - Sentinel Hospital Network & NVRL. Weeks with missing sentinel hospital data are represented by the hatched bar.*



## 9. Mortality Surveillance

Influenza-associated deaths include all deaths where influenza is reported as the primary/main cause of death by the physician or if influenza is listed anywhere on the death certificate as the cause of death. HPSC receives daily mortality data from the General Register Office (GRO) on all deaths from all causes registered in Ireland. These data have been used to monitor excess all-cause and influenza and pneumonia deaths as part of the influenza surveillance system and the European Mortality Monitoring Project. These data are provisional due to the time delay in deaths' registration in Ireland. <http://www.euromomo.eu/>

- There were no reports of any deaths in notified influenza cases during week 40 2020 – week 14 2021.
- The latest data on excess all-cause deaths in Ireland available for the week ending 11<sup>th</sup> April 2021 (week 14 2021) has shown that there were excess all-cause deaths observed during weeks 1-6 2021 after correcting GRO data for reporting delays with the standardised EuroMOMO algorithm.
- During weeks 1-7 2021, excess pneumonia deaths were observed using the standardised EuroMOMO algorithm.
- These excess deaths are likely reflecting the impact of the COVID-19 pandemic. Due to delays in death registrations with the GRO, excess mortality data included in this report will be reported with one-week lag time.

## 10. Outbreak Surveillance

- No influenza, RSV or acute respiratory infection (ARI - excluding COVID-19) outbreaks were notified to HPSC during the 2020/2021 season to date.
- COVID-19 outbreaks are not included in this report; surveillance data on COVID-19 outbreaks are detailed on the HPSC website. <https://www.hpsc.ie/a-z/respiratory/coronavirus/novelcoronavirus/casesinireland/>

## 11. Influenza Vaccinations

From 01/09/2020 up to the week ending 11/04/2021, the total number of influenza vaccinations provided by GPs and Pharmacists was 1,247,330.

## 12. International Summary

Since the start of the COVID-19 pandemic, influenza activity globally has remained at low levels. The World Health Organization (WHO) has advised that current influenza surveillance data should be interpreted with caution as the ongoing COVID-19 pandemic has influenced health seeking behaviours, surveillance and reporting in sentinel sites, as well as testing priorities and capacities in Member States. The various hygiene and physical distancing measures implemented by Member States to reduce SARS-CoV-2 virus transmission have likely played a role in reducing influenza virus transmission.

As of 29<sup>th</sup> March 2021, based on data up to 14<sup>th</sup> March 2021, WHO reported that globally despite continued or even increased testing for influenza in some countries, influenza activity remained at lower levels than expected for this time of the year. In the temperate zone of the northern hemisphere, influenza activity remained below baseline, though sporadic detections of influenza A and B viruses continued to be reported in some countries. In the temperate zone of the southern hemisphere, influenza activity was reported at inter-seasonal level. In the Caribbean and Central American countries, no influenza detections were reported. In tropical South America, no influenza activity was reported, but low levels of detection of other respiratory viruses (ORVs) were reported in some countries. In tropical Africa, influenza activity was reported in some reporting countries in Western, Middle and Eastern Africa in recent weeks. In Southern Asia, sporadic influenza detections were reported in India and Nepal. In South East Asia, influenza A(H3N2) detections continued to be reported in Lao People's Democratic Republic (PDR). Worldwide, influenza B detections accounted for the majority of the very low numbers of detections reported. The WHO GISRS laboratories tested more than 291427 specimens during that time period. A total of 375 specimens were positive for influenza viruses, of which 132 (35.2%) were typed as influenza A and 243 (64.8%) as influenza B. Of the sub-typed influenza A viruses, 5 (6.1%) were influenza A(H1N1)pdm09 and 77 (93.9%) were influenza A(H3N2). Of the characterised B viruses 188 (100%) belonged to the B/Victoria lineage.

In the European region, influenza activity remained at inter-seasonal levels during week 13 2021. One thousand and nineteen (1,019) primary care sentinel source specimens were tested for influenza viruses and one was positive for influenza B virus. Since the start of the season, of 32,556 primary care sentinel specimens that have been tested for influenza viruses, 38 were positive (22 type A and 16 type B viruses). During week 13 2021, 4 of 28,423 specimens from non-sentinel sources (such as hospitals, schools, primary care facilities not involved in sentinel surveillance, or nursing homes and other institutions) tested positive for an influenza virus: all 4 were B. Since the beginning of the season, 747 of 594,784 non-sentinel specimens tested positive for influenza viruses; 370 (49.5%) were type A and 377 (50.5%) type B. Of 70 subtyped A viruses, 29 (41.4%) were A(H1)pdm09 and 41 (58.6%) were A(H3). Of 377 type B viruses, only 14 were ascribed to a lineage: 11 B/Victoria and 3 B/Yamagata.

See [ECDC](#) and [WHO](#) influenza surveillance reports for further information.

- Further information on influenza is available on the following websites:  
Northern Ireland <https://www.publichealth.hscni.net/publications/influenza-weekly-surveillance-bulletin-northern-ireland-202021>  
Public Health England <https://www.gov.uk/government/collections/weekly-national-flu-reports>  
  
Europe – ECDC <http://ecdc.europa.eu/>  
United States CDC <http://www.cdc.gov/flu/weekly/fluactivitysurv.htm>  
Public Health Agency of Canada <http://www.phac-aspc.gc.ca/fluwatch/index-eng.php>
- Influenza case definition in Ireland <https://www.hpsc.ie/a-z/respiratory/influenza/casedefinitions/>
- COVID-19 case definition in Ireland <https://www.hpsc.ie/a-z/respiratory/coronavirus/novelcoronavirus/casedefinitions/>

- Avian influenza overview December 2020 – February 2021 <https://www.ecdc.europa.eu/en/publications-data/avian-influenza-overview-december-2020-february-2021>
- Avian influenza: EU on alert for new outbreaks <https://www.ecdc.europa.eu/en/news-events/avian-influenza-eu-alert-new-outbreaks>
- Information on COVID-19 in Ireland is available on the HPSC website <https://www.hpsc.ie/a-z/respiratory/coronavirus/novelcoronavirus/>
- The WHO categorised COVID-19 as a pandemic on 11 March 2020. For more information about the situation in the WHO European Region visit:
  - WHO website: <https://www.who.int/emergencies/diseases/novel-coronavirus-2019>
  - ECDC website: <https://www.ecdc.europa.eu/en/novel-coronavirus-china>

### 13. WHO recommendations on the composition of influenza virus vaccines

The WHO vaccine strain selection committee recommend that quadrivalent egg-based vaccines for use in the 2021/2022 northern hemisphere influenza season contain the following:

- an A/Victoria/2570/2019 (H1N1)pdm09-like virus;
- an A/Cambodia/e0826360/2020 (H3N2)-like virus;
- a B/Washington/02/2019 (B/Victoria lineage)-like virus; and
- a B/Phuket/3073/2013 (B/Yamagata lineage)-like virus.

[https://www.who.int/influenza/vaccines/virus/recommendations/2021-22\\_north/en/](https://www.who.int/influenza/vaccines/virus/recommendations/2021-22_north/en/)

Further information on influenza in Ireland is available at [www.hpsc.ie](http://www.hpsc.ie)

#### Acknowledgements

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