Influenza Surveillance in Ireland – Summary Report

Weeks 37 & 38 2011 (12th – 25th September 2011)

During the summer period, a short summary report of influenza activity will be published every fortnight. In the event of influenza activity increasing a full report will be published on a weekly basis.

Summary

- All indicators of influenza activity in Ireland have continued to remain at low levels.
- The sentinel GP influenza-like illness (ILI) consultation rates remained low and below baseline levels during weeks 37 and 38 2011.
    - The ILI consultation rate was 3.1 per 100,000 population in week 37 2011 and 0.9 per 100,000 in week 38 2011. ILI rates in all age groups were at low levels.
- The proportion of influenza–related calls to GP Out-of-Hours services has remained at low levels.
- No positive influenza specimens were detected by the National Virus Reference Laboratory (NVRL) from sentinel or non-sentinel sources during weeks 37 and 38 2011. To date this summer, one confirmed influenza positive specimen has been detected, an influenza A (H3) case from sentinel sources during week 31 2011. It is not unusual to detect sporadic cases during the summer period.
- There have been no reports of confirmed influenza cases admitted to hospital or of any influenza-associated deaths occurring during the summer period.
- No new general outbreaks of influenza/ILI have been reported since week 5 2011.
- During weeks 37 and 38 2011, the NVRL tested 128 non-sentinel respiratory specimens, one was positive for respiratory syncytial virus and one was positive for adenovirus. There have been sporadic reports of adenovirus, RSV, PIV-1, PIV-2 and PIV-3 during the summer period. The predominant virus detected this summer has been PIV-3.
- As of 23rd September 2011, influenza activity in the temperate regions of the northern hemisphere remained low or undetectable. Countries in the tropical zone mostly reported low influenza activity but with some transmission reported in countries of the Americas (Cuba, Honduras and Bolivia), western Africa (Cameroon) and southern Asia (India, Thailand, Vietnam and Singapore). Transmission in South Africa has declined to low levels. In Australia, the number of laboratory confirmed influenza notifications reported is declining in Queensland, New South Wales (NSW) and other states with the exception of the Northern Territory. The number of oseltamivir-resistant influenza A (H1N1) 2009 viruses detected in the recently reported cluster in New South Wales, Australia, appears to be declining as the season in Australia wanes. The geographic area of spread of this cluster is wider than originally reported. All of the viruses from the cluster were sensitive to zanamivir. No cases identified have died. Investigations into this cluster are ongoing. ILI activity in New Zealand continues around national baseline levels and the majority of viruses detected have been influenza B. http://www.who.int/influenza/surveillance_monitoring/updates/en/index.html

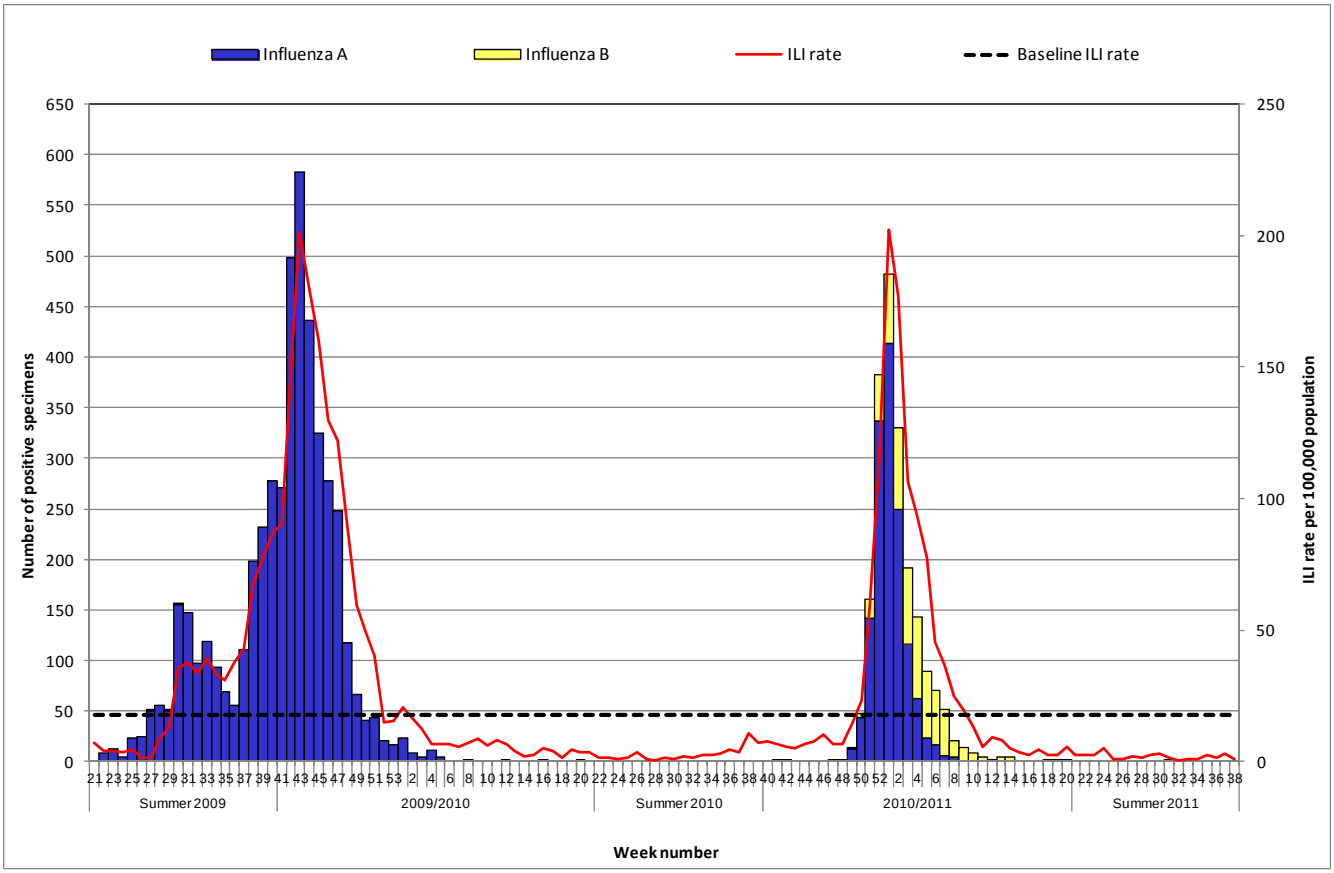

Figure 1. ILI sentinel GP consultation rates per 100,000 population, baseline ILI threshold rate, and number of positive influenza A and B specimens tested by the NVRL, by influenza week and season.
Source: Clinical ILI data from ICGP and virological data from the NVRL [*] [†]*

Further information on influenza in Ireland and internationally can be found on the following websites:

Ireland	www.hpsc.ie
Northern Ireland	http://www.cdscni.org.uk/
UK – HPA	http://www.hpa.org.uk/Topics/InfectiousDiseases/InfectionsAZ/Influenza/
Europe – ECDC	http://ecdc.europa.eu/
Europe – EISN	http://ecdc.europa.eu/en/activities/surveillance/EISN/Pages/home.aspx

Acknowledgements

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[*] Please note that in addition to the NVRL, Cork University Hospital (CUH) and Galway University Hospital(s) (GUH) also tested for influenza A (H1N1) 2009 during the pandemic period.
[†] Sentinel GP consultations and virological data are updated on an ongoing basis, ILI rates and virological data are adjusted accordingly.