

Influenza Surveillance in Ireland – Summary Report

Influenza Weeks 35 & 36 2012 (27th August – 9th September 2012)



During the summer period, a short summary report of influenza activity will be published every fortnight.

Summary

- **Overall, influenza activity in Ireland remained at low levels during weeks 35 and 36 2012.**
- The sentinel GP influenza-like illness (ILI) consultation rate was 0.8 per 100,000 population in week 35 2012 and 5.1 per 100,000 in week 36 2012, remaining low and stable.
 - ♦ ILI rates are below the Irish baseline threshold (25.9 per 100,000 population).
 - ♦ Age specific ILI rates remained low in all age groups.
- The proportion of influenza-related calls to GP Out-of-Hours services remained at low levels.
- One influenza B case was detected by the NVRL during weeks 35 and 36 2012.
- Three respiratory syncytial virus (RSV) positive detections were reported by the NVRL during weeks 35 and 36 2012. Two RSV laboratory notifications were recorded on CIDR (Ireland's Computerised Infectious Disease Reporting System) during weeks 35 and 36 2012.
- Two adenovirus and two parainfluenza virus type-3 positive detections were reported by the NVRL during weeks 35 and 36 2012.
- One influenza A case and one influenza B case were hospitalised during week 35 and 36 2012. During the 2012 summer period to date, 12 confirmed influenza hospitalised cases were notified to HPSC.
- No confirmed influenza-associated deaths were reported to HPSC for the summer 2012 period.
- No influenza outbreaks were reported during weeks 35 and 36 2012. During the 2012 summer period to date, only one influenza outbreak (associated with influenza B) has been reported.

International surveillance: Most countries in the northern temperate zone have moved over to out of season surveillance schedules. The US has discovered new cases of swine origin influenza A(H3N2)v in humans but no sustained human-to-human transmission has been identified so far. Countries reporting notable influenza activity are Brazil, Costa Rica, Cuba, Ecuador, El Salvador, Honduras, Nicaragua, Panama, Peru and Bolivia in the Americas (influenza A(H1N1)pdm09, A(H3N2) and B); Ghana and Madagascar in sub-Saharan Africa (influenza A(H3N2) and type B); Bhutan, Cambodia, southern China, Hong Kong, India, Lao, Singapore, Sri Lanka and Viet Nam in Asia (influenza A(H3N2) and B). Influenza activity decreased in temperate countries of the southern hemisphere. Influenza A(H3N2) viruses are the most commonly reported type/sub-type in recent weeks in most countries of the southern hemisphere temperate region including Chile, South Africa and Australia. However, in Central America the previously reported transmission of influenza A(H1N1)pdm09 has now largely transitioned to a predominance of influenza B. Tropical Asia and Southeast Asia have been reporting mostly A(H3N2), whereas Bhutan, India and Sri Lanka have had both influenza A(H1N1) and type B circulating. Reports of neuraminidase resistance continue to be very uncommon. Notably, Australia reports that a large proportion of the influenza A(H3N2) viruses tested so far this season demonstrated reduced titres in haemagglutination inhibition assays using ferret antisera against the vaccine viruses contained in the current southern hemisphere vaccines.

http://www.who.int/influenza/surveillance_monitoring/updates/en/index.html

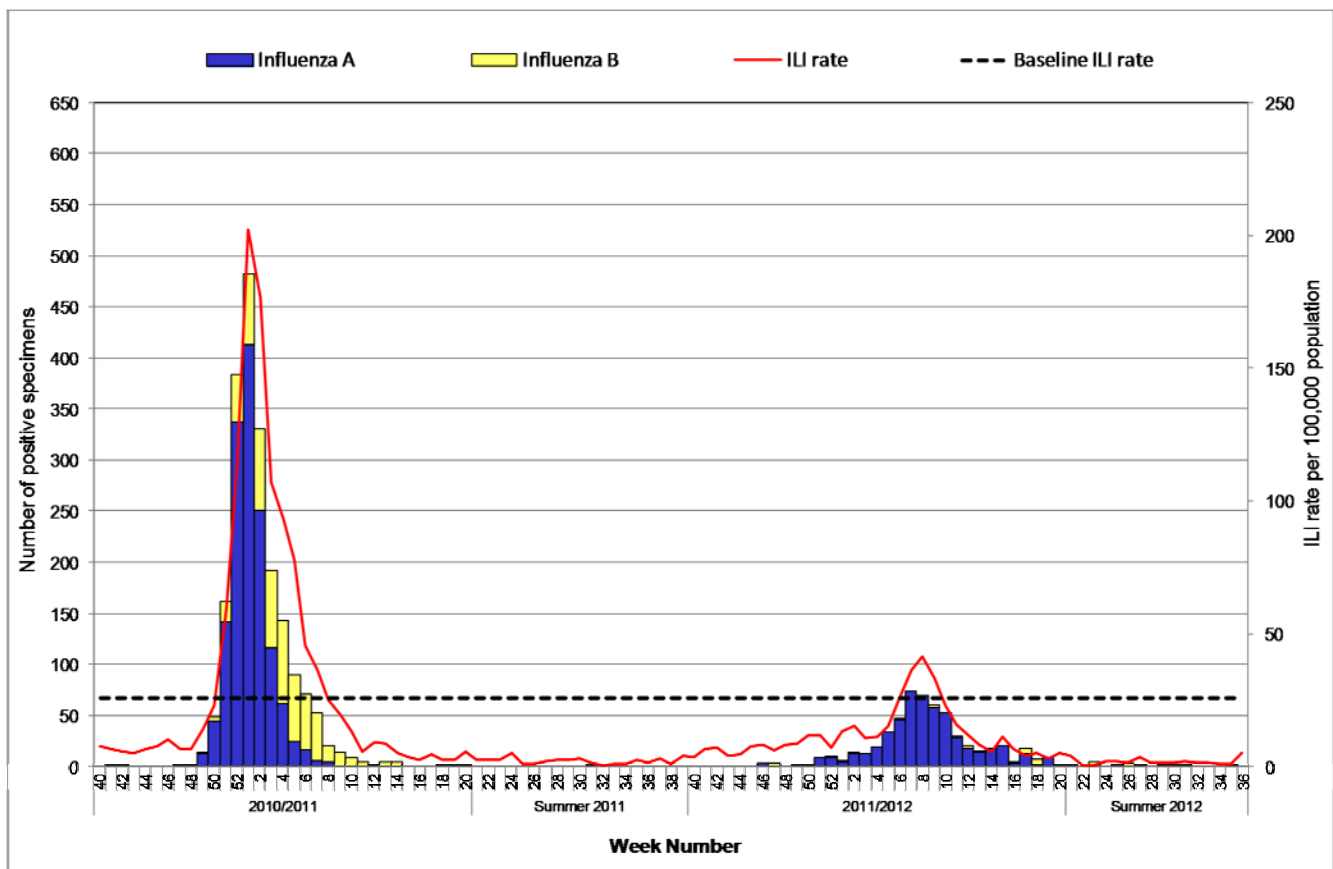


Figure 1: ILI sentinel GP consultation rates per 100,000 population, baseline ILI threshold rate, and number of positive influenza A and B specimens tested by the NVRL, by influenza week and season.

Source: Clinical ILI data from ICGP and virological data from the NVRL

Further information in Ireland and internationally

RSV was made notifiable in Ireland on January 1st 2012. Laboratory notifications of RSV are reported in more detail in the [Weekly Infectious Disease Report for Ireland](#).

- Ireland www.hpsc.ie
- Northern Ireland <http://www.fluawareni.info/>
- Europe – ECDC <http://ecdc.europa.eu/>

This report was prepared by Sarah Jackson and Joan O’Donnell, HPSC.

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