

ECDC EXECUTIVE UPDATE

Pandemic influenza A(H1N1) 2009

Issue 13
Monday, 5 October 2009

Meetings and events

30 September 2009: Visit at ECDC of Professor Donald Henderson

Professor Donald Henderson, WHO John Hopkins University in the USA, who contributed to the global smallpox eradication, visited ECDC on the 30 September and was given an update of the situation of the pandemic H1N1 (2009) in Europe

1–2 October 2009: Regular meeting of the EU Chief Medical Officers in Stockholm

ECDC Director, Zsuzsanna Jakab, gave a presentation to the EU Chief Medical Officers (CMO) at a meeting linked to the Swedish EU Presidency in Stockholm, 1-2 October. The ECDC Director spoke about possible scenarios for Europe this autumn regarding the pandemic H1N1, particularly drawing on the experience from the Southern Hemisphere.

The meeting focused on various aspects of the present influenza H1N1 pandemic and Member States shared experiences that will enable them to improve their management of the expected developments during the coming months.

Weekly digest on pandemic influenza A(H1N1) 2009 from ECDC's Daily Updates and from the Weekly Influenza Surveillance Overview

Aggregate numbers of pandemic (H1N1) 2009 cases and deaths in EU and EEA countries as presented in the Weekly Influenza Surveillance Overview on Fridays. The following statistics are from 2 October 2009:

- The cumulative number of reported cases since the beginning of the pandemic in EU/EEA Member States totals 43 554, of which 49 are known to have died.

Discrepancies with the ECDC daily pandemic A(H1N1) 2009 update are due to unsynchronised reporting related to the ongoing transition to TESSy.

ECDC Daily Updates are now produced by 09.00hrs every morning from Monday–Friday and will include information on pandemic H1N1 2009 epidemiology in EU and EFTA countries. The Monday Daily Update includes information from the weekend now that ECDC has discontinued producing Daily Updates at the weekends.

ECDC has now stopped publishing numbers of confirmed cases reported from EU and EEA Member States – as well as from other countries around the world – in its Daily Update. This is due to the fact that most European countries are now recommending laboratory confirmation only for certain population groups, such as the risk groups. The World Health Organization has also recommended that countries verify only the first few hundred cases; after that exhaustive sampling is not recommended any more.

ECDC will continue to monitor the evolution of the pandemic within Europe as reflected by the number of fatal cases by country and through the Weekly Influenza Surveillance Overview which is published on Fridays. For the countries outside of Europe, ECDC will monitor the number of fatal cases by country and monitor the surveillance reports of selected non-European countries. It must be emphasised that the numbers of fatal cases per country associated with pandemic influenza are likely to be gross underestimates. Access to healthcare, the quality of the laboratory network in the country, the quality of the surveillance system and the case definition used for identifying fatal cases all affect these figures and will vary from country to country.

5 October 2009

Four pandemic influenza A(H1N1) 2009 vaccines soon available on the European market

An additional vaccine, Celvapan, against pandemic influenza A(H1N1) 2009 was recommended for authorisation on 2 October 2009 by the European Medicines Agency. Adoption of an authorisation decision by the European Commission is expected this week (week 41). The vaccine from Baxter is an unadjuvanted, inactivated, whole virion vaccine containing 7.5 µg of haemagglutinin of the influenza A/California/07/2009 (H1N1) strain. It is propagated in Vero cells.

The Celvapan vaccine is currently recommended to be offered in a two-dose schedule, at an interval of three weeks. It is recommended to be authorised for use in adults, including pregnant women, and children from six months of age. Results from first clinical trials will be available from mid-October 2009.

For further information see <http://www.emea.europa.eu/humandocs/PDFs/EPAR/celvapan/62290809en.pdf>

Two other pandemic influenza A(H1N1) 2009 vaccines have recently been authorised by the European Commission; Focetria from Novartis and Pandemrix from GSK. Focetria and Pandemrix vaccines have received and Celvapan is pending to receive a central European authorisation allowing the manufacturer to replace the flu virus strain in the current 'mock-up' vaccines with the pandemic influenza A(H1N1) 2009 strain causing the current pandemic.

For further information see <http://www.emea.europa.eu/>

In addition, the National Regulatory Agency in Hungary provided a national licence of a pandemic vaccine produced by the Hungarian manufacturer Omninvest on 29 September 2009. This vaccine is an alum-adjuvanted, inactivated, whole-virion vaccine, containing 6 µg of haemagglutinin of the influenza A/California/07/2009 (H1N1) strain. It is also propagated in Vero cells. The pandemic vaccine from Omninvest is recommended for adults, including pregnant women and children older than six months and will be used in Hungary. The vaccine from Omninvest is recommended to be offered in a one-dose schedule.

For further information see <http://www.omninvest.hu/influenza/english/index.html>

Weekly overview of selected non-EU countries

The Daily Update on Monday includes the weekly overview of selected non-EU countries, including Chile, Brazil, Australia, New Zealand and South Africa.

2 October 2009

The ECDC Weekly Influenza Surveillance Overview

The ECDC Weekly Influenza Surveillance Overview is published on Friday afternoons and is available at: http://www.ecdc.europa.eu/en/activities/surveillance/EISN/Pages/EISN_Bulletin.aspx

30 September 2009

European Commission authorised two pandemic influenza vaccines

Following the positive scientific opinion issued by the Committee for Medicinal Products for Human Use (CHMP) at the European Medicines Agency (EMA) on 24 September, the European Commission granted variations to two existing authorisations for vaccines for influenza pandemic (H1N1) 2009 yesterday. The products concerned are Focetria (Novartis), and Pandemrix (GlaxoSmithKline). The vaccines will be authorised for use in all Member States of the EU and the EEA (Iceland, Liechtenstein and Norway). That should ensure that sufficient vaccines will be available before the start of the flu season and will reduce the risks for illnesses and deaths for European citizens.

Full EC press release available at: <http://europa.eu/rapid/pressReleasesAction.do?reference=IP/09/1384>

This week's media highlights

The news that the European Commission earlier this week granted authorisation to two A(H1N1) vaccines has been covered in all major media outlets. The coverage has led to a number of stories at the EU and country level on when and how countries would start their vaccination campaigns and in particular how they would mix their seasonal influenza and pandemic vaccination campaigns.

In addition there has been wide coverage from the business perspective and on delivery times for vaccines. Further afield, the news that Australia has started to implement its vaccination plan, and that China is continuing apace following its start last week, has been covered by several media channels.

Vaccine administration has also been a top story during the week with certain media raising questions about the effect on risk groups and whether one or two doses would be required. Other news have concentrated on reports from around the globe suggesting that some countries, notably the US, Mexico and the UK, are beginning to see an increase in the number of A(H1N1) cases.

Public health development

First European report of transmission of the pandemic A(H1N1) 2009 influenza virus from humans to pigs (UK)

The UK's Department of Agriculture and Rural Development of Northern Ireland (DARDNI) has confirmed that a pig herd has tested positive for the human pandemic influenza A(H1N1) 2009. The confirmation was reported to the Department of Environment, Food and Rural Affairs (DEFRA), which subsequently reported it to the World Organisation for Animal Health (OIE) on 18 September 2009. Following the action taken in other countries with similar human-to-animal transmission, none of the animals were slaughtered. The OIE report mentions that no known cases of human flu are currently associated with this outbreak. The Food Standards Agency has advised, in line with WHO and other international guidance, that influenza A(H1N1) 2009 does not pose a food safety risk to consumers.

See the [full Public Health Development](#).

Scientific advance

Comparison between the 1957 and 2009 pandemics – a close but imperfect fit

Arguably the 1957 pandemic was the closest in its characteristics to the 2009 pandemic in that in both children and schools had a special focus and the case fatality rates were and are considerably lower than those that were

observed in, say, 1918–19. A comparison between the two by a unique physician who experienced both in his working lifetime reveals some similarities.

The full Scientific Advice will be available at:

http://ecdc.europa.eu/en/activities/sciadvice/Pages/Scientific_Updates.aspx?filterItemsBy1=ECDC_Subject_what&filterItemsByValue1=Influenza

Updates from *Eurosurveillance*

Residual immunity in older people against the influenza A(H1N1) – recent experience in northern Spain

The 2009 pandemic influenza A(H1N1) virus has a higher incidence among children and young adults, a pattern that has also been reported for seasonal influenza caused by the influenza A(H1N1) virus. The article from Spain analyses the age at infection of symptomatic patients with influenza in the Basque Country, reported through the sentinel influenza surveillance system which monitors 2.2–2.5% of the population. Between September 1999 and August 2009, influenza A(H3N2) or seasonal influenza A(H1N1) was detected in 941 patients, and from April to August 2009, pandemic influenza A(H1N1) was detected in 112 patients. The H3/H1 seasonal influenza ratio was between 3.3 and 3.4 in the under 60 year-olds, but 9.8 in older individuals, suggesting that people born before 1950 have residual immunity against the influenza A H1N1 subtype (both seasonal and pandemic).

<http://www.eurosurveillance.org/ViewArticle.aspx?ArticleId=19344>

Early estimates of 2009 pandemic influenza A(H1N1) virus activity in general practice in France: incidence of influenza-like illness and age distribution of reported cases

At the end of August 2009, an unusually elevated level of influenza-like illness (ILI) activity was reported to the French Sentinel Network. The article estimates the observed excess in ILI cases in France during summer 2009 and characterises age patterns in reported cases. An excess of cases has been observed since 5 July, with an increasing trend over time. The cumulated estimated excess number of ILI cases was 269 935 [179 585; 316 512], corresponding to 0.5% of the French population over the period. Compared with the same period in the past years, relative cumulative incidence was greater among young subjects and lower among subjects over 65 years old. Compared with past epidemics, the relative cumulative incidence was greater in children less than five years old. This excess of cases may reflect the current spread of the A(H1N1) virus in France, subject to the following limitations: estimates were based on clinical cases consulting a GP; high media coverage may have led to a non-specific increase in consultation rates.

<http://www.eurosurveillance.org/ViewArticle.aspx?ArticleId=19341>

Upcoming events

On 12–14 October, ECDC will hold its Competent Bodies meeting in Uppsala on Strengthening Europe's Defense against Communicable Diseases. Focus will be on the roles and responsibilities of the different parties, on Europe facing the influenza (H1N1) 2009 pandemic and on the challenge of preventing and controlling communicable diseases in an open Europe.

On 14–16 October, ECDC will participate in a meeting in Washington on the clinical aspects of influenza A(H1N1) 2009.

On 15 October, an ECDC representative will be speaking on the pandemic H1N1 (2009) at the World Health Congress in Berlin.