

ECDC DAILY UPDATE

Pandemic (H1N1) 2009

Update 09 November 2009,
09:00 hours CEST

Main developments in past 72 hours

- ECDC updated its Pandemic Risk Assessment November 6th including recommended European planning assumptions for hospital care;
- WHO note concerning the detection of pandemic and other influenzas in animals;
- Deaths reported by EU/EEA countries as specifically due to the pandemic virus rose steeply in Week 45;
- Reports from European Influenza Surveillance Network show that pandemic activity is increasing in fifteen out of twenty one countries reporting a trend;
- Total of 401 fatal cases in Europe and EFTA countries and 6 082 in the rest of the world

This report is based on official information provided by the national public health websites or through other official communication channels. An update on the number of confirmed fatal cases is presented in Table 2 - as of 08 November 2009 -16:00 hours CEST, for the world, and 09 November 2009 - 09:00 hours CEST, for Europe.

ECDC Pandemic Risk Assessment updated

ECDC on Friday updated its Pandemic Risk Assessment which is the main repository of its scientific analyses of the epidemiology and experience of the pandemic in Europe and elsewhere. The update is informed by the first experiences from this autumn in Europe and North America as well as further analyses from the Southern Hemisphere's temperate countries during their winter season. It includes details of the clinical experience of people who are becoming severely ill; the first adjusted planning assumptions for European countries not significantly affected by the earlier wave; the basic parameters of the pandemic, drawing on work undertaken

with WHO and ECDC Advisory Forum; European confirmation that many older people possess prior immunity, but that those who are not immune are more at risk of severe disease than any other age group; more information on the extent of asymptomatic and very mild cases and estimates of the relative risk for those who, if they have certain risk factors, become severely ill with this infection (pregnant women, people with asthma and other chronic respiratory diseases and massively obese people). The Risk Assessment is available at [http://www.ecdc.europa.eu/en/healthtopics/Pages/Influenza_A\(H1N1\)_Risk_Assessment.aspx](http://www.ecdc.europa.eu/en/healthtopics/Pages/Influenza_A(H1N1)_Risk_Assessment.aspx)

Other updates

A(H1N1) detected in animals

After consultation with international bodies dealing with animals (FAO & OIE) WHO on November 5th issued a short note concerning pandemic influenza A(H1N1) occurring in animals.

Since the pandemic virus emerged, a small number of infections have been reported in herds of pigs probably following direct transmission of the virus from infected humans to swine. These isolated events have had no impact on the dynamics of the pandemic, which is spreading readily via human-to-human transmission. As human infections become increasingly widespread, transmission of the virus from humans to swine and other animals is likely to occur with greater frequency. This has already occurred with infections have been reported in turkeys in Chile and Canada and in a few pet animals in the USA. Again, these infections were isolated events and pose no special risks to human health. However close monitoring and prompt official notification is needed in WHO's view since these recent findings and the detection of a seemingly new A(H3N2) virus in mink in Denmark further suggest that influenza A viruses in animals and humans increasingly behave like a pool of genes circulating among multiple hosts. Hence there is a potential for novel influenza viruses to be generated in animals other than swine. This situation reinforces the need for close monitoring and close collaboration between public health and veterinary authorities. When influenza infections are detected in farmed animals, WHO recommends monitoring of farm workers for signs of respiratory illness, and testing for H1N1 infection should such signs appear. FAO and OIE recommend that animals that are showing signs of illness be examined and properly managed, and allowed to fully recover before being transported or marketed. In addition, samples from infected animals and humans should be taken for full genome sequencing of the influenza viruses to determine if mutations have occurred that could lead to changes in virulence, host range or antiviral resistance. Such sequencing is also important to assess the possible origin of the case or outbreak.

Full WHO note available at: http://www.who.int/csr/disease/swineflu/notes/briefing_20091105/en/index.html

Epidemiologic update

All 27 EU and 4 EFTA countries are reporting cases of pandemic (H1N1) 2009 influenza. Since April 2009, a total 401 deaths have been reported; the information is available in Table 2.

The latest available updates as of November 08, 2009, at 16:00, on new and on confirmed fatal pandemic A(H1N1) cases outside the EU/EFTA area by country, are also presented in Table 2.

The latest available updates on hospital admissions per Member State are presented in Table 1.

Surveillance Trends weeks 44 and 45

Today ECDC reports that deaths announced by EU national authorities as being due to the pandemic rose steeply in week 45 (see Figure 1 and Table 2). The Weekly Influenza Surveillance Overview for Week 44 published on November 6th recorded how on pandemic influenza continues to spread and increase across Europe with pandemic activity increasing in fifteen out of twenty one countries reporting a trend. Of the six countries reporting rising influenza activity four (Austria, Estonia, Portugal and Romania) did so for the first time. Pandemic A(H1N1) remains the dominant strain circulating, while seasonal strains, mostly A(H3N2) and influenza B, are occurring only sporadically. The percentage of influenza positive sentinel specimens further increased since last week and is now at 48%. Of nearly five hundred patients with Severe Acute Respiratory Infection patients reported by five countries to ECDC between weeks 40 and 44/2009, 60% needed ventilator support and 50% had no underlying chronic condition.

ECDC Weekly Influenza Surveillance Overview:

http://www.ecdc.europa.eu/en/activities/surveillance/EISN/Newsletter/091106_EISN_Weekly_Influenza_Surveillance_Overview.pdf

Daily Update contents

ECDC has now stopped publishing numbers of confirmed cases reported from EU/EFTA 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 in 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.

We will continue to monitor the evolution of the pandemic within Europe mirrored 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, we will monitor the number of fatal cases by country and monitor the surveillance reports of selected non-European countries. It must be emphasized 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.

Daily Updates will be produced by 09:00hrs every morning Monday to Friday. No updates will be produced during weekends and the Daily Update published on Monday includes the weekend's information. The production cycle will be reviewed as needed.

Table 1: Reported number of confirmed Pandemic (H1N1) 2009 influenza cases admitted to hospitals and intensive care by country as of 09 November 2009, 09:00 hours (CEST) in the EU and EFTA countries

Country (date of report)	Number of cases currently hospitalised	Cumulative number of cases admitted in hospitals	Number of cases currently in intensive care	Cumulative number of cases admitted to intensive care
Austria (02.11.)	-	-	-	-
Belgium (05.11.)	-	-	-	-
Bulgaria (04.11)	-	-	-	-
Cyprus	-	-	-	-
Czech Republic (05.11.)	-	-	-	-
Denmark (04.11.)	-	-	-	-
Estonia (23.10.)	-	11	-	-
Finland (04.11.)	-	-	-	-
France (04.11.)	203	625	36	131
Germany (29.10.)	-	-	-	-
Greece (04.11.)	-	-	-	-
Hungary (01.11.)	-	68	-	-
Iceland (30.10.)	43	-	11	-
Ireland (05.11.)	165	665	19	54
Italy (07.11)	-	-	-	-
Latvia (13.08.)	-	1	-	-
Liechtenstein (05.11.)	-	-	-	-
Lithuania (13.08.)	-	-	-	-
Luxembourg (21.10.)	-	-	0	0
Malta (04.09.)	-	46	-	1
Netherlands (06.11.)	273	611	28	69
Norway (04.11.)	69	497	4	69
Poland (05.11.)	-	-	-	-
Portugal (04.11.)	63	-	9	-
Romania (08.11)	-	-	-	-
Slovakia (12.08.)	2	33	0	0
Slovenia (10.08.)	-	-	-	-
Spain (05.11.)	-	-	-	-
Sweden (01.11.)	51	241	-	-
Switzerland (01.11.)	6	33	-	-
United Kingdom ^a (05.11.)	848	-	172	-

Note: Data for the EU and EFTA countries correspond to the Ministry of Health or surveillance centre websites. New updates with changes in figures are shaded in yellow. (-) denotes no information readily available in official sources.

^aData includes all probable cases for England only. Does not include Scotland (691 cumulative hospitalisations), Wales (251) and Northern Ireland (495).

Table 2. Reported number of new and cumulative confirmed fatal Pandemic (H1N1) 2009 influenza cases in EU and EFTA countries, as 09 November 2009, 09:00 hours CEST, and in the rest of the world by country, as of 08 November 2009, 16:00 hours CEST.

Country	Number of new fatal cases since previous national update	Cumulative number of fatal cases
EU AND EFTA COUNTRIES		
Austria	-	1
Belgium	-	8
Bulgaria	-	5
Czech Republic	-	1
Finland	-	2
France	-	49 ^a
Germany	-	9
Greece	-	5
Hungary	-	5
Iceland	-	1
Ireland	-	14
Italy	4	29
Luxembourg	-	1
Malta	-	3
Netherlands	7	17
Norway	-	15
Portugal	-	5
Spain	-	73
Sweden	-	3
United Kingdom	1	155
Total	12	401
OTHER EUROPEAN COUNTRIES & CENTRAL ASIA		
Belarus	-	7
Croatia	-	1
Moldova	1	3
Russia	1	15
Serbia	1	4
Ukraine	-	1
Total	3	31
MEDITERRANEAN AND MIDDLE-EAST		
Bahrain	-	6
Egypt	-	6
Iran	-	33
Iraq	-	7

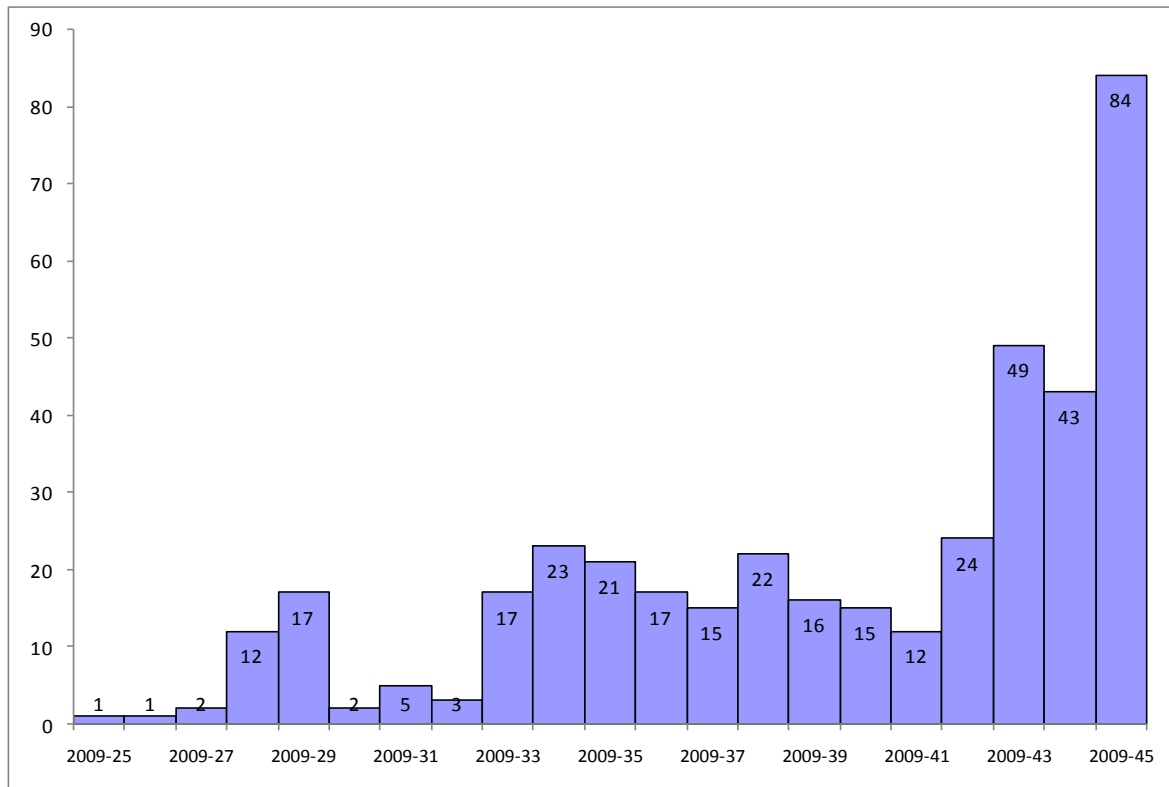
Israel	-	39
Jordan	-	7
Kuwait	1	22
Lebanon	-	3
Occupied Palestinian Territory	1	2
Oman	-	25
Qatar	-	5
Saudi Arabia	-	66
Syria	-	7
Turkey	4	23
United Arab Emirates	-	6
Yemen	-	17
Total	6	274
AFRICA		
Ghana	-	1
Madagascar	-	1
Mauritius	-	8
Mozambique	-	2
Namibia	-	1
Sao Tome & Principe	-	2
South Africa	-	91
Sudan	-	1
Tanzania	-	1
Total	-	108
NORTH AMERICA		
Canada	14	115
Mexico	21	398
USA	-	1004
Total	35	1517
CENTRAL AMERICA & CARIBBEAN		
Bahamas	-	4
Barbados	-	3
Cayman Islands	-	1
Costa Rica	-	38
Cuba	-	7
Dominican Republic	-	22
El Salvador	-	23
Guatemala	-	18
Honduras	-	16
Jamaica	-	5

Nicaragua	-	11
Panama	-	11
Saint Kitts and Nevis	-	1
Suriname	-	2
Trinidad-Tobago	-	5
Total	-	167
SOUTH AMERICA		
Argentina	7	600
Bolivia	-	56
Brazil	-	1368
Chile	4	140
Colombia	-	136
Ecuador	-	80
Paraguay	-	52
Peru	-	180
Uruguay	-	33
Venezuela	2	97
Total	13	2742
NORTH-EAST & SOUTH ASIA		
Afghanistan	-	9
Bangladesh	-	6
China (Mainland)	8	16
Hong Kong SAR China	-	39
India	6	484
Japan	-	28
Macao SAR China	-	2
Mongolia	2	8
South Korea	3	48
Taiwan	-	27
Total	19	667
SOUTH-EAST ASIA		
Brunei Darussalam	-	1
Cambodia	-	4
Indonesia	-	10
Laos Peoples Democratic Republic	-	1
Malaysia	-	77
Philippines	-	30
Singapore	-	18
Thailand	-	184
Vietnam	-	39

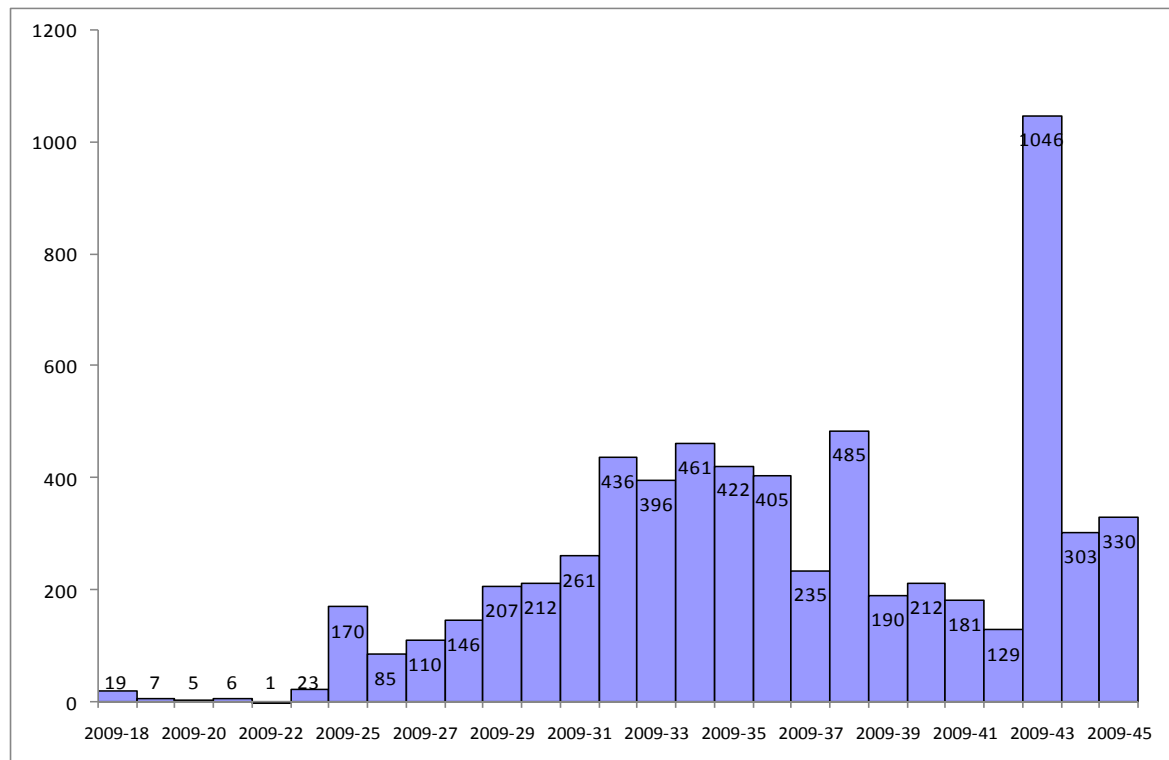
Total	-	364
AUSTRALIA & PACIFIC		
Australia	1	187
Cook Islands	-	1
Marshall Islands	-	1
New Zealand	-	19
Samoa	-	2
Solomon Islands	-	1
Tonga	-	1
Total	1	212
TOTAL	89	6483

^a Deaths reported from France include 1 in Guyana, 9 in New Caledonia, 7 in the French Polynesia, 6 in the Reunion, 1 in Martinique, 2 in Mayotte, 1 in Guadeloupe and 22 in mainland France.

Figure 1: Number of confirmed deaths among pandemic (H1N1) 2009 influenza cases by week of notification. EU and EFTA countries (upper panel, week 25 to week 45, 2009) and world (lower panel^a, week 18 to week 45, 2009).



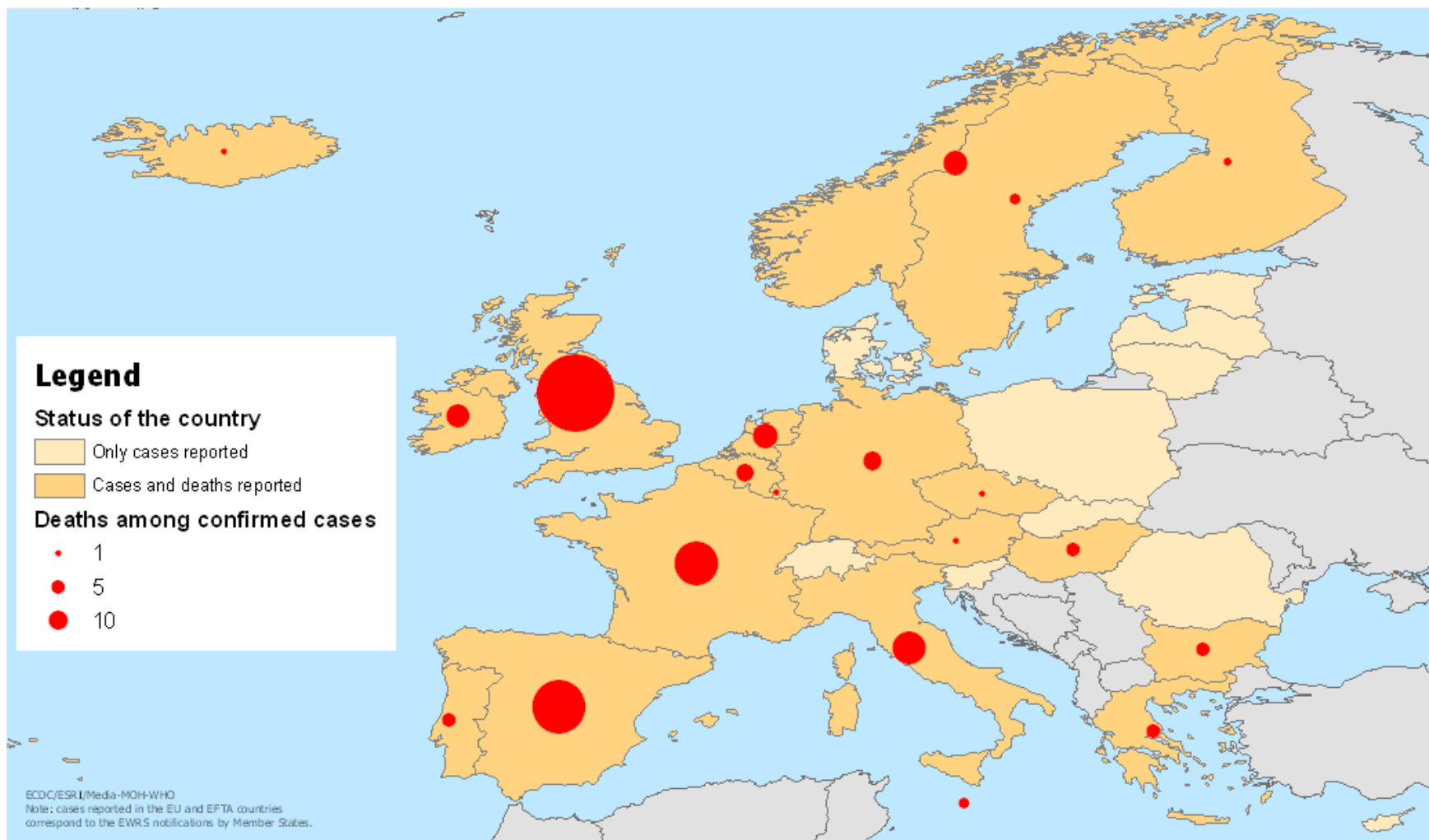
Notification week



Notification week

^a The apparent increase in the number of deaths in week 43 is due to the aggregate reporting of fatal cases from Brazil from weeks 37 to 40 and to our batch report of US fatal cases since August 1st.

Reported cumulative number of confirmed fatal cases of influenza A(H1N1)v in EU and EFTA countries, as of 09 November 2009, 09:00 hours CEST



Reported cumulative number of confirmed fatal cases of influenza A(H1N1)v and country reporting status by country, as of 08 November 2009, 16:00 hours CEST

