

ECDC EXECUTIVE UPDATE

Pandemic influenza (H1N1) 2009

Issue 23

Monday, 14 December 2009

Weekly influenza surveillance overview (WISO) highlights

- Most countries are witnessing medium influenza intensity with only nine reporting high to very high levels. Activity is widespread in the majority of countries reporting to EISN.
- Thirteen countries have reported decreasing rates of influenza-like illness for at least the last two weeks.
- The proportion of influenza-positive sentinel samples continues to decline, but 2009 pandemic influenza A(H1N1) virus still accounts for 99% of all subtyped viruses in sentinel patients.
- Oseltamivir resistance was found in one percent of influenza pandemic viruses tested in the countries reporting to EISN.

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

Weekly digest on pandemic influenza (H1N1) 2009 from ECDC Daily Updates

Mortality data: Number of deaths reported to be true to the pandemic continue to grow in week 50/2009. As of 14 December, the cumulative number of reported deaths since the beginning of the pandemic in EU/EFTA Member States has totalled 1333.

14 December

- Global Health Security Initiative: [statement](#) concerning pandemic and vaccination
- EpiSouth update: several countries in the region still showing high or medium level influenza activity.

11 December

- Selected scientific publications, including a [joint ECDC/CDC reply](#) to a British Medical review, questioning the effectiveness in treating influenza.

10 December

- WHO influenza global public health research agenda 2009-10 in development (interim document available [here](#))

9 December

- Germany considering sales or donations of surplus pandemic vaccine stock

8 December

- Updates from USA and Canada
- Situation with influenza-like illnesses and 2009 pandemic influenza A(H1N1) in Moldova, Ukraine, Russia and Belarus as of 4 December

- Centre for Infectious Disease Research and Policy (CIDRAP) launches promising [practices database](#)

Updates from *Eurosurveillance*

This week's *Eurosurveillance* published the following articles related to 2009 pandemic influenza A(H1N1):

[Public perceptions in relation to intention to receive pandemic influenza vaccination in a random population sample: evidence from a cross-sectional telephone survey](#)

[Behaviours regarding preventive measures against pandemic H1N1 influenza among Italian healthcare workers, October 2009](#)

[Behaviour of the pandemic H1N1 influenza virus in Andalusia, Spain, at the onset of the 2009-10 season](#)

[Prolonged shedding of influenza A\(H1N1\)v virus: two case reports from France 2009](#)

A brief overview of each article can be found in [Friday's Daily Update](#).

Public health developments

Clinical management and mitigation strategies during 2009 influenza A(H1N1) pandemic in moderate resource settings

Even at this late stage in the current pandemic and in the face of limited resources, clinical services can be prepared for optimally dealing with many people who can be expected to need care. New [WHO guidance](#) published in November gives useful indications on what preparations should be made. If limited amounts of antivirals or pandemic vaccines are available, they should be given to those in the risk groups.

A description of the publication with ECDC comments can be found in [this week's public health development](#).

Past meetings and events

11 December: [Eurovaccine 2009](#), the first European conference on vaccination and immunisation organised by ECDC, was held in Stockholm. Topics addressed during the one-day conference included implementation of the 2009 pandemic H1N1 vaccination. The video stream of Eurovaccine 2009 will be available on demand from 15 December at the [Eurovaccine 2009 website](#).

8–9 December: The twentieth Advisory Forum Meeting took place on ECDC premises.

Upcoming events

15–17 December: ECDC, together with the WHO Regional office for Europe, will organise a workshop on pandemic response in Bucharest, Romania. The workshop will be attended by EU candidate and potential candidate countries.

16–17 December: ECDC will participate in the Health Security Committee Communicators' network meeting on the 2009 (H1N1) pandemic, taking place in Luxembourg.

European epidemiology and key points

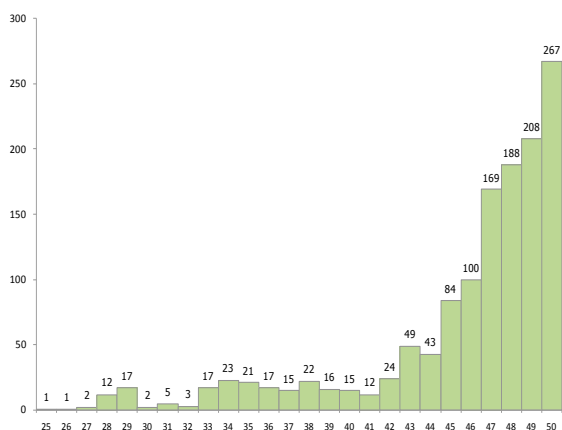
Most countries are witnessing medium influenza intensity with only nine reporting high to very high levels. In the majority of countries activity is widespread.

Thirteen countries have reported decreasing rates of influenza-like illness for at least the last two weeks.

The proportion of influenza-positive sentinel samples continues to decline, but pandemic influenza A(H1N1) virus still accounts for 99% of all subtyped viruses in sentinel patients.

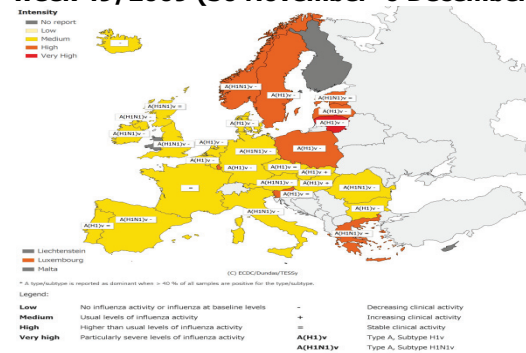
With regards to epidemiology, it is more important to look at trends and distributions, such as those for deaths and cases in the community.

Figure 1: Deaths reported among pandemic (H1N1) 2009 influenza cases in EU and EFTA countries (week 25–50/2009)



This shows a weekly number of deaths from mid October onwards. There is an increase in fatalities during week 50 as compared to week 49. There has been a seven-fold increase in fatalities since mid-October. Source: [ECDC Daily Update 14 December](#)

Map 1: Geographic spread distribution map week 49/2009 (30 November–6 December)



This shows how widespread influenza activity was in most European countries during week 49.

Source: [ECDC Weekly influenza surveillance overview, 11 December](#)

Table 1: Countries reporting community incidence in Week 49

Rising trend	Stable	Declining trend	
Hungary	Czech Republic	Austria	Luxembourg
Slovakia	Estonia	Belgium	Netherlands
	France	Bulgaria	Norway
	Greece	Denmark	Poland
	Portugal	Germany	Romania
	Slovenia	Iceland	Spain
	UK - Scotland	Ireland	Sweden
		Italy	UK(England)
		Latvia	UK(Northern Ireland)
		Lithuania	

Source: [ECDC Weekly influenza surveillance overview, 11 December](#)

European surveillance

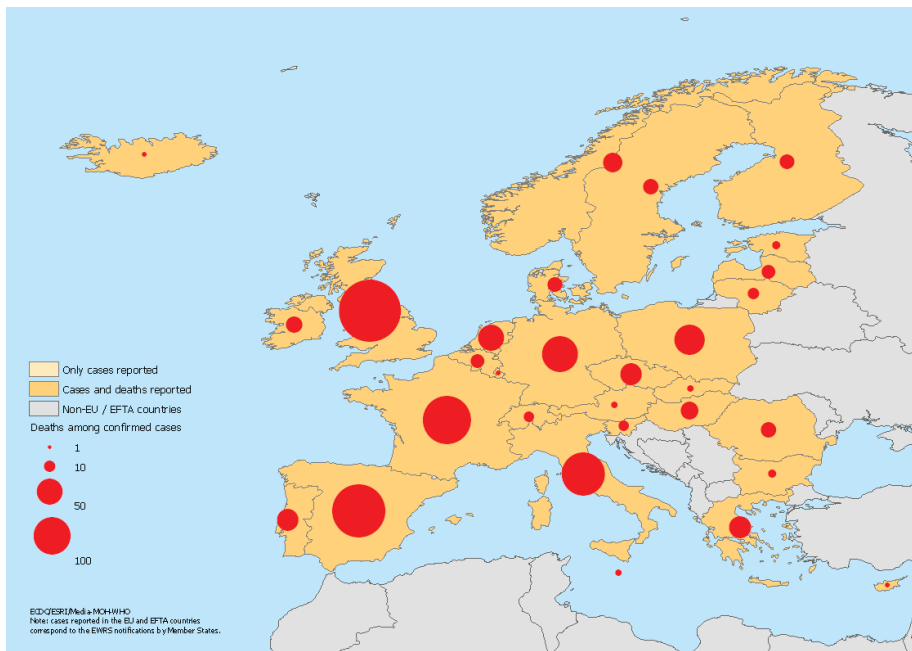
Vaccination: Vaccination is underway in many Member States and will be effective. Over sixty-five million doses of the new vaccines have already been used worldwide, with post-marketing surveillance undertaken by EU Member States and the European Medicines Agency based on more than 10 million doses (click [here](#) for more information). Apart from some children experiencing higher temperatures than expected with their second dose of Pandemrix (click [here](#) for the report), to date, no more significant reactions than those detailed in the marketing authorisation have been found. ECDC Director Zsuzsanna Jakab has advised all Europeans that have been offered the pandemic vaccine to take it.

How vaccine safety is monitored and maintained in a pandemic: Influenza vaccines are among the safest vaccines. There is no reason to expect that the pandemic vaccine will have new adverse events, but it is important to monitor all Adverse Events Following Immunisation (AEFI). Many AEFI occur independently of the vaccine, in particular when vaccinating high-risk groups. To distinguish AEFI related to vaccination and those related to chance, comparisons between AEFI rates and naturally occurring background-rates are being made.

Examples can be seen on the EMEA [weekly update](#) on pandemic safety monitoring as well as on national sites like the Swedish [Lakemedelsverket](#) and UK Medicines Agency ([MHRA](#)). The system is working, as is demonstrated by AEFIs identified by EMEA in their [4 December press release](#).

For Europe, the main monitoring agency for centrally licensed vaccines (Focetria from Novartis, Pandemrix from GlaxoSmithKline and Celvapan from Baxter) is the [European Medicines Agency](#). The [World Health Organization](#) (WHO) also plays a vital role at the global level and ECDC is supporting the Medicines Agency through the [VAESCO Project](#).

Map 2: ECDC reported number deaths due to 2009 pandemic influenza A(H1N1) in Europe as of 14 December



This map shows how countries in Western Europe have been affected. Numbers of deaths in Central, south-east and Eastern Europe are growing

Looking forward in the short-term: National and local pandemic waves may last about 15 weeks. They do not occur at the same time in different European countries nor do they occur at the same time in different parts of the same country. We can also expect local peaks to vary, e.g. to be higher or lower.

In Europe, we are beginning to see a sustained decrease in community influenza activity in a number of countries that were first affected. However, hospitalisations and deaths will continue to rise for a while as there are more hospitalisations after a peak in a country than before. Illnesses will continue to rise in the eastern, central and south-eastern countries of Europe. Some of these are considered vulnerable by ECDC because they have lower supplies of antivirals and few vaccines. In these countries, there may be particular pressures on hospitals at Christmas and around the New Year.

Stockholm, 2009

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