Bin ainuwamation

## Influenza virus characterization

Summary report, Europe, December 2023

## Document number: WHO/EURO:2023 61894595472777

© World Health Organization and the European Centre for Disease Prevention and Control 2023
Some rights reserved. This work is available under the Creative Commons Attribution- 3.0 IGO licence (CC BY-3.0 IGO; Creative Commons - Attribution 3.0 IGO - CC BY 3.0 IGO).

Under the terms of this licence, you may copy, redistribute and adapt the work, even commercially, provided the work is appropriately cited, as indicated below. In any use of this work, there should be no suggestion that WHO or ECDC endorse any specific organization, products or services. The use of the WHO or ECDC logo is not permitted. If you adapt the work, then you must license your work under the same or equivalent Creative Commons licence. If you create a translation of this work, you should add the following disclaimer along with the suggested citation: "This translation was not created by the World Health Organization (WHO) or the European Centre for Disease Prevention and Control (ECDC). WHO and ECDC are not responsible for the content or accuracy of this translation. The original English edition shall be the binding and authentic edition: Influenza virus characterization: summary report, Europe, December 2023. Copenhagen: WHO Regional Office for Europe and Stockholm: European Centre for Disease Prevention and Control; 2023".

Suggested citation. Influenza virus characterization: summary report, Europe, December 2023. Copenhagen: WHO Regional Office for Europe and Stockholm: European Centre for Disease Prevention and Control; 2023. Licence: CC BY 3.0 IGO.

Cataloguing-in-Publication (CIP) data. CIP data are available at http://apps.who.int/iris.
Sales, rights and licensing. To purchase WHO publications, see http://apps.who.int/bookorders. To submit requests for commercial use and queries on rights and licensing, see http://www.who.int/about/licensing.

Third-party materials. If you wish to reuse material from this work that is attributed to a third party, such as tables, figures or images, it is your responsibility to determine whether permission is needed for that reuse and to obtain permission from the copyright holder. The risk of claims resulting from infringement of any third-party-owned component in the work rests solely with the user.

The designations employed and the presentation of the material in this publication do not imply the expression of any opinion whatsoever on the part of the World Health Organization and ECDC concerning the legal status of any country, territory, area or city or of its authorities, or concerning the delimitation of its frontiers or boundaries. Dotted lines on maps represent approximate border lines for which there may not yet be full agreement.

The mention of specific companies or of certain manufacturers' products does not imply that they are endorsed or recommended by the World Health Organization and ECDC in preference to others of a similar nature that are not mentioned. Errors and omissions excepted, the names of proprietary products are distinguished by initial capital letters.

All reasonable precautions have been taken by the World Health Organization and ECDC to verify the information contained in this publication. However, the published material is being distributed without warranty of any kind, either expressed or implied. The responsibility for the interpretation and use of the material lies with the reader. In no event shall the World Health Organization and ECDC be liable for damages arising from its use.
This publication follows WHO institutional style guidelines which reflects the WHO Style Guide with regard to names and designation of countries, territories, areas or cities, or of their authorities. The names and designations of countries, territories, areas and cities used in this publication should not be understood as an endorsement by ECDC of the terminology used.

## Contents

Acknowledgements ..... 4
Summary of the latest WHO Influenza Vaccine Composition meetings ..... 5
Influenza by type/subtype ..... 6
Worldwide ..... 6
European region ..... 7
Summary of influenza detections in the WHO European Region, week 35/2023 to 49/2023 ..... 8
Sentinel surveillance system dynamics, week 35/2023 to 49/2023 ..... 9
Genetic diversity by Type/Lineage and group ..... 10
Influenza A H1N1 ..... 11
Genetic analyses: H1N1 ..... 11
Maximum likelihood phylogenetic trees: H1N1 ..... 11
Summary of the antigenic properties of H1N1 viruses circulating in the reporting period ..... 13
A/H1N1: References ..... 13
Influenza A H3N2 ..... 14
Genetic analyses: H3N2 ..... 14
Maximum likelihood phylogenetic tree: H3N2 ..... 14
Summary of the antigenic properties of H3N2 viruses circulating in the reporting period ..... 16
A/H3N2: HI reagents and references ..... 16
Influenza B ..... 17
Genetic analyses: B/Victoria ..... 17
Maximum likelihood phylogenetic tree: B/Victoria ..... 17
Summary of the antigenic properties of B/Victoria lineage viruses circulating in the reporting period 1 ..... 19
$\mathrm{B} /$ Victoria: Reagents and references ..... 19
Summaries of data submitted to TESSy ..... 20
Genetic characterization ..... 20
(According to the guidance produced for TESSy reporting at the beginning of the 2022-2023 influenza season) ..... 20
Susceptibility to antivirals ..... 20
Annex ..... 21
A/H1N1 ..... 21
A/H3N2 ..... 22
B/Victoria ..... 23
WHO Collaborating Centre reports ..... 23

## Acknowledgements

This report was prepared by the Worldwide Influenza Centre, Francis Crick Institute (WIC), with contributions from:

Prof. Nicola Lewis (Director)
Dr Ruth Harvey (Deputy Director)
Dr Monica Galiano (Head of Molecular Testing and Genomics)
Dr Zheng Xiang
Ms Becky Clark
Ms Alice Lilley
Ms Christine Carr
Mr Michael Bennett
Dr Tanya Mikaiel
Ms Abi Lofts
Dr Alize Proust
Ms Chandrika Halai
Dr Karen Cross
Ms Aine Rattigan
Mr Lorin Adams
for the World Health Organization Regional Office for Europe under WHO contract.
Data from The European Surveillance System - TESSy was provided by the respective country and area and released by ECDC.

We thank all those who have contributed information, clinical specimens and viruses, and associated data to the WHO Global Influenza Surveillance and Response System (GISRS), which provides the basis for our current understanding of recently circulating influenza viruses included in this summary. This report was prepared in part using data reported to the European Surveillance System (TESSy). We gratefully acknowledge the authors, originating and submitting laboratories of the sequences from the GISAID EpiFluTM database, which were downloaded for use in the preparation of this report (all submitters of data may be contacted directly via the GISAID website), along with all laboratories who submitted sequences directly to WHO CC London.

## Summary of the latest WHO Influenza Vaccine Composition meetings

Genetic and antigenic characterization data generated at the Worldwide Influenza Centre for viruses with collection dates after 31 January 2023 until 31 August 2023 informed the WHO influenza vaccine composition meeting (VCM) in September 2023 when recommendations were made for the southern hemisphere (SH) 2024 influenza season. At the September 2023 VCM it was recommended to change the A(H1N1)pdm09 and A(H3N2) vaccine components for the 2024 SH season. Previously, at the February 2023 VCM, which focused on data from viruses collected after 31 August 2022 until 31 January 2023, it was also recommended to change the A(H1N1)pdm09 vaccine component for the 2023-2024 northern hemisphere (NH) season.

It is recommended vaccines for use in the 2024 SH influenza season contain the following:

## Trivalent: Egg-based Vaccines

- an A/Victoria/4897/2022 (H1N1)pdm09-like virus;
- an A/Thailand/8/2022 (H3N2)-like virus; and
- a B/Austria/1359417/2021 (B/Victoria lineage)-like virus.


## Trivalent: Cell- or recombinant-based Vaccines

- an A/Wisconsin/67/2022 (H1N1)pdm09-like virus;
- an A/Massachusetts/18/2022 (H3N2)-like virus; and
- a B/Austria/1359417/2021 (B/Victoria lineage)-like virus.

Quadrivalent (egg- or cell culture- or recombinant-based vaccines): Above 3 components; and a B/Phuket/3073/2013 (B/Yamagata lineage)-like virus.

## Influenza B/Yamagata-lineage

No B/Yamagata-lineage viruses with collection dates after March 2020 have been detected or sequences released in GISAID as of 15 December 2023.

The absence of confirmed detection of naturally occurring $B /$ Yamagata lineage viruses is indicative of very low risk of infection by $\mathrm{B} /$ Yamagata lineage viruses. Therefore, it is the opinion of the WHO influenza vaccine composition advisory committee that inclusion of a B/Yamagata lineage antigen in quadrivalent influenza vaccines is no longer warranted, and every effort should be made to exclude this component as soon as possible. A continued effort by all NICs of GISRS is required to identify B/Yamagata-lineage viruses for detailed characterization to determine if there are any in circulation.

## Influenza by type/subtype

## Worldwide

Geographical distribution of influenza viruses with collection dates from 1st September 2023 through to 15th December as deposited in GISAID, coloured by Type/subtype. Geographic markers scaled to detection proportions. Full length HA. Map provided by WHO GIS Centre for Health, DNA/DDI (https://www.who.int/data/ gis)


Globally, influenza detections have increased since last report in October but still remain under the epidemic threshold of $10 \%$. The relative proportions of $\mathrm{A} / \mathrm{H} 1 \mathrm{~N} 1, \mathrm{~A} / \mathrm{H} 3 \mathrm{~N} 2$ and $\mathrm{B} /$ Victoria varied by geographic region with cocirculation of $A / H 1 N 1$ and $A / H 3 N 2$ overall and some detections of $B /$ Victoria, as indicated by the different colours in the pie charts by country.

## European region

Geographical distribution in the European region of influenza viruses with collection dates from 1st September 2023 through to 15th December as deposited in GISAID, coloured by Type/subtype. Geographic markers scaled to detection proportions. Full length HA.


In the European region, influenza detections remained low until recent weeks when they started to approach the $10 \%$ epidemic threshold.

The majority of countries which reported detections showed co-circulation of $A / H 1 N 1$ and $A / H 3 N 2$ as indicated by the different colours in the pie charts.

## Summary of influenza detections in the WHO European Region, week 35/2023 to 49/2023

Table 1 shows influenza virus detections in the WHO European Region reported to The European Surveillance System (TESSy) database from 1st September 2023 (weeks 35 to 49) compared with the same period in the previous season. For type-percentage calculations, the denominator is total detections; for subtype and lineage, it is the total influenza A subtyped and total influenza $B$ lineage determined, respectively. As not all countries have a true non-sentinel testing denominator, no percentage calculations for total tested are shown (Data taken from Flu News Europe reports and from ERVISS (European Respiratory Virus Surveillance Summary)).

| Virus type/subtype/lineage | Cumulative number of detections for weeks 35 to 49/2023 |  |  |  | Cumulative number of detections for weeks 35 to 49/2022 |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | Sentinel sources | Non-sentinel sources | Totals | \% | Sentinel sources | Non-sentinel sources | Totals | \% |
| Influenza A | 1362 | 15158 | 16520 | 95 | 3196 | 24586 | 27782 | 93 |
| A(H1N1)pdm09 | 607 | 2600 | 3207 | 48 | 355 | 4367 | 4722 | 45 |
| A(H3N2) | 494 | 3014 | 3508 | 52 | 2283 | 3584 | 5867 | 55 |
| A not subtyped | 261 | 9544 | 9805 | NA | 558 | 16635 | 17193 | NA |
| Influenza B | 66 | 727 | 793 | 5 | 321 | 1700 | 2021 | 7 |
| Victoria lineage | 0 | 80 | 80 | 100 | 113 | 113 | 226 | 100 |
| Yamagata lineage | 0 | 0 | 0 | NA | 0 | 0 | 0 | NA |
| Lineage not ascribed | 66 | 647 | 713 | NA | 208 | 1587 | 1795 | NA |
| Total detections | 1428 | 15885 | 17313 | NA | 3517 | 26286 | 29803 | NA |
| Total tested | 48781 | 661213 | 709994 | NA | 28191 | 551767 | 579958 | NA |

Compared with the same period (weeks 35 to 49) in 2022, for sentinel surveillance the number of tested specimens has nearly doubled, however the number of influenza detections has halved. For non-sentinel surveillance, the number of tested specimens has increased from last season to the current, however detections have decreased by nearly 2 folds. The higher number of detections in 2022 was likely driven by the increase in A(H3N2) detections; in both periods, the proportion of influenza A of unknown subtype was around $60 \%$ of the total influenza A detected.

Relative frequencies of type A vs B influenza viruses are similar between both periods, with influenza B detections at $7 \%$ in 2022 compared to $5 \%$ in the current period. Relative frequencies of influenza A subtypes are similar between both periods with nearly similar frequencies of $A(H 3 N 2)$ viruses ( $52 \%$ ) and $A(H 1 N 1)(48 \%)$ in the current period, compared to a ratio of 55/45\% for the same period in 2022.

## Sentinel surveillance system dynamics, week 35/2023 to 49/2023

Figure adapted from ERVISS


During the period from week 35 to week 49 of 2023, influenza activity remained at low levels through the reporting period until the last two weeks when it started to approach the epidemic threshold of $10 \%$. Across sentinel surveillance, influenza A/H3N2 and A/H1N1 viruses cocirculated during most of this period with overall frequencies of $48 \%$ for $A(H 1 N 1)$ and $52 \%$ for $A(H 3 N 2)$.

## Genetic diversity by Type/Lineage and group




## Influenza A H1N1

## Genetic analyses: H1N1

6B.1A.5a.2 (C.1) and 6B.1A.5a.2a.1 (C.1.1. and C.1.1.1) clade viruses both continued to circulate with differing relative proportions depending on region. In Europe, both 5a.2a and 5a.2a. 1 viruses were detected, with roughly equal proportions.

Within the 5a.2a viruses, characterised by substitutions K54Q, A186T, E224A, R259K and K308R, two clades were observed: one minor clade with D94N and T216A (C.1.7) with root on A/Sydney/5/2021, with viruses detected in Europe, Australia and Oman, and a larger clade defined by substitution I418V (C.1) which was detected in Europe, the US, South-East Asia and some countries in the Middle East and Africa. Other subclades that were reported in previous weeks were not seen during this period, except for one with A48P (C.1.2) with viruses from Thailand.

Within the 5a.2a. 1 viruses, characterised by substitutions P137S, K142R, D260E, T277A, E356D and N451H, there are two main groups of viruses: a major clade with T216A (C.1.1.1.) represented by A/Victoria/4897/2022 and a minor clade represented by A/Wisconsin/67/2022 (C.1.1). Within the major clade there are 2 distinct subclades: one with R113K and V427I that was detected in Europe, Asia and US and a second subclade with R45K that was seen in the US, Europe and South Korea.

## Maximum likelihood phylogenetic trees: H1N1

Maximum likelihood time-resolved phylogenetic tree inferred using Iqtree2 from HA sequence data obtained from GISAID from 1st September onwards. Trees were manually curated and, if sequence numbers were > 200, downsampled using Treemer to retain a representative tree topology of 200 sequences with emphasis on viruses from the European region. Annotation of amino acids substitutions was performed with Treetime ancestral reconstruction. References and CVVs are marked as Cell or Egg.


## Summary of the antigenic properties of H1N1 viruses circulating in the reporting period

Both cell- and egg-based NH 2023-24 strain A/Victoria/4897/2022 recognises both 5a.2a and 5a.2a. 1 test viruses well.

For an overall picture of the past season, see the Annex.

## A/H1N1: References

| Virus | Genetic group | Virus passage | Ferret ID |
| :--- | :--- | :--- | :--- |
| IVR-215 (A/Victoria/2570/2019) | 6B.1A.5a.2 | E4/D7/E3 | F37/21 |
| A/Sydney/5/2021 | 6B.1A.5a.2a | MDCK3/MDCK3 | F46/22 |
| A/Sydney/5/2021 | 6B.1A.5a.2a | E3/E3 | F04/22 |
| A/Victoria/4897/2022 | 6B.1A.5a.2a.1 | SIAT2/MDCK2 | F05/23 |
| IVR-238 (A/Victoria/4897/2022) | 6B.1A.5a.2a.1 | E3/D6/E1 10-6 | F07/23 |
| A/Wisconsin/67/2022 | 6B.1A.5a.2a.1 | MDCK2 | F17/23 |

## Influenza A H3N2

## Genetic analyses: H3N2

Clade 3C.2a1b.2a. 2 (renamed as $\mathbf{2}$ since February 2023) predominated since 1st February in all geographic regions where H3N2 circulated. Within this clade, cocirculation of multiple genetic clades were observed during most of the southern hemisphere influenza season 2022-2023, with clades $\mathbf{2 a . 2 b}$, the $\mathbf{2 a . 3 a . 1}$ and $\mathbf{2 a . 1 b}$ were the most frequently detected.

During this reporting period, the great majority of H3 viruses detected belong to clade 2a.3a.1, which share substitutions E50K with clade 2a.3a and present additional substitutions I 140 K and I 223 V . Within clade 2a.3a.1, viruses with 125 V , V347M and 1418 V were seen in Europe, South-East Asia and Australia, whereas viruses with N122D (potential loss of N-glycosylation) and K276E were detected in Europe, the US, Qatar, Thailand and Oman. Other subclades included: N122D and V347M viruses from US, Australia and Qatar (the latter characterised by V112I and S145N) and a subclade with viruses from China, Europe, US, Australia, Thailand and Qatar with no subclade-specific amino acids.

A few viruses from Europe, US and Qatar with substitutions K276E and V347M cluster within clade 2a.3a.

## Maximum likelihood phylogenetic tree: H3N2

Maximum likelihood time-resolved phylogenetic tree inferred using Iqtree 2 from HA sequence data obtained from GISAID from 1st September onwards. Trees were manually curated and, if sequence numbers were > 200, downsampled using Treemer to retain a representative tree topology of 200 sequences with emphasis on viruses from the European region. Annotation of amino acids substitutions was performed with Treetime ancestral reconstruction. References and CVVs are marked as Cell or Egg.


## Summary of the antigenic properties of H3N2 viruses circulating in the reporting period

We note variable recognition by current 2a.3a.1 reference and vaccine antisera for a number of 3 a. 1 viruses that have been analysed since September.

For an overall picture of the past season, see the Annex.

## A/H3N2: HI reagents and references

| Virus | Genetic group | Virus passage | Ferret ID |
| :---: | :---: | :---: | :---: |
| A/Thuringen/10/2022 | 2 b | P1/SIAT2 | F36/22 |
| A/Stockholm/5/2021 | 2a | SIAT0/SIAT3 | F35/21 |
| A/Darwin/9/2021 | 2a | E3/E4 | F39/21 |
| A/Norway/24873/2021 | 2a. 3 | SIAT2 | F10/22 |
| A/Norway/24873/2021 | 2a. 3 | E3 (Am2Al1) | F11/22 |
| A/Poland/97/2022 | 2a. 2 | S2 | F39/22 |
| A/Slovenia/8720/2022 | 2a. 1 | SIAT1/MDCK1/SIAT2 | F24/22 |
| A/Lille/50053/2022 | 2a. 1 | MDCK1/SIAT3 | F02/23 |
| A/Catalonia/NSVH161512067/2022 | 2a.1b | SIAT1/SIAT3 | F41/22 |
| A/Albania/289813/2022 | 2a.3a.1 | MDCK1 | F21/23 |
| A/Albania/289813/2022 | 2a.3a.1 | E3(Am1Al2) | F19/23 |
| A/Brandenburg/15/2022 | 2a.3a.1 | E5(Am1Al2) | F18/23 |
| A/Switzerland/28719/2022 | 2b | SIAT1 | F29/23 |
| A/Massachusetts/18/2022 | 2a.3a.1 | SIAT3/SIAT1 | F36/23 |
| A/California/122/2022 | 2a.3a.1 | E1/E1 | F33/23 |
| A/Thailand/08/2022 | 2a.3a.1 | E3/E1 | F34/23 |
| IVR-237(A/Thailand/08/2022) | 2a.3a.1 | E3/D7/E1 | F35/23 |

## Influenza B

## Genetic analyses: B/Victoria

Clade V1A.3a. 2 viruses characterised by substitutions A127T, P144L, N150K, G184E, N197D (-CHO), K203R and R279K predominated since 1st February 2023 in geographic regions where B/Victoria-lineage viruses were detected.

Within V1A.3a.2, the most recent viruses are characterised by additional substitution D197E (C.5). Subclades observed within V1A.3a. 2 (C.5) are: C.5.1 with E183K detected in Europe, US and Australia; C.5.4 with V117I, E128K, A154T and K326R detected in Europe and US; C.5.5 with R80G, E184K detected in US and Colombia; C.5.6 with D129N detected in Australia, Thailand and US; C.5.7 with E183K and E128G seen in China, Thailand and Australia.

No Clade V1A. 3 viruses were detected since 1st February 2023.
No B/Yamagata lineage viruses have been detected since March 2020.

## Maximum likelihood phylogenetic tree: B/Victoria

Maximum likelihood time-resolved phylogenetic tree inferred using Iqtree2 from HA sequence data obtained from GISAID from 1st September onwards. Trees were manually curated and, if sequence numbers were > 200, downsampled using Treemer to retain a representative tree topology of 200 sequences with emphasis on viruses from the European region. Annotation of amino acids substitutions was performed with Treetime ancestral reconstruction. References and CVVs are marked as Cell or Egg.


## Summary of the antigenic properties of B/Victoria lineage viruses circulating in the reporting period

Very few $\mathrm{B} /$ Victoria viruses collected since 1st September have been phenotypically characterized by haemagglutination inhibition (HI). All V1A.3a. 2 viruses tested were well-recognised by antisera raised against B/Austria/1359417/2021 and -like viruses.

For an overall picture of the past season, see the Annex.
$B /$ Victoria: Reagents and references

| Virus | Genetic group | Virus passage | Ferret ID |
| :--- | :--- | :--- | :--- |
| B/Brisbane/60/2008 | V1A | E4/E4 | sheep pool |
| B/Stockholm/3/2022 | V1A.3a.2 | SIAT1/MDCK3 | F28/22 |
| B/Austria/1359417/2021 | V1A.3a.2 | SIAT1/MDCK4 | NIB F01/21 |
| B/Austria/1359417/2021 G141 | V1A.3a.2 | E3/E5 | F15/21 |
| B/Austria/1359417/2021 G141R | V1A.3a.2 | E3/E5 | F44/21 |
|  |  |  |  |

## Summaries of data submitted to TESSy

## Genetic characterization

(According to the guidance produced for TESSy reporting at the beginning of the 2022-2023 influenza season)

Overall, 131 viruses detected from week 40 to 49/2023 were genetically characterized:

- Of $87 \mathrm{~A} / \mathrm{H} 1 \mathrm{~N} 1$ viruses, all belonged to clade 6 B .1 A .5 a .2 (clade 5a.2) with 41 ( $47 \%$ ) represented by A/Sydney/5/2021 (5a.2a), 26 (30\%) by A/Victoria/4897/2022 (5a.2a.1) and 20 (23\%) by A/Wisconsin/67/2022 (5a.2a.1), while none were allocated to the 'Subgroup Not Listed' category.
- Of 37 A/H3N2 viruses, all belonged to clade (3C.2a1b.2a.2, renamed as 2) with 36 ( $97 \%$ ) represented by A/Thailand/8/2022 (clade 2a.3a.1) and one virus represented by A/Finland/402/2023 (clade 2a.3a). No viruses were allocated to the 'Subgroup Not Listed' category.
- Of 7 B/Victoria-lineage viruses, all belonged to clade V1A.3a.2, with five (71\%) represented by B/Catalonia/2279261NS/2023
(subclade C.5.1) and two viruses represented by B/Connecticut/01/2021 (subclade C.5). No viruses were allocated to the 'Subgroup Not Listed' category.


## Susceptibility to antivirals

Between weeks 35 and 39/2023, 8 viruses were assessed for susceptibility to neuraminidase inhibitors and 7 were assessed for susceptibility to baloxavir marboxil. Phenotypically and/or genotypically, no markers associated with reduced susceptibility were identified.

No antiviral susceptibility data was available so far for weeks 40 to 49 of season 2023-2024.
At the WIC, 8 influenza viruses detected within the WHO EURO Region since 1st September 2023 (weeks 35 to 49/2023) were assessed for susceptibility to antivirals. Of these, $4 \mathrm{~A} / \mathrm{H} 1 \mathrm{~N} 1$ and $4 \mathrm{~A} / \mathrm{H} 3 \mathrm{~N} 2$ were phenotypically assessed against oseltamivir and zanamivir. All viruses showed Normal Inhibition (NI) by both NAls.

Phenotypic testing for susceptibility to baloxavir marboxil was performed for $4 \mathrm{~A} / \mathrm{H} 1 \mathrm{~N} 1$ and $4 \mathrm{~A} / \mathrm{H} 3 \mathrm{~N} 2$ viruses, with all of them showing Normal Inhibition.

Genotypic assessment of 6 H1N1 and 10 H3N2 NA gene sequences from influenza viruses detected within the WHO EURO Region since 1st September 2023 and received at the WIC did not find any marker associated with reduced susceptibility to NAI.

For 5 H 1 N 1 and 10 H3N2 viruses where PA gene sequencing was successful, no markers associated with reduced inhibition by baloxavir marboxil were identified.

No influenza B viruses detected within the WHO European region were available for antiviral susceptibility characterisation at the WIC within this period.

## Annex

Heatmapped phylogenetic trees represent the combined genetic and antigenic analyses where the correlation between genetic groups, signature amino acids and their antigenic profile (including microneutralisation for A/H3N2) can be observed.

These outputs were generated by the London WHO Collaborating Centre at the WIC for the SH 2024 September VCM with influenza viruses with collection dates between 1 February and 31 August 2023.

## A/H1N1



## A/H3N2



## B/Victoria



## WHO Collaborating Centre reports

A full description of results generated by the London WHO Collaborating Centre at the WIC and used at the September 2023 WHO VCM, and previous ones, can be found at https://www.crick.ac.uk/partnerships/ worldwide-influenza-centre/annual-and-interim-reports

## European Centre for Disease <br> Prevention and Control (ECDC)

Gustav den III:s Boulevard 40, SE-169 73, Solna, Sweden
Tel. +46 858601000
Fax +46 858601001
www.ecdc.europa.eu
Contact us
publications@ecdc.europa.eu
( Follow us on Twitter
@ECDC_EU
(f) Like our Facebook page
www.facebook.com/ECDC.EU

World Health Organization
Regional Office for Europe
UN City, Marmorvej 51, DK-2100 Copenhagen Ø, Denmark
Tel. $+4545 \quad 33 \quad 7000$
Fax +4545337001
www.who.int/europe
Contact us
eurocontact@who.int
(3) Follow us on Twitter
@WHO_EUROPE
(f) Like our Facebook page www.facebook.com/WHOEurope

