

## SURVEILLANCE REPORT

### Weekly influenza surveillance overview

15 October 2010

## Main surveillance developments in week 40/2010 (04–10 Oct 2010)

*This first page contains the main developments of this week and can be printed separately or together with the more detailed information following.*

- While the influenza surveillance systems in most EU/EEA Member States have started fully operating again in week 40/2010, the large majority of countries are reporting low rates and unchanging trends of sentinel physician consultations for influenza-like illness and acute respiratory infection.
- Only two (1.2%) of 161 sentinel specimens tested positive for influenza virus. Seven (87.5%) of eight influenza viruses detected in sentinel and non-sentinel specimens were type A.
- No SARI cases were reported for week 40/2010.
- Very sporadic detections of influenza virus along with detections of respiratory syncytial virus and adenovirus in a number of European countries suggest that the low influenza-like illness and acute respiratory infection activity currently observed is likely due to respiratory pathogens other than influenza.

**Sentinel surveillance of influenza-like illness (ILI)/ acute respiratory infection (ARI):** Of the 20 countries reporting, all observed low intensity with only three countries indicating an increasing trend compared with the previous week; however, all were within baseline levels. For more information, [click here](#).

**Virological surveillance:** Sentinel physicians collected 161 respiratory specimens, of which two (1.2%) tested positive for influenza virus. Altogether, seven (87.5%) of eight influenza viruses detected in sentinel and non-sentinel specimens were type A. For more information, [click here](#).

**Hospital surveillance of severe acute respiratory infection (SARI):** During week 40/2010, no SARI cases were reported. For more information, [click here](#).

# Sentinel surveillance (ILI/ARI)

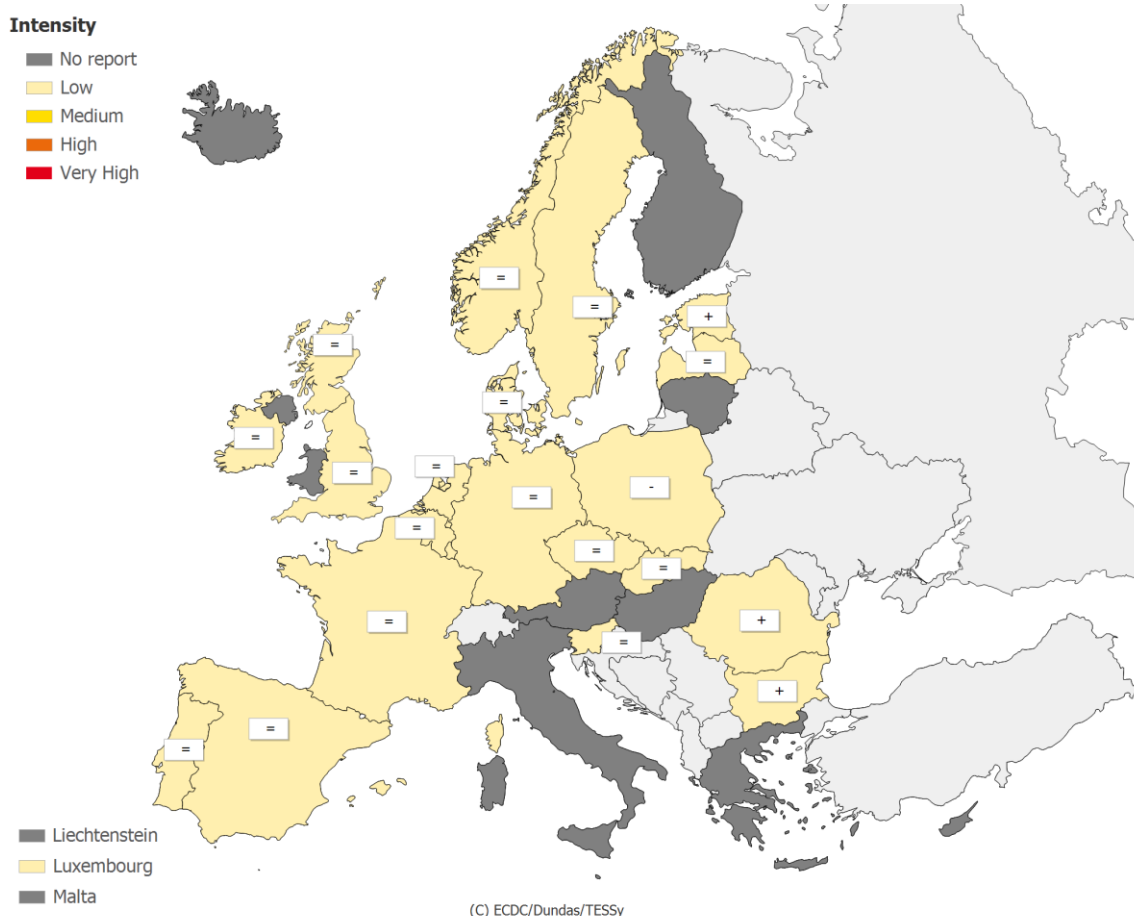
## Weekly analysis—epidemiology

During week 40/2010, 20 of 29 countries reported epidemiological data. All countries experienced low intensity (Map 1, Table 1).

For the geographic spread indicator, Estonia, France and the UK (England) reported sporadic cases, while all other countries observed no activity (Map 2, Table 1).

Based on comparison with the previous week, Bulgaria, Estonia and Romania reported an increasing trend in the consultation rates for ILI/ARI, Poland a decreasing trend, and Luxembourg reported an unknown trend. The remaining countries reported a stable trend (Map 1 and Table 1). Consultation rates were below the national baseline threshold throughout.

**Map 1: Intensity for week 40/2010**



\* A type/subtype is reported as dominant when > 40 % of all samples are positive for the type/subtype.

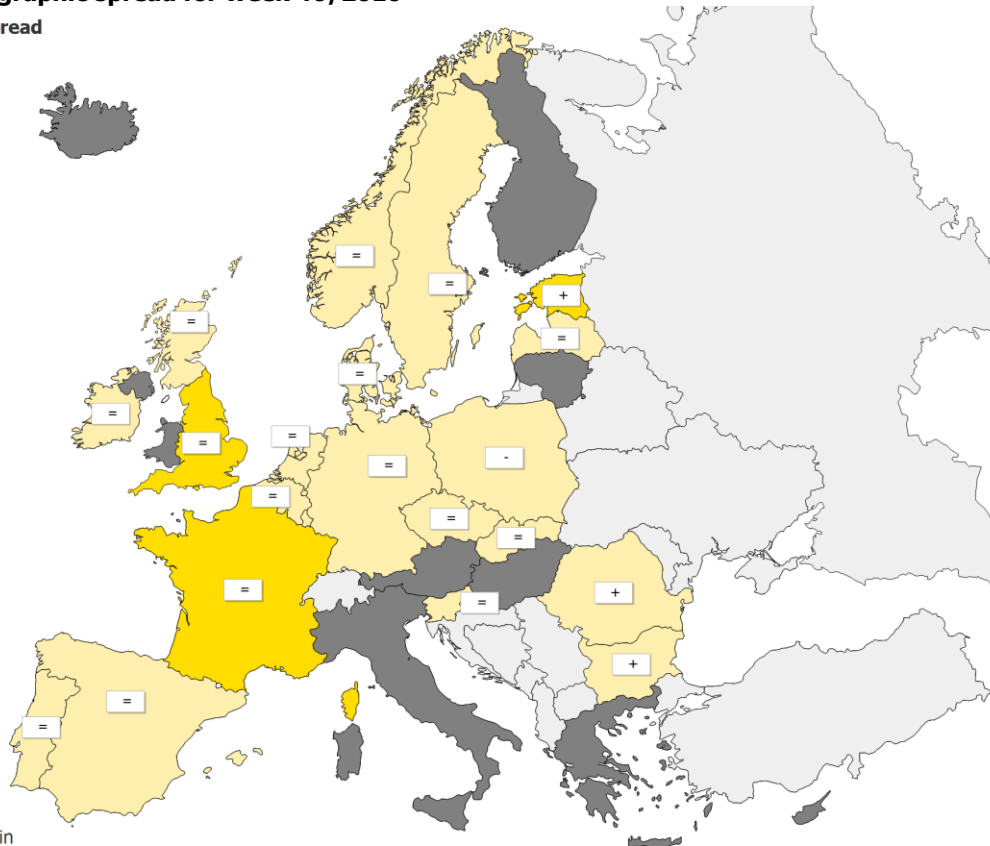
Legend:

<b>Low</b>	No influenza activity or influenza at baseline levels	-	Decreasing clinical activity
<b>Medium</b>	Usual levels of influenza activity	+	Increasing clinical activity
<b>High</b>	Higher than usual levels of influenza activity	=	Stable clinical activity
<b>Very high</b>	Particularly severe levels of influenza activity		

**Map 2: Geographic spread for week 40/2010**

**Geographic spread**

- No Report
- No Activity
- Sporadic
- Local
- Regional
- Widespread



- Liechtenstein
- Luxembourg
- Malta

(C) ECDC/Dundas/TESSy

\* A type/subtype is reported as dominant when at least ten samples have been detected as influenza positive in the country and of those > 40 % are positive for the type/subtype.

**Legend:**

<b>No activity</b>	No evidence of influenza virus activity (clinical activity remains at baseline levels)	-	Decreasing clinical activity
<b>Sporadic</b>	Isolated cases of laboratory confirmed influenza infection	+	Increasing clinical activity
		=	Stable clinical activity
<b>Local outbreak</b>	Increased influenza activity in local areas (e.g. a city) within a region, or outbreaks in two or more institutions (e.g. schools) within a region (laboratory confirmed)		
<b>Regional activity</b>	Influenza activity above baseline levels in one or more regions with a population comprising less than 50% of the country's total population (laboratory confirmed)		
<b>Widespread</b>	Influenza activity above baseline levels in one or more regions with a population comprising 50% or more of the country's population (laboratory confirmed)		

**Table 1: Epidemiological and virological overview by country, week 40/2010**

Country	Intensity	Geographic spread	Trend	No. of sentinel swabs	Dominant type	Percentage positive*	ILI per 100.000	ARI per 100.000	Epidemiological overview	Virological overview
Austria				0	None	-	-	-	Graphs	Graphs
Belgium	Low	No activity	Stable	16	None	0.0	29.3	1221.7	Graphs	Graphs
Bulgaria	Low	No activity	Increasing	0	None	-	-	550.5	Graphs	Graphs
Cyprus				-	-	-	-	-		
Czech Republic	Low	No activity	Stable	-	-	-	17.6	796.4	Graphs	Graphs
Denmark	Low	No activity	Stable	-	-	-	64.1	0.0	Graphs	Graphs
Estonia	Low	Sporadic	Increasing	2	None	0.0	5.4	271.9	Graphs	Graphs
Finland				35	None	0.0	-	-	<a href="#">Graphs</a>	<a href="#">Graphs</a>
France	Low	Sporadic	Stable	-	-	-	-	1611.2	Graphs	Graphs
Germany	Low	No activity	Stable	9	None	0.0	-	974.3	Graphs	Graphs
Greece				-	-	-	-	-		
Hungary				-	-	-	-	-		
Iceland				-	-	-	-	-		
Ireland	Low	No activity	Stable	13	None	0.0	7.1	-	Graphs	Graphs
Italy				-	-	-	-	-		
Latvia	Low	No activity	Stable	0	None	-	0.0	1294.6	Graphs	Graphs
Lithuania				3	None	33.3	-	-	Graphs	Graphs
			Unknown (no information available)							
Luxembourg	Low	No activity		1	None	0.0	-*	-*	Graphs	Graphs
Malta				-	-	-	-	-		
Netherlands	Low	No activity	Stable	14	None	0.0	24.3	-	Graphs	Graphs
Norway	Low	No activity	Stable	2	None	0.0	27.1	-	Graphs	Graphs
Poland	Low	No activity	Decreasing	3	None	0.0	37.0	-	Graphs	Graphs
Portugal	Low	No activity	Stable	0	None	-	0.0	-	Graphs	Graphs
Romania	Low	No activity	Increasing	9	-	0.0	2.5	864.2	Graphs	Graphs
Slovakia	Low	No activity	Stable	1	None	100.0	176.5	1656.9	Graphs	Graphs
Slovenia	Low	No activity	Stable	2	None	0.0	0.0	918.4	Graphs	Graphs
Spain	Low	No activity	Stable	40	None	0.0	10.0	-	Graphs	Graphs
Sweden	Low	No activity	Stable	-	-	-	7.8	-	Graphs	Graphs
UK - England	Low	Sporadic	Stable	6	None	0.0	6.4	404.5	Graphs	Graphs
UK - Northern Ireland				-	-	-	-	-		
UK - Scotland	Low	No activity	Stable	5	None	0.0	2.8	193.1	Graphs	Graphs
UK - Wales				-	-	-	-	-		
Europe				161		1.2				Graphs

\*Incidence per 100 000 is not calculated for these countries as no population denominator is provided.

Note: Liechtenstein is not reporting to the European Influenza Surveillance Network

## Description of the system

This surveillance is based on nationally organized sentinel networks of physicians, mostly general practitioners (GPs), covering at least 1–5% of the population in their countries. All EU/EEA Member States (except Liechtenstein) are participating. Depending on their country's choice, each sentinel physician reports the weekly number of patients seen with influenza-like illness (ILI), acute respiratory infection (ARI) or both to a national focal point. From the national level, both numerator and denominator data are then reported to the European Surveillance System (TESSy) database. Additional semi-quantitative indicators of intensity, geographic spread and trend of influenza activity at the national level are also reported.

# Virological surveillance

## Weekly analysis—virology

In week 40/2010, 19 countries reported virological data. Sentinel physicians collected 161 specimens, two (1.2%) of which were positive for influenza virus (Tables 1 and 2). In addition, six non-sentinel source specimens (i.e., specimens collected for diagnostic purpose in hospitals) were reported positive for influenza virus. Of the eight influenza viruses detected from sentinel and non-sentinel sources during week 40/2010, seven (87.5%) were type A and one was a type B virus. These detections were reported by Lithuania, Norway, Slovakia, Spain and the UK (England).

Two of the seven influenza A viruses detected in week 40/2010 were subtyped, one from a sentinel patient as a 2009 pandemic influenza A(H1N1) virus, and one from a non-sentinel source as A(H3). Table 2 shows the distribution of both sentinel and non-sentinel specimens by type and subtype.

More details on circulating viruses can be found in the [report](#) prepared by the Community Network of Reference Laboratories coordination team.

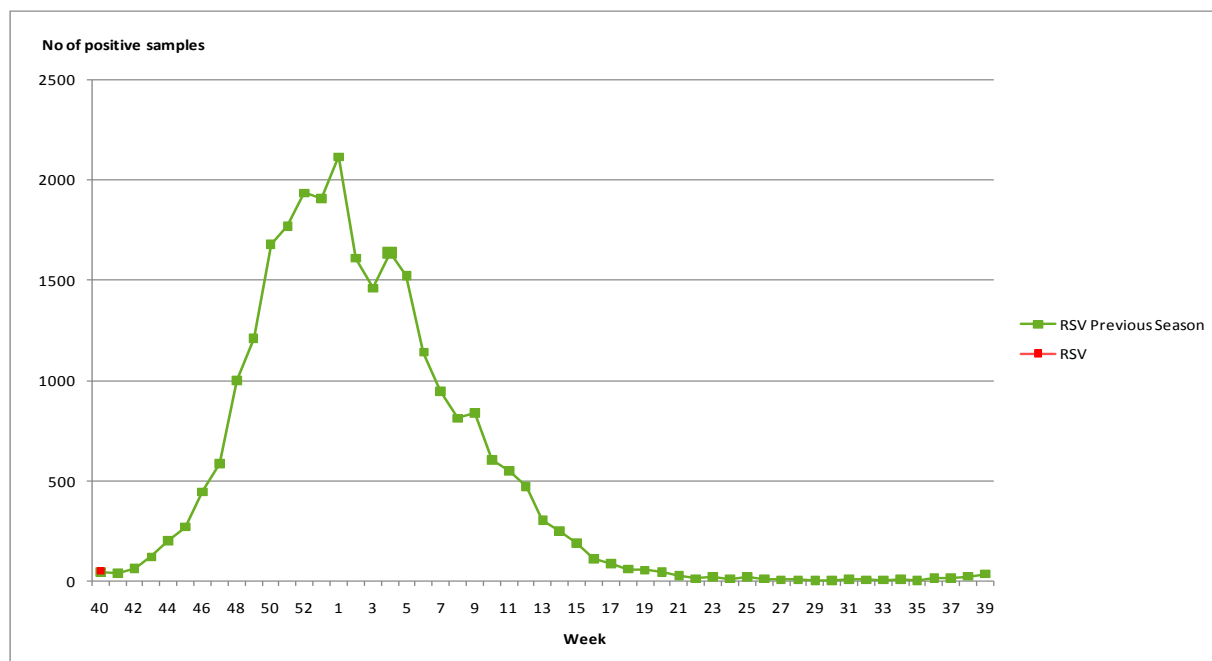
In week 40/2010, six countries reported 52 detections of respiratory syncytial virus.

**Table 2: Weekly and cumulative influenza virus detections by type, subtype and surveillance system, week 40/2010**

Virus type/subtype	Current Period		Season	
	Sentinel	Non-sentinel	Sentinel	Non-sentinel
Influenza A		2		5
A (pandemic H1N1)		1		0
A (subtyping not performed)		1		4
A (not subtypable)		0		0
A (H3)		0		1
A (H1)		0		0
Influenza B		0		1
<b>Total Influenza</b>		<b>2</b>		<b>6</b>

Note: A(pandemic H1), A(H3) and A(H1) includes both N-subtyped and not N-subtyped viruses

**Figure 1: Respiratory syncytial virus (RSV) detections, sentinel and non-sentinel, week 40/2010**



## Country comments

In Finland during week 40, 15 of 35 specimens tested were adenovirus-positive.

## Description of the system

According to the nationally defined sampling strategy, sentinel physicians take nasal or pharyngeal swabs from patients with influenza-like illness (ILI), acute respiratory infection (ARI) or both and send the specimens to influenza-specific reference laboratories for virus detection, (sub-)typing, antigenic or genetic characterisation and antiviral susceptibility testing.

For details on the current virus strains recommended by WHO for vaccine preparation [click here](#).

# Hospital surveillance – severe acute respiratory infection (SARI)

## Weekly analysis—SARI

During week 40/2010, no SARI cases were reported.

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*The report text was written by an editorial team at the European Centre for Disease Prevention and Control (ECDC): Eeva Broberg, Flaviu Plata, Phillip Zucs and René Snacken. The bulletin text was reviewed by the Community Network of Reference Laboratories for Human Influenza in Europe (CNRL) coordination team: Adam Meijer, Rod Daniels, John McCauley and Maria Zambon. On behalf of the EISN members the bulletin text was reviewed by Bianca Snijders (RIVM Bilthoven, The Netherlands) and Thedi Ziegler (National Institute for Health and Welfare, Finland)*

*Maps and commentary used in this Weekly Influenza Surveillance Overview (WISO) do not imply any opinions whatsoever of ECDC or its partners on the legal status of the countries and territories shown or concerning their borders.*

*All data published in the WISO are up-to-date on the day of publication. Past this date, however, published data should not be used for longitudinal comparisons as countries tend to retrospectively update their numbers in the database.*

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