

SURVEILLANCE REPORT

Weekly influenza surveillance overview

25 October 2013

Main surveillance developments in week 42/2013 (14–20 October 2013)

This first page contains the main developments for this week and can be printed separately or together with the more detailed information that follows.

During week 42/2013 there was low influenza activity in Europe:

- All 27 reporting countries experienced low intensity of clinical influenza activity.
- Sporadic activity was reported by three countries.
- Of 327 sentinel specimens tested by 19 countries, 2 (0.6%) were positive for influenza virus
- Ireland and the UK have reported five hospitalised laboratory-confirmed influenza cases since week 40.

Sentinel surveillance of influenza-like illness (ILI)/ acute respiratory infection (ARI): Low intensity was reported by all 27 reporting countries. For more information, [click here](#).

Virological surveillance: Only 0.6% of the tested sentinel specimens were positive for influenza virus. For more information, [click here](#).

Hospital surveillance of laboratory-confirmed influenza cases: Of five reported hospitalised cases, four were admitted to ICU. For more information, [click here](#).

Sentinel surveillance (ILI/ARI)

Weekly analysis – epidemiology

For week 42/2013, clinical data were reported by 27 countries, all of which experienced low-intensity influenza activity, the lowest category of reporting (Table 1, Map 1).

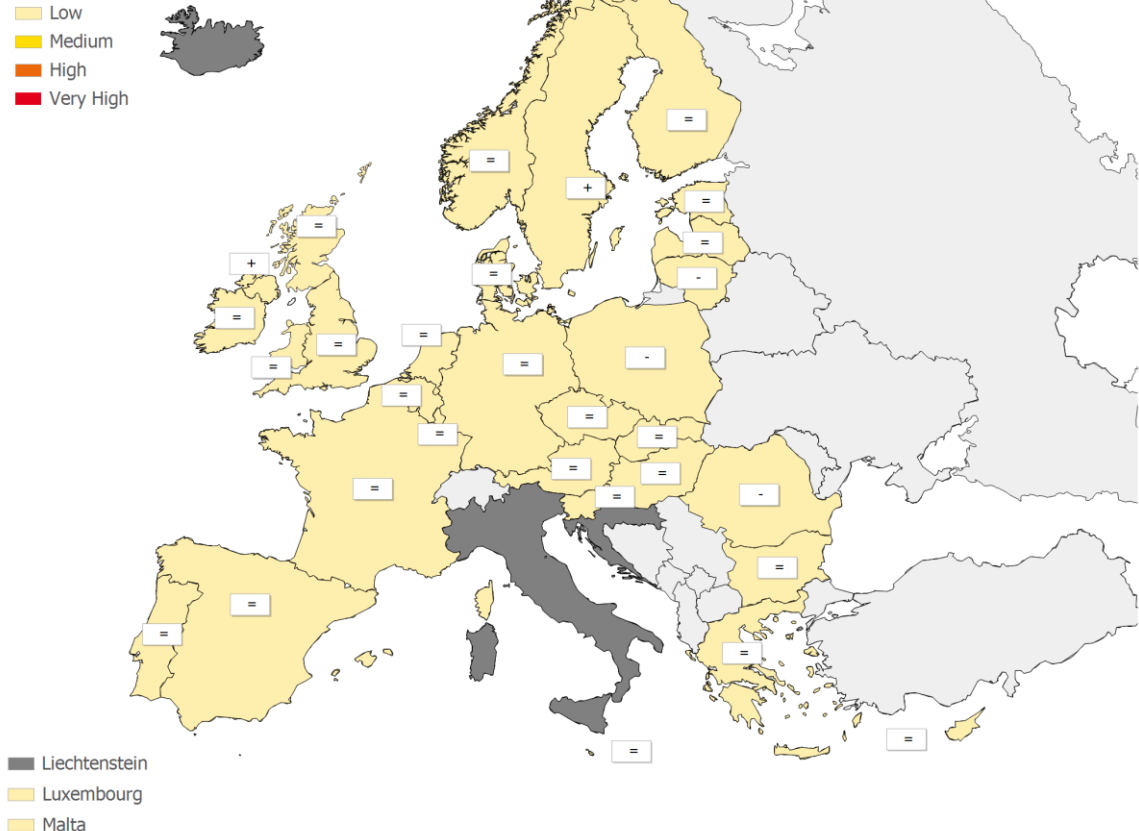
Geographic patterns of influenza activity were reported as sporadic by Denmark, France and Norway. All other countries reported no activity (Table 1, Map 2).

Increasing trends were reported by Sweden and the UK (Northern Ireland) while all other countries reported stable or decreasing trends (Table 1, Map 2).

Map 1. Intensity for week 42/2013

Intensity

- No report
- Low
- Medium
- High
- Very High

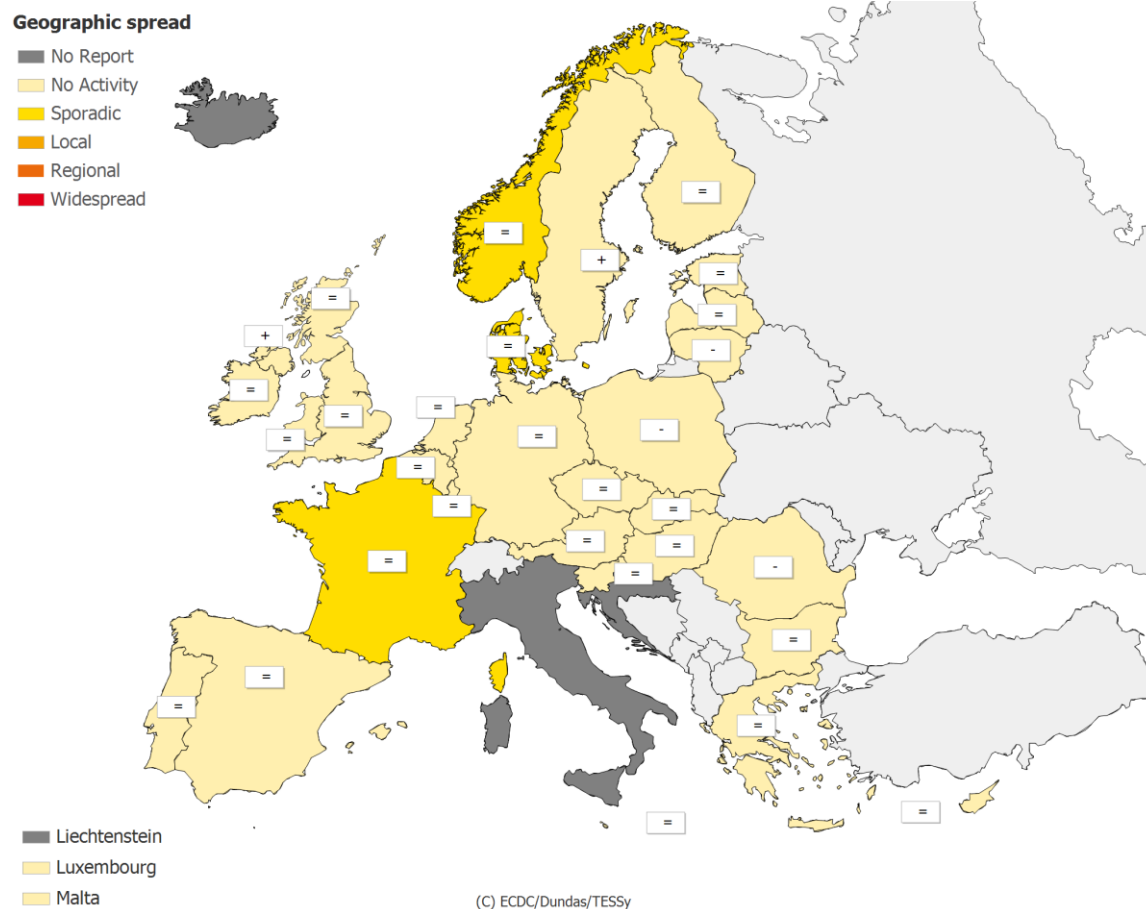


(C) ECDC/Dundas/TESSy

* 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:

No report	Intensity level was not reported	+	Increasing clinical activity
Low	No influenza activity or influenza at baseline levels	-	Decreasing clinical activity
Medium	Usual levels of influenza activity	=	Stable clinical activity
High	Higher than usual levels of influenza activity		
Very high	Particularly severe levels of influenza activity		

Map 2. Geographic spread for week 42/2013



* 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:

No report	Activity level was not reported	+	Increasing clinical activity
No activity	No evidence of influenza virus activity (clinical activity remains at baseline levels)	-	Decreasing clinical activity
Sporadic	Isolated cases of laboratory confirmed influenza infection	=	Stable clinical activity
Local outbreak	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)		
Regional activity	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)		
Widespread	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 42/2013

Country	Intensity	Geographic spread	Trend	No. of sentinel specimens	Dominant type	Percentage positive	ILI per 100 000	ARI per 100 000	Epidemiological overview	Virological overview
Austria	Low	No activity	Stable	0	None	0.0	754.6	-	Graphs	Graphs
Belgium	Low	No activity	Stable	16	None	0.0	38.3	1486.3	Graphs	Graphs
Bulgaria	Low	No activity	Stable	0	None	0.0	-	636.3	Graphs	Graphs
Croatia				-	-	0.0	-	-		
Cyprus	Low	No activity	Stable	-	-	0.0	-*	-*	Graphs	Graphs
Czech Republic	Low	No activity	Stable	-	-	0.0	20.9	817.6	Graphs	Graphs
Denmark	Low	Sporadic	Stable	7	None	28.6	14.1	-	Graphs	Graphs
Estonia	Low	No activity	Stable	10	None	0.0	5.0	229.7	Graphs	Graphs
Finland	Low	No activity	Stable	12	None	0.0	-	-	Graphs	Graphs
France	Low	Sporadic	Stable	40	None	0.0	-	1542.7	Graphs	Graphs
Germany	Low	No activity	Stable	28	None	0.0	-	1138.1	Graphs	Graphs
Greece	Low	No activity	Stable	0	None	0.0	71.1	-	Graphs	Graphs
Hungary	Low	No activity	Stable	1	None	0.0	44.9	-	Graphs	Graphs
Iceland				0	-	0.0	-	-	Graphs	Graphs
Ireland	Low	No activity	Stable	7	None	0.0	4.3	-	Graphs	Graphs
Italy				-	-	0.0	-	-		
Latvia	Low	No activity	Stable	0	None	0.0	0.0	992.9	Graphs	Graphs
Lithuania	Low	No activity	Decreasing	4	None	0.0	0.6	587.3	Graphs	Graphs
Luxembourg	Low	No activity	Stable	3	None	0.0	-*	-*	Graphs	Graphs
Malta	Low	No activity	Stable	0	None	0.0	-*	-*	Graphs	Graphs
Netherlands	Low	No activity	Stable	2	None	0.0	18.5	-	Graphs	Graphs
Norway	Low	Sporadic	Stable	1	None	0.0	22.1	-	Graphs	Graphs
Poland	Low	No activity	Decreasing	9	None	0.0	211.2	-	Graphs	Graphs
Portugal	Low	No activity	Stable	0	None	0.0	0.0	-	Graphs	Graphs
Romania	Low	No activity	Decreasing	4	-	0.0	2.1	678.2	Graphs	Graphs
Slovakia	Low	No activity	Stable	1	None	0.0	136.5	1516.5	Graphs	Graphs
Slovenia	Low	No activity	Stable	4	None	0.0	0.0	801.8	Graphs	Graphs
Spain	Low	No activity	Stable	64	None	0.0	12.3	-	Graphs	Graphs
Sweden	Low	No activity	Increasing	31	-	0.0	13.9	-	Graphs	Graphs
UK - England	Low	No activity	Stable	62	None	0.0	2.6	202.0	Graphs	Graphs
UK - Northern Ireland	Low	No activity	Increasing	0	None	0.0	15.6	326.6	Graphs	Graphs
UK - Scotland	Low	No activity	Stable	21	None	0.0	7.6	315.3	Graphs	Graphs
UK - Wales	Low	No activity	Stable	-	-	0.0	4.5	-	Graphs	Graphs
Europe				327		0.6			Graphs	

**Incidence per 100 000 is not calculated for these countries as no population denominator is provided. Liechtenstein does not report to the European Influenza Surveillance Network.*

Description of the system

Surveillance is based on nationally organised sentinel networks of physicians, mostly general practitioners (GPs), covering at least 1 to 5% of the population in their countries. All EU/EEA Member States (except Liechtenstein) participate. Depending on their country's choice, each sentinel physician reports the weekly number of patients seen with ILI, 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

For week 42/2013, 19 countries tested 327 sentinel specimens of which two (0.6%) from Denmark were positive for A(H1)pdm09 influenza virus (Tables 1–2).

In addition, nine specimens collected in week 42 from non-sentinel sources (e.g. specimens collected for diagnostic purposes in hospitals) were found to be positive for influenza virus. Of these, eight were type A and one type B. Of five subtyped influenza A viruses, four were A(H3) and one was A(H1)pdm09 (Table 2).

For week 42/2013, genetic characterisation of six influenza viruses has been reported for sentinel and non-sentinel specimens. Of five influenza A viruses, four were characterised as A(H3) clade representative A/Victoria/208/2009 – A/Texas/50/2012 subgroup (3C), one of the recommended A virus components for the 2013–2014 influenza season vaccine and one as A(H1)pdm09 group 6 representative A/St Petersburg/27/2011, which was the main genetic clade reported during the previous season. The B virus was characterised as B/Yamagata/16/88-lineage clade 2 representative B/Massachusetts/02/2012, the recommended B virus component for the 2013–2014 influenza season vaccine.

More details on viruses circulating between 1 January and 31 May 2013 can be found in the [September report](#) prepared by the European Reference Laboratory Network for Human Influenza (ERLI-Net) coordination team.

Since week 40/2013 there have been no reports on viruses tested for antiviral susceptibility.

For week 42/2013, 74 respiratory syncytial virus detections have been reported by six countries, remaining at low level.

Table 2. Weekly and cumulative influenza virus detections by type, subtype and surveillance system, weeks 40–42/2013

Virus type/subtype	Current period Sentinel	Current period Non-sentinel	Season Sentinel	Season Non-sentinel
Influenza A	2	8	5	33
A(H1)pdm09	2	1	4	6
A(H3)	0	4	1	16
A(sub-type unknown)	0	3	0	11
Influenza B	0	1	3	11
B(Vic) lineage	0	0	0	0
B(Yam) lineage	0	0	0	2
Unknown lineage	0	1	3	9
Total influenza	2	9	8	44

Note: A(H1)pdm09 and A(H3) include both N-subtyped and non-N-subtyped viruses

Description of the system

According to the nationally defined sampling strategy, sentinel physicians take nasal or pharyngeal swabs from patients with ILI, 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 of the current virus strains recommended by WHO for vaccine preparation [click here](#).

Hospital surveillance – severe influenza disease

Weekly analysis of hospitalised laboratory-confirmed influenza cases

Since week 40/2013, five hospitalised laboratory-confirmed influenza cases have been reported by Ireland and the United Kingdom (Table 3); four of them were admitted to ICU. Three patients were infected with influenza B virus, in two patients influenza A virus was diagnosed.

Table 3. Cumulative number of hospitalised laboratory-confirmed influenza cases, weeks 40–42/2013

Country	Number of cases	Incidence of cases per 100 000 population	Number of fatal cases reported	Incidence of fatal cases per 100 000 population	Estimated population covered
Ireland	1				
United Kingdom	4	0.01			63705030
Total	5		0		

Table 4. Number of hospitalised laboratory-confirmed influenza cases by influenza type and subtype, week 42/2013 and cumulative for the season

Pathogen	Number of cases during current week	Cumulative number of cases since the start of the season
Influenza A		2
A(H1)pdm09		1
A(H3)		
A(sub-typing not performed)		1
Influenza B	2	3
Total	2	5

The EuroMOMO mortality monitoring system

All-cause mortality has been within the normal range for all reporting countries.

Further details are available on <http://www.euromomo.eu/>

This report was written by an editorial team at the European Centre for Disease Prevention and Control (ECDC): Cornelia Adlhoch, Eeva Broberg, Julien Beauté and René Snacken. The bulletin text was reviewed by European Reference Laboratory Network for Human Influenza (ERLI-Net) coordination team: Adam Meijer, Rod Daniels, John McCauley and Maria Zambon. On behalf of the EISN members, the bulletin text was reviewed by Maja Sočan (Inštitut za varovanje zdravja), Allison Waters (University College Dublin) and Tyra Grove Krause (Statens Serum Institut, Copenhagen). In addition, the report is reviewed by experts of WHO Regional Office for Europe.

Maps and commentary published in this Weekly Influenza Surveillance Overview (WISO) do not represent a statement on the part of ECDC or its partners on the legal or border status of the countries and territories shown.

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 database.

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