Influenza Update N° 328

12 November 2018, based on data up to 28 October 2018

Information in this report is categorized by influenza transmission zones, which are geographical groups of countries, areas or territories with similar influenza transmission patterns. For more information on influenza transmission zones, see: www.who.int/influenza/surveillance_monitoring/updates/EN_GIP_Influenza_transmission_zones.pdf

Summary

- In the temperate zone of the northern hemisphere influenza activity remained at inter-seasonal levels. Increased influenza detections were reported in some countries of Southern and South-East Asia. In the temperate zones of the southern hemisphere, influenza activity returned to nearly inter-seasonal levels. Worldwide, seasonal influenza subtype A viruses accounted for the majority of detections.

- National Influenza Centres (NICs) and other national influenza laboratories from 104 countries, areas or territories reported data to FluNet for the time period from 15 October 2018 to 28 October 2018 (data as of 2018-11-09 03:38:30 UTC). The WHO GISRS laboratories tested more than 84313 specimens during that time period. 2145 were positive for influenza viruses, of which 1845 (86%) were typed as influenza A and 300 (14%) as influenza B. Of the sub-typed influenza A viruses, 905 (64.5%) were influenza A(H1N1)pdm09 and 499 (35.5%) were influenza A(H3N2). Of the characterized B viruses, 54 (52.4%) belonged to the B-Yamagata lineage and 49 (47.6%) to the B-Victoria lineage.
For more detailed information, see the Influenza reports from WHO Regional Offices:

- WHO Region of the Americas (AMRO): [www.paho.org/influenzareports](http://www.paho.org/influenzareports)
- WHO European Region (EURO): [www.flunewseurope.org/](http://www.flunewseurope.org/)
- WHO Western Pacific Region (WPRO): [www.wpro.who.int/emerging_diseases/Influenza/en/](http://www.wpro.who.int/emerging_diseases/Influenza/en/)

Countries in the temperate zone of the northern hemisphere

- In the temperate zone of the northern hemisphere, influenza activity remained at interseasonal levels. In Europe and North America, influenza like illness (ILI) levels started to increase in some of the countries with low to no influenza virus detections. In Northern Africa, Egypt continued to report low detections of influenza A(H3N2) viruses. In Western Asia, respiratory illness indicators started to increase in some of the countries. Increased influenza A virus detections were reported in Bahrain and Kuwait (predominantly A(H3N2)). Influenza percent positivity continued to increase in Qatar and Saudi Arabia, with detections of predominately influenza A(H1N1)pdm09 virus. In East Asia, influenza activity remained low in general.

Number of specimens positive for influenza by subtype in northern hemisphere

![Graph showing influenza activity](image)

*Data source: FluNet ([www.who.int/flunet](http://www.who.int/flunet)). Global Influenza Surveillance and Response System (GISRS)*

Data generated on 08/11/2018
Countries in the tropical zone

Tropical countries of Central America, the Caribbean and South America

- In the Caribbean, influenza and respiratory syncytial virus (RSV) detections remained low in general except in Haiti where detections of influenza A(H1N1)pdm09 virus remained elevated. In Central American countries, influenza activity was reported in El Salvador (A(H1N1)pdm09 and B viruses) and Nicaragua (A(H1N1)pdm09). Elevated RSV activity was reported in Guatemala, Nicaragua and Panama.

- In the tropical countries of South America, influenza and RSV activity were low in most countries.

African region

- In Western Africa, influenza activity was reported in Ghana, Guinea, Mali, Senegal and Togo with all seasonal influenza subtypes co-circulating. In Middle Africa, detections of influenza A(H3N2) were reported in Cameroon and the Central African Republic. In Eastern Africa, increased influenza detections of predominately influenza A(H3N2) virus were reported in Kenya and Mauritius.

Tropical Asia

- In Southern Asia, influenza activity of predominately A(H1N1)pdm09 virus continued to be reported in India. In Nepal, decreased detections of influenza A(H3N2) and B viruses were reported in recent weeks.

- In South East Asia, influenza activity continued to be reported in some countries. In Lao PDR, influenza percent positivity remained elevated with influenza A(H1N1)pdm09 virus most frequently detected. Influenza activity continued to be reported in Cambodia and Thailand with detections of predominately influenza A(H1N1)pdm09 followed by influenza A(H3N2) viruses.
Number of specimens positive for influenza by subtype in Southern Asia

Data source: FluNet (www.who.int/flunet). Global Influenza Surveillance and Response System (GISRS)
Data generated on 08/11/2018

Number of specimens positive for influenza by subtype in South East Asia

Data source: FluNet (www.who.int/flunet). Global Influenza Surveillance and Response System (GISRS)
Data generated on 08/11/2018
Countries in the temperate zone of the southern hemisphere

- In the temperate zone of the southern hemisphere, influenza activity returned to inter-seasonal levels.
- In temperate South America, influenza and RSV activity decreased across the countries of the sub-region.
- In Southern Africa, influenza season appeared to have ended in South Africa, with transmission and impact indicators below baseline since week 42. Whereas influenza A(H1N1)pdm09 was the predominant virus detected during the first half of the season, influenza B virus was most frequently detected in the second half of the season.
- In Oceania, influenza activity returned to approximate inter-seasonal levels after peaking in September. In Australia, the influenza season appeared to have ended. Activity and impact of the influenza season were low, while the proportion of influenza patients admitted to an intensive care unit was assessed moderate in comparison with previous years. In New Zealand, influenza activity declined further in recent weeks and remained below baseline levels. Severe acute respiratory infection (SARI) hospitalizations were low compared to previous years, however influenza-associated SARI hospital and ICU admission rates were comparable to other influenza A(H1N1)pdm09 predominant seasons. Low to moderate ILI activity was observed across reporting Pacific Island countries, with variability from week to week.

Number of specimens positive for influenza by subtype in southern hemisphere

Data source: FluNet (www.who.int/flunet). Global Influenza Surveillance and Response System (GISRS)
Data generated on 08/11/2018
**Sources of data**
The Global Influenza Programme monitors influenza activity worldwide and publishes an update every two weeks. The updates are based on available epidemiological and virological data sources, including FluNet (reported by the WHO Global Influenza Surveillance and Response System) FluID (epidemiological data reported by national focal points) and influenza reports from WHO Regional Offices and Member States. Completeness can vary among updates due to availability and quality of data available at the time when the update is developed.

**Seasonal influenza reviews:**
A review of the 2017–2018 influenza season in the northern hemisphere, was published on 24 August 2018 and can be found here:
http://apps.who.int/iris/bitstream/handle/10665/274263/WER9334.pdf?ua=1&ua=1

**Epidemiological Influenza updates:**
http://www.who.int/influenza/surveillance_monitoring/updates/latest_update_GIP_surveillance

**Epidemiological Influenza updates archives 2015:**
http://www.who.int/influenza/surveillance_monitoring/updates/GIP_surveillance_2015_archives

**Virological surveillance updates:**
http://www.who.int/influenza/gisrs_laboratory/updates/summaryreport

**Virological surveillance updates archives:**
http://www.who.int/influenza/gisrs_laboratory/updates/

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