Influenza Update N° 281
23 January 2017, based on data up to 08 January, 2017
Details of Influenza Transmission Zones available at:
http://www.who.int/influenza/surveillance_monitoring/updates/EN_GIP_Influenza_transmission_zones.pdf

Summary
Influenza activity in the temperate zone of the northern hemisphere continued to increase, with many countries especially in East Asia and Europe having passed their seasonal threshold early in comparison with previous years. Worldwide, influenza A(H3N2) virus was predominant. The majority of influenza viruses characterized so far was similar antigenically to the reference viruses contained in vaccines for use in the 2016-2017 northern hemisphere influenza season. All tested viruses collected recently for antiviral sensitivity were susceptible to the neuraminidase inhibitor antiviral medications.

- In North America, influenza activity continued to increase with influenza A(H3N2) virus predominating. In the United States of America, influenza-like illness (ILI) levels were above the seasonal thresholds and respiratory syncytial virus (RSV) activity continued to be reported.
- In Europe, influenza activity was high, with influenza A(H3N2) virus being the most prominent subtype. Persons aged over 65 years were most frequently associated with severe disease from influenza infection.
- In East Asia, high influenza activity continued to be reported with influenza A(H3N2) viruses predominant.
- In Western Asia, influenza activity slightly increased.
- In Southern Asia influenza activity remained low in most of the countries. Detection of influenza A(H3N2) virus continued to be reported by the Islamic Republic of Iran and Sri Lanka.
- In South East Asia, influenza activity remained low, with influenza A(H3N2) virus and influenza B predominating in the region.
- In Northern Africa, influenza detections continued to be reported in Morocco and Tunisia with influenza A(H3N2) virus dominating.
- In West Africa, influenza continued to be detected in Ghana with B viruses dominating.
- In the Caribbean countries and Central America, influenza and other respiratory virus activity remained low in general.
- In tropical South America, influenza and other respiratory viruses activity remained low.
- In the temperate zone of the Southern Hemisphere, influenza activity was at inter-seasonal levels.

National Influenza Centres (NICs) and other national influenza laboratories from 97 countries, areas or territories reported data to FluNet for the time period from 26 December 2016 to 08 January 2017* (data as of 2017-01-20 09:52:23 UTC). The WHO GISRS laboratories tested more than 165297 specimens during that time period. 40259 were positive for influenza viruses, of which 38809 (96.4%) were typed as influenza A and 1450 (3.6%) as influenza B. Of the sub-typed influenza A viruses, 422 (2.6%) were influenza A(H1N1)pdm09 and 15893 (97.4%) were influenza A(H3N2). Of the characterized B viruses, 116 (49.8%) belonged to the B-Yamagata lineage and 117 (50.2%) to the B-Victoria lineage.
Countries in the temperate zone of the northern hemisphere

North America
In North America, influenza activity continued to increase with influenza A(H3N2) virus predominating. In the United States of America, ILI levels were above the seasonal thresholds, and respiratory syncytial virus (RSV) activity continued to be reported. In Canada, influenza activity and ILI consultations increased. In Mexico, pneumonia activity increased above the seasonal threshold.

For more information see:
Europe

In Europe, influenza activity continued to increase, with influenza A (H3N2) virus being the most prominent subtype. In particular, influenza activity was high in Northern and Mediterranean European countries. Several Eastern European countries reported a steep rise in influenza detections. Persons aged over 65 were most frequently associated with severe disease from influenza infection.

For more information see: [https://flunewseurope.org/](https://flunewseurope.org/)

Number of specimens positive for influenza by subtype in Northern Europe

Data source: FluNet ([www.who.int/flunet](www.who.int/flunet)). Global Influenza Surveillance and Response System (GISRS) Data generated on 20/01/17
Northern Africa
In Northern Africa, influenza detections continued to be reported in Morocco and Tunisia, with influenza A(H3N2) virus dominating.

Central Asia
For more information see: https://flunewseurope.org/

Eastern Asia
In East Asia, influenza activity continued to be reported with influenza A(H3N2) as the dominant virus circulating. In particular, influenza activity increased in Mongolia in the recent weeks.

Western Asia
In Western Asia, influenza activity slightly increased in the countries reporting data during this period. Influenza activity increased in Israel in the recent weeks, with influenza A(H3N2) virus dominating. In Qatar, detections of influenza B viruses continued to be reported.

Countries in the tropical zone

Tropical countries of Central America, the Caribbean and South America
In the Caribbean and Central America, influenza and other respiratory virus activity remained low in most of the countries. In Puerto Rico, influenza-like illness and influenza activity remained above the alert threshold, with influenza A(H3N2) virus predominating. Costa Rica reported increased influenza activity in past weeks with influenza A(H1N1)pdm09 and A(H3N2) viruses co-circulating.

For more information see:

African region
In the African region, influenza continued to be detected in Ghana with influenza B viruses dominating.

Tropical Asia
In Southern Asia, influenza activity remained low in most of the countries. Detection of influenza A(H3N2) virus continued to be reported by the Islamic Republic of Iran and Sri Lanka.

Countries in the temperate zone of the southern hemisphere

Temperate South America
For more information see:

Southern Africa
In the temperate countries of Southern Africa, influenza virus detections continued to be sporadic.

Oceania, Melanesia and Polynesia
In Oceania, influenza virus activity remained at inter-seasonal level.
Number of specimens positive for influenza by subtype in Southern Hemisphere

Source 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.

Links to web pages
Influenza reports from WHO Regional Offices:
AMRO: www.paho.org/influenzareports
EURO: http://www.flunewseurope.org/
WPRO: http://www.wpro.who.int/emerging_diseases/Influenza

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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