Influenza Update N° 342

27 May 2019, based on data up to 12 May 2019

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 zones of the southern hemisphere, influenza detections increased overall.
  - In Australia and New Zealand influenza detections were predominantly influenza A(H3N2) and influenza B viruses.
  - In South Africa, predominantly influenza A(H3N2) viruses were detected.
  - In South America, influenza A(H1N1)pdm09 viruses predominated.
- In Southern Asia, influenza activity was low overall.
- In the Caribbean, Central American countries, and the tropical countries of South America, influenza and RSV activity were low in general.
- In Eastern, West and Middle Africa, influenza activity was low across reporting countries.
- In the temperate zone of the northern hemisphere influenza activity decreased overall.
  - In North America and Europe, influenza activity was low overall.
  - In North Africa, influenza detections were low across reporting countries.
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- In Western Asia, influenza activity was low overall, but with continued detections in a few countries on the Arabian Peninsula.
- In East Asia, decreased but continued influenza activity was reported.
  - Worldwide, seasonal influenza A viruses accounted for the majority of detections.
  - National Influenza Centres (NICs) and other national influenza laboratories from 111 countries, areas or territories reported data to FluNet for the time period from 29 April 2019 to 12 May 2019 (data as of 2019-05-24 03:41:52 UTC). The WHO GISRS laboratories tested more than 80173 specimens during that time period. 7693 were positive for influenza viruses, of which 4383 (57%) were typed as influenza A and 3310 (43%) as influenza B. Of the sub-typed influenza A viruses, 707 (30.9%) were influenza A(H1N1)pdm09 and 1578 (69.1%) were influenza A(H3N2). Of the characterized B viruses, 63 (2.9%) belonged to the B-Yamagata lineage and 2075 (97.1%) 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 southern hemisphere

- Increased influenza detections were reported from countries in the temperate zone of the southern hemisphere.
- In Oceania, Australia, ILI activity and influenza detections were higher compared to the same period in previous years. Increased detections of mainly influenza A(H3N2) viruses were reported. New Caledonia reported detections of predominantly influenza A(H1N1)pdm09 viruses. New Zealand reported increased detections of influenza A(H3N2) and influenza B Victoria lineage viruses. In New Zealand, ILI activity increased but remained below baseline. Influenza-associated hospitalizations also increased.
- South Africa reported increased influenza detections with predominantly influenza A(H3N2) and increased ILI activity. The season started in week 18 when influenza detections increased above the seasonal threshold.
- In South America, influenza detections increased above baseline and ILI activity increased in Chile, with influenza A(H1N1)pdm09 predominant among influenza detections. In Paraguay, influenza detections, of predominantly influenza A(H1N1)pdm09, and ILI increased slightly but remained around the baseline while RSV detections increased. Influenza detections were low in Argentina, Brazil and Uruguay.
Number of specimens positive for influenza by subtype in Oceania

Data source: FluNet (www.who.int/flunet). Global Influenza Surveillance and Response System (GISRS) Data generated on 24/05/2019

Number of specimens positive for influenza by subtype in Southern Africa

Data source: FluNet (www.who.int/flunet). Global Influenza Surveillance and Response System (GISRS) Data generated on 24/05/2019
Countries in the tropical zone

Tropical countries of Central America, the Caribbean and South America

- In the Caribbean and Central American countries, influenza activity remained low overall. Detections of mainly influenza A(H1N1)pdm09 virus in Cuba and influenza A(H3N2) in Haiti decreased in recent weeks. Influenza activity decreased in Jamaica and Guatemala. Costa Rica reported detections of all seasonal subtypes.
- In the tropical countries of South America, influenza and respiratory syncytial virus (RSV) activity were low in general among those countries reporting data for this period.

Tropical Africa

In Western and Middle Africa, influenza detections were low across reporting countries with small numbers of influenza A(H3N2) and influenza B viruses detected. ILI activity increased slightly in Guinea and Togo. In Eastern Africa, influenza detections were also low across reporting countries with all seasonal influenza subtypes detected.

Tropical Asia

- In Southern Asia, influenza activity was low overall in reporting countries, with influenza A(H1N1)pdm09 virus predominating.
- In South East Asia, influenza activity was low in most of the countries. In Thailand, influenza activity increased slightly with influenza B viruses most frequently detected followed by influenza A(H1N1)pdm09. Decreased detections of all seasonal influenza subtypes were reported in Malaysia. ILI increased slightly in Laos People’s Democratic Republic and Singapore with all seasonal influenza subtypes detected.
Countries in the temperate zone of the northern hemisphere

- In the temperate zone of the northern hemisphere, influenza activity continued to decrease with co-circulation of influenza A and B viruses.
- In North America, influenza-like illness (ILI) and influenza activity were low, overall, with detections of predominantly influenza A(H3N2) viruses.
- In Europe, influenza activity was low across the continent, with intensity of influenza-like illness or acute respiratory infection rates ranging from low to baseline. Of the few influenza virus detections reported, influenza A(H3N2) predominated.
- In Central Asia, influenza activity was low in those countries reporting.
- In Northern Africa, influenza detections were low across reporting countries with influenza A(H1N1)pdm09 and influenza B virus detections reported from Egypt.
- In Western Asia, influenza activity was low in most of the countries with influenza A and B viruses circulating in Kuwait, Oman, Qatar and Saudi Arabia. Severe acute respiratory infection (SARI) activity in Saudi Arabia decreased during this reporting period compared to the previous period.
- In East Asia, influenza activity decreased but continued detections of predominantly influenza B viruses were reported. ILI and influenza activity declined in China but influenza positivity remains elevated with influenza B viruses of the Victoria lineage circulating. In the Republic of Korea, influenza activity continued to decrease after a second peak reported in week 15/2019.

Number of specimens positive for influenza by subtype in the northern hemisphere

![Graph showing number of specimens positive for influenza by subtype from 2018 to 2019](graph.png)

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

Data generated on 23/05/2019
Number of specimens positive for influenza by subtype in the Western Asia

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

Data generated on 23/05/2019

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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 in August 2018 and can be found here: [http://apps.who.int/iris/bitstream/handle/10665/274263/WER9334.pdf?ua=1&ua=1](http://apps.who.int/iris/bitstream/handle/10665/274263/WER9334.pdf?ua=1&ua=1)

Epidemiological Influenza updates:

Epidemiological Influenza updates archives 2015:

Virological surveillance updates:
[http://www.who.int/influenza/gisrs_laboratory/updates/summaryreport](http://www.who.int/influenza/gisrs_laboratory/updates/summaryreport)

Virological surveillance updates archives:
[http://www.who.int/influenza/gisrs_laboratory/updates/](http://www.who.int/influenza/gisrs_laboratory/updates/)

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