Influenza Update N° 366

27 April 2020, based on data up to 12 April 2020

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: https://www.who.int/influenza/surveillance_monitoring/updates/Influenza_Transmission_Zones20180914.pdf

Summary

- The current influenza surveillance data should be interpreted with caution as the ongoing COVID-19 pandemic might have influenced to different extents health seeking behaviours, staffing/routines in sentinel sites, as well as testing capacities in Member States. The various social and physical distancing measures implemented by Member States to reduce SARS-CoV2 virus transmission might also have played a role in interrupting influenza virus transmission.

- In the temperate zone of the northern hemisphere, influenza activity was low overall. A marked overall increase in excess all-cause mortality was seen across the countries of the EuroMOMO network.

- In the Caribbean and Central American countries, elevated severe acute respiratory infection (SARI) activity was reported by several countries in the sub-region, while influenza and other respiratory virus detections were low.

- In tropical South American countries, influenza detections were low.

- In tropical Africa, influenza detections were low overall, except for Mozambique

- In Southern Asia, ILI and SARI activity appeared to decrease in Afghanistan and Bhutan.
In South East Asia, there were no or low influenza detections across reporting countries.

In the temperate zones of the southern hemisphere, influenza activity remained at inter-seasonal levels overall. SARI activity appeared to decrease in Chile and Paraguay.

Worldwide, seasonal influenza A and B viruses were detected in similar proportion.

National Influenza Centres (NICs) and other national influenza laboratories from 65 countries, areas or territories reported data to FluNet for the time period from 30 March 2020 to 12 April 2020 (data as of 2020-04-24 03:30:16 UTC). The WHO GISRS laboratories tested more than 122242 specimens during that time period. 1249 were positive for influenza viruses, of which 686 (54.9%) were typed as influenza A and 563 (45.1%) as influenza B. Of the sub-typed influenza A viruses, 298 (77.8%) were influenza A(H1N1)pdm09 and 85 (22.2%) were influenza A(H3N2). Of the characterized B viruses, 3 (6.5%) belonged to the B-Yamagata lineage and 43 (93.5%) to the B-Victoria lineage.

WHO encourages the testing of routine influenza surveillance samples from sentinel and non-sentinel sources for COVID-19 where resources are available and invites all countries/areas/territories to report this information to routine, established regional and global platforms. (See the Operational considerations for COVID-19 surveillance using GISRS guidance)

For more detailed information, see the Influenza reports from WHO Regional Offices:

- WHO Region of the Americas (AMRO): www.paho.org/influenzareports
- WHO Eastern Mediterranean Region (EMRO): http://www.emro.who.int/health-topics/influenza/situation-update.html
- WHO European Region (EURO): www.flunewseurope.org/
- WHO Western Pacific Region (WPRO): www.wpro.who.int/emerging_diseases/Influenza/en/
- EuroMOMO Bulletin: https://www.euromomo.eu

Countries in the temperate zone of the northern hemisphere

In the temperate zone of the northern hemisphere, influenza activity was low overall.

In the countries of North America, influenza activity indicators have all decreased to very low levels, except for ILI activity in the United States of America, which remained slightly above the seasonal baseline. Cumulative hospitalization rates were reported at levels similar to previous seasons except in children and young adults, where rates were higher compared to past seasons. The percentage of deaths attributed to pneumonia and influenza increased above the epidemic threshold.

In Europe, influenza activity continued to decrease overall. ILI activity remained elevated in Estonia and the Netherlands and decreased in Ireland and Belgium but remained above the baseline threshold in these two countries. SARI remained elevated in the Russian Federation. Influenza detections were low in most reporting countries with both influenza A and B viruses co-circulating. Pooled mortality estimates from the EuroMOMO network showed a marked overall increase in excess all-cause mortality which appeared to be driven by a very substantial excess mortality in some of the European participating countries and coinciding
with the current COVID-19 global pandemic. This excess mortality was primarily found in the age group of 65 years and above, followed by the age group of 15-64 years.

- In Central Asia, no influenza detections were reported.
- In Northern Africa, there were no influenza updates for this reporting period.
- In Western Asia, influenza activity was low across reporting countries.
- In East Asia, influenza illness indicators and influenza activity remained at inter-seasonal levels across all countries.

**Number of specimens positive for influenza by subtype in North America**

![Chart showing number of specimens positive for influenza by subtype in North America]

**Data source:** FluNet (www.who.int/flunet). Global Influenza Surveillance and Response System (GISRS)
Data generated on 24/04/2020

Number of specimens positive for influenza by subtype in the European Region of WHO
Countries in the tropical zone

**Tropical countries of Central America, the Caribbean and South America**

- In the Caribbean and Central American countries, influenza activity was low across reporting countries. Elevated SARI activity was reported in the Dominican Republic, Haiti, Honduras and Jamaica while SARI activity appeared to decrease in Costa Rica. In Mexico, influenza activity continued to decrease, with influenza B/Victoria lineage viruses most frequently detected.

- In the tropical countries of South America, influenza detections were low in Bolivia (Plurinational State of) and Brazil.

**Tropical Africa**

- In tropical Africa, there were no or low influenza detections across most reporting countries. Influenza activity of predominantly influenza A(H1N1)pdm09 viruses was reported in Mozambique. ILI activity decreased but SARI remained elevated in Mali.

**Tropical Asia**

- In Southern Asia, no influenza detections were reported across reporting countries. ILI and SARI activity appeared to decrease slightly in Afghanistan and Bhutan.

- In South East Asia, influenza activity was low overall. ILI and SARI appeared to decrease in Lao People's Democratic Republic, with no detections of influenza viruses.
Countries in the temperate zone of the southern hemisphere

- In the temperate zones of the southern hemisphere, influenza activity remained at inter-seasonal levels.
- In parts of Australia, where the data was available, emergency department visits for respiratory symptoms were greater than expected for this time of year, but influenza activity remained at inter-seasonal levels.
- Detections of predominately influenza A(H1N1)pdm09 were low in South Africa.
- In temperate South America, SARI levels appeared to decrease in Chile and Paraguay. The ILI rate continued to increase in Paraguay.

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

![Graph showing number of specimens positive for influenza by subtype

Data source: FluNet (www.who.int/flunet). Global Influenza Surveillance and Response System (GISRS)
Data generated on 24/04/2020

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 2019 influenza season in the southern hemisphere, was published in January 2020 and can be found here:
https://extranet.who.int/iris/restricted/bitstream/handle/10665/330368/WER9501-02-eng-fre.pdf

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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