Influenza Update N° 369

08 June 2020, based on data up to 24 May 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 varying extents health seeking behaviours, staffing/routines in sentinel sites, as well as testing priorities and capacities in Member States. The various hygiene 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.
- Globally, influenza activity was at lower levels than expected for this time of the year. In the temperate zone of the northern hemisphere, influenza activity returned to inter-seasonal levels while in the temperate zones of the southern hemisphere, the influenza season has not started yet.
- In the Caribbean and Central American countries, no or low influenza detections were reported in most reporting countries. Increased severe acute respiratory infection (SARI) activity was reported in some countries.
- In tropical South American and tropical Africa, there were no influenza viruses detected across reporting countries.
- In Southern Asia, influenza like illness (ILI) and SARI activity decreased in Bhutan and Nepal.
▪ In South East Asia, no influenza detections were reported.

▪ Worldwide, seasonal influenza A viruses accounted for the majority of detections.

▪ National Influenza Centres (NICs) and other national influenza laboratories from 60 countries, areas or territories reported data to FluNet for the time period from 11 May 2020 to 24 May 2020 (data as of 2020-06-05 04:13:18 UTC). The WHO GISRS laboratories tested more than 217327 specimens during that time period. 103 were positive for influenza viruses, of which 71 (68.9%) were typed as influenza A and 32 (31.1%) as influenza B. Of the sub-typed influenza A viruses, 4 (66.7%) were influenza A(H1N1)pdm09 and 2 (33.3%) were influenza A(H3N2). Of the characterized B viruses, 0 (0%) belonged to the B-Yamagata lineage and 4 (100%) 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 (ideally indicating which data are from sentinel sites) 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](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/)
- EuroMOMO Bulletin: [https://www.euromomo.eu](https://www.euromomo.eu)

Countries in the temperate zone of the northern hemisphere

▪ In the temperate zone of the northern hemisphere, influenza returned to inter-seasonal level overall.

▪ In the countries of North America, influenza activity indicators were at very low levels. In the United States of America, the percentage of deaths attributed to pneumonia and influenza decreased but remained above the epidemic threshold. The contribution of deaths from COVID-19 may be incomplete and could be affected by reporting delays.

▪ In Europe, there was no or low influenza activity across reporting countries. Pooled mortality estimates from the EuroMOMO network showed a decrease to normal expected levels following a period of substantial excess mortality in some of the European participating countries and coinciding with the current COVID-19 global pandemic.

▪ In Central Asia, no influenza detections were reported.

▪ In Northern Africa, there were no influenza updates for this reporting period.

▪ In Western Asia, there were no or low influenza detections across reporting countries. In Azerbaijan,ILI and SARI cases appeared to increase coinciding with increased cases of COVID-19.
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 northern hemisphere

Data source: FluNet (www.who.int/flunet). Global Influenza Surveillance and Response System (GISRS) Data generated on 05/06/2020

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. SARI activity increased in Costa Rica, decreased in Jamaica and Honduras though remaining at moderate and at extraordinary levels, respectively. Increased detections of SARS-CoV-2 were reported across these countries in recent weeks.
- In the tropical countries of South America, there were no to low influenza detections.

Tropical Africa

- In tropical Africa, there were no influenza virus detections in this reporting period.

Tropical Asia

- In Southern Asia, no influenza detections were reported across reporting countries. ILI and SARI activities decreased in Bhutan and Nepal.
- In South East Asia, no influenza detections were reported across reporting countries.
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 Oceania, ILI and influenza activity remained at or below inter-seasonal levels.
- In South Africa, there were no influenza virus detections during this reporting period.
- In temperate South America, no or low influenza virus detections were reported across the sub-region. SARI cases increased in Chile in recent weeks, correlated in time with increased SARS-CoV-2 circulation.

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

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

Data generated on 05/06/2020

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/

Contact: fluupdate@who.int