Influenza Update N° 377

28 September 2020, based on data up to 13 September 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 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-CoV-2 virus transmission have likely played a role in reducing influenza virus transmission.

- Globally, influenza activity was reported at lower levels than expected for this time of the year. In the temperate zones of the southern hemisphere, the influenza season has not started. Despite continued or even increased testing for influenza in some countries in the southern hemisphere, very few influenza detections were reported.

- In the temperate zone of the northern hemisphere, influenza activity remained below inter-seasonal levels.

- In the Caribbean and Central American countries, there were sporadic, or no influenza detections reported. Severe acute respiratory infection (SARI) activity, likely due to COVID-19, remained elevated in some reporting countries.
In tropical South America, tropical Africa and Southern Asia there were sporadic or no influenza detections across reporting countries.

In South East Asia, sporadic influenza detections were reported in Lao People's Democratic Republic and Thailand.

Worldwide, of the very low numbers of detections reported, seasonal influenza B viruses accounted for the majority of detections.

National Influenza Centres (NICs) and other national influenza laboratories from 44 countries, areas or territories reported data to FluNet for the time period from 31 August 2020 to 13 September 2020 (data as of 2020-09-25 06:17:20 UTC). The WHO GISRS laboratories tested more than 129 824 specimens during that time period. 56 were positive for influenza viruses, of which 21 (37.5%) were typed as influenza A and 35 (62.5%) as influenza B. Of the sub-typed influenza A viruses, 0 (0%) were influenza A(H1N1)pdm09 and 4 (100%) were influenza A(H3N2). Of the characterized B viruses, 2 (12.5%) belonged to the B-Yamagata lineage and 14 (87.5%) to the B-Victoria lineage.

During the COVID-19 pandemic, WHO encourages countries continue routine influenza surveillance, test samples from influenza surveillance sites for influenza and SARS-CoV-2 virus where resources are available, and report this information in a timely manner to established regional and global platforms (See the Operational considerations for COVID-19 surveillance using GISRS guidance).

The WHO Consultation and Information Meeting on the Composition of Influenza Virus Vaccines for Use in the 2021 Southern Hemisphere Influenza Season was held on 16-24 September 2020 in the format of an e-Consultation. It was recommended that trivalent vaccines contain the following: an A/Victoria/2570/2019 (H1N1)pdm09-like virus; an A/Hong Kong/2671/2019 (H3N2)-like virus; and a B/Washington/02/2019 (B/Victoria lineage)-like virus. It was also recommended that quadrivalent vaccines containing two influenza B viruses contain the above three viruses and a B/Phuket/3073/2013 (B/Yamagata lineage)-like virus. For more information: https://www.who.int/influenza/vaccines/virus/recommendations/2021_south/en/.

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 southern hemisphere

In the temperate zones of the southern hemisphere, influenza activity remained record low in comparison with previous seasons.
In Oceania, influenza like illness (ILI) and other influenza activity indicators remained below usual levels for this time of year in general. While influenza testing in Australia and New Zealand is maintained or even increased, very few influenza viruses were detected. Increased ILI activity was reported in a few Pacific Island though aetiology was yet to be confirmed.

In South Africa, no influenza viruses were detected in ILI and pneumonia samples from sentinel sites. A moderate increase of respiratory syncytial virus detections was recorded since week 29.

In temperate South America, few influenza detections, mainly influenza B viruses, were reported in Argentina. The number of SARI cases increased in Paraguay and reached extraordinary levels while it continued to decrease in Chile, correlating in time with decreasing SARS-CoV-2 activity.

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

![Graph showing number of specimens positive for influenza by subtype in the southern hemisphere]

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

Data generated on 25/09/2020

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**Countries in the tropical zone**

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

- In the Caribbean and Central American countries, no to sporadic influenza detections were reported across reporting countries. In Haiti, SARI cases increased above epidemic threshold in recent weeks. In Jamaica, SARI hospitalization rate continued to increase and reached moderate levels. In Costa Rica, the number of SARI cases continued to decrease but remaining at extraordinary levels; the number of ILI cases remained elevated. In Honduras, SARI activity decreased to moderate level. Detections of SARS-CoV-2 continued to be reported at elevated levels in most countries in the sub-region.
In the tropical countries of South America, no influenza detections were reported. SARI activity decreased to the seasonal threshold in Colombia, correlated in time with decreased SARS-CoV-2 virus detections.

Tropical Africa

- In Western Africa, few influenza detections were reported in Côte d’Ivoire, mainly influenza B; of samples tested for influenza in Burkina Faso, Mali, Niger and Togo none tested positive for influenza. In Middle Africa, SARI cases decreased after a peak in July in Central African Republic. In Eastern Africa, the reporting rate was low. Kenya reported an increasing trend of SARI cases with two detections of influenza B viruses in recent weeks.

Tropical Asia

- In Southern Asia, ILI and SARI activity was reported to be low and no influenza detections were reported across reporting countries. The proportion of consultation for ILI appeared to increase in Afghanistan.
- In South East Asia, sporadic influenza detections were reported in Lao People’s Democratic Republic and Thailand in recent weeks. ILI and SARI levels remained low or stable across reporting countries.

Countries in the temperate zone of the northern hemisphere

- In the temperate zone of the northern hemisphere, influenza activity remained at inter-seasonal level overall.
- In the countries of North America, influenza activity indicators, including the percent of tests positive for influenza, were at very low levels. In the United States of America, at the national level, ILI activity remained below the national baseline except in the 0-4 years old where activity was reported just above the baseline level. The percentage of deaths attributed to pneumonia, influenza or COVID-19 was above the epidemic threshold for pneumonia and influenza mortality established from historical data, likely related to the COVID-19.
- In Europe, influenza activity remained at inter-seasonal levels. In Belgium and Ireland, ILI activity increased and crossed the epidemic threshold earlier than in the previous years, likely reflecting increased SARS-CoV-2 circulation. Pooled mortality estimates from the EuroMOMO network returned to normal expected levels.
- In Central Asia, there were no influenza updates for this reporting period.
- In Northern Africa, there were no influenza updates for this reporting period.
- In Western Asia, there were no influenza detections and ILI levels were low across reporting countries. Of the samples tested for influenza in Oman and the United Arab Emirates none tested positive for influenza.
In East Asia, influenza illness indicators and influenza activity remained at inter-seasonal levels in most reporting countries. ILI activity appeared to increase in southern China and was reported at higher level than previous years.

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

![Graph showing number of specimens positive for influenza by subtype in northern hemisphere]

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

Data generated on 25/09/2020

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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 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](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](http://www.who.int/influenza/surveillance_monitoring/updates/latest_update_GIP_surveillance)


**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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