

SURVEILLANCE REPORT

Weekly influenza surveillance overview

11 October 2013

Main surveillance developments in week 40/2013 (30 September–6 October 2013)

This first page contains the main developments for this week and can be printed separately or together with the more detailed information that follows.

Week 40/2013 was the first week of the influenza surveillance season. During week 40/2013:

- All 26 reporting countries experienced low intensity of clinical influenza activity, 22 countries reported no geographic spread and 21 countries reported stable trends.
- Of 132 sentinel specimens tested by 15 countries, 3 (2%) were positive for influenza.
- One hospitalised laboratory-confirmed influenza case was reported by Ireland.

During the first week of the 2013–2014 influenza season, there was no evidence of any significant influenza activity in Europe.

Sentinel surveillance of influenza-like illness (ILI)/ acute respiratory infection (ARI): Low intensity was reported by all 26 reporting countries. For more information, [click here](#).

Virological surveillance: Fifteen countries tested sentinel specimens, of which 2% were positive for influenza. For more information, [click here](#).

Hospital surveillance of influenza laboratory-confirmed cases. Ireland reported one hospitalised case infected by a B virus. For more information, [click here](#).

Sentinel surveillance (ILI/ARI)

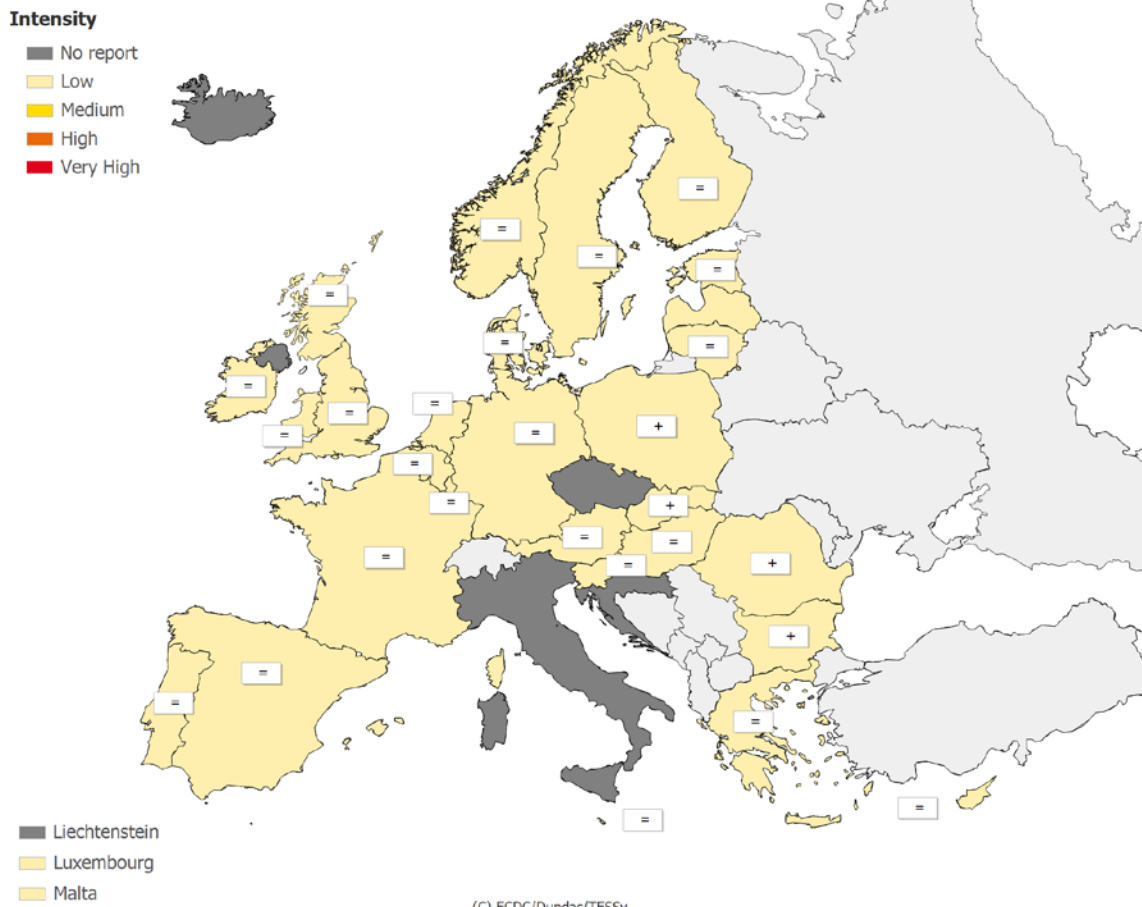
Weekly analysis – epidemiology

During week 40/2013, clinical data were reported by 26 countries, all of which experienced low-intensity influenza activity, the lowest category of reporting (Table 1, Map 1).

Geographic patterns of influenza activity were reported as local by Malta and sporadic by France, Lithuania, Norway and the UK (Scotland). All other countries reported no activity (Table 1, Map 2).

Increasing trends were reported by Bulgaria, Poland, Romania and Slovakia while all other countries reported stable trends (Table 1, Map 2).

Map 1. Intensity for week 40/2013

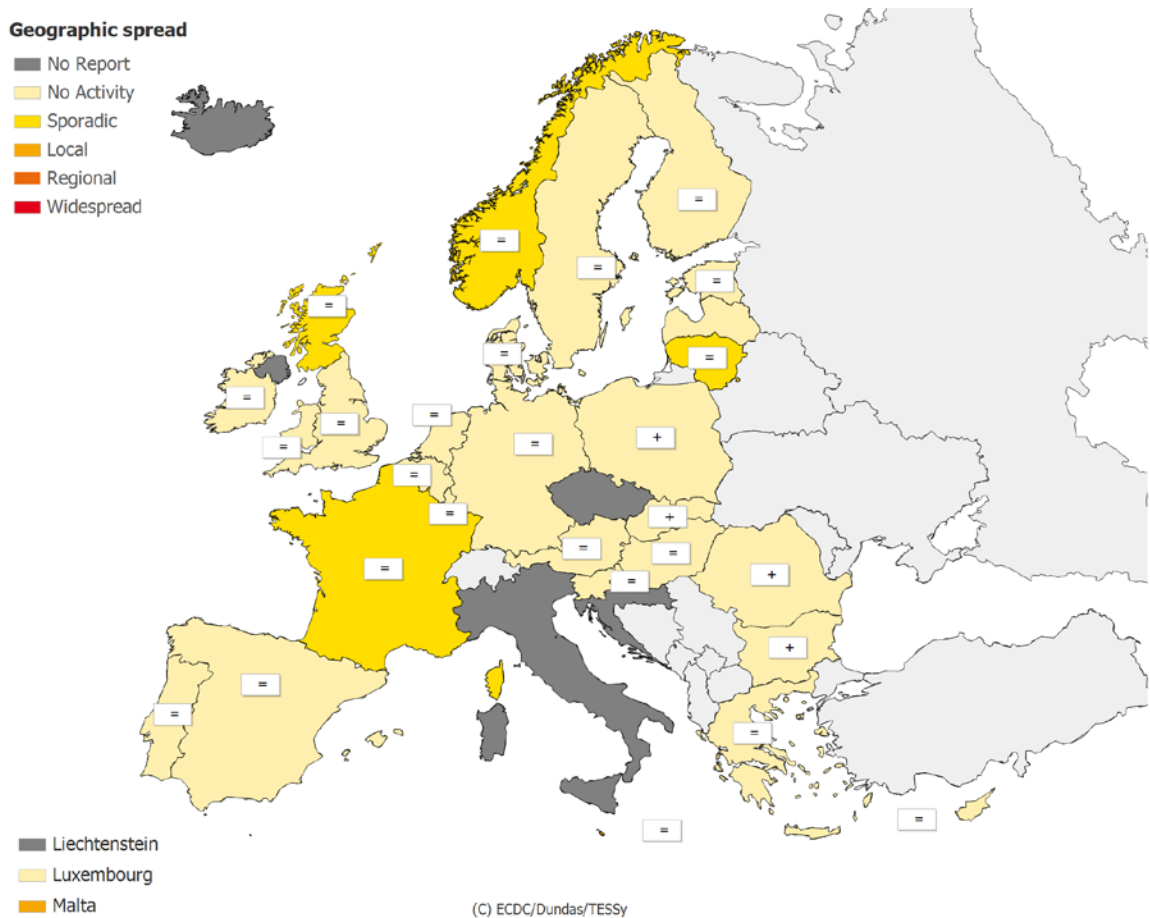


(C) ECDC/Dundas/TESSy

* A type/subtype is reported as dominant when at least ten samples have been detected as influenza positive in the country and of those > 40 % are positive for the type/subtype.
 Legend:

No report	Intensity level was not reported	+	Increasing clinical activity
Low	No influenza activity or influenza at baseline levels	-	Decreasing clinical activity
Medium	Usual levels of influenza activity	=	Stable clinical activity
High	Higher than usual levels of influenza activity		
Very high	Particularly severe levels of influenza activity		

Map 2. Geographic spread for week 40/2013



* A type/subtype is reported as dominant when at least ten samples have been detected as influenza positive in the country and of those > 40 % are positive for the type/subtype.
 Legend:

No report	Activity level was not reported	+	Increasing clinical activity
No activity	No evidence of influenza virus activity (clinical activity remains at baseline levels)	-	Decreasing clinical activity
Sporadic	Isolated cases of laboratory confirmed influenza infection	=	Stable clinical activity
Local outbreak	Increased influenza activity in local areas (e.g. a city) within a region, or outbreaks in two or more institutions (e.g. schools) within a region (laboratory confirmed)		
Regional activity	Influenza activity above baseline levels in one or more regions with a population comprising less than 50% of the country's total population (laboratory confirmed)		
Widespread	Influenza activity above baseline levels in one or more regions with a population comprising 50% or more of the country's population (laboratory confirmed)		

Table 1. Epidemiological and virological overview by country, week 40/2013

Country	Intensity	Geographic spread	Trend	No. of sentinel specimens	Dominant type	Percentage positive	ILI per 100 000	ARI per 100 000	Epidemiological overview	Virological overview
Austria	Low	No activity	Stable	0	None	0.0	532.6	-	Graphs	Graphs
Belgium	Low	No activity	Stable	3	None	33.3	13.8	1805.9	Graphs	Graphs
Bulgaria	Low	No activity	Increasing	0	None	0.0	-	529.4	Graphs	Graphs
Croatia				-	-	0.0	-	-		
Cyprus	Low	No activity	Stable	-	-	0.0	-*	-*	Graphs	Graphs
Czech Republic				-	-	0.0	-	-		
Denmark	Low	No activity	Stable	0	None	0.0	17.2	-	Graphs	Graphs
Estonia	Low	No activity	Stable	0	None	0.0	6.4	239.4	Graphs	Graphs
Finland	Low	No activity	Stable	7	None	0.0	-	-	Graphs	Graphs
France	Low	Sporadic	Stable	23	None	0.0	-	1566.9	Graphs	Graphs
Germany	Low	No activity	Stable	14	None	0.0	-	924.7	Graphs	Graphs
Greece	Low	No activity	Stable	-	-	0.0	96.4	-	Graphs	Graphs
Hungary	Low	No activity	Stable	-	None	0.0	54.7	-	Graphs	Graphs
Iceland				-	-	0.0	-	-		
Ireland	Low	No activity	Stable	7	None	14.3	4.3	-	Graphs	Graphs
Italy				-	-	0.0	-	-		
Latvia	Low	No activity	N.A.	0	None	0.0	0.0	1073.8	Graphs	Graphs
Lithuania	Low	Sporadic	Stable	1	None	0.0	0.5	625.4	Graphs	Graphs
Luxembourg	Low	No activity	Stable	1	None	0.0	-*	-*	Graphs	Graphs
Malta	Low	Local	Stable	0	None	0.0	-*	-*	Graphs	Graphs
Netherlands	Low	No activity	Stable	8	None	0.0	17.4	-	Graphs	Graphs
Norway	Low	Sporadic	Stable	1	None	0.0	18.4	-	Graphs	Graphs
Poland	Low	No activity	Increasing	2	None	0.0	243.8	-	Graphs	Graphs
Portugal	Low	No activity	Stable	0	None	0.0	0.0	-	Graphs	Graphs
Romania	Low	No activity	Increasing	3	-	0.0	1.1	794.1	Graphs	Graphs
Slovakia	Low	No activity	Increasing	0	None	0.0	154.2	1754.8	Graphs	Graphs
Slovenia	Low	No activity	Stable	4	None	0.0	0.0	786.2	Graphs	Graphs
Spain	Low	No activity	Stable	19	None	5.3	6.0	-	Graphs	Graphs
Sweden	Low	No activity	Stable	14	-	0.0	4.6	-	Graphs	Graphs
UK - England	Low	No activity	Stable	15	-	0.0	2.7	188.1	Graphs	Graphs
UK - Northern Ireland				1	None	0.0	-	-	Graphs	Graphs
UK - Scotland	Low	Sporadic	Stable	9	None	0.0	5.8	360.7	Graphs	Graphs
UK - Wales				-	-	0.0	-	-		
Europe				132		2.3			Graphs	Graphs

*Incidence per 100 000 is not calculated for these countries as no population denominator is provided. Liechtenstein does not report to the European Influenza Surveillance Network.

Description of the system

Surveillance is based on nationally organised sentinel networks of physicians, mostly general practitioners (GPs), covering at least 1 to 5% of the population in their countries. All EU/EEA Member States (except Liechtenstein) participate. Depending on their country's choice, each sentinel physician reports the weekly number of patients seen with ILI, ARI, or both to a national focal point. From the national level, both numerator and denominator data are then reported to the European Surveillance System (TESSy) database. Additional semi-quantitative indicators of intensity, geographic spread, and trend of influenza activity at the national level are also reported.

Virological surveillance

Weekly analysis – virology

For week 40/2013, 15 countries tested 132 sentinel specimens, of which three (2%) were positive for influenza virus. One was sub-typed as A(H1)pdm09 (Spain) and two were B viruses (Belgium and Ireland) for which the lineage is unknown (Tables 1 and 2).

In addition, 15 non-sentinel source specimens (e.g. specimens collected for diagnostic purposes in hospitals) were found to be positive for influenza, 11 type A and four type B viruses. Of four sub-typed influenza A viruses, three were A(H3) and one was A(H1)pdm09 (Table 2).

For week 40/2013, there was no report on antigenic and genetic characterisation or antiviral susceptibility against neuraminidase inhibitors.

More details on viruses circulating between 1 January and 31 May 2013 can be found in the [September report](#) prepared by the European Reference Laboratory Network for Human Influenza (ERLI-Net) coordination team.

For week 40/2013, seven countries reported 31 respiratory syncytial virus detections, remaining at the baseline level.

Table 2. Weekly and cumulative influenza virus detections by type, sub-type and surveillance system, week 40/2013

Virus type/subtype	Current period Sentinel	Current period Non-sentinel	Season Sentinel	Season Non-sentinel
Influenza A	1	11	1	11
A(H1)pdm09	1	1	1	1
A(H3)	0	3	0	3
A(sub-type unknown)	0	7	0	7
Influenza B	2	4	2	4
B(Vic) lineage	0	0	0	0
B(Yam) lineage	0	0	0	0
Unknown lineage	2	4	2	4
Total influenza	3	15	3	15

Note: A(H1)pdm09 and A(H3) include both N-sub-typed and non-N-sub-typed viruses

Description of the system

According to the nationally defined sampling strategy, sentinel physicians take nasal or pharyngeal swabs from patients with ILI, ARI or both and send the specimens to influenza-specific reference laboratories for virus detection, (sub-)typing, antigenic or genetic characterisation and antiviral susceptibility testing.

For details of the current virus strains recommended by WHO for vaccine preparation [click here](#).

Hospital surveillance – severe influenza disease

Weekly analysis of hospitalised laboratory-confirmed influenza cases

In week 40/2012, one hospitalised laboratory-confirmed influenza case was reported by Ireland. The patient was a 31-year-old pregnant woman infected by an influenza B virus.

Table 3. Cumulative number of hospitalised laboratory-confirmed influenza cases, week 40/2013

Country	Number of cases	Incidence of cases per 100 000 population	Number of fatal cases reported	Incidence of fatal cases per 100 000 population	Estimated population covered
Ireland	1				
Total	1		0		

Table 4. Number of hospitalised laboratory-confirmed influenza cases by influenza type and sub-type, week 40/2013 and cumulative for the season

Pathogen	Number of cases during current week	Cumulative number of cases since the start of the season
Influenza A		
A(H1)pdm09		
A(H3)		
A(sub-typing not performed)		
Influenza B	1	1
Total	1	1

The EuroMOMO mortality monitoring system

For week 40/2013, analysis of pooled data from 16 countries or regions showed that overall all-cause mortality has been – apart from excess mortality peaks in single countries during the summer period – around normal levels since the end of the winter season 2012/2013.

Further details are available on <http://www.euromomo.eu/>

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Maps and commentary published in this Weekly Influenza Surveillance Overview (WISO) do not represent a statement on the part of ECDC or its partners on the legal or border status of the countries and territories shown.

All data published in the WISO are up-to-date on the day of publication. Past this date, however, published data should not be used for longitudinal comparisons as countries tend to retrospectively update their database.

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