

Very low levels of influenza activity in Europe



This is the first Weekly Electronic Bulletin of the 2001-2002 influenza season. It mainly covers week 42/2001, but will also comment on influenza activity in weeks 40/2001 and 41/2001. Maps outlining influenza activity in weeks 40/2001 and 41/2001 can be viewed on the EISS web site (see "Maps").

Eight networks reported clinical influenza activity to the European Influenza Surveillance Scheme (EISS) in week 42/2001. Seven networks reported no influenza activity (Belgium, Denmark, England, Germany, Ireland, Italy and Switzerland) and a local outbreak of influenza was reported in Wales. The intensity of activity in all networks was low.

In weeks 40/2001 and 41/2001, the Czech Republic reported sporadic influenza activity and all of the other EISS networks reported no influenza activity.

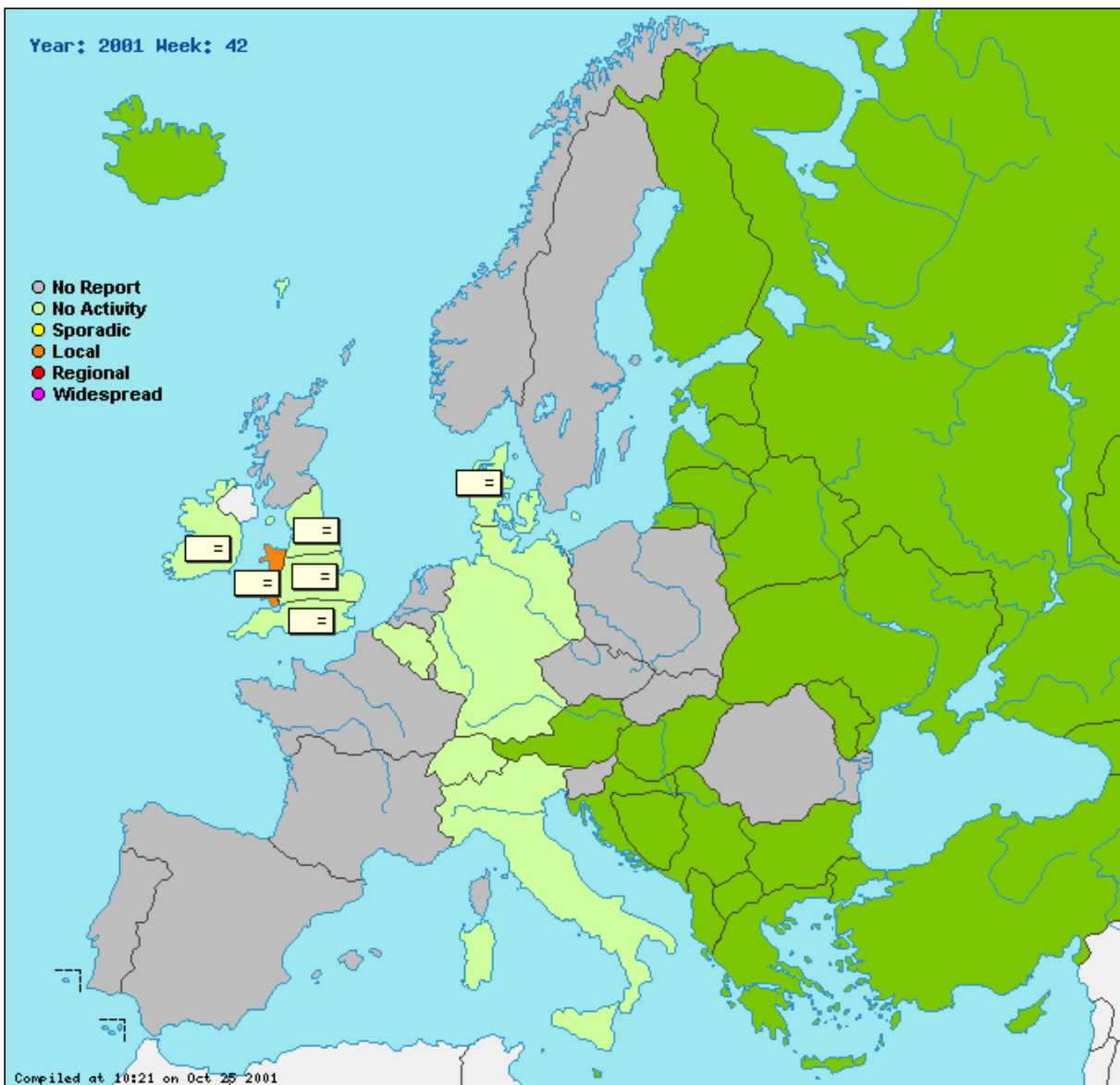
There are indications that influenza A and B viruses are circulating in Europe. The surveillance network in the Czech Republic reported two cases of influenza A in week 40/2001 and one case of influenza B in week 41/2001 (all reported by sentinel physicians). The GROG surveillance network in France reported a case of influenza B (confirmed by immunofluorescence) in week 40/2001 (a hospitalised baby) and 4 cases of influenza were detected by sentinel physicians in week 42/2001 using a rapid influenza surveillance test (source: GROG).

The Weekly Electronic Bulletin presents and comments influenza activity in the 18 European countries (20 networks) which are members of EISS. In week 42/2001, nine countries (ten networks) reported influenza activity to EISS. Eight networks reported clinical data and eight reported virological data.

Map

The map presents the geographical spread as assessed by each of the networks.

Clicking on the map will, if available, take you through to the national web site. If 'regional' activity is reported, a pop-up text box will appear which describes the activity in greater detail.



A = Dominant virus A
H1N1 = Dominant virus A(H1N1)
H3N2 = Dominant virus A(H3N2)
H1N2 = Dominant virus A(H1N2)
B = Dominant virus B
A & B = Dominant virus A & B

= : stable clinical activity
+ : increasing clinical activity
- : decreasing clinical activity

Low = no influenza activity or influenza at baseline levels
Medium = usual levels of influenza activity
High = higher than usual levels of influenza activity
Very high = particularly severe levels of influenza activity

No activity = no evidence of influenza virus activity (clinical activity remains at baseline levels)
Sporadic = isolated cases of laboratory confirmed influenza infection
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.

Country comments (where available)

Switzerland

No influenza virus has been detected last week. Very few samples arrive at our laboratory.

Table and graphs (where available)

Network - region	Geographic Spread	Intensity	Sentinel swabs	Percentage positive	Dominant type	Rate	Numerator / denominator	Network graphs
Belgium	None		0	0%	None	401.7/100,000	ILI / Population	Click here
Denmark	None	Low	0	0%	None		ILI / Population	Click here
England Central	None	Low	0	0%	None	15.1/100,000	ILI / Population	Click here
England North	None	Low	0	0%	None	12.5/100,000	ILI / Population	Click here
England South	None	Low	0	0%	None	8.2/100,000	ILI / Population	Click here
France South			0	0%	None		ARI / Population	Click here
Germany	None		0	0%	None		ARI / Population	Click here
Ireland	None		0	0%	None	10.0/100,000	ILI / Population	Click here
Italy	None						ILI / Population	Click here
Netherlands			0	0%	None		ILI / Population	Click here
Switzerland	None		0	0%	None		ILI / Population	Click here

Preliminary data

Intensity: Low = no influenza activity or influenza activity at baseline level; Medium= usual levels of influenza activity; High = higher than usual levels of influenza activity; Very high = particularly severe levels of influenza activity.

Geographical spread: No activity = no laboratory-confirmed cases, or evidence of increased or unusual respiratory disease activity; Sporadic = isolated cases of laboratory-confirmed influenza infection; Localized = limited to one administrative unit in the country (or reporting site) only; Regional = appearing in multiple but <50% of the administrative units of the country (or reporting sites); Widespread = appearing in >=50% of the administrative units of the country (or reporting sites).

Impact: Low = demands on health-care services are not above usual levels; Moderate = demands on health-care services are above the usual demand levels but still below the maximum capacity of those services; Severe = demands on health care services exceed the capacity of those services.

Trend: Increasing = evidence that the level of respiratory disease activity is increasing compared with the previous week; Stable = evidence that the level of respiratory disease activity is unchanged compared with the previous week; Decreasing = evidence that the level of respiratory disease activity is decreasing compared with the previous week.

Percentage positive: percentage of sentinel swabs that tested positive for influenza A or B

Dominant type: this assessment is based on data from sentinel and non-sentinel sources

ARI: acute respiratory infection

ILI: influenza-like illness

Sentinel SARI: severe acute respiratory illness

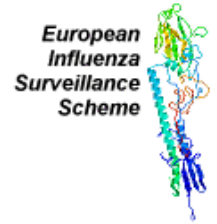
Population: per 100,000 population

*: the value in the table for these countries reflects the percent (e.g. from 0.0 to 100.0) of total outpatient encounters that were due to ILI/ARI rather than a consultation rate per 100,000

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Low levels of influenza activity in Europe



Eleven networks in the European Influenza Surveillance Scheme (EISS) reported no influenza activity in week 43/2001. One network - the Czech Republic - reported sporadic influenza activity. The sentinel physicians in this network reported two cases of laboratory confirmed influenza A and one case of influenza B.

“Near patient tests”:

Some of the surveillance networks in EISS are using “near patient tests” for surveillance purposes. These tests are done within a physician's office and have been integrated into the surveillance networks to support the clinical diagnosis and management of influenza patients. They can also help to speed up the detection of influenza viruses circulating in the general population.

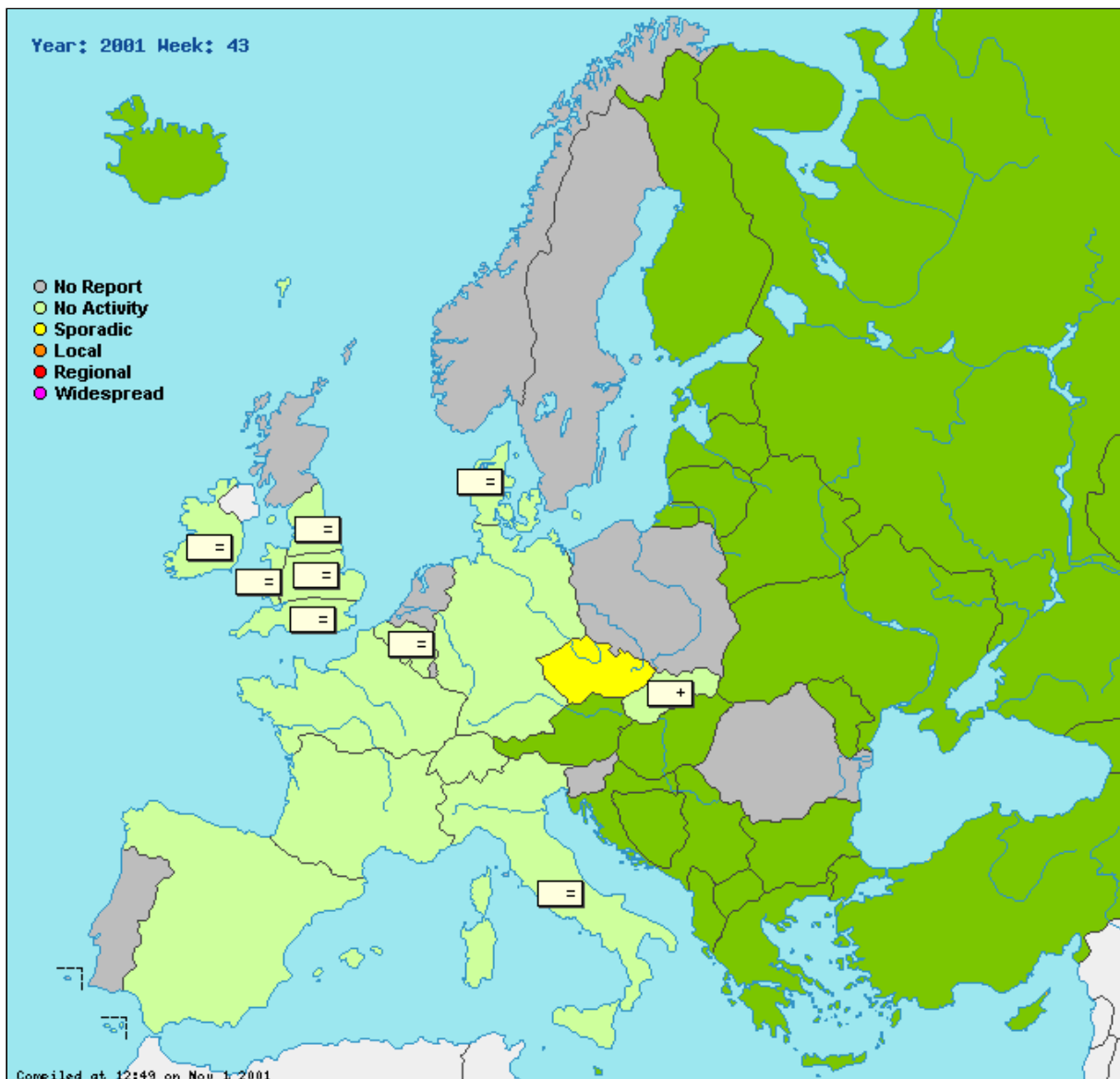
The French GROG surveillance network and the Swiss surveillance network reported two positive “near patient test” results during week 43/2001: one (a 5-year-old child) in France South (source: GROG) and the other in the southern, Italian-speaking part of Switzerland. Both networks use a “near patient test” that does not distinguish between an influenza A and B infection, and has a sensitivity of about 70%. A national reference laboratory must validate these results before they are recorded in the EISS database.

The Weekly Electronic Bulletin presents and comments influenza activity in the 18 European countries (20 networks) that are members of EISS. In week 43/2001, twelve countries (fourteen networks) reported influenza activity to EISS. Twelve networks reported clinical data and nine reported virological data.

Map

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Country comments (where available)

Czech Republic

Two cases of influenza A (serology-CFR) were detected in north Bohemia - both cases are from children 5 years old. One case of flu B (antigen detectin by menas of ELISA)from Prague region (adult man from hospital).

Spain

No influenza activity

No influenza virus isolated yet

Switzerland

The number of samples received at the laboratory increased a little bit. One influenza virus has been detected with rapid test in the region 6, in the city of Agno.

Table and graphs (where available)

Network - region	Geographic Spread	Intensity	Sentinel swabs	Percentage positive	Dominant type	Rate	Numerator / denominator	Network graphs
Belgium	None		1	0%	None	50.6/100,000	ILI / Population	Click here
Czech Republic	Sporadic		14	7.1%	None	1355.2/100,000	ARI / Population	Click here
Denmark	None	Low	0	0%	None		ILI / Population	Click here
England Central	None	Low	2	0%	None	10.4/100,000	ILI / Population	Click here
England North	None	Low				12.6/100,000	ILI / Population	Click here
England South	None	Low	0	0%	None	4.6/100,000	ILI / Population	Click here
France North	None						ARI / Population	Click here
France South	None						ARI / Population	Click here
Germany	None						ARI / Population	Click here
Ireland	None		1	0%	None	4761.9/100,000	ILI / Population	Click here
Italy	None	Low				23.0/100,000	ILI / Population	Click here
Netherlands			0	0%	None		ILI / Population	Click here
Scotland			1	0%	None		ILI / Population	Click here
Slovakia	None					806.7/100,000	ILI / Population	Click here
Spain	None		4	0%	None	10.0/100,000	ILI / Population	Click here
Switzerland	None		5	0%	None	228.3/100,000	ILI / Population	Click here
Wales	None	Low				1.4/100,000	ILI / Population	Click here

Preliminary data

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Sentinel SARI: severe acute respiratory illness

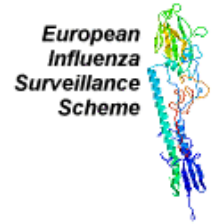
Population: per 100,000 population

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Influenza activity remains at low levels in Europe



The Weekly Electronic Bulletin presents and comments influenza activity in the 18 European countries (20 networks) that are members of the European Influenza Surveillance Scheme (EISS). In the week 44/2001, ten networks reported "no influenza activity" (i.e. clinical activity remains at baseline levels) to EISS and twelve networks reported that no dominant influenza virus type was circulating in the network populations.

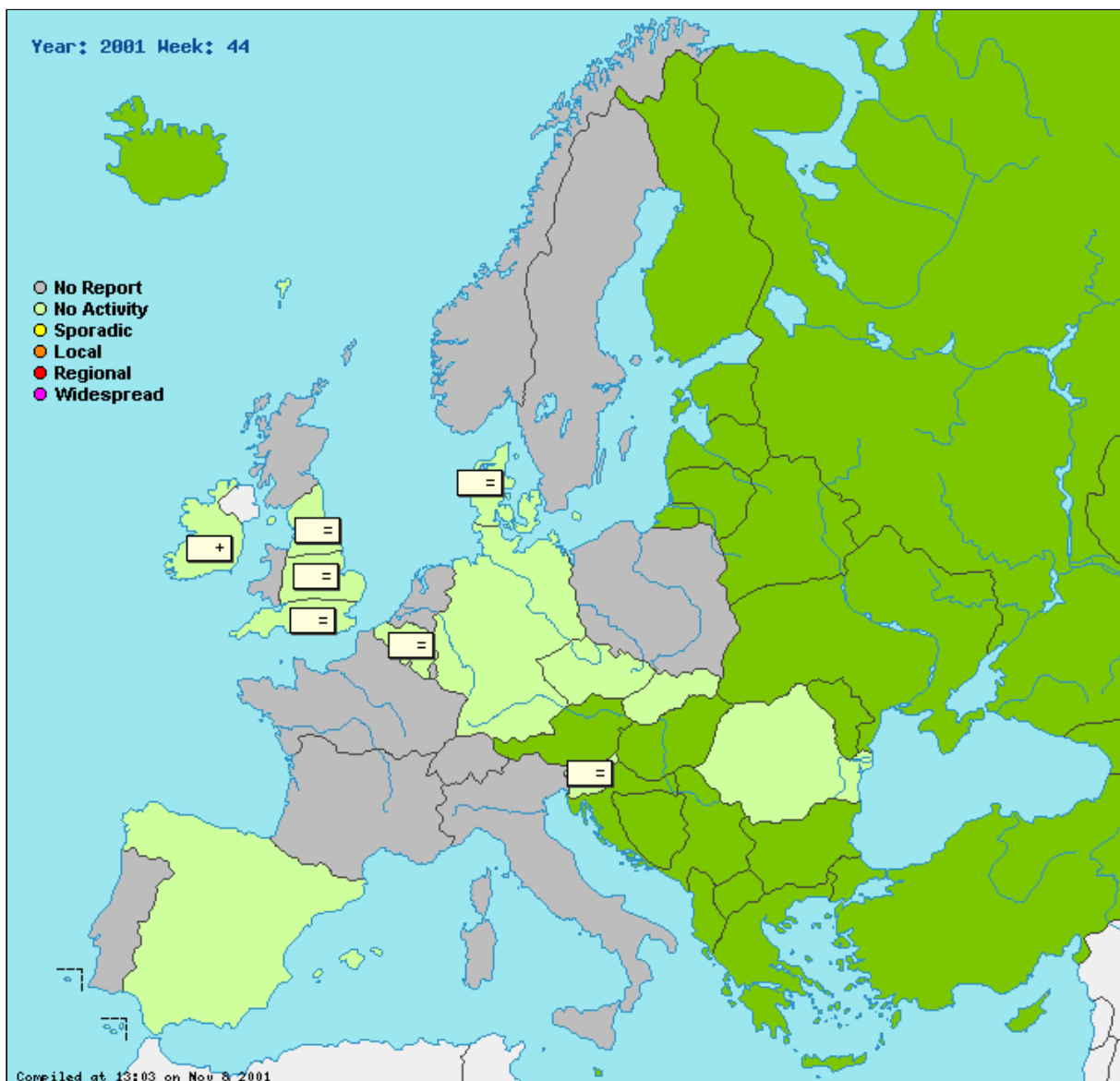
The Swiss network, which is using "near patient tests" for surveillance purposes, reported a second positive case detected by this test (that does not distinguish between influenza type A and B). The National Reference Laboratory is in the process of validating these results.

Although there are indications that influenza viruses are already circulating, influenza activity still remains at a low level in Europe.

Map

The map presents the geographical spread as assessed by each of the networks.

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Country comments (where available)

Slovakia

The morbidity of ILI is on seasonal level. Reported incidence reached 559,0/100000. Compare to the previous week, it was 30,7% decrease due to autumn holiday. No influenza detection so far.

Spain

No influenza activity

No influenza virus isolated yet

Switzerland

Another influenza virus has been detected with rapid test. The patient is living in the region 4, in the city of Ibach (SZ).

This is the second case of rapid test detection since the beginning of the surveillance period. No influenza virus has been detected with cell culture. Medical contact for influenza-like virus remained at a low level last week.

Table and graphs (where available)

Network - region	Geographic Spread	Intensity	Sentinel swabs	Percentage positive	Dominant type	Rate	Numerator / denominator	Network graphs
Belgium	None		2	0%	None	43.1/100,000	ILI / Population	Click here
Czech Republic	None		28	0%	None	1309.5/100,000	ARI / Population	Click here
Denmark	None	Low	2	0%	None		ILI / Population	Click here
England Central	None	Low	0	0%	None	11.6/100,000	ILI / Population	Click here
England North	None	Low				17.7/100,000	ILI / Population	Click here
England South	None	Low	0	0%	None	11.1/100,000	ILI / Population	Click here
France South			29	0%	None		ARI / Population	Click here
Germany	None		69	0%	None		ARI / Population	Click here
Ireland	None		2	0%	None	19.6/100,000	ILI / Population	Click here
Netherlands			0	0%	None		ILI / Population	Click here
Romania	None					248.2/100,000	ARI / Population	Click here
Slovakia	None					559.0/100,000	ILI / Population	Click here
Slovenia	None		0	0%	None	1.3/100,000	ILI / Population	Click here
Spain	None		3	0%	None	3.4/100,000	ILI / Population	Click here
Switzerland			8	0%	None		ILI / Population	Click here
Wales			0	0%	None		ILI / Population	Click here

Preliminary data

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Percentage positive: percentage of sentinel swabs that tested positive for influenza A or B

Dominant type: this assessment is based on data from sentinel and non-sentinel sources

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Population: per 100,000 population

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Low levels of influenza activity in Europe

In week 45/2001, seventeen networks reported "no influenza activity" to EISS (i.e. clinical activity remained at baseline levels), and one regional network – France South – reported "sporadic" influenza activity.

From the networks that reported virological data, Norway confirmed an influenza A virus infection in a one-year-old boy. The swab was obtained from a non-sentinel source and was the first detection of influenza in Norway this season.

Although there are indications that influenza viruses are circulating, influenza activity remains at a low level in the majority of the European countries.

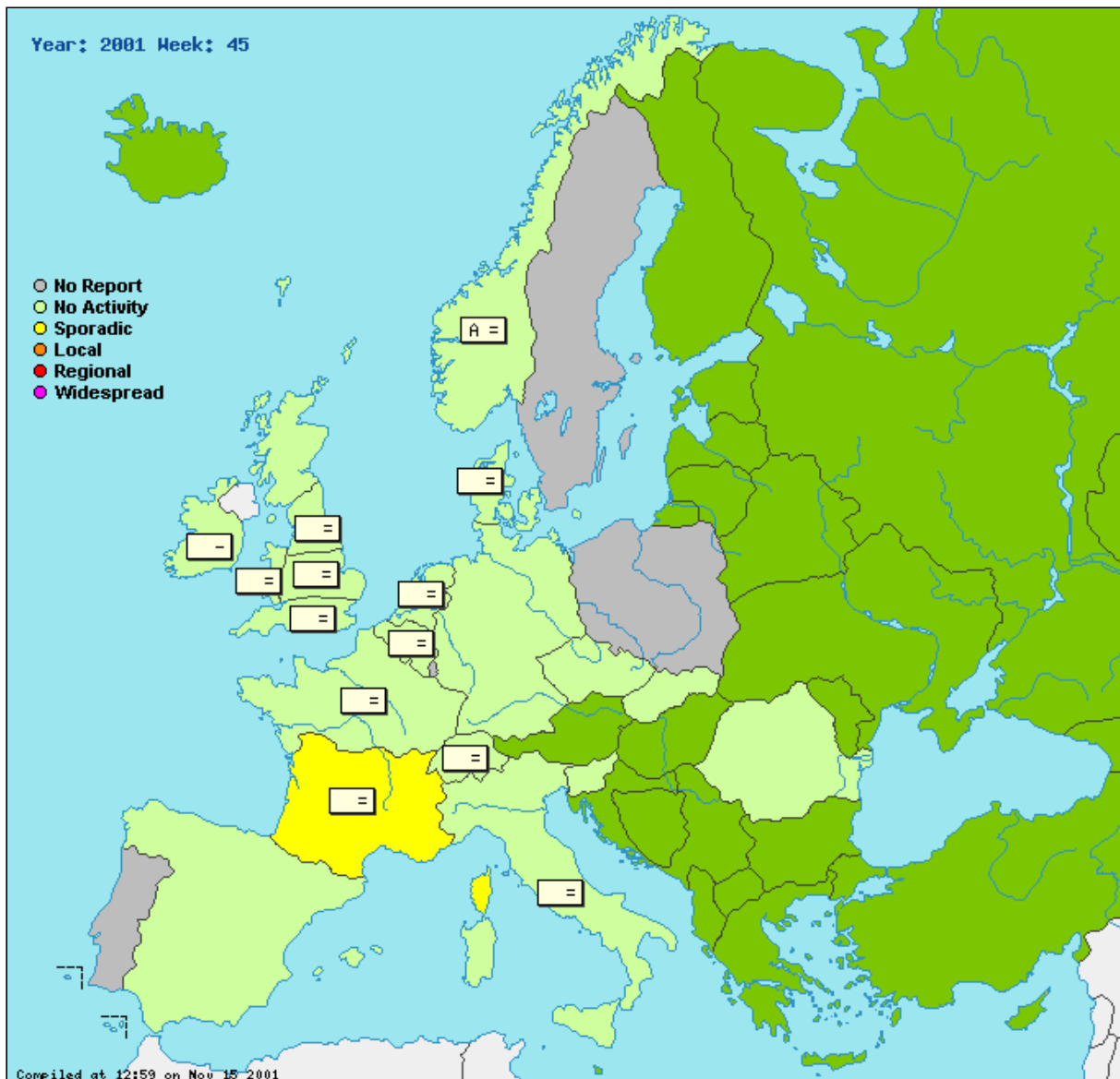
Erratum:

There is an error in this week's bulletin table (see "Table and graphs" below). The correct "Rate" for Germany is 1402/100,000.

Map

The map presents the geographical spread as assessed by each of the networks.

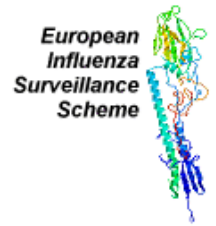
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Widespread = influenza activity above baseline levels in one or more regions with a population comprising 50% or more of the country's population. Laboratory confirmed.

Country comments (where available)

Czech Republic

Total morbidity at non-epidemic level.

One case of flu A by means of serology (CFR), from north Bohemia(17 years old patient, dg influenza)

France North

No more new case of influenza in the North of France. Since the beginning of the season, 6 cases have been detected in the North of France. 1 of them has been identified as a similar strain to B/Sichuan/379/99. Other cases are untyped (detection with

France South

3 new cases of untyped flu detected with

Netherlands

No influenza virus isolated yet

Spain

No influenza virus isolated yet

Switzerland

Last week, no further influenza virus has been detected neither with cell culture nor with the rapid test. However, the amount of samples received in the laboratory increased slightly since the beginning of this week.

Table and graphs (where available)

Network - region	Geographic Spread	Intensity	Sentinel swabs	Percentage positive	Dominant type	Rate	Numerator / denominator	Network graphs
Belgium	None					125.6/100,000	ILI / Population	Click here
Czech Republic	None		52	0%	None	1384.1/100,000	ARI / Population	Click here
Denmark	None	Low	6	0%	None		ILI / Population	Click here
England Central	None	Low	0	0%	None	16.7/100,000	ILI / Population	Click here
England North	None	Low	6	0%	None	22.8/100,000	ILI / Population	Click here
England South	None	Low	0	0%	None	11.5/100,000	ILI / Population	Click here
France North	None	Low	24	0%	None		ARI / Population	Click here
France South	Sporadic	Low	41	0%	None		ARI / Population	Click here
Germany	None					958773.2/100,000	ARI / Population	Click here
Ireland	None		6	0%	None	7.8/100,000	ILI / Population	Click here
Italy	None	Low	0	0%	None	42.4/100,000	ILI / Population	Click here
Netherlands	None	Low	1	0%	None		ILI / Population	Click here
Norway	None	Low			Type A		ILI / Population	Click here
Portugal			3	0%	None		ILI / Population	Click here
Romania	None					236.8/100,000	ARI / Population	Click here
Scotland	None		0	0%	None	18.2/100,000	ILI / Population	Click here
Slovakia	None					843.1/100,000	ILI / Population	Click here
Slovenia	None		6	0%		3.6/100,000	ILI / Population	Click here
Spain	None		32	0%	None	14.3/100,000	ILI / Population	Click here
Switzerland	None	Low	16	0%	None		ILI / Population	Click here
Wales	None	Low				2.8/100,000	ILI / Population	Click here

Preliminary data

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Influenza activity in Europe remains at low levels



Sentinel networks in Europe reported low levels of influenza activity in week 46/2001. Fifteen networks reported 'no influenza activity'. France South notified a positive 'near patient test' and 'sporadic influenza activity'. The Czech Republic also reported 'sporadic influenza activity', with 6.7% of 75 sentinel swabs testing positive (four for influenza A and one for influenza B).

Influenza virus infections were detected/confirmed in Portugal (one case of influenza A(H3N2)), Spain (one case of influenza A) and England Central (one case of influenza B) in week 46/2001. The swabs were obtained from non-sentinel sources in all networks and these were the first influenza virus detection in Portugal (a 29-year-old male) and in Spain (a 22-year-old male) this season. No influenza viruses were detected/isolated in the other networks, either by culture or 'near patient test'.

Although there are indications that influenza viruses are circulating in some countries, this has not had a significant effect on levels of influenza morbidity in Europe.

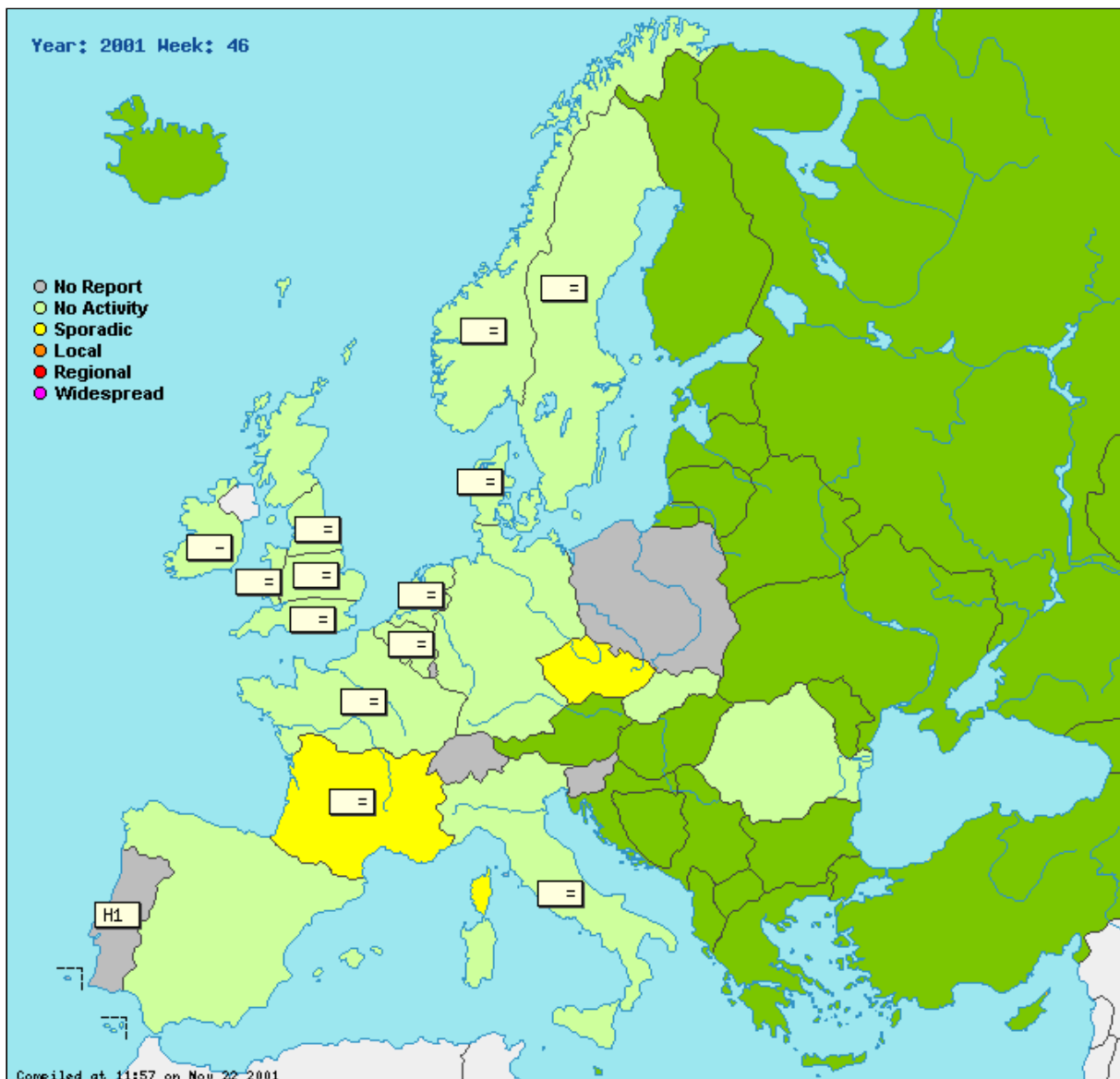
Erratum:

There is an error in this week's map and table (see below). The correct 'Dominant type' for Portugal is 'Type A, Subtype H3N2'. Also, in Spain, an influenza virus A was isolated in week 46/2001.

Map

The map presents the geographical spread as assessed by each of the networks.

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Low = no influenza activity or influenza at baseline levels
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No activity = no evidence of influenza virus activity (clinical activity remains at baseline levels)
Sporadic = isolated cases of laboratory confirmed influenza infection
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.

Country comments (where available)

France North

no more detection of influenza in the North of France.

France South

One more detection of Flu (with a near patient test) on a 13 yrs girl in Port de Bouc, near Marseille.

Italy

There is a slight increase of ILI incidence for age group 0-14 years

Spain

No influenza virus isolated yet

Switzerland

No influenza virus was found so far in Switzerland by the culture method. Medical contacts for influenza-like illness are normal level for the season and have been stable during the last weeks.

Table and graphs (where available)

Network - region	Geographic Spread	Intensity	Sentinel swabs	Percentage positive	Dominant type	Rate	Numerator / denominator	Network graphs
Belgium	None					59.8/100,000	ILI / Population	Click here
Czech Republic	Sporadic		75	6.7%	None	1495.1/100,000	ARI / Population	Click here
Denmark	None	Low	6	0%	None		ILI / Population	Click here
England Central	None	Low	9	0%	None	17.1/100,000	ILI / Population	Click here
England North	None	Low				16.7/100,000	ILI / Population	Click here
England South	None	Low	4	0%	None	57.0/100,000	ILI / Population	Click here
France North	None	Low					ARI / Population	Click here
France South	Sporadic	Low	71	0%	None		ARI / Population	Click here
Germany	None		84	0%	None	1477.0/100,000	ARI / Population	Click here
Ireland	None					4.6/100,000	ILI / Population	Click here
Italy	None	Low	0	0%	None	48.4/100,000	ILI / Population	Click here
Netherlands	None	Low					ILI / Population	Click here
Norway	None	Low	0	0%	None		ILI / Population	Click here
Portugal			5	0%	Type A, Subtype H1N1		ILI / Population	Click here
Romania	None					238.0/100,000	ARI / Population	Click here
Scotland	None		0	0%	None	27.7/100,000	ILI / Population	Click here
Slovakia	None					874.1/100,000	ILI / Population	Click here
Slovenia			9	0%	None		ILI / Population	Click here
Spain	None		28	0%	None	15.7/100,000	ILI / Population	Click here
Sweden	None	Low					ILI / Population	Click here
Switzerland			14	0%	None		ILI / Population	Click here
Wales	None	Low				0.9/100,000	ILI / Population	Click here

Preliminary data

Intensity: Low = no influenza activity or influenza activity at baseline level; Medium = usual levels of influenza activity; High = higher than usual levels of influenza activity; Very high = particularly severe levels of influenza activity.

Geographical spread: No activity = no laboratory-confirmed cases, or evidence of increased or unusual respiratory disease activity; Sporadic = isolated cases of laboratory-confirmed influenza infection; Localized = limited to one administrative unit in the country (or reporting site) only; Regional = appearing in multiple but <50% of the administrative units of the country (or reporting sites); Widespread = appearing in >=50% of the administrative units of the country (or reporting sites).

Impact: Low = demands on health-care services are not above usual levels; Moderate = demands on health-care services are above the usual demand levels but still below the maximum capacity of those services; Severe = demands on health care services exceed the capacity of those services.

Trend: Increasing = evidence that the level of respiratory disease activity is increasing compared with the previous week; Stable = evidence that the level of respiratory disease activity is unchanged compared with the previous week; Decreasing = evidence that the level of respiratory disease activity is decreasing compared with the previous week.

Percentage positive: percentage of sentinel swabs that tested positive for influenza A or B

Dominant type: this assessment is based on data from sentinel and non-sentinel sources

ARI: acute respiratory infection

ILI: influenza-like illness

Sentinel SARI: severe acute respiratory illness

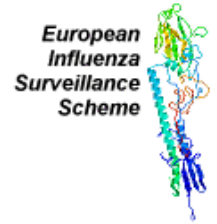
Population: per 100,000 population

*: the value in the table for these countries reflects the percent (e.g. from 0.0 to 100.0) of total outpatient encounters that were due to ILI/ARI rather than a consultation rate per 100,000

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Influenza in Europe still below the epidemic threshold



Fourteen networks reported no influenza activity in week 47. Only in France and Slovenia was sporadic activity observed.

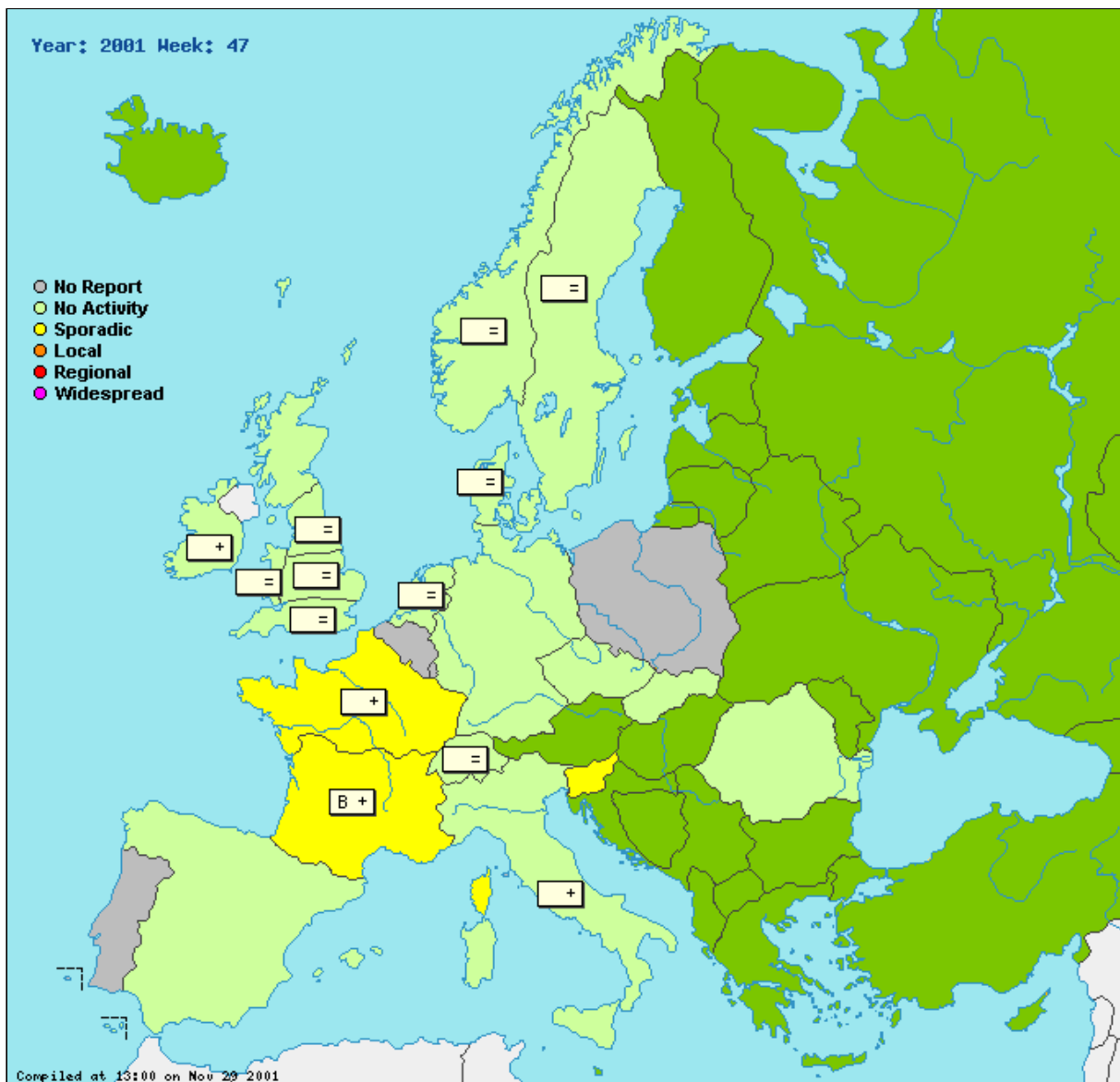
From the networks that reported virological data, France confirmed an influenza B virus infection in a sentinel swab. No influenza viruses were isolated from sentinel swabs in the other networks.

The level of ILI and ARI morbidity remains below the threshold levels throughout Europe and the influenza viruses A and B isolated/detected until now resemble the strains in the vaccine for this season.

Map

The map presents the geographical spread as assessed by each of the networks.

Clicking on the map will, if available, take you through to the national web site. If 'regional' activity is reported, a pop-up text box will appear which describes the activity in greater detail.



A = Dominant virus A
 H1N1 = Dominant virus A(H1N1)
 H3N2 = Dominant virus A(H3N2)
 H1N2 = Dominant virus A(H1N2)
 B = Dominant virus B
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 - : decreasing clinical activity

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 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.

Country comments (where available)

Belgium

Slight increase of the ALI but still under the epidemic threshold.

France North

1 detection of untyped flu in Paris. ARI rate in general practice is increasing (+ 30%) in Bretagne and Ile-de-France region. Patients who need to be immunization against flu must be vaccinated now.

France South

2 new cases of flu B detected in Lyon and Bordeaux, several detections of untyped flu with GROG surveillance : 2 sporadic cases of influenza B in Rhône-Alpes (week 46) and Aquitaine (week 47) regions isolated from two teenagers.

Netherlands

The first influenza A/H3N2 virus was detected in a sample taken in week 43 from a hospitalized 64-year old man. The virus resembles the strain in the vaccine according to the results of the haemagglutination inhibition test

Spain

No influenza virus isolated this week

Table and graphs (where available)

Network - region	Geographic Spread	Intensity	Sentinel swabs	Percentage positive	Dominant type	Rate	Numerator / denominator	Network graphs
Belgium			17	0%	None		ILI / Population	Click here
Czech Republic	None		32	0%	None		ARI / Population	Click here
Denmark	None	Low	10	0%	None		ILI / Population	Click here
England Central	None	Low	7	0%	None	17.5/100,000	ILI / Population	Click here
England North	None	Low	3	0%	None	17.6/100,000	ILI / Population	Click here
England South	None	Low	2	0%	None	13.1/100,000	ILI / Population	Click here
France North	Sporadic	Low	0	0%	None		ARI / Population	Click here
France South	Sporadic	Low	68	1.5%	Type B		ARI / Population	Click here
Germany	None		79	0%	None	1519.0/100,000	ARI / Population	Click here
Ireland	None		10	0%	None	16.6/100,000	ILI / Population	Click here
Italy	None	Low	2	0%	None	61.3/100,000	ILI / Population	Click here
Netherlands	None	Low	0	0%	None		ILI / Population	Click here
Norway	None	Low					ILI / Population	Click here
Portugal			6	0%	None		ILI / Population	Click here
Romania	None					249.3/100,000	ARI / Population	Click here
Scotland	None		0	0%	None	4.0/100,000	ILI / Population	Click here
Slovakia	None					947.5/100,000	ILI / Population	Click here
Slovenia	Sporadic		10	0%	None	6.5/100,000	ILI / Population	Click here
Spain	None		38	0%	None	17.2/100,000	ILI / Population	Click here
Sweden	None	Low				1.1/100,000	ILI / Population	Click here
Switzerland	None	Low					ILI / Population	Click here
Wales	None	Low	0	0%	None	0.5/100,000	ILI / Population	Click here

Preliminary data

Intensity: Low = no influenza activity or influenza activity at baseline level; Medium = usual levels of influenza activity; High = higher than usual levels of influenza activity; Very high = particularly severe levels of influenza activity.

Geographical spread: No activity = no laboratory-confirmed cases, or evidence of increased or unusual respiratory disease activity; Sporadic = isolated cases of laboratory-confirmed influenza infection; Localized = limited to one administrative unit in the country (or reporting site) only; Regional = appearing in multiple but <50% of the administrative units of the country (or reporting sites); Widespread = appearing in >=50% of the administrative units of the country (or reporting sites).

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Trend: Increasing = evidence that the level of respiratory disease activity is increasing compared with the previous week; Stable = evidence that the level of respiratory disease activity is unchanged compared with the previous week; Decreasing = evidence that the level of respiratory disease activity is decreasing compared with the previous week.

Percentage positive: percentage of sentinel swabs that tested positive for influenza A or B

Dominant type: this assessment is based on data from sentinel and non-sentinel sources

ARI: acute respiratory infection

ILI: influenza-like illness

Sentinel SARI: severe acute respiratory illness

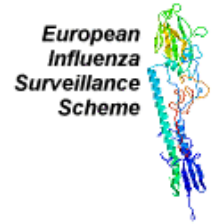
Population: per 100,000 population

*: the value in the table for these countries reflects the percent (e.g. from 0.0 to 100.0) of total outpatient encounters that were due to ILI/ARI rather than a consultation rate per 100,000

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Influenza activity still at low levels in Europe



In week 48/2001, twelve European networks reported no influenza activity, while France and Slovenia still confirmed sporadic activity.

Only two networks reported virologically confirmed cases of influenza: France, with a first sentinel case of influenza A(H3N2), and Romania, where the first confirmed case of the season is an A(H1N1) virus.

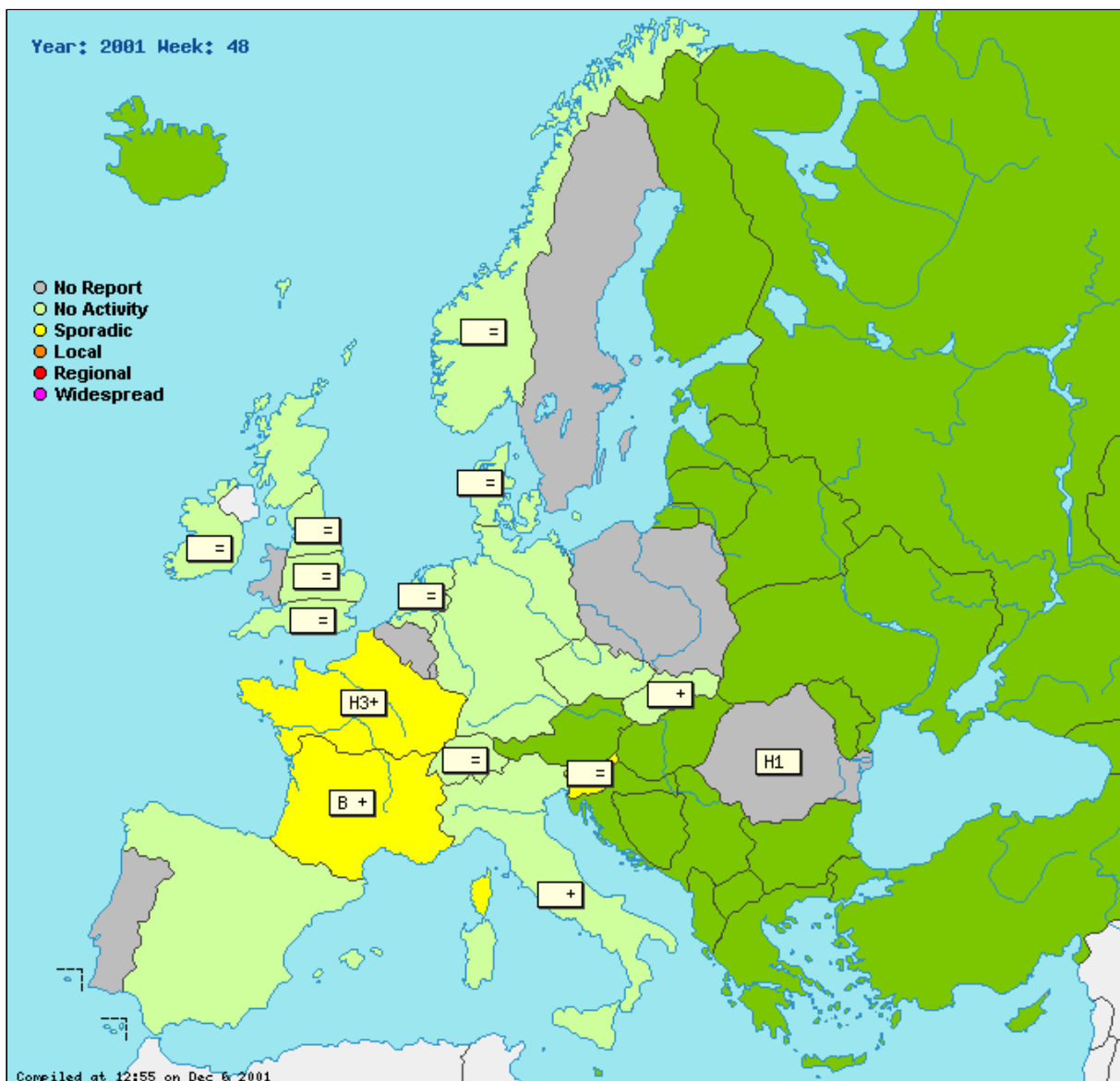
Influenza activity stays below the epidemic threshold in all the reporting countries, but France and Slovakia reported slightly increased levels of influenza morbidity.

In week 48/2001, sixteen countries (seventeen networks) reported information on influenza activity to EISS. Fourteen networks reported clinical data and fourteen reported virological data.

Map

The map presents the geographical spread as assessed by each of the networks.

Clicking on the map will, if available, take you through to the national web site. If 'regional' activity is reported, a pop-up text box will appear which describes the activity in greater detail.



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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.

Country comments (where available)

France North

First confirmed case of A(H3N2) on a 19 yrs student living in Ile-de-France region.

First influenza A(H3N2) influenza isolate from a 19 year old student who consulted a sentinel GP. Other ILI among class mates. The isolate is antigenically related to the A/PANAMA/2007/99(H3N2) strain.

France South

Health activity indicators are increasing slowly.

Influenza B viruses are related to the vaccine prototype B/Sichuan/379/99.

Table and graphs (where available)

Network - region	Geographic Spread	Intensity	Sentinel swabs	Percentage positive	Dominant type	Rate	Numerator / denominator	Network graphs
Belgium			6	0%	None		ILI / Population	Click here
Czech Republic	None		40	0%	None		ARI / Population	Click here
Denmark	None	Low	4	0%	None	68.4/100,000	ILI / Population	Click here
England Central	None	Low	19	0%	None	22.7/100,000	ILI / Population	Click here
England North	None	Low	2	0%	None	18.2/100,000	ILI / Population	Click here
England South	None	Low	5	0%	None	15.2/100,000	ILI / Population	Click here
France North	Sporadic	Low	21	4.8%	Type A, Subtype H3N2		ARI / Population	Click here
France South	Sporadic	Low	64	3.1%	Type B		ARI / Population	Click here
Germany	None		90	0%	None	1519.0/100,000	ARI / Population	Click here
Ireland	None		8	0%	None	12.5/100,000	ILI / Population	Click here
Italy	None	Low				71.5/100,000	ILI / Population	Click here
Netherlands	None	Low	0	0%	None		ILI / Population	Click here
Norway	None	Low	0	0%	None		ILI / Population	Click here
Portugal			0	0%	None		ILI / Population	Click here
Romania					Type A, Subtype H1N1		ARI / Population	Click here
Scotland	None		0	0%	None	21.6/100,000	ILI / Population	Click here
Slovakia	None					1015.0/100,000	ILI / Population	Click here
Slovenia	Sporadic	Low	6	0%	None	11.0/100,000	ILI / Population	Click here
Spain	None		46	0%	None	16.7/100,000	ILI / Population	Click here
Switzerland	None	Low					ILI / Population	Click here

Preliminary data

Intensity: Low = no influenza activity or influenza activity at baseline level; Medium = usual levels of influenza activity; High = higher than usual levels of influenza activity; Very high = particularly severe levels of influenza activity.

Geographical spread: No activity = no laboratory-confirmed cases, or evidence of increased or unusual respiratory disease activity; Sporadic = isolated cases of laboratory-confirmed influenza infection; Localized = limited to one administrative unit in the country (or reporting site) only; Regional = appearing in multiple but <50% of the administrative units of the country (or reporting sites); Widespread = appearing in >=50% of the administrative units of the country (or reporting sites).

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Percentage positive: percentage of sentinel swabs that tested positive for influenza A or B

Dominant type: this assessment is based on data from sentinel and non-sentinel sources

ARI: acute respiratory infection

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Sentinel SARI: severe acute respiratory illness

Population: per 100,000 population

*: the value in the table for these countries reflects the percent (e.g. from 0.0 to 100.0) of total outpatient encounters that were due to ILI/ARI rather than a consultation rate per 100,000

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Low influenza activity in Europe

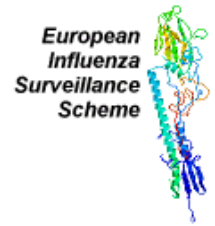
In week 49/2001, clinical influenza activity was low in the networks that reported to the European Influenza Surveillance Scheme (EISS). Three networks (France, Slovenia and Romania) reported sporadic influenza activity, while the other networks reported no activity.

Influenza activity remained below the epidemic threshold in all of the reporting networks, but slightly increased levels of influenza morbidity were observed in France, Italy and Slovakia.

The three subtypes of influenza were virologically confirmed as sporadic cases in week 49/2001: A(H3N2) in France, A(H1N1) in Romania and B in France and Slovenia. Belgium also reported detections/isolations of influenza A viruses (subtype not specified).

Reports of Respiratory Syncytial Virus infections are increasing in France, England, Ireland and Scotland.

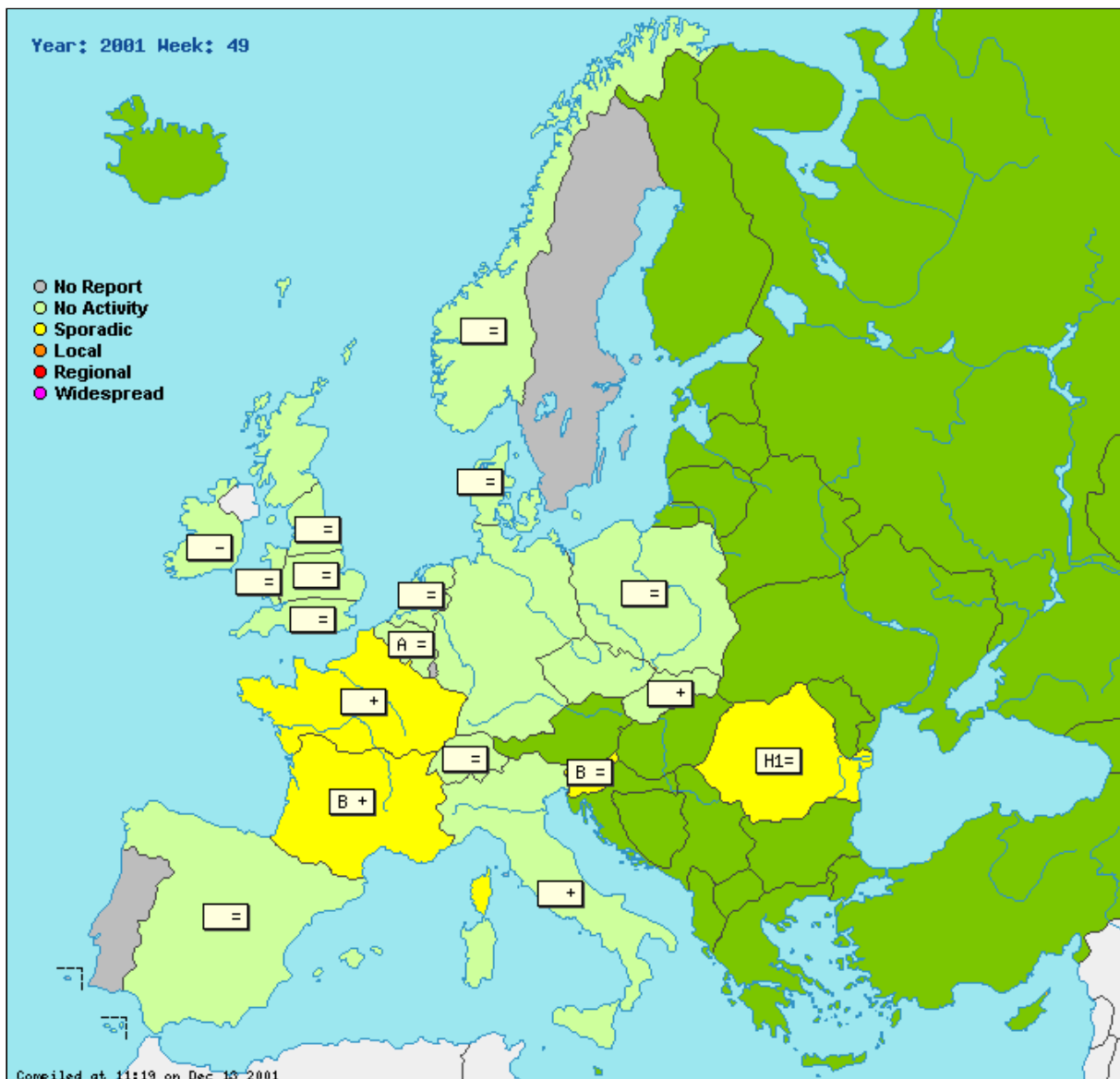
In week 49/2001, nineteen networks reported information on influenza activity to EISS. Eighteen networks reported clinical data and nineteen reported virological data.



Map

The map presents the geographical spread as assessed by each of the networks.

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 H1N1 = Dominant virus A(H1N1)
 H3N2 = Dominant virus A(H3N2)

Low = no influenza activity or influenza at baseline levels
 Medium = usual levels of influenza activity
 High = higher than usual levels of influenza activity

H1N2 = Dominant virus A(H1N2)
B = Dominant virus B
A & B = Dominant virus A & B

= : stable clinical activity
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- : decreasing clinical activity

Very high = particularly severe levels of influenza activity

No activity = no evidence of influenza virus activity (clinical activity remains at baseline levels)

Sporadic = isolated cases of laboratory confirmed influenza infection

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.

Country comments (where available)

France South

1 new confirmed case of flu A(H3N2) near Lyon, 1 more detection with a

GROG : Influenza B viruses related to B/Sichuan/379/99. The influenza A virus isolated Week 47 is an A H3N2 strain related to A/Panama/2007/99.

Norway

No indications of influenza activity

Switzerland

No influenza viruses have been detected in Switzerland last week. Only a VRS virus have been detected in a 5 months old children.

Table and graphs (where available)

Network - region	Geographic Spread	Intensity	Sentinel swabs	Percentage positive	Dominant type	Rate	Numerator / denominator	Network graphs
Belgium	None		7	14.3%	Type A	66.7/100,000	ILI / Population	Click here
Czech Republic	None		52	3.9%	None	1618.1/100,000	ARI / Population	Click here
Denmark	None	Low	3	0%	None	115.4/100,000	ILI / Population	Click here
England Central	None	Low	8	0%	None	23.0/100,000	ILI / Population	Click here
England North	None	Low	7	0%	None	26.7/100,000	ILI / Population	Click here
England South	None	Low	5	0%	None	19.0/100,000	ILI / Population	Click here
France North	Sporadic	Low					ARI / Population	Click here
France South	Sporadic	Low	82	3.7%	Type B		ARI / Population	Click here
Germany	None		91	0%	None	1521.0/100,000	ARI / Population	Click here
Ireland	None		5	0%	None	5.5/100,000	ILI / Population	Click here
Italy	None	Low	0	0%	None	83.5/100,000	ILI / Population	Click here
Netherlands	None	Low	0	0%	None		ILI / Population	Click here
Norway	None	Low	1	0%	None		ILI / Population	Click here
Poland	None	Low	0	0%	None	16.7/100,000	ILI / Population	Click here
Portugal			1	0%	None		ILI / Population	Click here
Romania	Sporadic	Low	80	3.8%	Type A, Subtype H1N1	216.3/100,000	ARI / Population	Click here
Scotland	None		23	0%	None	26.0/100,000	ILI / Population	Click here
Slovakia	None		32	0%	None	1089.4/100,000	ILI / Population	Click here
Slovenia	Sporadic	Low	10	10.0%	Type B	5.9/100,000	ILI / Population	Click here
Spain	None	Low	25	0%	None	8.8/100,000	ILI / Population	Click here
Switzerland	None	Low	18	0%	None		ILI / Population	Click here
Wales	None	Low	0	0%	None	3.7/100,000	ILI / Population	Click here

Preliminary data

Intensity: Low = no influenza activity or influenza activity at baseline level; Medium= usual levels of influenza activity; High = higher than usual levels of influenza activity; Very high = particularly severe levels of influenza activity.

Geographical spread: No activity = no laboratory-confirmed cases, or evidence of increased or unusual respiratory disease activity; Sporadic = isolated cases of laboratory-confirmed influenza infection; Localized = limited to one administrative unit in the country (or reporting site) only; Regional = appearing in multiple but <50% of the administrative units of the country (or reporting sites); Widespread = appearing in >=50% of the administrative units of the country (or reporting sites).

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Trend: Increasing = evidence that the level of respiratory disease activity is increasing compared with the previous week; Stable = evidence that the level of respiratory disease activity is unchanged compared with the previous week; Decreasing = evidence that the level of respiratory disease activity is decreasing compared with the previous week.

Percentage positive: percentage of sentinel swabs that tested positive for influenza A or B

Dominant type: this assessment is based on data from sentinel and non-sentinel sources

ARI: acute respiratory infection

ILI: influenza-like illness

Sentinel SARI: severe acute respiratory illness

Population: per 100,000 population

*: the value in the table for these countries reflects the percent (e.g. from 0.0 to 100.0) of total outpatient encounters that were due to ILI/ARI rather than a consultation rate per 100,000

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Low levels of influenza activity in Europe with laboratory confirmed cases of influenza A and B



Thirteen networks in the European Influenza Surveillance Scheme (EISS) reported no influenza activity in week 50/2001. Five networks reported sporadic activity: Belgium, France, Norway, Romania and Slovenia.

Influenza viruses were detected in/isolated from sentinel swabs in Belgium, the Czech Republic, France, Romania and Slovenia. There were also detections of influenza viruses in non-sentinel samples (e.g. samples from hospitals) in England, France, Norway, Slovenia and Spain. In week 50/2001, both influenza A and B viruses were detected, but influenza A was reported more frequently than influenza B. In France South, the dominant influenza virus was influenza B.

Reports of Respiratory Syncytial Virus infections increased in France, England, Ireland and Scotland.

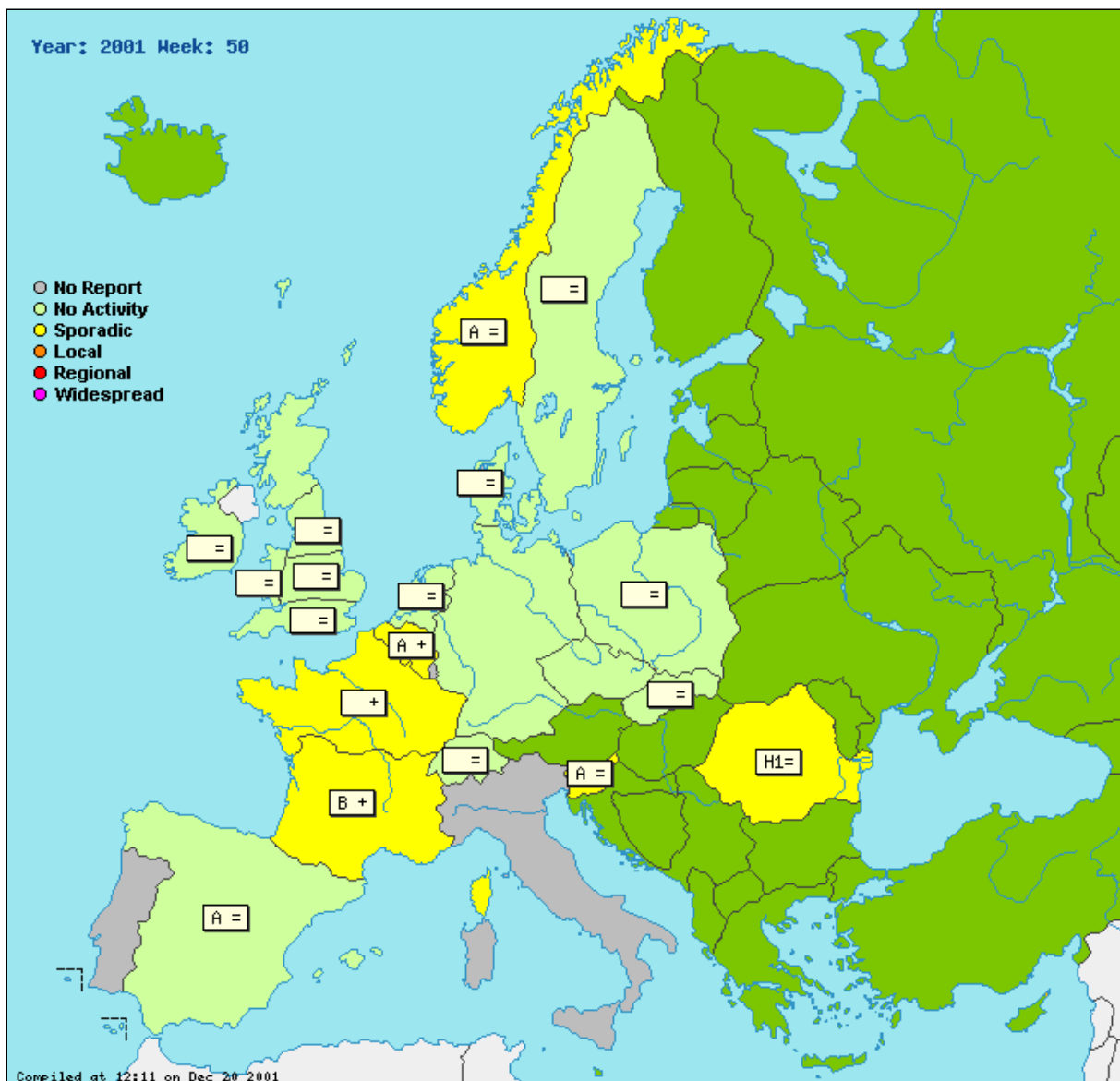
In week 50/2001, twenty networks reported information on influenza activity to EISS. Eighteen networks reported clinical data and eighteen networks reported virological data.

The European Influenza Surveillance Scheme wishes you a Merry Christmas.

Map

The map presents the geographical spread as assessed by each of the networks.

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H3N2 = Dominant virus A(H3N2)
H1N2 = Dominant virus A(H1N2)
B = Dominant virus B
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No activity = no evidence of influenza virus activity (clinical activity remains at baseline levels)
Sporadic = isolated cases of laboratory confirmed influenza infection
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.

Country comments (where available)

France North

Sporadic cases of influenza A or B in most of the french regions. RSV infections are very active.

France South

GROG : The identification of influenza B are strains related to B/Sichuan/379/99-like. Hospitals : First detection of influenza B in Hospitals. The isolation of influenza A in week 49, from Army survey, is a strain A H3N2 apparented to A/Panama/2007/99 and the isolation of influenza B to Lyon is related to B/sichuan/379/99.

Italy

Indicators of influenza continue to remain low across the Italy. No detection nor isolation so far.

Spain

In samples from hospital patients were detected three influenza A isolates. The subtype have not yet been determined. Clinical influenza activity remains stable at a low level.

Switzerland

One influenza virus was detected on Monday in a 5 years old boy. He is living in region 1, in a village close to Geneva. Medical contacts for influenza-like illness are stable and are still below the threshold. The influenza B Virus detected in week 46 has been further characterized. It was an influenza B/Sichuan/379/99-like virus resembling the one contained in the 2001-2002 vaccine. Inhibition of the hemagglutination reaction was done on parallel in our laboratory and in the one of MRC (London). Both results showed a decreased but not an unusual HI titre with B/Sichuan/379/99 antibody.

Table and graphs (where available)

Network - region	Geographic Spread	Intensity	Sentinel swabs	Percentage positive	Dominant type	Rate	Numerator / denominator	Network graphs
Belgium	Sporadic	Low	31	6.5%	Type A	84.5/100,000	ILI / Population	Click here
Czech Republic	None		84	2.4%	None	1705.0/100,000	ARI / Population	Click here
Denmark	None	Low	7	0%	None	135.2/100,000	ILI / Population	Click here
England Central	None	Low	18	0%	None	21.6/100,000	ILI / Population	Click here
England North	None	Low	1	0%	None	19.5/100,000	ILI / Population	Click here
England South	None	Low	2	0%	None	13.5/100,000	ILI / Population	Click here
France North	Sporadic	Low	52	0%	None		ARI / Population	Click here
France South	Sporadic	Low	78	5.1%	Type B		ARI / Population	Click here
Germany	None		74	0%	None	1627.0/100,000	ARI / Population	Click here
Ireland	None		8	0%	None	7.2/100,000	ILI / Population	Click here
Italy			2	0%	None		ILI / Population	Click here
Netherlands	None	Low	2	0%	None	41.1/100,000	ILI / Population	Click here
Norway	Sporadic	Low	6	0%	Type A		ILI / Population	Click here
Poland	None	Low	0	0%	None	11.5/100,000	ILI / Population	Click here
Portugal			1	0%	None		ILI / Population	Click here
Romania	Sporadic	Low	20	10.0%	Type A, Subtype H1N1	210.5/100,000	ARI / Population	Click here
Scotland	None		41	0%	None	34.1/100,000	ILI / Population	Click here
Slovakia	None		9	0%		1083.0/100,000	ILI / Population	Click here
Slovenia	Sporadic	Low	11	9.1%	Type A	10.8/100,000	ILI / Population	Click here
Spain	None	Low	22	0%	Type A	15.2/100,000	ILI / Population	Click here
Sweden	None	Low				1.5/100,000	ILI / Population	Click here
Switzerland	None	Low	9	0%	None		ILI / Population	Click here
Wales	None	Low				3.7/100,000	ILI / Population	Click here

Preliminary data

Intensity: Low = no influenza activity or influenza activity at baseline level; Medium= usual levels of influenza activity; High = higher than usual levels of influenza activity; Very high = particularly severe levels of influenza activity.

Geographical spread: No activity = no laboratory-confirmed cases, or evidence of increased or unusual respiratory disease activity; Sporadic = isolated cases of laboratory-confirmed influenza infection; Localized = limited to one administrative unit in the country (or reporting site) only; Regional = appearing in multiple but <50% of the administrative units of the country (or reporting sites); Widespread = appearing in >=50% of the administrative units of the country (or reporting sites).

Impact: Low = demands on health-care services are not above usual levels; Moderate = demands on health-care services are above the usual demand levels but still below the maximum capacity of those services; Severe = demands on health care services exceed the capacity of those services.

Trend: Increasing = evidence that the level of respiratory disease activity is increasing compared with the previous week; Stable = evidence that the level of respiratory disease activity is unchanged compared with the previous week; Decreasing = evidence that the level of respiratory disease activity is decreasing compared with the previous week.

Percentage positive: percentage of sentinel swabs that tested positive for influenza A or B

Dominant type: this assessment is based on data from sentinel and non-sentinel sources

ARI: acute respiratory infection

ILI: influenza-like illness

Sentinel SARI: severe acute respiratory illness

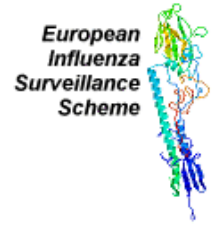
Population: per 100,000 population

*: the value in the table for these countries reflects the percent (e.g. from 0.0 to 100.0) of total outpatient encounters that were due to ILI/ARI rather than a consultation rate per 100,000

The bulletin text was written by Anne Mosnier (Open Rome, France), John Paget (EISS co-ordination centre, the Netherlands), Helena Rebelo de Andrade (Direc o  o-Geral da Sa  de, Portugal) and Tom  s Vega (Consejer  a de Sanidad y Bienestar Social, Spain) on behalf of the EISS Working Group.

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Little or no influenza activity in Europe



Six networks in the European Influenza Surveillance Scheme (EISS) reported no influenza activity and three networks - Belgium, France and the Czech Republic - reported sporadic activity in week 51/2001. In England, no influenza activity was reported in the South and Central parts of the country and regional activity was reported in the North (i.e. activity was above the baseline level).

The clinical morbidity rate in England North increased from 19 per 100,000 in week 50/2001 to 56 per 100,000 in week 51/2001. This increase was mainly driven by influenza-like activity in the 0-4 and 65+ age groups. It is important to note that the rate in England North is based on a smaller denominator than usual (see comment below concerning the Christmas holidays) and may be an overestimate of the true level of influenza-like activity in this region.

The surveillance of influenza in week 51/2001 was affected by the Christmas holidays: the data was processed more slowly than usual (i.e. the EISS database is not yet complete) and some sentinel practices were closed during this period (this could, for example, lead to lower than usual population denominators). The data presented in the Weekly Electronic Bulletin should therefore be interpreted with caution.

The dominant influenza virus in week 51/2001 was influenza A in Belgium, the Czech Republic, Norway and Switzerland. In France, the dominant influenza virus was A in the North and B in the South. Four networks reported no dominant influenza virus: England, Italy, Poland and Scotland.

Reports of Respiratory Syncytial Virus infections increased in France, England and Scotland.

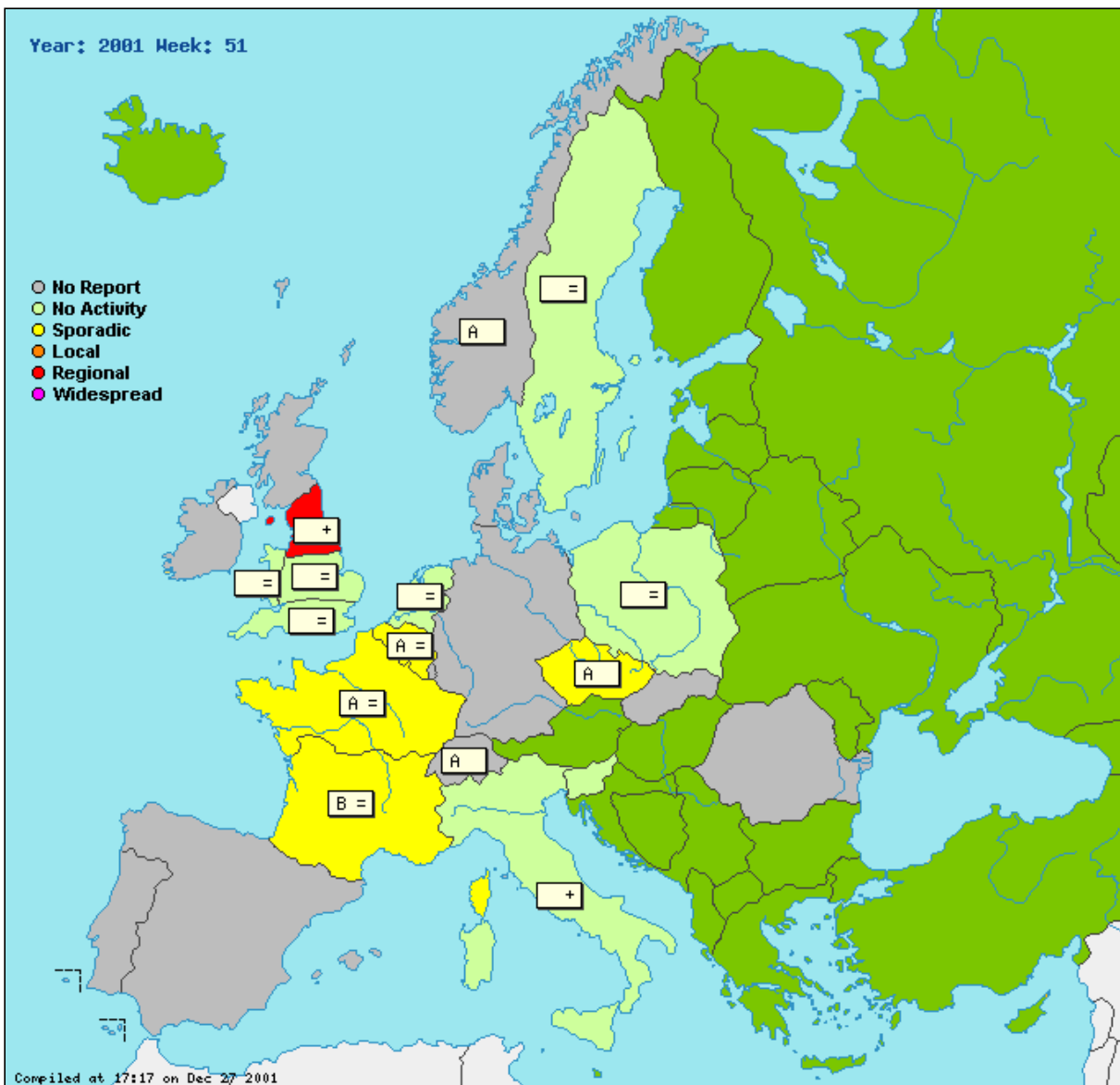
In week 51/2001, thirteen networks reported information on influenza activity to EISS. Ten networks reported clinical data and nine networks reported virological data.

The European Influenza Surveillance Scheme wishes you a Happy New Year.

Map

The map presents the geographical spread as assessed by each of the networks.

Clicking on the map will, if available, take you through to the national web site. If 'regional' activity is reported, a pop-up text box will appear which describes the activity in greater detail.



A = Dominant virus A
H1N1 = Dominant virus A(H1N1)
H3N2 = Dominant virus A(H3N2)
H1N2 = Dominant virus A(H1N2)
B = Dominant virus B
A & B = Dominant virus A & B

= : stable clinical activity
 + : increasing clinical activity
 - : decreasing clinical activity

Low = no influenza activity or influenza at baseline levels
Medium = usual levels of influenza activity
High = higher than usual levels of influenza activity
Very high = particularly severe levels of influenza activity

No activity = no evidence of influenza virus activity (clinical activity remains at baseline levels)
Sporadic = isolated cases of laboratory confirmed influenza infection
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.

Country comments (where available)

France North

Flu A and B are circulating at the same time: 5 new sporadic cases of A, 3 new sporadic cases of B.

France South

5 sporadic cases of flu B in several cities France South.
Sporadic cases of influenza B and few influenza A isolates.

Italy

1st case of virologically confirmed influenza B (week 2001/51), from a 11 yrs patient. The isolate is from Milano (northern Italy).

Switzerland

An influenza A virus has been detected last week. The swab came from a 32 years old man who was living near Basel. Few samples came to our laboratory last week.

Table and graphs (where available)

Network - region	Geographic Spread	Intensity	Sentinel swabs	Percentage positive	Dominant type	Rate	Numerator / denominator	Network graphs
Belgium	Sporadic	Low	17	17.7%	Type A	76.4/100,000	ILI / Population	Click here
Czech Republic	Sporadic		42	14.3%	Type A		ARI / Population	Click here

England Central	None	Low	0	0%	None	25.0/100,000	ILI / Population	Click here
England North	Regional	Low	4	0%	None	56.3/100,000	ILI / Population	Click here
England South	None	Low	3	0%	None	15.2/100,000	ILI / Population	Click here
France North	Sporadic	Low	27	3.7%	Type A		ARI / Population	Click here
France South	Sporadic	Low	86	10.5%	Type B		ARI / Population	Click here
Italy	None	Low	0	0%	None	114.2/100,000	ILI / Population	Click here
Netherlands	None	Low					ILI / Population	Click here
Norway			0	0%	Type A		ILI / Population	Click here
Poland	None	Low	0	0%	None	17.1/100,000	ILI / Population	Click here
Scotland			41	0%	None		ILI / Population	Click here
Slovenia	None						ILI / Population	Click here
Sweden	None	Low				28.8/100,000	ILI / Population	Click here
Switzerland			9	0%	Type A		ILI / Population	Click here
Wales	None	Low				0.9/100,000	ILI / Population	Click here

Preliminary data

Intensity: Low = no influenza activity or influenza activity at baseline level; Medium= usual levels of influenza activity; High = higher than usual levels of influenza activity; Very high = particularly severe levels of influenza activity.

Geographical spread: No activity = no laboratory-confirmed cases, or evidence of increased or unusual respiratory disease activity; Sporadic = isolated cases of laboratory-confirmed influenza infection; Localized = limited to one administrative unit in the country (or reporting site) only; Regional = appearing in multiple but <50% of the administrative units of the country (or reporting sites); Widespread = appearing in >=50% of the administrative units of the country (or reporting sites).

Impact: Low = demands on health-care services are not above usual levels; Moderate = demands on health-care services are above the usual demand levels but still below the maximum capacity of those services; Severe = demands on health care services exceed the capacity of those services.

Trend: Increasing = evidence that the level of respiratory disease activity is increasing compared with the previous week; Stable = evidence that the level of respiratory disease activity is unchanged compared with the previous week; Decreasing = evidence that the level of respiratory disease activity is decreasing compared with the previous week.

Percentage positive: percentage of sentinel swabs that tested positive for influenza A or B

Dominant type: this assessment is based on data from sentinel and non-sentinel sources

ARI: acute respiratory infection

ILI: influenza-like illness

Sentinel SARI: severe acute respiratory illness

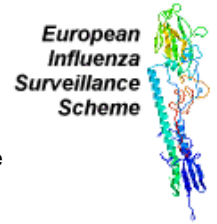
Population: per 100,000 population

*: the value in the table for these countries reflects the percent (e.g. from 0.0 to 100.0) of total outpatient encounters that were due to ILI/ARI rather than a consultation rate per 100,000

The bulletin text was written by Anne Mosnier (Open Rome, France), John Paget (EISS co-ordination centre, the Netherlands), Helena Rebelo de Andrade (Direc o-Geral da Sa de, Portugal) and Tom s Vega (Consejer a de Sanidad y Bienestar Social, Spain) on behalf of the EISS Working Group.

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Little or no influenza activity in Europe in the last week of 2001



During week 52/2001 only three networks reported 'influenza activity' to the European Influenza Surveillance Scheme (EISS): France reported 'regional activity' (i.e. influenza activity was above the baseline level), Switzerland and Norway reported 'sporadic activity'. Eleven networks reported no influenza activity: the Czech Republic, Denmark, England, Germany, Ireland, Italy, Netherlands, Poland, Scotland, Sweden and Wales.

France, Netherlands and Switzerland reported an increase in clinical morbidity in week 52/2001.

Similarly to week 51/2001, the surveillance of influenza activity in week 52/2001 was affected by the end of the year holidays: the EISS database is not yet complete and some sentinel practices were closed during this period. The data presented here should, therefore, be interpreted with caution.

The dominant types of influenza virus in week 52/2001 were influenza A in France and Norway, and influenza B in Switzerland. Six networks reported no dominant influenza type: the Czech Republic, Denmark, England, Germany, Poland and Scotland.

Reports of Respiratory Syncytial Virus continued to increase in France and Scotland, but decreased in England.

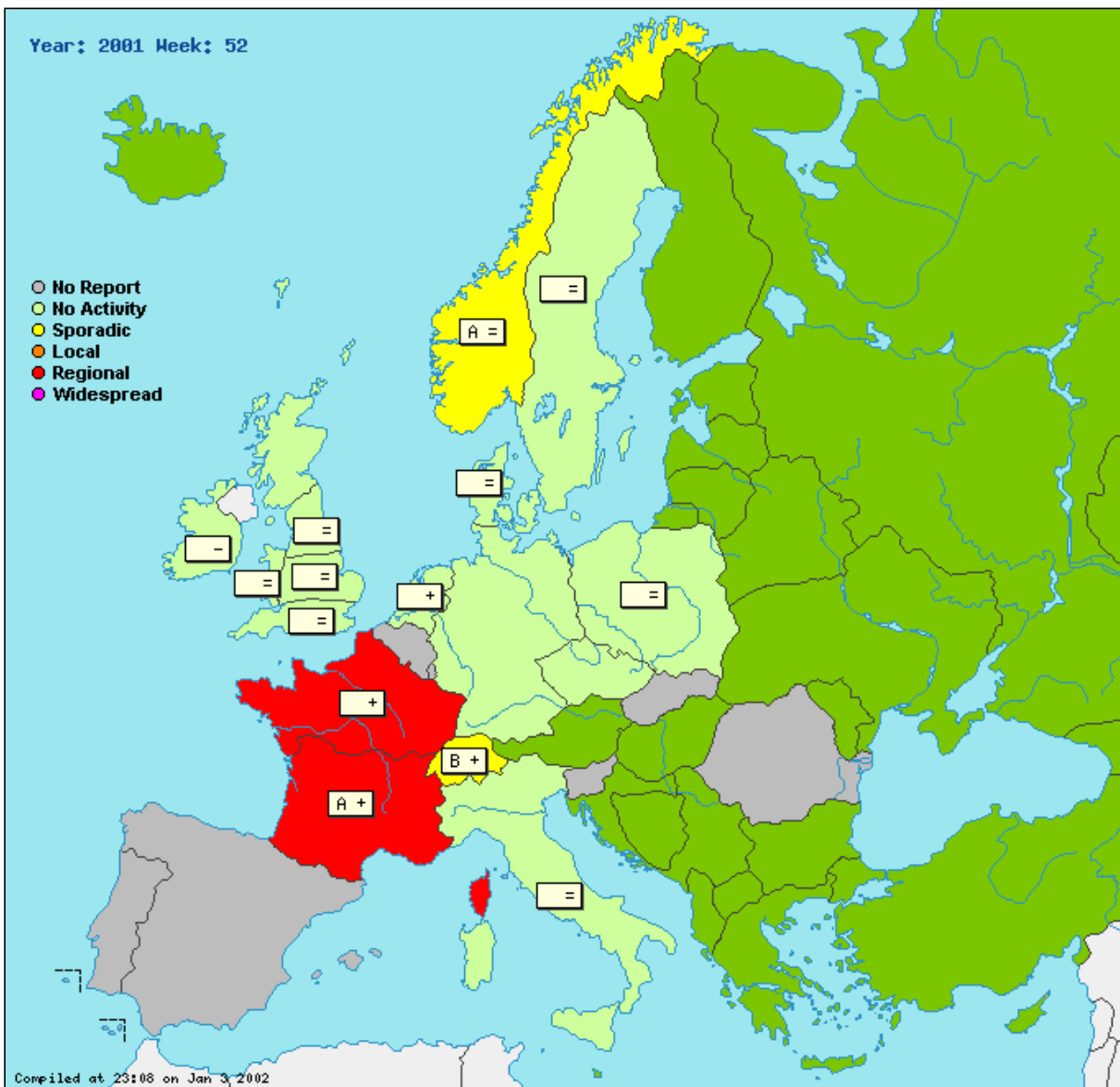
The influenza virus A and B isolated/detected so far resemble the strains in the influenza vaccine for this season.

In the week 52/2001, thirteen networks reported information on influenza activity to EISS. Thirteen networks reported clinical data and nine networks reported virological data.

Map

The map presents the geographical spread as assessed by each of the networks.

Clicking on the map will, if available, take you through to the national web site. If 'regional' activity is reported, a pop-up text box will appear which describes the activity in greater detail.



A = Dominant virus A
H1N1 = Dominant virus A(H1N1)
H3N2 = Dominant virus A(H3N2)
H1N2 = Dominant virus A(H1N2)
B = Dominant virus B
A & B = Dominant virus A & B

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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.

Country comments (where available)

France North

During holidays and GPs strike, epidemic levels are reached in Bretagne, Normandie, Pays-de-la-Loire, Nord-Pas-de-Calais, Picardie, Ile-de-France, Lorraine and Franche-Comte.

France South

During holidays and GPs strike, epidemic levels are reached in Aquitaine, Midi-Pyrénées, Rhône-Alpes, Provence-Alpes-Côte d'Azur and Poitou-Charentes.

Local outbreak of influenza A in Rhône-Alpes region.

Switzerland

An influenza B virus has been detected last week. The influenza A virus detected during week 50 was antigenically related to the vaccine strain A/Moscow/379/99 (H3N2)

Table and graphs (where available)

Network - region	Geographic Spread	Intensity	Sentinel swabs	Percentage positive	Dominant type	Rate	Numerator / denominator	Network graphs
Czech Republic	None		0	0%	None		ARI / Population	Click here
Denmark	None	Low	0	0%	None	63.8/100,000	ILI / Population	Click here
England Central	None	Low	5	0%	None	18.8/100,000	ILI / Population	Click here

England North	None	Low	0	0%	None	16.4/100,000	ILI / Population	Click here
England South	None	Low	0	0%	None	12.0/100,000	ILI / Population	Click here
France North	Regional	Low					ARI / Population	Click here
France South	Regional	Low	42	16.7%	Type A		ARI / Population	Click here
Germany	None		13	0%	None	984.0/100,000	ARI / Population	Click here
Ireland	None					7.3/100,000	ILI / Population	Click here
Italy	None	Low				151.6/100,000	ILI / Population	Click here
Netherlands	None	Low					ILI / Population	Click here
Norway	Sporadic	Low	0	0%	Type A		ILI / Population	Click here
Poland	None	Low	0	0%	None	6.9/100,000	ILI / Population	Click here
Scotland	None		17	0%	None	33.7/100,000	ILI / Population	Click here
Sweden	None	Low					ILI / Population	Click here
Switzerland	Sporadic	Low	3	0%	Type B		ILI / Population	Click here
Wales	None	Low				0.9/100,000	ILI / Population	Click here

Preliminary data

Intensity: Low = no influenza activity or influenza activity at baseline level; Medium= usual levels of influenza activity; High = higher than usual levels of influenza activity; Very high = particularly severe levels of influenza activity.

Geographical spread: No activity = no laboratory-confirmed cases, or evidence of increased or unusual respiratory disease activity; Sporadic = isolated cases of laboratory-confirmed influenza infection; Localized = limited to one administrative unit in the country (or reporting site) only; Regional = appearing in multiple but <50% of the administrative units of the country (or reporting sites); Widespread = appearing in >=50% of the administrative units of the country (or reporting sites).

Impact: Low = demands on health-care services are not above usual levels; Moderate = demands on health-care services are above the usual demand levels but still below the maximum capacity of those services; Severe = demands on health care services exceed the capacity of those services.

Trend: Increasing = evidence that the level of respiratory disease activity is increasing compared with the previous week; Stable = evidence that the level of respiratory disease activity is unchanged compared with the previous week; Decreasing = evidence that the level of respiratory disease activity is decreasing compared with the previous week.

Percentage positive: percentage of sentinel swabs that tested positive for influenza A or B

Dominant type: this assessment is based on data from sentinel and non-sentinel sources

ARI: acute respiratory infection

ILI: influenza-like illness

Sentinel SARI: severe acute respiratory illness

Population: per 100,000 population

*: the value in the table for these countries reflects the percent (e.g. from 0.0 to 100.0) of total outpatient encounters that were due to ILI/ARI rather than a consultation rate per 100,000

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Patchy influenza activity across Europe: varying from none to widespread



In week 01/2002, the influenza activity in Europe ranged from none to widespread and isolates of both influenza A(H3N2) and A(H1N1) were reported. The global picture, however, showed low intensity of influenza activity in comparison to previous seasons and the influenza viruses isolated so far resemble the strains in the influenza vaccine for the present winter (2001/2002).

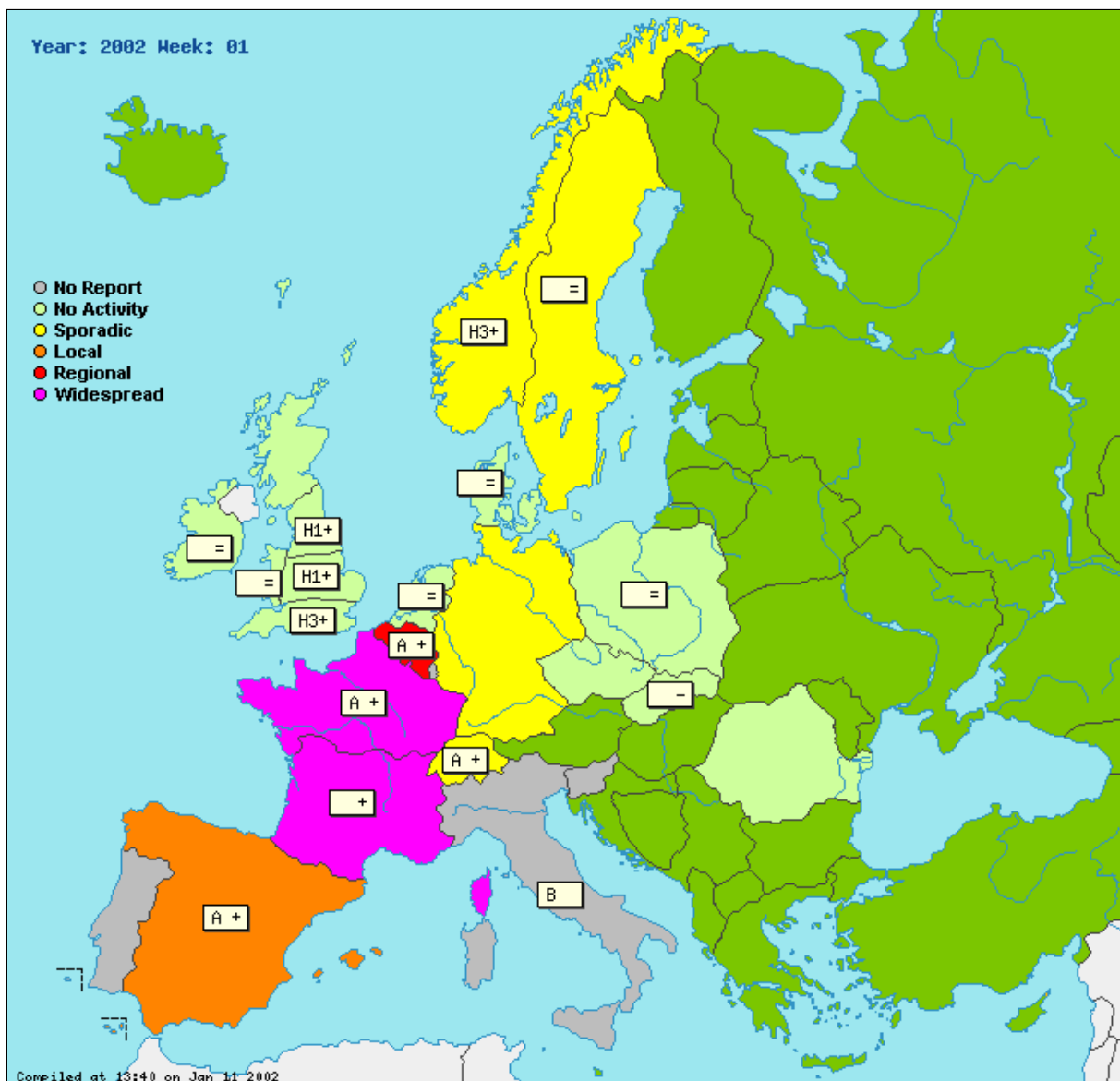
Activity in France reached a level described as widespread, remained regional in Belgium, and was reported as local in Spain. Clinical activity in the UK remained below the normal seasonal activity threshold but isolates of influenza A continued to be reported. In the other European countries reporting to EISS, influenza activity was generally limited to sporadic (Germany, Norway, Sweden and Switzerland) or reported as none.

The Weekly Electronic Bulletin presents and comments influenza activity in the 18 European countries (20 networks) that are members of the European Influenza Surveillance Scheme (EISS). In the present week 17 networks reported clinical data and 15 reported virological data.

Map

The map presents the geographical spread as assessed by each of the networks.

Clicking on the map will, if available, take you through to the national web site. If 'regional' activity is reported, a pop-up text box will appear which describes the activity in greater detail.



A = Dominant virus A
H1N1 = Dominant virus A(H1N1)

Low = no influenza activity or influenza at baseline levels
Medium = usual levels of influenza activity

H3N2 = Dominant virus A(H3N2)
H1N2 = Dominant virus A(H1N2)
B = Dominant virus B
A & B = Dominant virus A & B

= : stable clinical activity
+ : increasing clinical activity
- : decreasing clinical activity

High = higher than usual levels of influenza activity
Very high = particularly severe levels of influenza activity

No activity = no evidence of influenza virus activity (clinical activity remains at baseline levels)
Sporadic = isolated cases of laboratory confirmed influenza infection
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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.

Country comments (where available)

Belgium

So far, 53 Influenza A and 3 Influenza B

France North

Flu is epidemic in every region. Sickness leave are increasing in several region: Normandie, Picardie, Lorraine, Bourgogne, Paris-Ile-de-France, Franche-Comté. All confirmed cases among unvaccinated people.

France South

Flu is epidemic in every region. Attack rate of sickness leaves is increasing in several region: Aquitaine, Provence-Alpes-Côte d'Azur, Poitou-Charentes, Rhône-Alpes, Midi-Pyrénées. All confirmed cases concern unvaccinated patients.

Norway

One hospital-based and one community-based case of influenza A(H3N2), both Southeastern Norway.

Spain

Influenza activity is increasing in the middle part of the country (sentinel networks of Madrid and Castilla y Leon), associated with isolates of influenza A(H3N2) and influenza B.

Switzerland

One influenza A virus has been detected during the week 52 in the region 4, in a 71 years old woman living near Basel. Another influenza virus has been detected with rapid test in the region 1 during the week 2. Influenza virus is present in different region of Switzerland and is regularly detected now.

Table and graphs (where available)

Network - region	Geographic Spread	Intensity	Sentinel swabs	Percentage positive	Dominant type	Rate	Numerator / denominator	Network graphs
Belgium	Regional	Medium	24	20.8%	Type A	359.0/100,000	ILI / Population	Click here
Czech Republic	None		48	0%	None	1068.5/100,000	ARI / Population	Click here
Denmark	None	Low				76.6/100,000	ILI / Population	Click here
England Central	None	Low	19	5.3%	Type A, Subtype H1N1	30.4/100,000	ILI / Population	Click here
England North	None	Low	10	20.0%	Type A, Subtype H1N1	35.5/100,000	ILI / Population	Click here
England South	None	Low	19	21.1%	Type A, Subtype H3N2	28.5/100,000	ILI / Population	Click here
France North	Widespread	Low	21	14.3%	Type A		ARI / Population	Click here
France South	Widespread	Low					ARI / Population	Click here
Germany	Sporadic	Low	34	2.9%	None	1254.0/100,000	ARI / Population	Click here
Ireland	None		4	0%	None	11.0/100,000	ILI / Population	Click here
Netherlands	None	Low	0	0%	None	17.7/100,000	ILI / Population	Click here
Norway	Sporadic	Low	5	20.0%	Type A, Subtype H3N2		ILI / Population	Click here
Poland	None	Low	0	0%	None	11.3/100,000	ILI / Population	Click here
Romania	None		6	0%	None	110.2/100,000	ARI / Population	Click here
Scotland	None		28	0%	None	33.2/100,000	ILI / Population	Click here
Slovakia	None		9	0%	None	664.2/100,000	ILI / Population	Click here
Slovenia			0	0%	None		ILI / Population	Click here
Spain	Local	Medium	14	50.0%	Type A	41.2/100,000	ILI / Population	Click here
Sweden	Sporadic	Low				2.0/100,000	ILI / Population	Click here
Switzerland	Sporadic	Low	8	0%	Type A		ILI / Population	Click here
Wales	None	Low					ILI / Population	Click here

Preliminary data

Intensity: Low = no influenza activity or influenza activity at baseline level; Medium= usual levels of influenza activity; High = higher than usual levels of influenza activity; Very high = particularly severe levels of influenza activity.

Geographical spread: No activity = no laboratory-confirmed cases, or evidence of increased or unusual respiratory disease activity; Sporadic = isolated cases of laboratory-confirmed influenza infection; Localized = limited to one administrative unit in the country (or reporting site) only; Regional = appearing in multiple but <50% of the administrative units of the country (or reporting sites); Widespread = appearing in >=50% of the administrative units of the country (or reporting sites).

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Percentage positive: percentage of sentinel swabs that tested positive for influenza A or B

Dominant type: this assessment is based on data from sentinel and non-sentinel sources

ARI: acute respiratory infection

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Sentinel SARI: severe acute respiratory illness

Population: per 100,000 population

*: the value in the table for these countries reflects the percent (e.g. from 0.0 to 100.0) of total outpatient encounters that were due to ILI/ARI rather than a consultation rate per 100,000

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EISS : Weekly Electronic Bulletin

Influenza remains at moderate and variable activity across Europe



In week 02/2002, influenza activity was widespread throughout many European countries but at different levels of intensity. In some countries such as Belgium, France and Spain, incidence rates were above the baseline thresholds with a medium intensity and a regional or widespread geographical distribution. In other central and northern European countries, influenza remained at low levels with no activity, sporadic or local activity (Denmark, England, Germany, Ireland, Netherlands, Norway, Poland, Portugal, Scotland, Slovakia, Switzerland and Wales).

In southern countries, like Spain and Italy, the increasing rates in the last two weeks could be indicating the beginning of the seasonal influenza curve. Children, adolescents and middle age adults were the most affected age groups in these countries where this information is available, mainly among non vaccinated people (data from Spain).

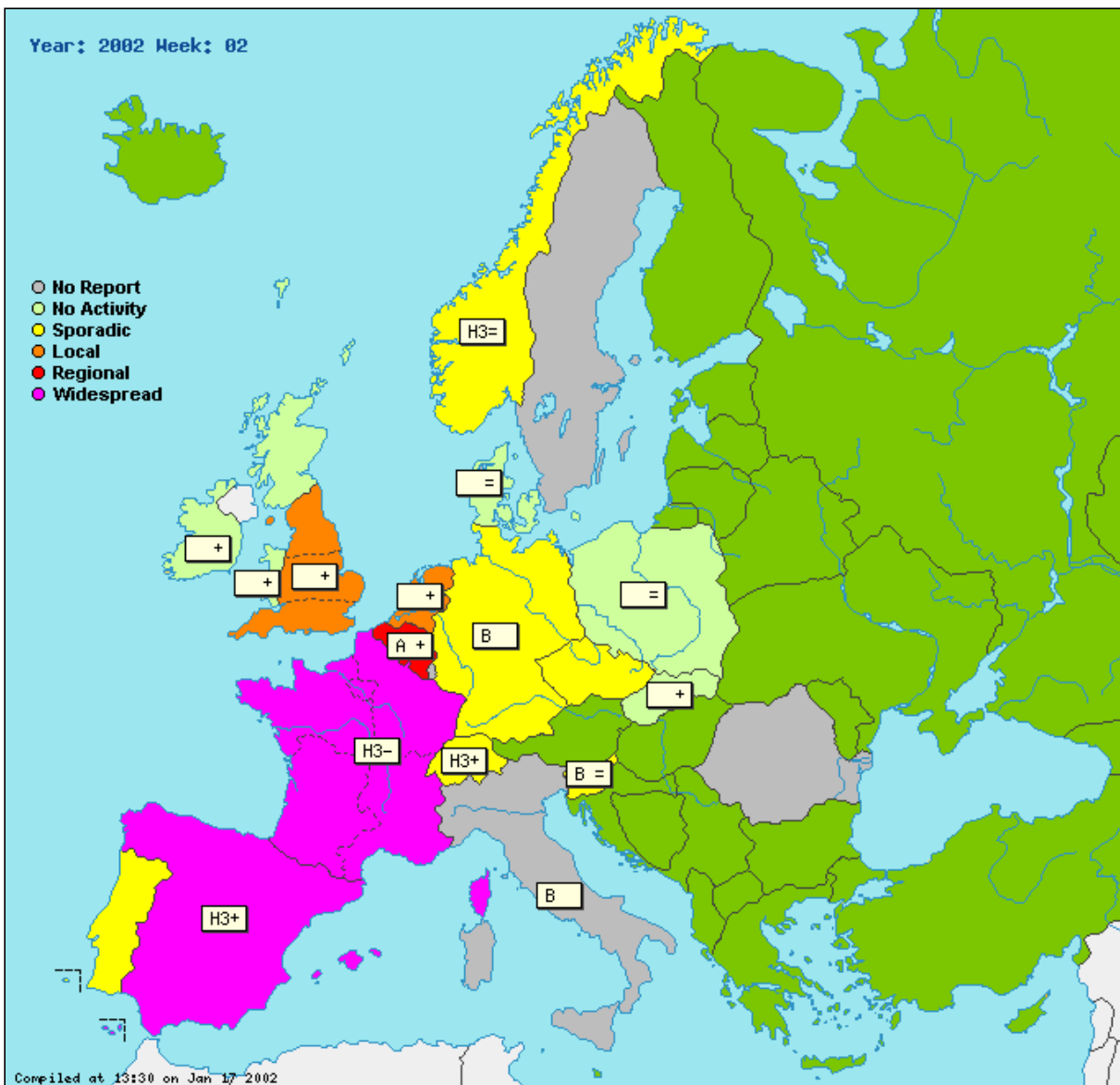
Isolations showed a co-circulation of influenza A(H3N2) and B viruses, with the former as dominant in most countries. Subtype H1N1 was isolated sporadically in the last weeks. The isolated viruses characterised are all similar to the vaccine strains.

The Weekly Electronic Bulletin presents and comments influenza activity in the 18 European countries (20 networks) that are members of the European Influenza Surveillance Scheme (EISS). In week 02/2002, 17 networks reported clinical data and 17 networks reported virological data.

Map

The map presents the geographical spread as assessed by each of the networks.

Clicking on the map will, if available, take you through to the national web site. If 'regional' activity is reported, a pop-up text box will appear which describes the activity in greater detail.



A = Dominant virus A
H1N1 = Dominant virus A(H1N1)
H3N2 = Dominant virus A(H3N2)
H1N2 = Dominant virus A(H1N2)
B = Dominant virus B
A & B = Dominant virus A & B

= : stable clinical activity
+ : increasing clinical activity
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Low = no influenza activity or influenza at baseline levels
Medium = usual levels of influenza activity
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Very high = particularly severe levels of influenza activity

No activity = no evidence of influenza virus activity (clinical activity remains at baseline levels)
Sporadic = isolated cases of laboratory confirmed influenza infection
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.

Country comments (where available)

France

Influenza is still over the epidemic threshold in France, but clinical activity slightly decreased since last week. An effect of the GP's strike ?

Co-circulation of A(H3N2) and B. For the time being, A(H3N2) is dominant.

Italy

Increasing influenza activity. Weekly incidence of influenza like-illness (ILI) is 3,11 per 1,000 patient population. Rates continues remain highest in age group 0-14 years. Increasing number of laboratory confirmed cases of influenza B. The isolates are from Trieste, Genova, Parma and Roma. One influenza A/H3N2, detected by RT-PCR, during week 02/02, from a 3 yrs patient. The case is from Siena (central Italy).

Norway

All cases are hospitalised patients in southeastern Norway.

Spain

Influenza is epidemic in Spain associated with isolates of influenza A(H3N2) and influenza B.

Switzerland

The number of swabs increased this week. Influenza A/Ireland/10548/99 (H3N2) have been detected. The swab was taken during the week 52.

Table and graphs (where available)

Network - region	Geographic Spread	Intensity	Sentinel swabs	Percentage positive	Dominant type	Rate	Numerator / denominator	Network graphs
Belgium	Regional	Medium	108	32.4%	Type A	470.6/100,000	ILI / Population	Click here
Czech Republic	Sporadic		43	4.7%	None	1431.2/100,000	ARI / Population	Click here
Denmark	None	Low	2	0%	None	120.1/100,000	ILI / Population	Click here
England	Local	Low				29.7/100,000	ILI / Population	Click here
France	Widespread	Medium	274	26.3%	Type A, Subtype H3N2		ARI / Population	Click here
Germany	Sporadic		61	9.8%	Type B	1559.0/100,000	ARI / Population	Click here
Ireland	None		9	0%	None	14.9/100,000	ILI / Population	Click here
Italy			1	0%	Type B		ILI / Population	Click here
Netherlands	Local	Low	0	0%	None	49.6/100,000	ILI / Population	Click here
Norway	Sporadic		3	0%	Type A, Subtype H3N2		ILI / Population	Click here
Poland	None	Low	0	0%	None	11.8/100,000	ILI / Population	Click here
Portugal	Sporadic		1	0%	None		ILI / Population	Click here
Scotland	None		32	0%	None	37.8/100,000	ILI / Population	Click here
Slovakia	None		7	0%	None	826.7/100,000	ILI / Population	Click here
Slovenia	Sporadic	Low	8	25.0%	Type B	10.8/100,000	ILI / Population	Click here
Spain	Widespread	Medium	96	33.3%	Type A, Subtype H3N2	200.9/100,000	ILI / Population	Click here
Switzerland	Sporadic	Low	15	0%	Type A, Subtype H3N2	91.4/100,000	ILI / Population	Click here
Wales	None	Low				4.7/100,000	ILI / Population	Click here

Preliminary data

Intensity: Low = no influenza activity or influenza activity at baseline level; Medium = usual levels of influenza activity; High = higher than usual levels of influenza activity; Very high = particularly severe levels of influenza activity.

Geographical spread: No activity = no laboratory-confirmed cases, or evidence of increased or unusual respiratory disease activity; Sporadic = isolated cases of laboratory-confirmed influenza infection; Localized = limited to one administrative unit in the country (or reporting site) only; Regional = appearing in multiple but <50% of the administrative units of the country (or reporting sites); Widespread = appearing in ≥50% of the administrative units of the country (or reporting sites).

Impact: Low = demands on health-care services are not above usual levels; Moderate = demands on health-care services are above the usual demand levels but still below the maximum capacity of those services; Severe = demands on health care services exceed the capacity of those services.

Trend: Increasing = evidence that the level of respiratory disease activity is increasing compared with the previous week; Stable = evidence that the level of respiratory disease activity is unchanged compared with the previous week; Decreasing = evidence that the level of respiratory disease activity is decreasing compared with the previous week.

Percentage positive: percentage of sentinel swabs that tested positive for influenza A or B

Dominant type: this assessment is based on data from sentinel and non-sentinel sources

ARI: acute respiratory infection

ILI: influenza-like illness

Sentinel SARI: severe acute respiratory illness

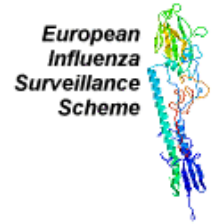
Population: per 100,000 population

*: the value in the table for these countries reflects the percent (e.g. from 0.0 to 100.0) of total outpatient encounters that were due to ILI/ARI rather than a consultation rate per 100,000

The bulletin text was written by Anne Mosnier (Open Rome, France), John Paget (EISS co-ordination centre, the Netherlands), Helena Rebelo de Andrade (Direcção-Geral da Saúde, Portugal) and Tomàs Vega (Consejería de Sanidad y Bienestar Social, Spain) on behalf of the EISS Working Group.

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Influenza activity slightly increases in Europe



In week 03/2002, influenza activity remained at a moderate or medium intensity in Europe. Belgium, France, Spain and Switzerland reported an increase in clinical morbidity rates with a medium intensity and a widespread or regional geographical spread. In the other countries, such as England, Ireland, Italy or the Netherlands, influenza activity was very similar to the week 02/2002.

Influenza A(H3N2) is the dominant virus in most countries, but the subtype A(H1N1) and type B are also being isolated. Influenza A(H3N2) viruses characterised in France and Switzerland were antigenically related to influenza A/Panama/2007/99 (H3N2) which is closely related to the 2001/2002 vaccine strain A/Moscow/10/99 (H3N2).

The Weekly Electronic Bulletin presents and comments influenza activity in the 18 European countries (20 networks) that are members of the European Influenza Surveillance Scheme. In this week, all of the networks reported clinical data and seventeen networks reported virological data.

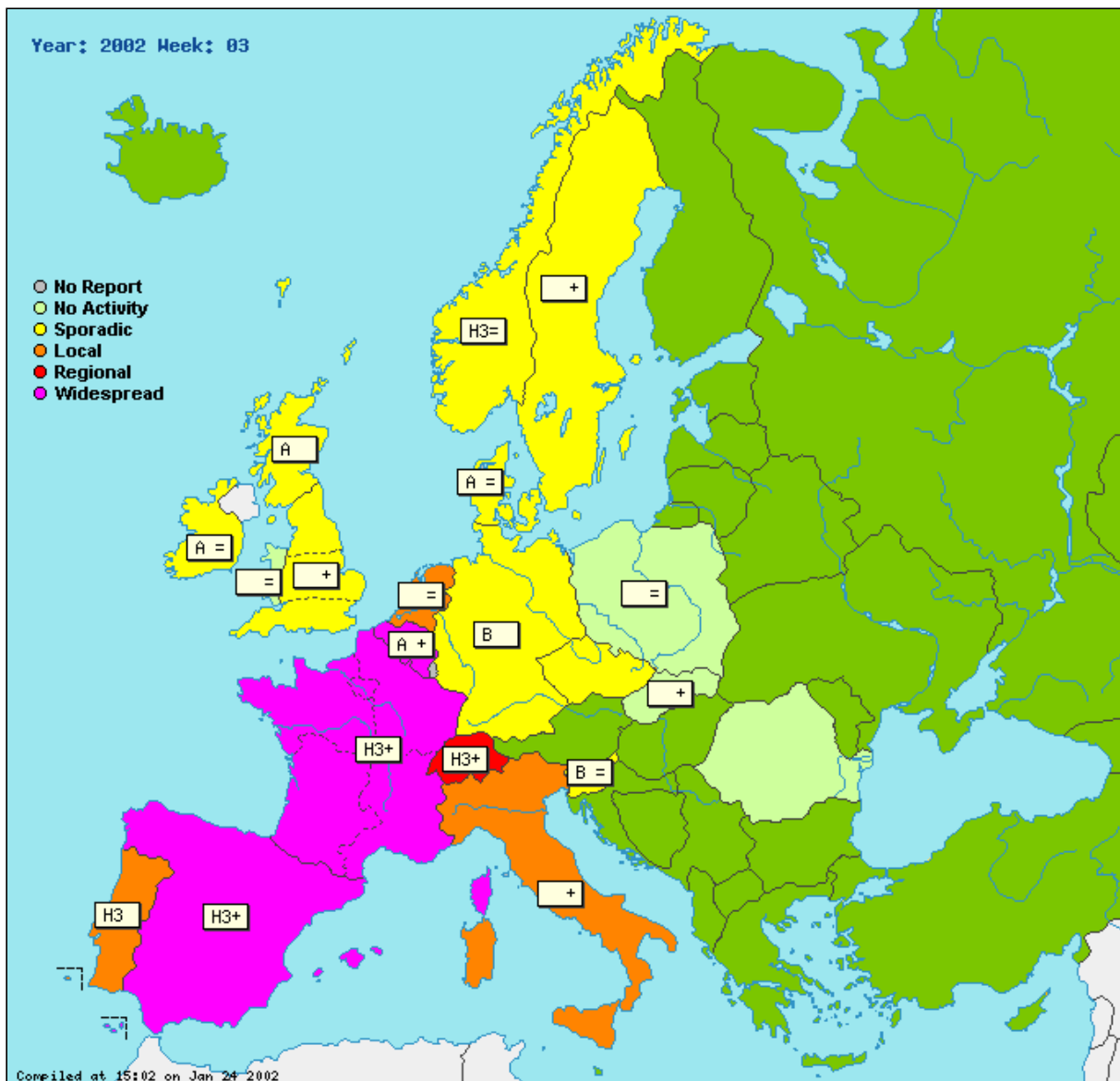
Erratum:

There is an error in this week's bulletin table (see "Table and graphs" below). The correct "Rate" for Slovenia is 5.5/100,000.

Map

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H1N2 = Dominant virus A(H1N2)
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A & B = Dominant virus A & B
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Country comments (where available)

England

France

Influenza activity is increasing in all french regions. At the present time, the epidemic has a significant impact on sick leaves prescription (+48 %) and drugs distribution (+81 %).

Influenza A/Panama/2007/99(H3N2)like viruses now are, by far, dominant in France.

Netherlands

So far just 3 influenza virus isolates from hospitalised patients, 2 A/H3N2 (week 43 and 1), 1 B (week 1)

Norway

Laboratory-confirmed influenza has so far been confined to Health Regions South, East, and West, all within southern Norway

Spain

Influenza is epidemic in Spain. Co-circulation of A(H3N2) and B. A(H3N2) is dominant.

Sweden

17 cases of clinical ILI were reported from the Swedish sentinel system.

Switzerland

The number of samples received at the laboratory increased dramatically these last days. 6 additional influenza viruses have been detected with cell culture. Either Influenza A and influenza B strains have been detected. One influenza A strain was antigenically related to influenza A/Panama/2007/99 (H3N2) that is closely related to the 2001/02 vaccine strain A/Moscow/10/99 (H3N2).

Table and graphs (where available)

Network - region	Geographic Spread	Intensity	Sentinel swabs	Percentage positive	Dominant type	Rate	Numerator / denominator	Network graphs
Belgium	Widespread	Medium	158	32.3%	Type A	727.0/100,000	ILI / Population	Click here
Czech Republic	Sporadic		43	2.3%	None	1495.6/100,000	ARI / Population	Click here
Denmark	Sporadic	Low	5	20.0%	Type A	111.1/100,000	ILI / Population	Click here
England	Sporadic	Low	82	17.1%	Type A, Subtype H1N1 and H3N2	37.7/100,000	ILI / Population	Click here
France	Widespread	Medium	316	32.0%	Type A, Subtype H3N2		ARI / Population	Click here
Germany	Sporadic		89	1.1%	Type B	1450.0/100,000	ARI / Population	Click here
Ireland	Sporadic		12	25.0%	Type A	24.9/100,000	ILI / Population	Click here
Italy	Local	Low				334.5/100,000	ILI / Population	Click here
Netherlands	Local	Low	0	0%	None	52.7/100,000	ILI / Population	Click here
Norway	Sporadic	Low	7	28.6%	Type A, Subtype H3N2		ILI / Population	Click here
Poland	None	Low	0	0%	None	10.4/100,000	ILI / Population	Click here
Portugal	Local	Low	27	37.0%	Type A, Subtype H3N2		ILI / Population	Click here
Romania	None		9	0%	None	167.9/100,000	ARI / Population	Click here
Scotland	Sporadic		12	0%	Type A		ILI / Population	Click here
Slovakia	None		12	0%	None	936.5/100,000	ILI / Population	Click here
Slovenia	Sporadic	Low	3	33.3%	Type B	1238.5/100,000	ILI / Population	Click here
Spain	Widespread	Medium	121	43.8%	Type A, Subtype H3N2	284.6/100,000	ILI / Population	Click here
Sweden	Sporadic	Low				6.4/100,000	ILI / Population	Click here
Switzerland	Regional	Medium	34	5.9%	Type A, Subtype H3N2	152.6/100,000	ILI / Population	Click here
Wales	None	Low	0	0%		6.5/100,000	ILI / Population	Click here

Preliminary data

Intensity: Low = no influenza activity or influenza activity at baseline level; Medium= usual levels of influenza activity; High = higher than usual levels of influenza activity; Very high = particularly severe levels of influenza activity.

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Percentage positive: percentage of sentinel swabs that tested positive for influenza A or B

Dominant type: this assessment is based on data from sentinel and non-sentinel sources

ARI: acute respiratory infection

ILI: influenza-like illness

Sentinel SARI: severe acute respiratory illness

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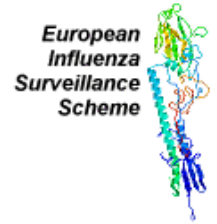
*: the value in the table for these countries reflects the percent (e.g. from 0.0 to 100.0) of total outpatient encounters that were due to ILI/ARI rather than a consultation rate per 100,000

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Heterogeneous levels of influenza activity in Europe



In week 04/2002, heterogeneous levels of influenza activity were reported throughout Europe. Influenza activity was described as widespread or regional in 5 countries: Belgium, France, Portugal, Spain and Switzerland. In most of these countries, clinical influenza morbidity rates were increasing and the intensity of influenza activity was medium. Only Spain reported a higher than usual intensity, compared to historical data. Most of the other EISS countries reported a low intensity of influenza activity, with a sporadic or local geographical spread and generally stable clinical morbidity rates. In the two networks where no influenza activity was reported (Wales and Romania), clinical morbidity indexes were increasing.

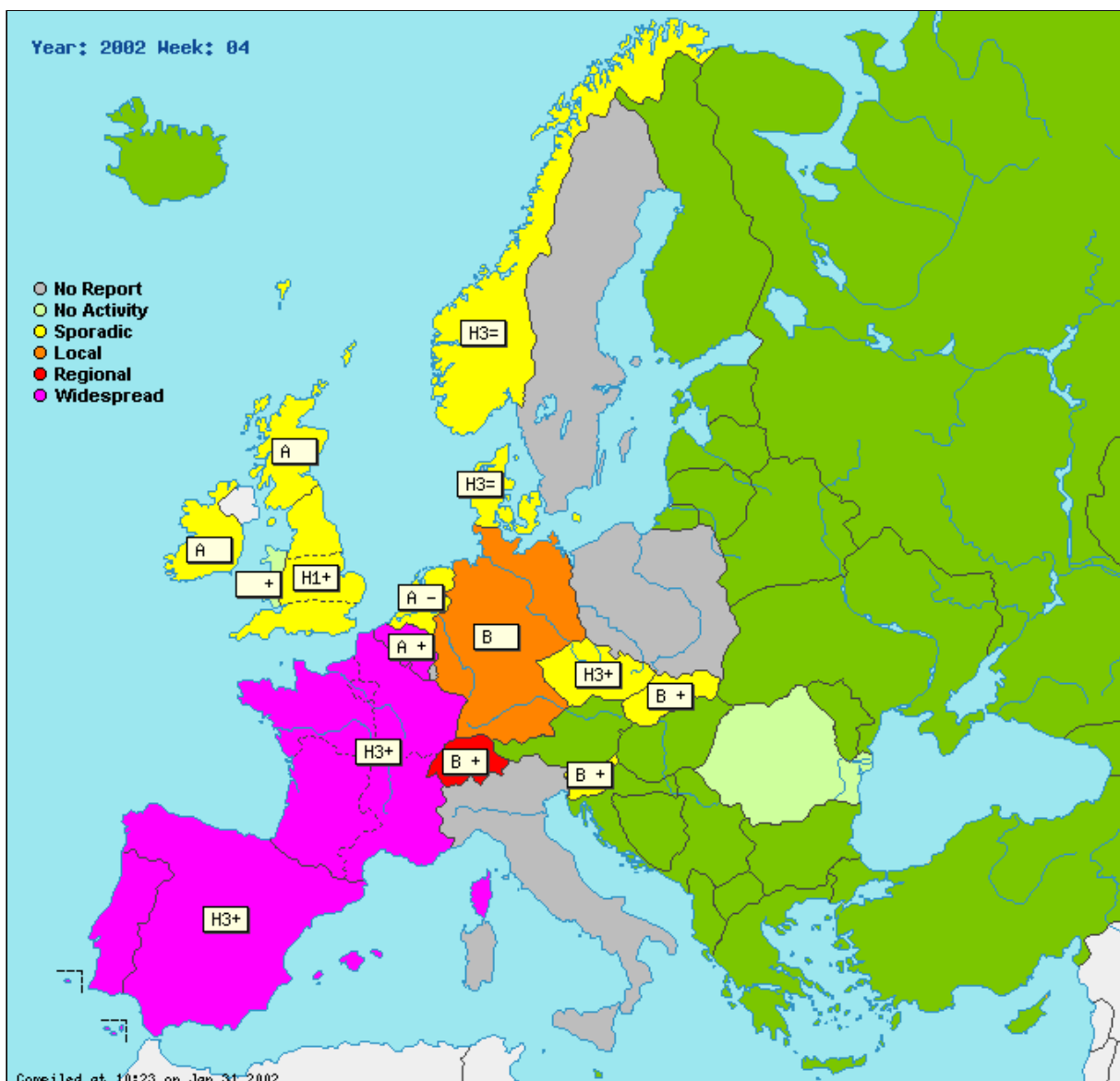
Influenza A(H3N2) remains the dominant virus in Europe, but type B is also currently detected/isolated in some countries. Some A(H1N1) is being reported, especially in England where this type was dominant in week 04/2002. Until now, all of the entirely characterised A and B influenza viruses resemble the strains in the 2001/2002 vaccine.

The Weekly Electronic Bulletin presents and comments influenza activity in the 18 European countries (20 networks) that are members of the European Influenza Surveillance Scheme. In week 04/2002, seventeen networks reported clinical data and sixteen networks reported virological data.

Map

The map presents the geographical spread as assessed by each of the networks.

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H1N2 = Dominant virus A(H1N2)
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A & B = Dominant virus A & B
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Country comments (where available)

Denmark

Two isolates typed as A/Moscow/10/99(H3N2)-like virus have been identified in two children.

England

GP consultation rates for influenza-like illness have increased in England and Wales, but remain at the upper end of the range for 'baseline' activity. The number of detections of influenza A made by the virus reference laboratory continues to increase. At the same time, the proportion of specimens from patients with 'flu-like illness' presenting to their GP, that are positive for influenza virus, is also increasing.

France

Peak is probably reached. Impact on drug consumption and sick leaves is moderate.

Influenza A(H3N2) is still epidemic in all the french regions. Sporadic cases of influenza B are currently detected/isolated.

Netherlands

In 3 of the 4 nose/throat swabs from GP patients consulting for ILI in week 4 we detected influenza A by PCR. Culturing is going on for typing. Since week 43 influenzavirus was detected in 11 hospital patients: 7 A/H3N2, 3 A, 1 B.

Norway

Cases of laboratory-confirmed influenza have now been observed in all regions. The majority of virus detections are in Region East, SE Norway.

Slovakia

The total morbidity has increased (+20,8%), compare to the previous week, but still is under expected level. No local outbreaks, only sporadic influenza activity on a low level is observed.

Second isolation of influenza B virus from sporadic case in Bratislava was recorded. Both strains were identified as B/Sichuan/379/99-like.

Spain

Influenza is still over the epidemic threshold in Spain. Activity appears to be decreasing in the middle part of the country. A(H3N2) is dominant.

Switzerland

Influenza activity increased again last week. The most affected region is the french part of Switzerland. Influenza viruses strains that circulate are antigenically related to the 2001/2002 vaccine strain. Both type of influenza viruses are equally detected Type A (H3N2) and B.

Table and graphs (where available)

Network - region	Geographic Spread	Intensity	Sentinel swabs	Percentage positive	Dominant type	Rate	Numerator / denominator	Network graphs
Belgium	Widespread	Medium	142	31.7%	Type A	973.8/100,000	ILI / Population	Click here
Czech Republic	Sporadic		50	12.0%	Type A, Subtype H3N2	1538.1/100,000	ARI / Population	Click here
Denmark	Sporadic	Low	18	5.6%	Type A, Subtype H3N2	103.9/100,000	ILI / Population	Click here
England	Sporadic	Low	58	53.5%	Type A, Subtype H1N1	43.8/100,000	ILI / Population	Click here
France	Widespread	Medium	301	36.9%	Type A, Subtype H3N2		ARI / Population	Click here
Germany	Local	Low	99	19.2%	Type B	1437.0/100,000	ARI / Population	Click here
Ireland	Sporadic		14	35.7%	Type A	23.0/100,000	ILI / Population	Click here
Netherlands	Sporadic	Low	4	75.0%	Type A	28.5/100,000	ILI / Population	Click here
Norway	Sporadic	Low	7	57.1%	Type A, Subtype H3N2		ILI / Population	Click here
Portugal	Widespread	Medium					ILI / Population	Click here
Romania	None		17	0%	None	174.6/100,000	ARI / Population	Click here
Scotland	Sporadic	Low	30	0%	Type A	38.1/100,000	ILI / Population	Click here
Slovakia	Sporadic	Low	5	20.0%	Type B	1131.6/100,000	ILI / Population	Click here
Slovenia	Sporadic	Low	43	32.6%	Type B	25.5/100,000	ILI / Population	Click here
Spain	Widespread	High	123	43.1%	Type A, Subtype H3N2	399.3/100,000	ILI / Population	Click here
Switzerland	Regional	Medium	44	0%	Type B	247.9/100,000	ILI / Population	Click here
Wales	None	Low	0	0%	None	9.3/100,000	ILI / Population	Click here

Preliminary data

Intensity: Low = no influenza activity or influenza activity at baseline level; Medium = usual levels of influenza activity; High = higher than usual levels of influenza activity; Very high = particularly severe levels of influenza activity.

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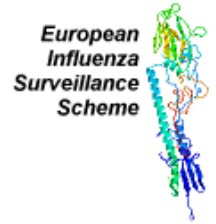
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First isolation of influenza A(H1N2) in Europe



In week 05/2002, levels of influenza activity ranged from none to widespread in Europe.

Influenza activity was described as widespread in 5 countries: Belgium, France, Portugal, Spain and Switzerland. In most of these countries, clinical influenza morbidity rates were no longer increasing and there was a medium intensity. At the same time, influenza activity was regional in 4 countries: Germany, Italy, the Netherlands and Norway. The other EISS countries reported a low intensity of influenza activity with a sporadic or local geographical spread and variable clinical morbidity rates. The Welsh network was the only one where no influenza activity was reported.

Influenza A(H3N2) remained the dominant virus in Europe. Influenza B was also detected/isolated in some countries, in particular in Italy, Slovakia and Slovenia.

Influenza A(H1N2):

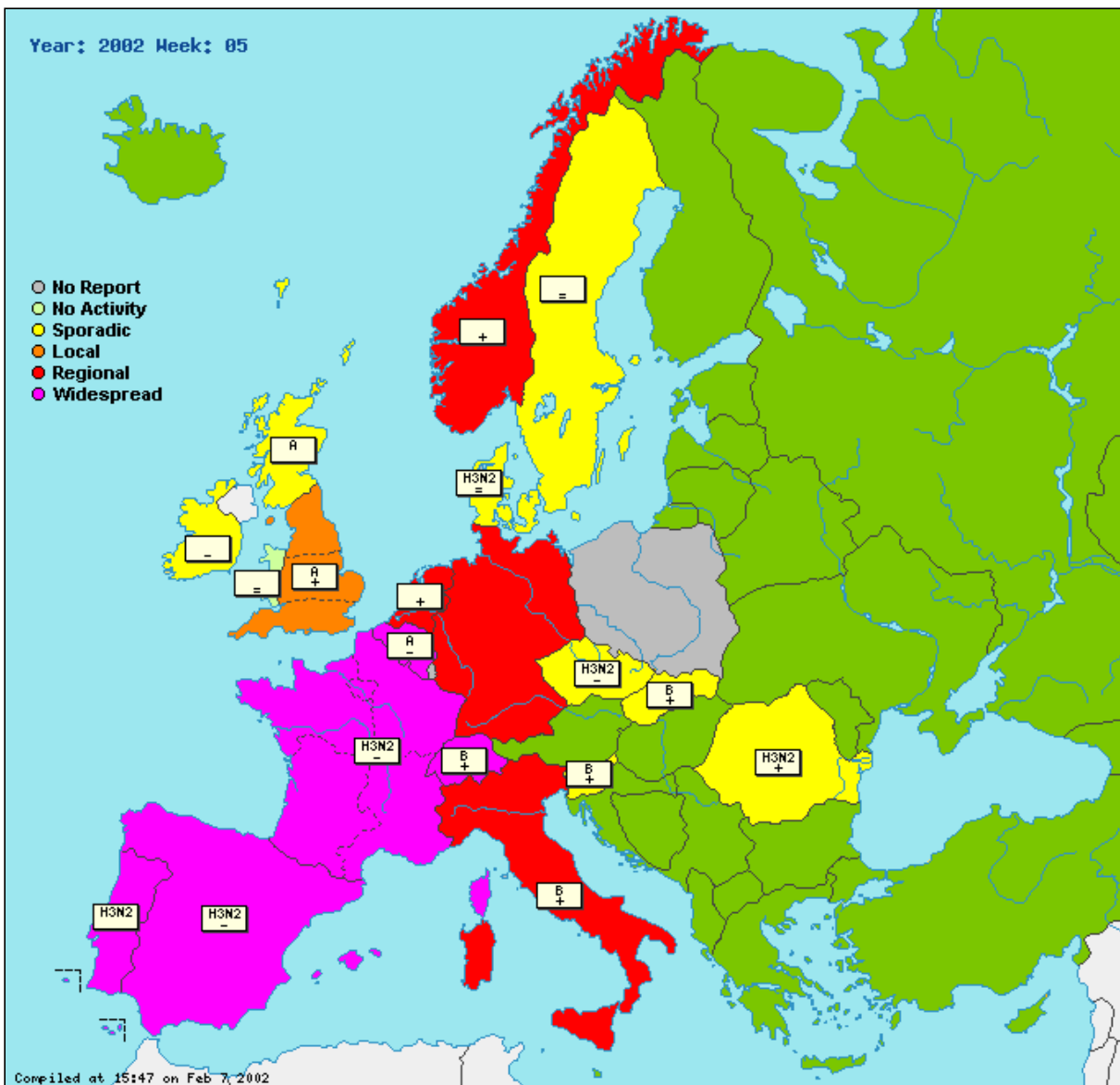
In England, influenza A(H1N2) has been isolated for the first time in Europe. Isolates have come from both hospital and community sources, including three school outbreaks. Most of the cases so far have been in the 5–14 year age range. The influenza A(H1N2) subtype has also been isolated in Scotland: one of the four typed isolates of this winter is an H1N2 and the three others are H3N2.

The Weekly Electronic Bulletin presents and comments influenza activity in the 18 European countries (20 networks) that are members of the European Influenza Surveillance Scheme. In week 05/2002, nineteen networks reported clinical data and seventeen networks reported virological data.

Map

The map presents the geographical spread as assessed by each of the networks.

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Country comments (where available)

Belgium

The percentage of Influenza B increases

England

Of the eight influenza A (not sub-typed) sentinel specimens, four are influenza A (H1N2) and four are influenza A (H1Nuntyped). Further characterisation of the N component of these is underway. Three recent school outbreaks have been confirmed as being due to the new H1N2 virus. Clinical indices of influenza activity remain little changed from last week and fall within the range of baseline activity.

Czech Republic

To date, two A(H3N2) strains were isolated in NIC -Prague. Both samples were taken from sporadic cases of flu.

France

Influenza is always epidemic in France. Peak was reached on week 04/2002, but influenza activity is still slightly increasing in the South West of France.

A(H3N2) viruses are dominant. Influenza B is also currently identified.

Italy

Increasing influenza activity. Weekly incidence of influenza-like illness (ILI) is 8,45 per 1,000 patient population. Rates continues remain highest in age group 0-14 years. Detection/isolations of influenza A and B viruses have strongly increased during last weeks. The predominant type is B; the vast majority of subtyped isolates being A/H3N2. Influenza B and A/H3N2 isolates are from Northern and Central Italy.

Slovakia

The total morbidity has slightly increased (+6,1%), compare to the previous week, but still is under expected level. No local outbreaks, only sporadic influenza activity on a low level is observed.

Third isolation of influenza B virus from sporadic case in Bratislava was recorded. The strain was identified as B/Sichuan/379/99-like, as the strains isolated before.

Spain

Influenza is still over the epidemic threshold in Spain, but the morbidity rate has declined this week. Co-circulation of A(H3N2) and B. A(H3N2) is dominant.

Sweden

10 clinical cases of ILI out of 4521 patient encounters were reported from the Swedish sentinel-system.

Switzerland

The number of influenza viruses detected increased. 17 influenza A and B viruses have been detected : 5 were influenza A viruses and 12 influenza B viruses. With rapid test, the number of influenza viruses detected is still high. However, there was less viruses detected in the region 1 during the week 5. Moreover, the number of rapid test made by the practitioners during the first part of the week 6 is lower than the one registered during the week 5. Wait and see next update.

Table and graphs (where available)

Network - region	Geographic Spread	Intensity	Sentinel swabs	Percentage positive	Dominant type	Rate	Numerator / denominator	Network graphs
Belgium	Widespread	Medium	119	43.7%	Type A	727.4/100,000	ILI / Population	Click here
Czech Republic	Sporadic		51	7.8%	Type A, Subtype H3N2		ARI / Population	Click here
Denmark	Sporadic	Low	12	8.3%	Type A, Subtype H3N2	92.9/100,000	ILI / Population	Click here
England	Local	Low	55	43.6%	Type A, Subtype H3N2 and H1N2	42.7/100,000	ILI / Population	Click here
France	Widespread	Medium	283	25.4%	Type A, Subtype H3N2		ARI / Population	Click here
Germany	Regional	Low	128	17.2%	None	1431.0/100,000	ARI / Population	Click here
Ireland	Sporadic	Low	14	14.3%	None	10.3/100,000	ILI / Population	Click here
Italy	Regional	Medium	2	0%	Type B	845.3/100,000	ILI / Population	Click here
Netherlands	Regional	Medium	4	0%	None	92.1/100,000	ILI / Population	Click here
Norway	Regional	Low					ILI / Population	Click here
Portugal	Widespread	Medium	23	65.2%	Type A, Subtype H3N2		ILI / Population	Click here
Romania	Sporadic	Low	16	6.3%	Type A, Subtype H3N2	179.4/100,000	ARI / Population	Click here
Scotland	Sporadic	Low	22	9.1%	Type A	40.6/100,000	ILI / Population	Click here
Slovakia	Sporadic	Low	25	4.0%	Type B	1200.9/100,000	ILI / Population	Click here
Slovenia	Sporadic	Low	58	27.6%	Type B	84.1/100,000	ILI / Population	Click here
Spain	Widespread	High	135	56.3%	Type A, Subtype H3N2	380.9/100,000	ILI / Population	Click here
Sweden	Sporadic	Low				6.0/100,000	ILI / Population	Click here
Switzerland	Widespread	Medium	55	0%	Type B	354.3/100,000	ILI / Population	Click here
Wales	None	Low	0	0%	None	7.0/100,000	ILI / Population	Click here

Preliminary data

Intensity: Low = no influenza activity or influenza activity at baseline level; Medium= usual levels of influenza activity; High = higher than usual levels of influenza activity; Very high = particularly severe levels of influenza activity.

Geographical spread: No activity = no laboratory-confirmed cases, or evidence of increased or unusual respiratory disease activity; Sporadic = isolated cases of laboratory-confirmed influenza infection; Localized = limited to one administrative unit in the country (or reporting site) only; Regional = appearing in multiple but <50% of the administrative units of the country (or reporting sites); Widespread = appearing in >=50% of the administrative units of the country (or reporting sites).

Impact: Low = demands on health-care services are not above usual levels; Moderate = demands on health-care services are above the usual demand levels but still below the maximum capacity of those services; Severe = demands on health care services exceed the capacity of those services.

Trend: Increasing = evidence that the level of respiratory disease activity is increasing compared with the previous week; Stable = evidence that the level of respiratory disease activity is unchanged compared with the previous week; Decreasing = evidence that the level of respiratory disease activity is decreasing compared with the previous week.

Percentage positive: percentage of sentinel swabs that tested positive for influenza A or B

Dominant type: this assessment is based on data from sentinel and non-sentinel sources

ARI: acute respiratory infection

ILI: influenza-like illness

Sentinel SARI: severe acute respiratory illness

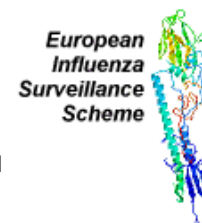
Population: per 100,000 population

*: the value in the table for these countries reflects the percent (e.g. from 0.0 to 100.0) of total outpatient encounters that were due to ILI/ARI rather than a consultation rate per 100,000

The bulletin text was written by Anne Mosnier (Open Rome, France), John Paget (EISS co-ordination centre, the Netherlands), Helena Rebelo de Andrade (Direcção-Geral da Saúde, Portugal) and Tomás Vega (Consejería de Sanidad y Bienestar Social, Spain) on behalf of the EISS Working Group.

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Widespread influenza activity reported in seven countries in Europe



In week 06/2002, levels of influenza activity ranged from sporadic to widespread in Europe. The geographical spread of influenza was reported as widespread in seven countries: Belgium, France, Italy, Norway, Portugal, Spain and Switzerland. Weekly clinical morbidity rates in these countries were decreasing in Belgium, France, Portugal and Spain, were stable in Italy and were increasing in Norway and Switzerland.

Influenza activity was regional in the Netherlands and Sweden in week 06/2002, with both countries reporting higher levels of influenza activity in the south. Local outbreaks of influenza were reported in Germany and Romania. In the remaining networks (the Czech Republic, Denmark, England, Ireland, Scotland, Slovakia, Slovenia and Wales) influenza activity was sporadic.

Compared to historical data, clinical morbidity rates in Europe were of a low (ten networks) or medium (eight networks) intensity. The percentage of sentinel swabs which tested positive for influenza (A or B) varied from 0% in Denmark, the Netherlands and Switzerland to 48% in Portugal.

Eleven networks reported that the dominant influenza type was influenza A and four networks reported that it was influenza B. Among the networks reporting influenza A as the dominant type, seven networks reported that influenza A(H3N2) was the dominant subtype.

Influenza A(H1N2):

No cases of influenza A(H1N2) were reported to the European Influenza Surveillance Scheme (EISS) in week 06/2002. The first two cases of influenza A(H1N2) were isolated in France, one in a patient sampled in week 05/2002 and the other in a patient sampled in week 04/2002.

The Weekly Electronic Bulletin presents and comments influenza activity in the 18 European countries (20 networks) that are members of EISS. In week 06/2002, nineteen networks reported clinical data and eighteen networks reported virological data.

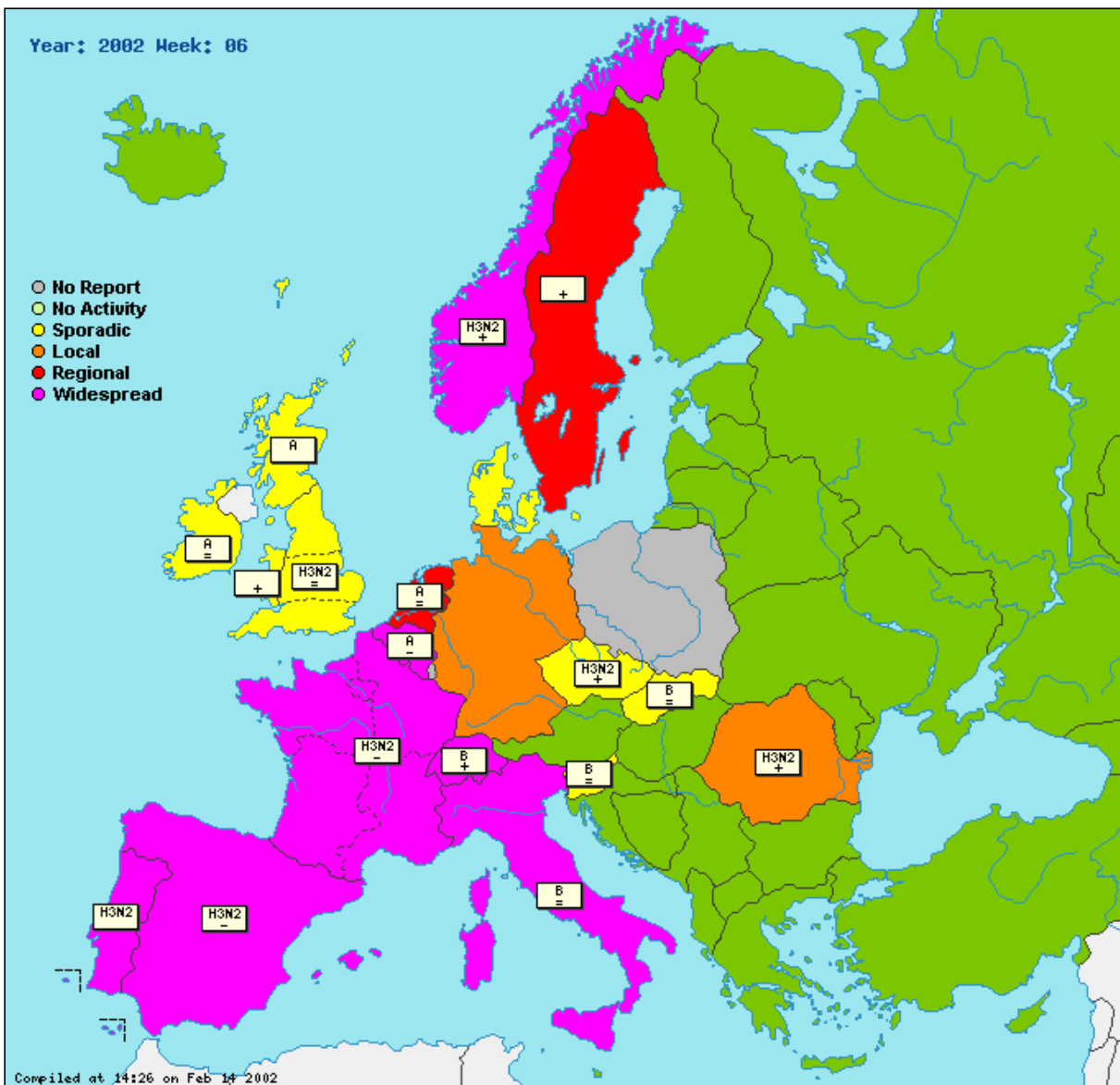
Erratum:

There is an error in this week's bulletin table (see "Table and graphs" below). The correct number of "Sentinel swabs" for France is 238 and the correct "Percentage positive" is 34.9%. The corresponding regional numbers and percentages are (available by clicking on France in the "Map" section): 64 and 25% for France North West, 14 and 50% for France North East, 8 and 12.5% for France Ile-de-France, 83 and 36.1% for France South West and 69 and 42.0% for France South East.

Map

The map presents the geographical spread as assessed by each of the networks.

Clicking on the map will, if available, take you through to the national web site. If 'regional' activity is reported, a pop-up text box will appear which describes the activity in greater detail.



A = Dominant virus A
H1N1 = Dominant virus A(H1N1)
H3N2 = Dominant virus A(H3N2)
H1N2 = Dominant virus A(H1N2)
B = Dominant virus B
A & B = Dominant virus A & B

= : stable clinical activity
+ : increasing clinical activity
- : decreasing clinical activity

Low = no influenza activity or influenza at baseline levels
Medium = usual levels of influenza activity
High = higher than usual levels of influenza activity
Very high = particularly severe levels of influenza activity

No activity = no evidence of influenza virus activity (clinical activity remains at baseline levels)
Sporadic = isolated cases of laboratory confirmed influenza infection
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.

Country comments (where available)

Belgium

Decreasing influenza activity but still at an epidemic level. Peak was reached on week 4.

England

Clinical indicators of influenza activity remain little changed compared to last week, with GP consultation rates remaining within the range of 'baseline' activity but are higher in children aged less than 15 years of age. Both influenza A (H3N2) and influenza A (H1) continue to be detected from community and hospital sources. The newly discovered influenza A (H1N2) continues to predominate in children less than 15 years of age.

The 7 sentinel specimens detailed as influenza A (not subtyped) are influenza A (H1N2untyped)

Czech Republic

To date, four A(H3N2) strains were isolated in NIC.

France

Impact of influenza is decreasing everywhere except in Bretagne (Western part of France).

The two H1 viruses of this week have not been submitted to full subtype characterisation as yet. The antigenic profile of their H1 is close to that of A/NC/20/99(H1N1). Two H1 viruses, one isolated from a patient sampled during week 2002/05 in an Alpes ski resort, and one isolated from a patient sampled during week 2002/04 in Lorraine (North-East of France) were subtyped as A(H1N2).

Italy

Weekly incidence of influenza-like illness (ILI) is 8,22 per 1,000 patient population. Rates continues remain highest in age group 0-14 years. Sporadic cases associated with influenza A/H3N2 subtype are isolated in Central Italy. Influenza activity

due to influenza B has continued to increase in Northern and Central Italy. Some B viruses isolated are antigenically related to B/Hong Kong/330/2001 new vaccine strain. No detection or isolation of the newly discovered influenza A/H1N2 subtype.

Norway

The influenza B virus that was detected in week 5 has been characterised both genetically and antigenically as B/Sichuan/379/99-like.

Portugal

The peak of influenza activity was reached at week 4 and since then the incidence rate of influenza like illness has been decreasing. From the start of the season the dominant subtype of influenza has been A(H3) but A(H1) has also been frequently detected.

Spain

Influenza activity is decreasing all around Spain. Co-circulation of A(H3N2) and B. A(H3N2) is dominant.

Sweden

34 cases of clinical ILI out of 7538 patient encounters were reported from the sentinel system.

Switzerland

During week 5, about the same number of influenza A and influenza B viruses were found. The strains which have been characterized were related to the 2001/2002 vaccine strains A/Moscow/10/99 (H3N2), A/Panama/2007/99, and influenza B/Sichuan/379/99.

Table and graphs (where available)

Network - region	Geographic Spread	Intensity	Sentinel swabs	Percentage positive	Dominant type	Rate	Numerator / denominator	Network graphs
Belgium	Widespread	Medium	74	39.2%	Type A	532.6/100,000	ILI / Population	Click here
Czech Republic	Sporadic	Low	51	7.8%	Type A, Subtype H3N2	1356.1/100,000	ARI / Population	Click here
Denmark	Sporadic	Low	10	0%	None	101.3/100,000	ILI / Population	Click here
England	Sporadic	Low	30	33.3%	Type A, Subtype H3N2	46.2/100,000	ILI / Population	Click here
France	Widespread	Medium	238	50.8%	Type A, Subtype H3N2		ARI / Population	Click here
Germany	Local	Low	109	23.9%	None	1448.0/100,000	ARI / Population	Click here
Ireland	Sporadic	Low	15	46.7%	Type A	9.9/100,000	ILI / Population	Click here
Italy	Widespread	Medium	0	0%	Type B	822.3/100,000	ILI / Population	Click here
Netherlands	Regional	Medium	6	0%	Type A	93.5/100,000	ILI / Population	Click here
Norway	Widespread	Low	7	28.6%	Type A, Subtype H3N2		ILI / Population	Click here
Portugal	Widespread	Medium	25	48.0%	Type A, Subtype H3N2		ILI / Population	Click here
Romania	Local	Low	51	41.2%	Type A, Subtype H3N2	207.1/100,000	ARI / Population	Click here
Scotland	Sporadic	Low	28	7.1%	Type A	29.3/100,000	ILI / Population	Click here
Slovakia	Sporadic	Low	20	5.0%	Type B	1168.1/100,000	ILI / Population	Click here
Slovenia	Sporadic	Low	57	26.3%	Type B	76.3/100,000	ILI / Population	Click here
Spain	Widespread	Medium	137	36.5%	Type A, Subtype H3N2	312.7/100,000	ILI / Population	Click here
Sweden	Regional	Medium				12.1/100,000	ILI / Population	Click here
Switzerland	Widespread	Medium	37	0%	Type B	399.8/100,000	ILI / Population	Click here
Wales	Sporadic	Low	0	0%	None	10.3/100,000	ILI / Population	Click here

Preliminary data

Intensity: Low = no influenza activity or influenza activity at baseline level; Medium = usual levels of influenza activity; High = higher than usual levels of influenza activity; Very high = particularly severe levels of influenza activity.

Geographical spread: No activity = no laboratory-confirmed cases, or evidence of increased or unusual respiratory disease activity; Sporadic = isolated cases of laboratory-confirmed influenza infection; Localized = limited to one administrative unit in the country (or reporting site) only; Regional = appearing in multiple but <50% of the administrative units of the country (or reporting sites); Widespread = appearing in ≥50% of the administrative units of the country (or reporting sites).

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Trend: Increasing = evidence that the level of respiratory disease activity is increasing compared with the previous week; Stable = evidence that the level of respiratory disease activity is unchanged compared with the previous week; Decreasing = evidence that the level of respiratory disease activity is decreasing compared with the previous week.

Percentage positive: percentage of sentinel swabs that tested positive for influenza A or B

Dominant type: this assessment is based on data from sentinel and non-sentinel sources

ARI: acute respiratory infection

ILI: influenza-like illness

Sentinel SARI: severe acute respiratory illness

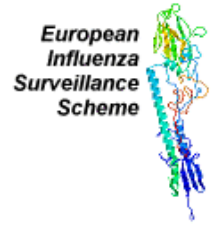
Population: per 100,000 population

*: the value in the table for these countries reflects the percent (e.g. from 0.0 to 100.0) of total outpatient encounters that were due to ILI/ARI rather than a consultation rate per 100,000

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Heterogeneous levels of influenza activity across Europe



In week 07/2002, levels of influenza activity ranged from none to widespread in Europe. No influenza activity was reported in Poland, the Slovak Republic and Wales. Widespread activity was reported in France, Italy, Norway, Portugal, Spain and Switzerland. With the exception of Norway, weekly clinical morbidity rates were decreasing in all of the countries that reported widespread activity in week 07/2002.

Four countries reported regional influenza activity in week 07/2002: Belgium, Germany, the Netherlands and Sweden. Weekly clinical morbidity rates were decreasing in Belgium, were stable in Germany and were increasing in the Netherlands and Sweden. Local outbreaks of influenza were reported in Romania and Slovenia, and sporadic influenza activity was reported in the Czech Republic, Denmark, England, Ireland and Scotland.

Eleven networks reported that the dominant influenza type was influenza A; eight of these reported that the dominant subtype was H3N2. Influenza B was the dominant influenza type in Italy, the Slovak Republic and Switzerland.

[Influenza A\(H1N2\):](#)

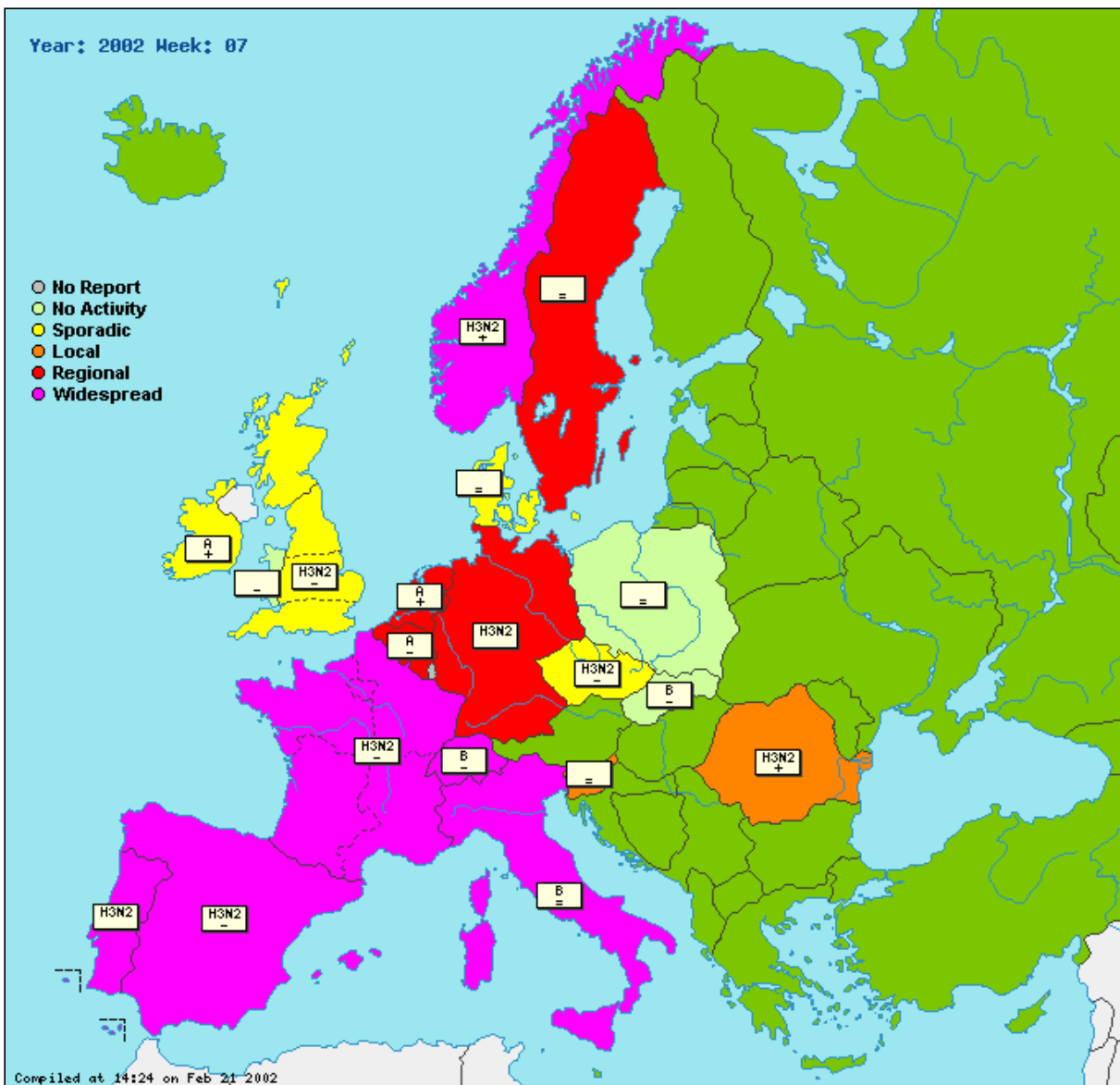
No cases of influenza A(H1N2) were reported to the European Influenza Surveillance Scheme (EISS) in week 07/2002.

The Weekly Electronic Bulletin presents and comments influenza activity in the 18 European countries (20 networks) that are members of the European Influenza Surveillance Scheme (EISS). In week 07/2002, twenty networks reported clinical data and eighteen networks reported virological data.

Map

The map presents the geographical spread as assessed by each of the networks.

Clicking on the map will, if available, take you through to the national web site. If 'regional' activity is reported, a pop-up text box will appear which describes the activity in greater detail.



A = Dominant virus A
 H1N1 = Dominant virus A(H1N1)
 H3N2 = Dominant virus A(H3N2)
 H1N2 = Dominant virus A(H1N2)
 B = Dominant virus B
 A & B = Dominant virus A & B

= : stable clinical activity
 + : increasing clinical activity
 - : decreasing clinical activity

Low = no influenza activity or influenza at baseline levels
 Medium = usual levels of influenza activity
 High = higher than usual levels of influenza activity
 Very high = particularly severe levels of influenza activity

No activity = no evidence of influenza virus activity (clinical activity remains at baseline levels)
 Sporadic = isolated cases of laboratory confirmed influenza infection
 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.

Country comments (where available)

England

Clinical consultation levels of influenza activity have decreased in England although rates remain highest in children aged less than 14 years. Virologically confirmed cases of influenza A (H3N2) and (H1) continue to be reported.

Czech Republic

Sporadic influenza continues, one local outbreak (influenza A H3N2) is reported from gerontopsychiatric hospital in Prague. To date, 10 A(H3N2) strains were identified, B influenza was confirmed by antigen detection only.

France

Influenza epidemic intensity is decreasing in France.

Influenza detections/isolations are decreasing in France. Influenza A(H3N2) and B are still active. Four cases of influenza A(H1N2) and two cases of A(H1N1) have been confirmed in France since October 2001.

Italy

Weekly incidence of influenza-like illness (ILI) is 7.33 per 1,000 patient population and influenza activity is reported as widespread in the country. Influenza B continues to be the predominant circulating strain in Northern and Central Italy. Sporadic detection of A/H3N2 viruses; the isolates are from Trieste and Genova (Northern Italy).

Slovakia

Slightly decreasing sporadic activity.

Fifth isolation of influenza B virus from sporadic case in Bratislava was recorded.

Spain

Decreasing influenza activity. Peak was reached on week 4. Co-circulation of A(H3N2) and B. A(H3N2) is dominant.

Sweden

40 cases of clinical ILI out of 7097 patient encounters were reported from the Swedish sentinel system.

Switzerland

Medical contacts for influenza-like illness remained stable or even decreased in certain regions last week for the first time in this surveillance period. On parallel the number of samples received in the laboratory continued to decrease. In week 7 the number of influenza viruses detected remained stable in comparison to the previous week. The number of influenza B viruses detected was slightly higher than the one of influenza A viruses. All the viruses that have been characterised were antigenically related to the 2001/2002 vaccine strains.

Table and graphs (where available)

Network - region	Geographic Spread	Intensity	Sentinel swabs	Percentage positive	Dominant type	Rate	Numerator / denominator	Network graphs
Belgium	Regional	Medium	25	44.0%	Type A	362.3/100,000	ILI / Population	Click here
Czech Republic	Sporadic	Low	71	22.5%	Type A, Subtype H3N2	1281.9/100,000	ARI / Population	Click here
Denmark	Sporadic	Low	10	0%	None	79.6/100,000	ILI / Population	Click here
England	Sporadic	Low	16	25.0%	Type A, Subtype H3N2	32.4/100,000	ILI / Population	Click here
France	Widespread	Medium	26	15.4%	Type A, Subtype H3N2	1564.6/100,000	ARI / Population	Click here
Germany	Regional	Low	127	32.3%	Type A, Subtype H3N2	1482.0/100,000	ARI / Population	Click here
Ireland	Sporadic		15	20.0%	Type A	32.9/100,000	ILI / Population	Click here
Italy	Widespread	Medium	2	0%	Type B	733.0/100,000	ILI / Population	Click here
Netherlands	Regional	Low	3	33.3%	Type A	117.5/100,000	ILI / Population	Click here
Norway	Widespread	Medium	6	16.7%	Type A, Subtype H3N2		ILI / Population	Click here
Poland	None	Low	0	0%	None	10.5/100,000	ILI / Population	Click here
Portugal	Widespread	Medium	10	60.0%	Type A, Subtype H3N2		ILI / Population	Click here
Romania	Local	Medium	56	41.1%	Type A, Subtype H3N2	224.2/100,000	ARI / Population	Click here
Scotland	Sporadic	Low	17	5.9%		28.2/100,000	ILI / Population	Click here
Slovakia	None	Low	29	3.5%	Type B	1102.2/100,000	ILI / Population	Click here
Slovenia	Local	Medium				86.2/100,000	ILI / Population	Click here
Spain	Widespread	Medium	36	83.3%	Type A, Subtype H3N2	225.3/100,000	ILI / Population	Click here
Sweden	Regional	Low				13.2/100,000	ILI / Population	Click here
Switzerland	Widespread	Medium	17	0%	Type B	343.6/100,000	ILI / Population	Click here
Wales	None	Low	0	0%	None	7.0/100,000	ILI / Population	Click here

Preliminary data

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Dominant type: this assessment is based on data from sentinel and non-sentinel sources

ARI: acute respiratory infection

ILI: influenza-like illness

Sentinel SARI: severe acute respiratory illness

Population: per 100,000 population

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Decreasing influenza activity in Europe

In week 08/2002, influenza activity was decreasing in Belgium, the Czech Republic, England, France, and Slovenia. The geographical spread of influenza was reported as widespread in five countries: Italy, Norway, Portugal, Spain, and Switzerland. However, weekly clinical morbidity rates in four of these countries were decreasing. Only three networks – the German, Norwegian and Romanian – reported increasing influenza activity.

Thirteen networks mentioned influenza A as the dominant type and three networks reported type B (Italy, Slovenia and Switzerland). Among the networks reporting influenza A, nine indicated that H3N2 was the dominant subtype.

Other influenza viruses isolated in Europe:

Recently, two influenza viruses were isolated in Europe which are not in the 2001-2002 influenza vaccine: the influenza A(H1N2) subtype isolated in England, Scotland and France ([click here](#)) and influenza B/Victoria/2/87-like viruses isolated in Germany, Italy and the Netherlands (see below).

Up until the end of week 07/2002, the EISS database had 4,488 laboratory-confirmed reports of influenza (sentinel and non-sentinel reports). Of these, 1,151 (26%) reports were cases of influenza B and the rest were influenza A. Based on an EISS survey carried out in week 07/2002, there have been, so far this season, one (sentinel) isolation of the B/Victoria/2/87-like virus in Germany, one (sentinel) isolation in Italy, and three (non-sentinel) isolations in the Netherlands. This means that only 0.4% of the influenza B viruses isolated so far this season in Europe have been B/Victoria/2/87-like viruses.

The current 2001-2002 influenza vaccine should provide a good level of immunity to the influenza A(H1N2) subtype as it is a combination of two antigens present in the two A strains currently contained in the vaccine, H1N1 and H3N2 ([click here](#); see PHLS Press Release). The 2001-2002 vaccine will provide sub optimum protection against B/Victoria/2/87-like viruses; however, our data suggests that there have only been rare cases of this virus in Europe.

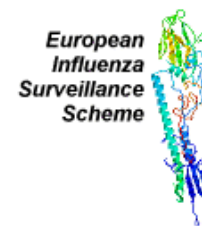
EISS is paying special attention to the surveillance of influenza viruses circulating in Europe at the moment, and the Weekly Electronic Bulletin will provide regular updates on the occurrence of the influenza A(H1N2) subtype and the B/Victoria/2/87-like viruses in the coming weeks.

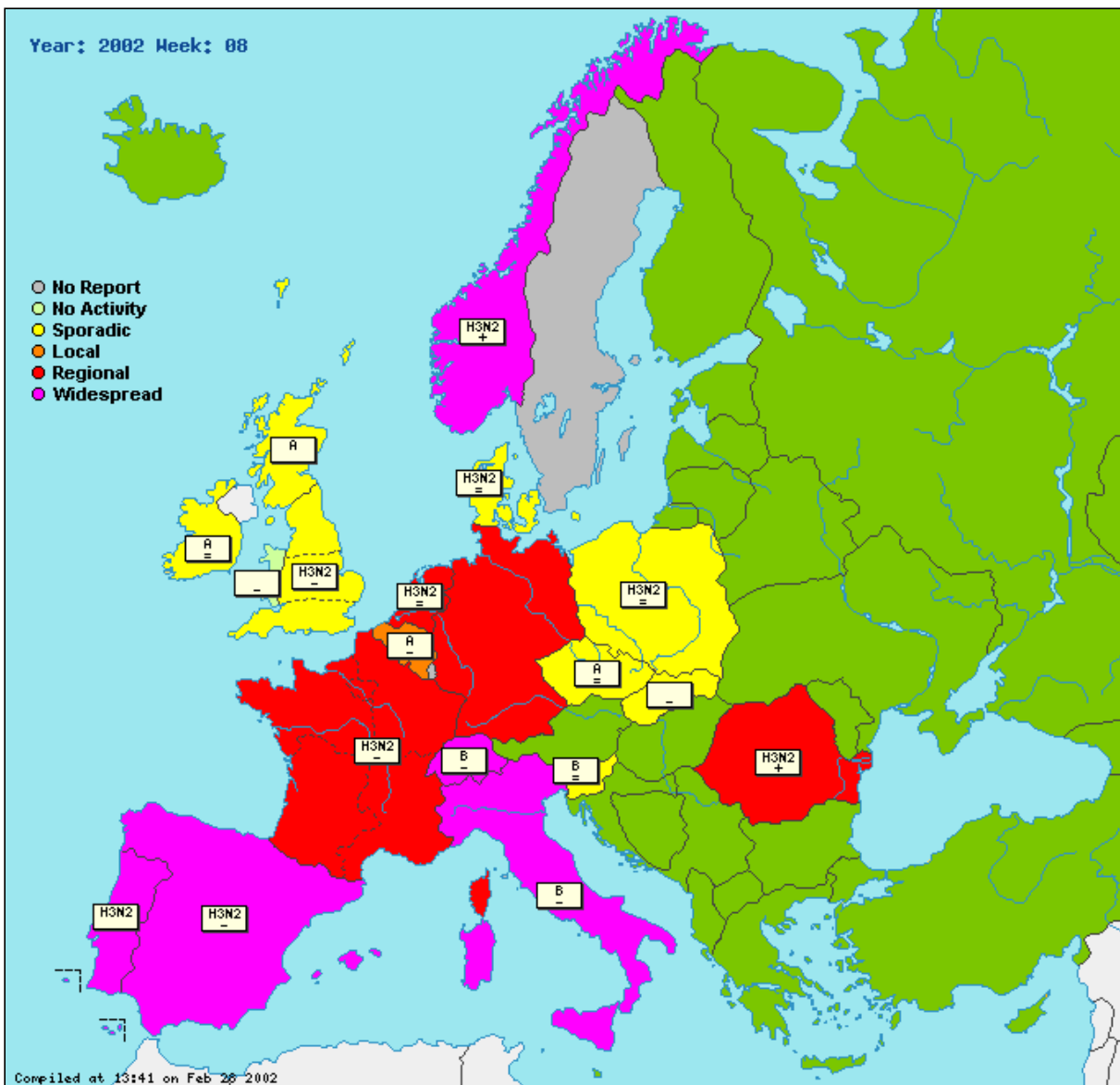
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Map

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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.

Country comments (where available)

England

GP consultations for 'influenza like illness' have continued to decrease in England. The number of influenza viruses detected from community based surveillance is also decreasing.

The 5 sentinel influenza A (not subtyped) are influenza A(H1N1untyped)

France

During school holidays, influenza activity is decreasing. Several cases of confirmed flu are observed among people in holidays in La Clusaz, Val d'Isère, Val Thorens (Alpes) and Les Angles (Pyrénées).

The circulation of influenza A and B viruses was declining although it was detected in nearly all regions.

Germany

Increasing influenza activity. Circulation of influenza A(H3N2) and B viruses to the same extent. More than half of the positive swabs were taken from children and young adults.

Italy

Decreasing Influenza activity; weekly incidence of influenza-like illness (ILI) is 5,90 per 1,000 patient population. Sporadic detection of A/H3N2 viruses; the isolates are from Parma and Sassari. Influenza B continues to be the predominant circulating strain.

Norway

Influenza A(H3N2) viruses similar to the vaccine strain remain dominant, but influenza B viruses are now being seen more regularly.

Portugal

Decreasing influenza activity in the country
Switzerland

Influenza A and B viruses are detected in Switzerland. Interestingly, during week 6 the majority of the viruses detected were influenza B. However, influenza A viruses have been detected in a higher proportion in week 7. All the samples characterised were antigenically related to the 2001/2002 vaccine strains influenza A/Panama/2007/99 (H3N2) and B/Sichuan/379/99.

Table and graphs (where available)

Network - region	Geographic Spread	Intensity	Sentinel swabs	Percentage positive	Dominant type	Rate	Numerator / denominator	Network graphs
Belgium	Local	Medium	38	23.7%	Type A	267.2/100,000	ILI / Population	Click here
Czech Republic	Sporadic	Low	44	9.1%	Type A	1286.0/100,000	ARI / Population	Click here
Denmark	Sporadic	Low	6	66.7%	Type A, Subtype H3N2	116.4/100,000	ILI / Population	Click here
England	Sporadic	Low	18	44.4%	Type A, Subtype H3N2	24.9/100,000	ILI / Population	Click here
France	Regional	Medium	84	25.0%	Type A, Subtype H3N2	1478.1/100,000	ARI / Population	Click here
Germany	Regional	Medium	220	33.6%	None	1865.0/100,000	ARI / Population	Click here
Ireland	Sporadic	Low	12	25.0%	Type A	26.4/100,000	ILI / Population	Click here
Italy	Widespread	Medium	0	0%	Type B	590.5/100,000	ILI / Population	Click here
Netherlands	Regional	Low	6	0%	Type A, Subtype H3N2	116.4/100,000	ILI / Population	Click here
Norway	Widespread	Medium	5	60.0%	Type A, Subtype H3N2		ILI / Population	Click here
Poland	Sporadic	Low	0	0%	Type A, Subtype H3N2	11.6/100,000	ILI / Population	Click here
Portugal	Widespread	Low	11	45.5%	Type A, Subtype H3N2		ILI / Population	Click here
Romania	Regional	Medium	53	43.4%	Type A, Subtype H3N2	277.2/100,000	ARI / Population	Click here
Scotland	Sporadic	Low	30	10.0%	Type A	27.9/100,000	ILI / Population	Click here
Slovakia	Sporadic	Low				1001.1/100,000	ILI / Population	Click here
Slovenia	Sporadic	Low	44	36.4%	Type B	57.1/100,000	ILI / Population	Click here
Spain	Widespread	Medium	67	46.3%	Type A, Subtype H3N2	168.1/100,000	ILI / Population	Click here
Switzerland	Widespread	Medium	40	0%	Type B	311.2/100,000	ILI / Population	Click here
Wales	None	Low	0	0%	None	4.7/100,000	ILI / Population	Click here

Preliminary data

Intensity: Low = no influenza activity or influenza activity at baseline level; Medium= usual levels of influenza activity; High = higher than usual levels of influenza activity; Very high = particularly severe levels of influenza activity.

Geographical spread: No activity = no laboratory-confirmed cases, or evidence of increased or unusual respiratory disease activity; Sporadic = isolated cases of laboratory-confirmed influenza infection; Localized = limited to one administrative unit in the country (or reporting site) only; Regional = appearing in multiple but <50% of the administrative units of the country (or reporting sites); Widespread = appearing in >=50% of the administrative units of the country (or reporting sites).

Impact: Low = demands on health-care services are not above usual levels; Moderate = demands on health-care services are above the usual demand levels but still below the maximum capacity of those services; Severe = demands on health care services exceed the capacity of those services.

Trend: Increasing = evidence that the level of respiratory disease activity is increasing compared with the previous week; Stable = evidence that the level of respiratory disease activity is unchanged compared with the previous week; Decreasing = evidence that the level of respiratory disease activity is decreasing compared with the previous week.

Percentage positive: percentage of sentinel swabs that tested positive for influenza A or B

Dominant type: this assessment is based on data from sentinel and non-sentinel sources

ARI: acute respiratory infection

ILI: influenza-like illness

Sentinel SARI: severe acute respiratory illness

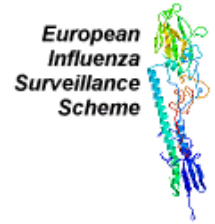
Population: per 100,000 population

*: the value in the table for these countries reflects the percent (e.g. from 0.0 to 100.0) of total outpatient encounters that were due to ILI/ARI rather than a consultation rate per 100,000

The bulletin text was written by Anne Mosnier (Open Rome, France), John Paget (EISS co-ordination centre, the Netherlands), Helena Rebelo de Andrade (Direc o o-Geral da Sa de, Portugal) and Tom s Vega (Consejer a de Sanidad y Bienestar Social, Spain) on behalf of the EISS Working Group.

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Influenza activity on the decline in Europe



In week 09/2002, influenza activity continued to decrease across the majority of the European countries: Belgium, Czech Republic, England, France, Italy, Portugal, Slovakia, Slovenia, Spain and Switzerland. The geographical spread of influenza was reported as widespread in four countries: Italy, Netherlands, Norway and Switzerland. However, in these four countries, the weekly clinical morbidity rate was only increasing in the Netherlands. Three networks reported increasing influenza activity with a geographic spread described as sporadic (Poland) or regional (Germany and Romania).

Eleven networks mentioned influenza A as the dominant type and five networks (Belgium, Italy, Slovenia, Spain and Switzerland) reported type B. Among the networks reporting influenza A, seven indicated that H3N2 was the dominant subtype and one reported the co-circulation of H1N1 and H3N2.

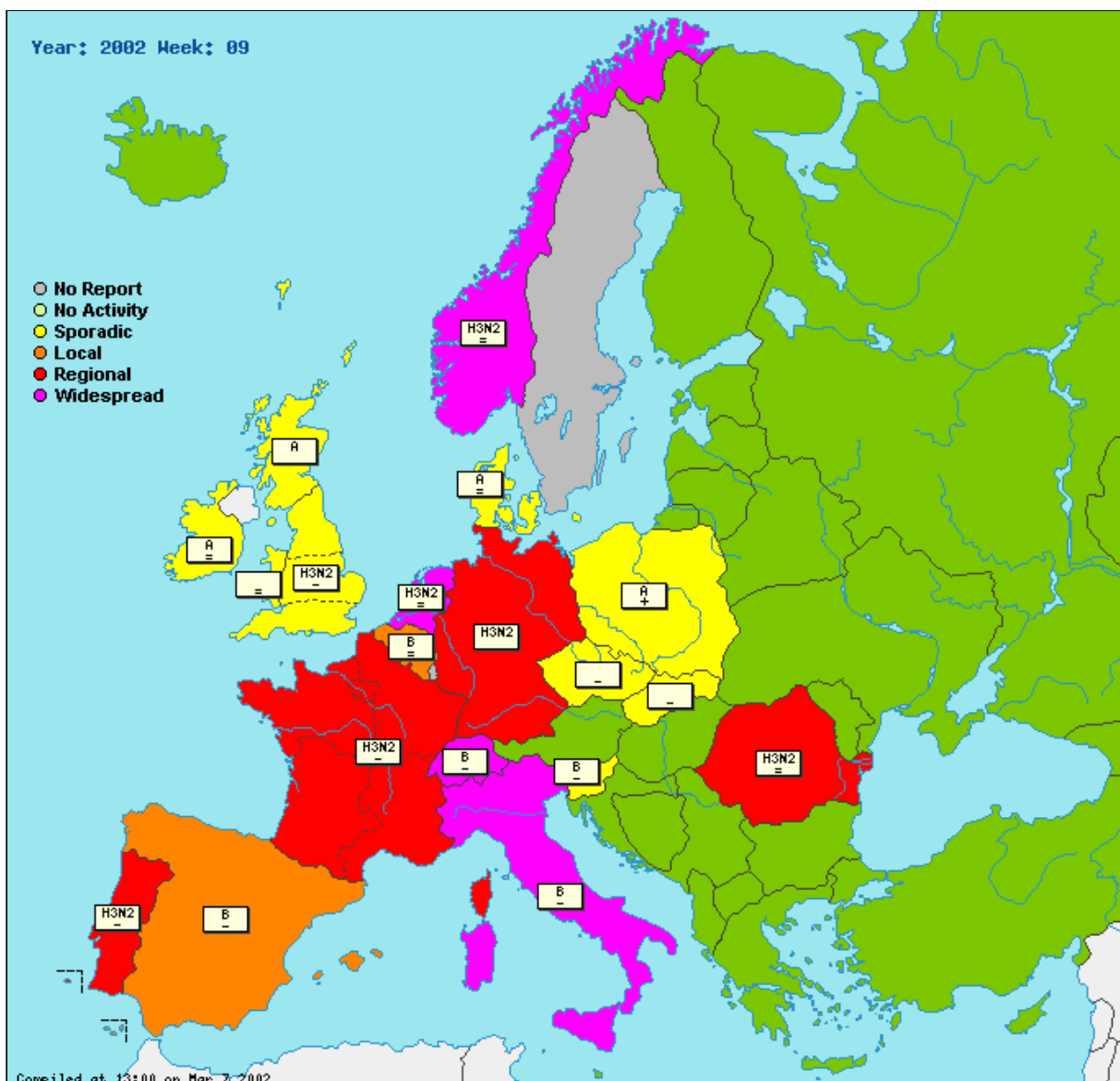
No cases of influenza A(H1N2) or influenza B/Victoria/2/87-like viruses were reported to the European Influenza Surveillance Scheme (EISS) in week 09/2002.

The Weekly Electronic Bulletin presents and comments influenza activity in the 18 European countries (20 networks) that are members of EISS. In the week 09/2002, nineteen networks reported clinical data and eighteen networks reported virological data.

Map

The map presents the geographical spread as assessed by each of the networks.

Clicking on the map will, if available, take you through to the national web site. If 'regional' activity is reported, a pop-up text box will appear which describes the activity in greater detail.



A = Dominant virus A
H1N1 = Dominant virus A(H1N1)
H3N2 = Dominant virus A(H3N2)
H1N2 = Dominant virus A(H1N2)
B = Dominant virus B
A & B = Dominant virus A & B
 = : stable clinical activity
 + : increasing clinical activity
 - : decreasing clinical activity

Low = no influenza activity or influenza at baseline levels
Medium = usual levels of influenza activity
High = higher than usual levels of influenza activity
Very high = particularly severe levels of influenza activity

No activity = no evidence of influenza virus activity (clinical activity remains at baseline levels)
Sporadic = isolated cases of laboratory confirmed influenza infection
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.

Country comments (where available)

England

Levels of acute respiratory viral infections have continued to decrease across England with clinical indicators of 'influenza-like illness' falling well below the upper threshold for 'baseline activity'. Numbers of influenza viruses detected from community sources by the virus reference laboratory, ERNVL, also continue to decrease.

Czech Republic

Sporadic cases of flu A and B continues.

France

Influenza activity is still decreasing and at baseline levels in most of the french regions, except in Brittany.

Italy

Decreasing Influenza activity; weekly incidence of influenza-like illness (ILI) is 4,75 per 1,000 patient population. Sporadic detection of B viruses; the isolated strains from week 4 are from Lecce.

Norway

Influenza A(H3N2) viruses remain dominant and are seen in all regions, including Spitzbergen, with most profound increase in Northern Norway.

Spain

Influenza activity is decreasing all around Spain.

Switzerland

The distribution of influenza A and B viruses is the same as observed these last weeks : the same amount of both type of influenza viruses is observed.

Table and graphs (where available)

Network - region	Geographic Spread	Intensity	Sentinel swabs	Percentage positive	Dominant type	Rate	Numerator / denominator	Network graphs
Belgium	Local	Medium	24	45.8%	Type B	223.0/100,000	ILI / Population	Click here
Czech Republic	Sporadic	Low	39	5.1%	None	1223.0/100,000	ARI / Population	Click here
Denmark	Sporadic	Low	4	50.0%	Type A		ILI / Population	Click here
England	Sporadic	Low	12	33.3%	Type A, Subtype H3N2	20.4/100,000	ILI / Population	Click here
France	Regional	Medium	72	27.8%	Type A, Subtype H3N2	1458.1/100,000	ARI / Population	Click here
Germany	Regional	Medium	252	34.1%	Type A, Subtype H3N2	1914.0/100,000	ARI / Population	Click here
Ireland	Sporadic		14	57.1%	Type A	27.3/100,000	ILI / Population	Click here
Italy	Widespread	Medium	0	0%	Type B	480.0/100,000	ILI / Population	Click here
Netherlands	Widespread	Medium	5	40.0%	Type A, Subtype H3N2	135.9/100,000	ILI / Population	Click here
Norway	Widespread	Medium	10	30.0%	Type A, Subtype H3N2		ILI / Population	Click here
Poland	Sporadic	Low	0	0%	Type A, Subtype H1N1 and H3N2	21.2/100,000	ILI / Population	Click here
Portugal	Regional	Low	6	0%	Type A, Subtype H3N2		ILI / Population	Click here
Romania	Regional	Medium	152	30.3%	Type A, Subtype H3N2	285.7/100,000	ARI / Population	Click here
Scotland	Sporadic	Low	35	8.6%	Type A	23.6/100,000	ILI / Population	Click here
Slovakia	Sporadic	Low				854.5/100,000	ILI / Population	Click here
Slovenia	Sporadic	Low	17	29.4%	Type B	35.2/100,000	ILI / Population	Click here
Spain	Local	Medium	47	34.0%	Type B	109.1/100,000	ILI / Population	Click here
Switzerland	Widespread	Medium	40	0%	Type B	287.0/100,000	ILI / Population	Click here
Wales	Sporadic	Low	0	0%	None	4.7/100,000	ILI / Population	Click here

Preliminary data

Intensity: Low = no influenza activity or influenza activity at baseline level; Medium= usual levels of influenza activity; High = higher than usual levels of influenza activity; Very high = particularly severe levels of influenza activity.

Geographical spread: No activity = no laboratory-confirmed cases, or evidence of increased or unusual respiratory disease activity; Sporadic = isolated cases of laboratory-confirmed influenza infection; Localized = limited to one administrative unit in the country (or reporting site) only; Regional = appearing in multiple but <50% of the administrative units of the country (or reporting sites); Widespread = appearing in >=50% of the administrative units of the country (or reporting sites).

Impact: Low = demands on health-care services are not above usual levels; Moderate = demands on health-care services are above the usual demand levels but still below the maximum capacity of those services; Severe = demands on health care services exceed the capacity of those services.

Trend: Increasing = evidence that the level of respiratory disease activity is increasing compared with the previous week; Stable = evidence that the level of respiratory disease activity is unchanged compared with the previous week; Decreasing = evidence that the level of respiratory disease activity is decreasing compared with the previous week.

Percentage positive: percentage of sentinel swabs that tested positive for influenza A or B

Dominant type: this assessment is based on data from sentinel and non-sentinel sources

ARI: acute respiratory infection

ILI: influenza-like illness

Sentinel SARI: severe acute respiratory illness

Population: per 100,000 population

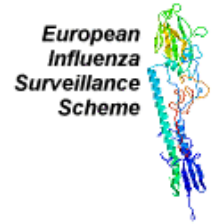
*: the value in the table for these countries reflects the percent (e.g. from 0.0 to 100.0) of total outpatient encounters that were due to ILI/ARI rather than a consultation rate per 100,000

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EISS : Weekly Electronic Bulletin

Influenza activity smoothly declining in Europe



In week 10/2002, the majority of the networks in the European Influenza Surveillance Scheme (EISS) had the same geographical spread and intensity levels as in week 09/2002. Germany and Romania changed from regional to widespread and the percentage of sentinel swabs which tested positive for influenza (A or B) increased in both countries. Switzerland and Portugal lowered the geographical spread to regional activity and local outbreaks respectively.

Clinical morbidity rates in Europe were generally declining or stable in week 10/2002. However, increasing rates were observed in four countries: Germany, Poland, Romania and Sweden.

Nine networks reported influenza A as the dominant type, mainly the H3N2 subtype. Five networks indicated that influenza B was the dominant type in their country.

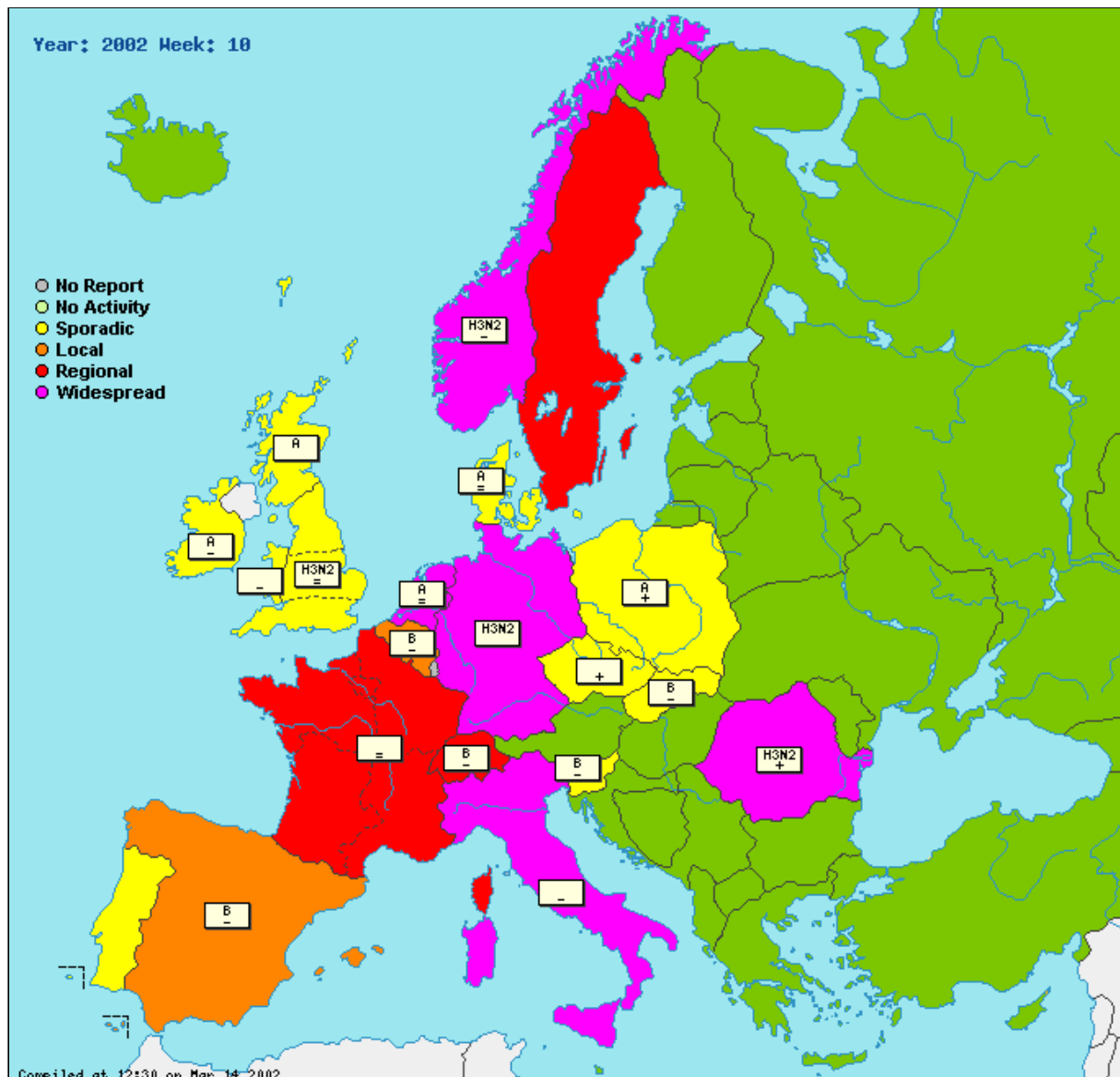
No cases of influenza A(H1N2) or influenza B/Victoria/2/87-like viruses were reported to the EISS in week 10/2002.

The Weekly Electronic Bulletin presents and comments influenza activity in the 18 European countries (20 networks) that are members of EISS. In the week 10/2002, twenty networks reported clinical data and sixteen networks reported virological data.

Map

The map presents the geographical spread as assessed by each of the networks.

Clicking on the map will, if available, take you through to the national web site. If 'regional' activity is reported, a pop-up text box will appear which describes the activity in greater detail.



A = Dominant virus A
H1N1 = Dominant virus A(H1N1)
H3N2 = Dominant virus A(H3N2)
H1N2 = Dominant virus A(H1N2)
B = Dominant virus B
A & B = Dominant virus A & B
= : stable clinical activity
+ : increasing clinical activity
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Low = no influenza activity or influenza at baseline levels
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Very high = particularly severe levels of influenza activity

No activity = no evidence of influenza virus activity (clinical activity remains at baseline levels)
Sporadic = isolated cases of laboratory confirmed influenza infection
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.

Country comments (where available)

England

GP consultation rates for 'influenza-like illness' remain little changed this week. Numbers of viruses detected from community based surveillance by the virus reference laboratory remain low.

France

Influenza activity is no more epidemic in France.

Spain

Decreasing influenza activity. Local detection of influenza A and B viruses. Influenza B is dominant.

Sweden

97 cases of clinical ILI out of 8804 patient encounters were reported from the Swedish sentinel-system. Two small outbreaks of Influenza A with attack rates 60%-80% have been reported and investigated.

Switzerland

During the week 9, the number of influenza viruses detected by both surveillance systems, cell culture and rapid test, decreased. As observed in the past weeks, the proportion of influenza A and B viruses detected remained about the same.

Table and graphs (where available)

Network - region	Geographic Spread	Intensity	Sentinel swabs	Percentage positive	Dominant type	Rate	Numerator / denominator	Network graphs
Belgium	Local	Medium	24	45.8%	Type B	191.3/100,000	ILI / Population	Click here
Czech Republic	Sporadic	Low	34	5.9%	None	1266.1/100,000	ARI / Population	Click here
Denmark	Sporadic	Low	3	0%	Type A	112.6/100,000	ILI / Population	Click here
England	Sporadic	Low	4	50.0%	Type A, Subtype H3N2	21.2/100,000	ILI / Population	Click here
France	Regional	Medium				1477.8/100,000	ARI / Population	Click here
Germany	Widespread	Medium	331	38.7%	Type A, Subtype H3N2	2069.0/100,000	ARI / Population	Click here
Ireland	Sporadic		13	46.2%	Type A	19.7/100,000	ILI / Population	Click here
Italy	Widespread	Medium				336.9/100,000	ILI / Population	Click here
Netherlands	Widespread	Medium	1	0%	Type A	116.6/100,000	ILI / Population	Click here
Norway	Widespread	Low	6	50.0%	Type A, Subtype H3N2		ILI / Population	Click here
Poland	Sporadic	Low	0	0%	Type A, Subtype H1N1 and H3N2	48.4/100,000	ILI / Population	Click here
Portugal	Sporadic	Low					ILI / Population	Click here
Romania	Widespread	Medium	76	59.2%	Type A, Subtype H3N2	324.2/100,000	ARI / Population	Click here
Scotland	Sporadic	Low	23	26.1%	Type A	26.1/100,000	ILI / Population	Click here
Slovakia	Sporadic	Low	1	100.0%	Type B	720.5/100,000	ILI / Population	Click here
Slovenia	Sporadic	Low	6	16.7%	Type B	26.2/100,000	ILI / Population	Click here
Spain	Local	Medium	40	40.0%	Type B	77.1/100,000	ILI / Population	Click here
Sweden	Regional	Low				28.6/100,000	ILI / Population	Click here
Switzerland	Regional	Medium	22	0%	Type B	166.8/100,000	ILI / Population	Click here
Wales	Sporadic	Low	0	0%	None	3.3/100,000	ILI / Population	Click here

Preliminary data

Intensity: Low = no influenza activity or influenza activity at baseline level; Medium = usual levels of influenza activity; High = higher than usual levels of influenza activity; Very high = particularly severe levels of influenza activity.

Geographical spread: No activity = no laboratory-confirmed cases, or evidence of increased or unusual respiratory disease activity; Sporadic = isolated cases of laboratory-confirmed influenza infection; Localized = limited to one administrative unit in the country (or reporting site) only; Regional = appearing in multiple but <50% of the administrative units of the country (or reporting sites); Widespread = appearing in >=50% of the administrative units of the country (or reporting sites).

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Percentage positive: percentage of sentinel swabs that tested positive for influenza A or B

Dominant type: this assessment is based on data from sentinel and non-sentinel sources

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Sentinel SARI: severe acute respiratory illness

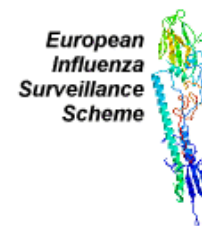
Population: per 100,000 population

*: the value in the table for these countries reflects the percent (e.g. from 0.0 to 100.0) of total outpatient encounters that were due to ILI/ARI rather than a consultation rate per 100,000

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Influenza activity remains at high levels in some European countries



While most networks in Europe reported lower clinical morbidity rates in week 11/2002, some central and northern European countries reported influenza activity that remained at widespread levels. This was the case in Germany, Norway and Romania, where the respective networks notified increasing or high levels of clinical morbidity.

Influenza virus A was the dominant type across Europe, but type B viruses were also isolated and were the dominant type in Belgium, Italy, Spain and Switzerland. In this last country, an influenza B virus isolated in week 5 was characterized and found to be related antigenically to the strain B/Hong-Kong/330/2001, recommended for the next 2002-2003 season vaccine in the northern hemisphere.

Other influenza viruses isolated in Europe (update):

During the present influenza season, two influenza viruses have been isolated in Europe that are not in the 2001-2002 influenza vaccine: the influenza A(H1N2) subtype and the influenza B/Victoria/2/87-like virus (see Weekly Electronic Bulletin 08/2002).

In week 11/2002, two new cases of influenza B/Victoria/2/87-like virus were reported to the European Influenza Surveillance Scheme (EISS): one in Norway (a boy aged 4 - sampled 14 February; hospital laboratory isolate subsequently submitted to the national reference laboratory) and the other in Switzerland (a child aged 7 - sampled in week 5). This means there have now been 7 cases of influenza B/Victoria/2/87-like virus reported to EISS during the 2001-2002 influenza season: one in Germany, one in Italy, three in the Netherlands, one in Norway and one in Switzerland. These results suggest that this virus is rare in Europe.

Up until the 21st of March 2002 (3:45pm), the EISS database had 5,820 laboratory-confirmed reports of influenza (sentinel and non-sentinel reports). Of these, 4,398 (76%) were cases of influenza A and an influenza A subtype (H1N1, H1N2 or H3N2) was reported for 1,430 cases. A total of 44 cases of influenza A(H1N2) were reported to EISS: 30 (all sentinel) in England, 9 (all sentinel) in Ireland, 4 in France (3 sentinel and 1 non-sentinel) and 1 in Romania (sentinel). This means that only 3.1% of the subtyped influenza A reports in the EISS database were cases of influenza A(H1N2).

It should be noted that EISS is aware of one other case of H1N2 in Europe (data not yet entered into the EISS database): a case in Scotland (source unknown).

The H1N2 influenza subtype seems to be most common in the 5-18 year age range. In England, most of the cases were in the 5-15 age group (80%), 8 of the 9 cases in Ireland were in the 13-18 year age range, and the case in Romania was a 15-year-old. In France, ages were more heterogeneous (12, 16, 29 and 52) and no age-specific data has been received from Scotland yet.

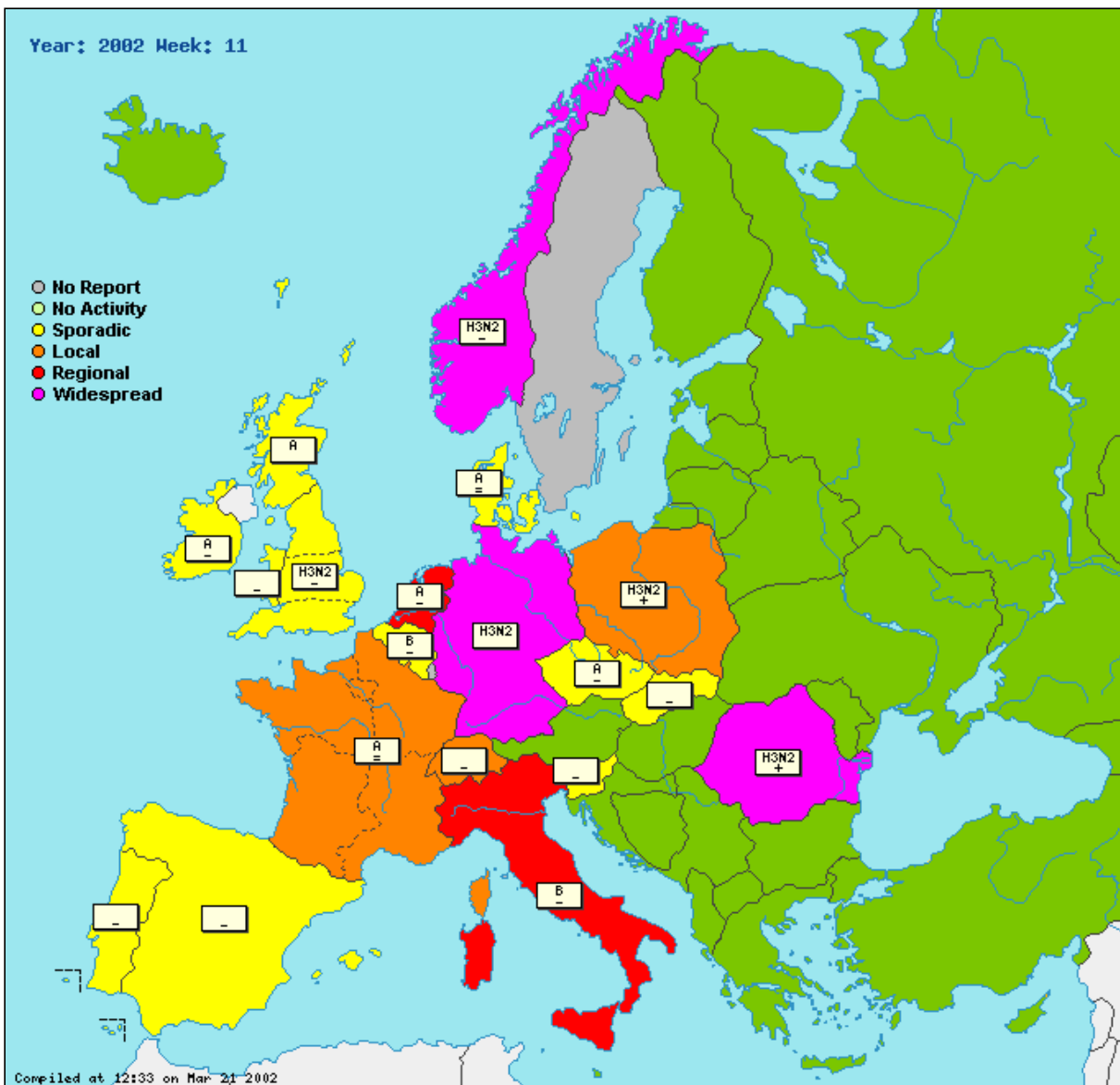
Within EISS, the national reference laboratory in Spain has characterized all influenza A positive specimens received so far this season. None of these specimens were of the influenza virus H1N2 subtype; these findings suggest that this subtype has not circulated in Spain so far this season.

The Weekly Electronic Bulletin presents and comments influenza activity in the 18 European countries (20 networks) that are members of EISS. In the week 11/2002, nineteen networks reported clinical data and eighteen networks reported virological data.

Map

The map presents the geographical spread as assessed by each of the networks.

Clicking on the map will, if available, take you through to the national web site. If 'regional' activity is reported, a pop-up text box will appear which describes the activity in greater detail.



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H1N1 = Dominant virus A(H1N1)
H3N2 = Dominant virus A(H3N2)
H1N2 = Dominant virus A(H1N2)
B = Dominant virus B
A & B = Dominant virus A & B

= : stable clinical activity
+ : increasing clinical activity
- : decreasing clinical activity

Low = no influenza activity or influenza at baseline levels
Medium = usual levels of influenza activity
High = higher than usual levels of influenza activity
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No activity = no evidence of influenza virus activity (clinical activity remains at baseline levels)
Sporadic = isolated cases of laboratory confirmed influenza infection
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.

Country comments (where available)

England

GP consultation rates for influenza-like illness have continued to decrease in England. Numbers of viruses detected from community sources remain at low levels
The four influenza A (H3N2) sentinel results relate to specimens taken in weeks 9 and 10, and reported in week 11

France

Sporadic cases of influenza A and B.

Germany

GP consultation rates for

Italy

Decreasing Influenza activity; weekly incidence of influenza-like illness (ILI) is 2,54 per 1,000 patient population. Sporadic detection of A/H3N2 and B viruses.

Norway

Most virus detections in week 11 were from Northern Norway, where activity is still increasing.

Spain

Sporadic isolates of influenza A and B viruses. Influenza B is dominant.

Switzerland

The number of samples received in the laboratory is also decreasing rapidly. Influenza A and B viruses are still detected and at equal numbers. An Influenza B virus which did not react in the usual way with our standard antisera was further characterised by the WHO collaborating centre (MRC) in London. The virus strain was antigenically related with the new

2002/2003 vaccine strain influenza B/Hong-Kong/330/01. This virus was detected during the week 5 in a swab from a 7 years old child living in Zurich. This is the first time that this strain was detected in our country. Further investigations on this virus are under way in London. In addition, during the week 9 the first virus of this season with the hemagglutinin H1 was detected. The sample came from a 57 years old man living in Schiers (GR). The virus was shipped for further characterisation to the reference centre in London.

Table and graphs (where available)

Network - region	Geographic Spread	Intensity	Sentinel swabs	Percentage positive	Dominant type	Rate	Numerator / denominator	Network graphs
Belgium	Sporadic	Medium	21	4.8%	Type B	131.9/100,000	ILI / Population	Click here
Czech Republic	Sporadic	Low	0	0%	Type A	1210.9/100,000	ARI / Population	Click here
Denmark	Sporadic	Low	7	42.9%	Type A	180.6/100,000	ILI / Population	Click here
England	Sporadic	Low	4	100.0%	Type A, Subtype H3N2	14.8/100,000	ILI / Population	Click here
France	Local	Medium	63	27.0%	Type A	1568.6/100,000	ARI / Population	Click here
Germany	Widespread	Medium	369	44.2%	Type A, Subtype H3N2	2046.0/100,000	ARI / Population	Click here
Ireland	Sporadic		8	25.0%	Type A	12.9/100,000	ILI / Population	Click here
Italy	Regional	Low	0	0%	Type B	254.1/100,000	ILI / Population	Click here
Netherlands	Regional	Low	5	0%	Type A	79.0/100,000	ILI / Population	Click here
Norway	Widespread	Low	0	0%	Type A, Subtype H3N2		ILI / Population	Click here
Poland	Local	Medium	0	0%	Type A, Subtype H3N2	66.7/100,000	ILI / Population	Click here
Portugal	Sporadic	Low					ILI / Population	Click here
Romania	Widespread	Medium	151	39.7%	Type A, Subtype H3N2	375.4/100,000	ARI / Population	Click here
Scotland	Sporadic	Low	20	30.0%	Type A	18.1/100,000	ILI / Population	Click here
Slovakia	Sporadic	Low	3	0%		689.1/100,000	ILI / Population	Click here
Slovenia	Sporadic	Low	7	0%	None	7.4/100,000	ILI / Population	Click here
Spain	Sporadic	Low	28	21.4%	Type B	55.4/100,000	ILI / Population	Click here
Switzerland	Local	Medium	26	0%	Type B	135.1/100,000	ILI / Population	Click here
Wales	Sporadic	Low	0	0%	None	1.9/100,000	ILI / Population	Click here

Preliminary data

Intensity: Low = no influenza activity or influenza activity at baseline level; Medium= usual levels of influenza activity; High = higher than usual levels of influenza activity; Very high = particularly severe levels of influenza activity.

Geographical spread: No activity = no laboratory-confirmed cases, or evidence of increased or unusual respiratory disease activity; Sporadic = isolated cases of laboratory-confirmed influenza infection; Localized = limited to one administrative unit in the country (or reporting site) only; Regional = appearing in multiple but <50% of the administrative units of the country (or reporting sites); Widespread = appearing in ≥50% of the administrative units of the country (or reporting sites).

Impact: Low = demands on health-care services are not above usual levels; Moderate = demands on health-care services are above the usual demand levels but still below the maximum capacity of those services; Severe = demands on health care services exceed the capacity of those services.

Trend: Increasing = evidence that the level of respiratory disease activity is increasing compared with the previous week; Stable = evidence that the level of respiratory disease activity is unchanged compared with the previous week; Decreasing = evidence that the level of respiratory disease activity is decreasing compared with the previous week.

Percentage positive: percentage of sentinel swabs that tested positive for influenza A or B

Dominant type: this assessment is based on data from sentinel and non-sentinel sources

ARI: acute respiratory infection

ILI: influenza-like illness

Sentinel SARI: severe acute respiratory illness

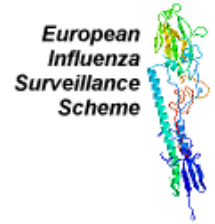
Population: per 100,000 population

*: the value in the table for these countries reflects the percent (e.g. from 0.0 to 100.0) of total outpatient encounters that were due to ILI/ARI rather than a consultation rate per 100,000

The bulletin text was written by Anne Mosnier (Open Rome, France), John Paget (EISS co-ordination centre, the Netherlands), Helena Rebelo de Andrade (Direcção-Geral da Saúde, Portugal) and Tomás Vega (Consejería de Sanidad y Bienestar Social, Spain) on behalf of the EISS Working Group.

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A and B influenza viruses remain active in Europe



In week 12/2002, the spread and the intensity of influenza activity decreased or remained stable in all the countries that reported to the European Influenza Surveillance Scheme (EISS). The highest influenza activity levels (widespread) were reported in Germany and Norway, while the geographic spread ranged from sporadic to regional in the other countries.

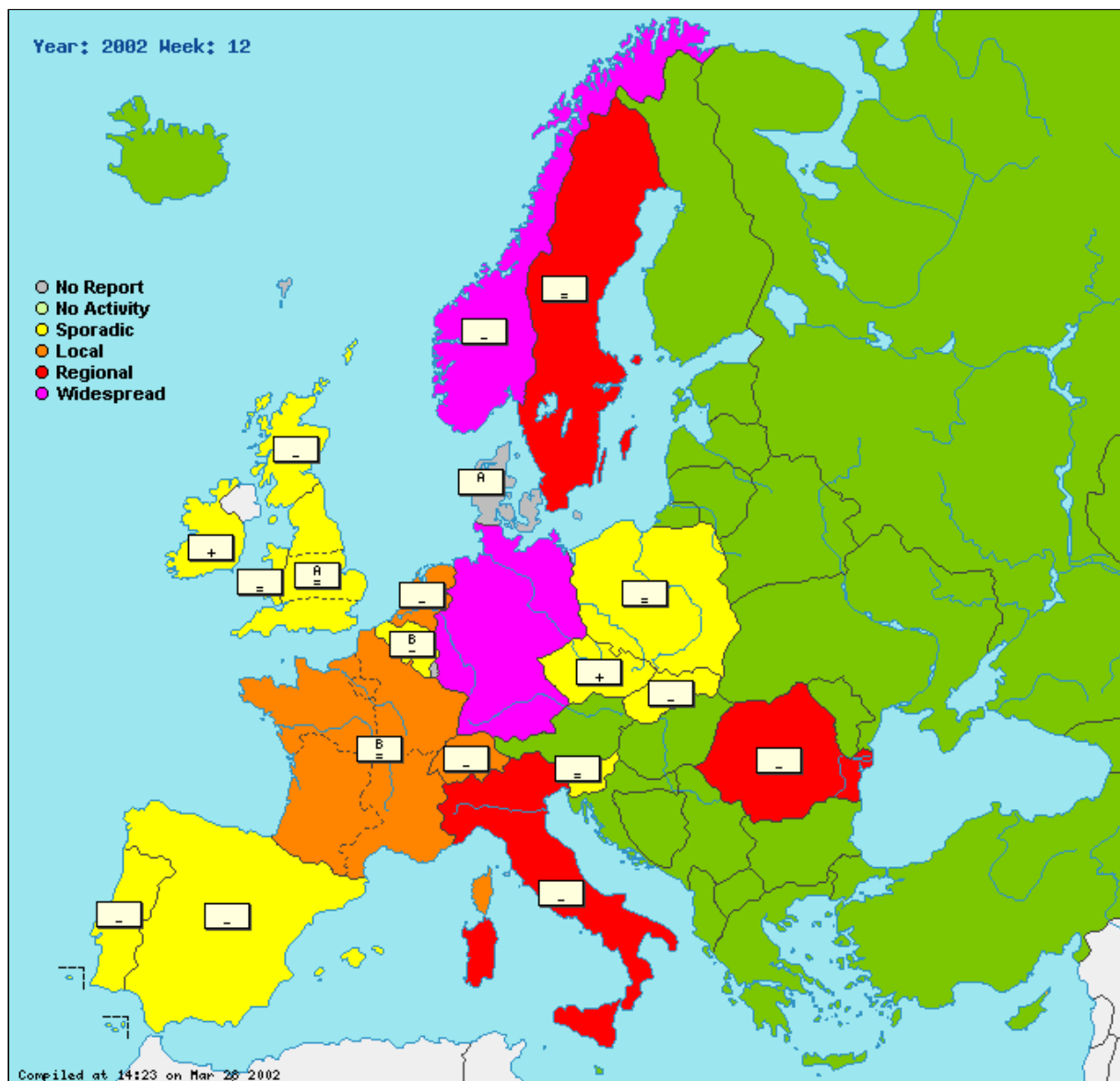
The percentage of sentinel specimens that tested positive for influenza (A or B) decreased from 38% in week 11/2002 to 31.5% in week 12/2002. Generally, the influenza A virus was the dominant type across Europe, but the influenza B virus was the dominant type in Belgium, France, Italy, Spain and Switzerland.

The Weekly Electronic Bulletin presents and comments influenza activity in the 18 European countries (20 networks) that are members of EISS. In the week 12/2002, nineteen networks reported clinical data and seventeen networks reported virological data.

Map

The map presents the geographical spread as assessed by each of the networks.

Clicking on the map will, if available, take you through to the national web site. If 'regional' activity is reported, a pop-up text box will appear which describes the activity in greater detail.



A = Dominant virus A
 H1N1 = Dominant virus A(H1N1)
 H3N2 = Dominant virus A(H3N2)
 H1N2 = Dominant virus A(H1N2)
 B = Dominant virus B
 A & B = Dominant virus A & B

Low = no influenza activity or influenza at baseline levels
 Medium = usual levels of influenza activity
 High = higher than usual levels of influenza activity
 Very high = particularly severe levels of influenza activity

No activity = no evidence of influenza virus activity (clinical activity remains at baseline levels)
 Sporadic = isolated cases of laboratory confirmed influenza infection

= : stable clinical activity
 + : increasing clinical activity
 - : decreasing 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.

Country comments (where available)

England

GP consultation rates for 'influenza-like illness' remain low in England. Virus detections from community derived sources also remain low.

Czech Republic

Slight increase of total morbidity, sporadic cases of flu A and B continues. The first B strain was isolated in Czech rep. The virus was detected during 12. c.w. in a swab from a 25 year old man living in Pilsen (west Bohemia).

France

Influenza B is still active in France and is now the dominant type. Influenza A(H3N2) is sporadic.

Germany

The first influenza viruses of subtype H1N2 have been detected in Germany. The samples came from GPs not included in the national sentinel. The HA is closely related to A/New Caledonia/20/99. Analysis of the NA gene is in progress.

Italy

Decreasing Influenza activity; weekly incidence of influenza-like illness (ILI) is 1,94 per 1,000 patient population. Sporadic detection of A/H3N2 and B viruses; the isolated strains from weeks 8 and 10 are from Milano and Genova (northern Italy).

Norway

Decreasing intensity in all health regions but still above threshold.

Spain

Sporadic isolates of influenza A and B viruses. Influenza B is dominant.

Switzerland

The number of samples sent in by Sentinel practitioners decreased again last week. However, the percentage of positive samples is still rather high (30% in week 11). This means that influenza viruses are still circulating in our country however at a reduced rate. Influenza A and B viruses are detected at equal numbers. The majority of influenza B viruses, which have been subtyped, were related to the 2001/2002-vaccine strain influenza B/Sichuan/379/99. Only one virus was related to the B/Hong Kong/330/01 virus a strain which is comprised in the new vaccine. All but one Influenza A viruses have been subtyped as influenza A (H3N2) and those were closely related to influenza A/Panama/2007/99 (H3N2). One influenza A H1-type has been detected but analysis is still going on in order to determine the origin of this virus.

Table and graphs (where available)

Network - region	Geographic Spread	Intensity	Sentinel swabs	Percentage positive	Dominant type	Rate	Numerator / denominator	Network graphs
Belgium	Sporadic	Medium	24	29.2%	Type B	115.9/100,000	ILI / Population	Click here
Czech Republic	Sporadic	Low	35	11.4%	None	1291.3/100,000	ARI / Population	Click here
Denmark			7	28.6%	Type A		ILI / Population	Click here
England	Sporadic	Low	2	0%	Type A	15.3/100,000	ILI / Population	Click here
France	Local	Medium	78	18.0%	Type B	1536.3/100,000	ARI / Population	Click here
Germany	Widespread	Medium	322	33.9%	Type A, Subtype H3N2	1813.0/100,000	ARI / Population	Click here
Ireland	Sporadic		11	45.5%	Type A	29.1/100,000	ILI / Population	Click here
Italy	Regional	Low	1	0%	Type B	194.0/100,000	ILI / Population	Click here
Netherlands	Local	Medium	5	20.0%	None	61.4/100,000	ILI / Population	Click here
Norway	Widespread	Low					ILI / Population	Click here
Poland	Sporadic	Medium	0	0%	Type A, Subtype H3N2	69.3/100,000	ILI / Population	Click here
Portugal	Sporadic	Low					ILI / Population	Click here
Romania	Regional	Medium	158	44.9%	Type A, Subtype H3N2	273.1/100,000	ARI / Population	Click here
Scotland	Sporadic	Low	27	33.3%	Type A	18.6/100,000	ILI / Population	Click here
Slovakia	Sporadic	Low	1	0%	None	635.1/100,000	ILI / Population	Click here
Slovenia	Sporadic	Low	1	0%	None	19.9/100,000	ILI / Population	Click here
Spain	Sporadic	Low	26	38.5%	Type B	28.5/100,000	ILI / Population	Click here
Sweden	Regional	Low				37.2/100,000	ILI / Population	Click here
Switzerland	Local	Medium	8	0%	Type B	90.0/100,000	ILI / Population	Click here
Wales	Sporadic	Low	0	0%	None	5.1/100,000	ILI / Population	Click here

Preliminary data

Intensity: Low = no influenza activity or influenza activity at baseline level; Medium= usual levels of influenza activity; High = higher than usual levels of influenza activity; Very high = particularly severe levels of influenza activity.

Geographical spread: No activity = no laboratory-confirmed cases, or evidence of increased or unusual respiratory disease activity; Sporadic = isolated cases of laboratory-confirmed influenza infection; Localized = limited to one administrative unit in the country (or reporting site) only; Regional = appearing in multiple but <50% of the administrative units of the country (or reporting sites); Widespread = appearing in >=50% of the administrative units of the country (or reporting sites).

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Trend: Increasing = evidence that the level of respiratory disease activity is increasing compared with the previous week; Stable = evidence that the level of respiratory disease activity is unchanged compared with the previous week; Decreasing = evidence that the level of respiratory disease activity is decreasing compared with the previous week.

Percentage positive: percentage of sentinel swabs that tested positive for influenza A or B

Dominant type: this assessment is based on data from sentinel and non-sentinel sources

ARI: acute respiratory infection

ILI: influenza-like illness

Sentinel SARI: severe acute respiratory illness

Population: per 100,000 population

*: the value in the table for these countries reflects the percent (e.g. from 0.0 to 100.0) of total outpatient encounters that were due to ILI/ARI rather than a consultation rate per 100,000

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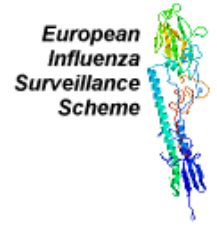
EISS : Weekly Electronic Bulletin

Influenza activity on the decline in Europe

In week 13/2002, most of the networks participating in the European Influenza Surveillance Scheme (EISS) reported declining or unchanged low levels of influenza activity. The geographical spread of influenza ranged from none to regional, while the morbidity rates decreased in all the reporting countries.

The percentage of sentinel specimens that tested positive for influenza remained stable (35%). Influenza A was the dominant virus in Europe, but influenza B was also regularly detected/isolated.

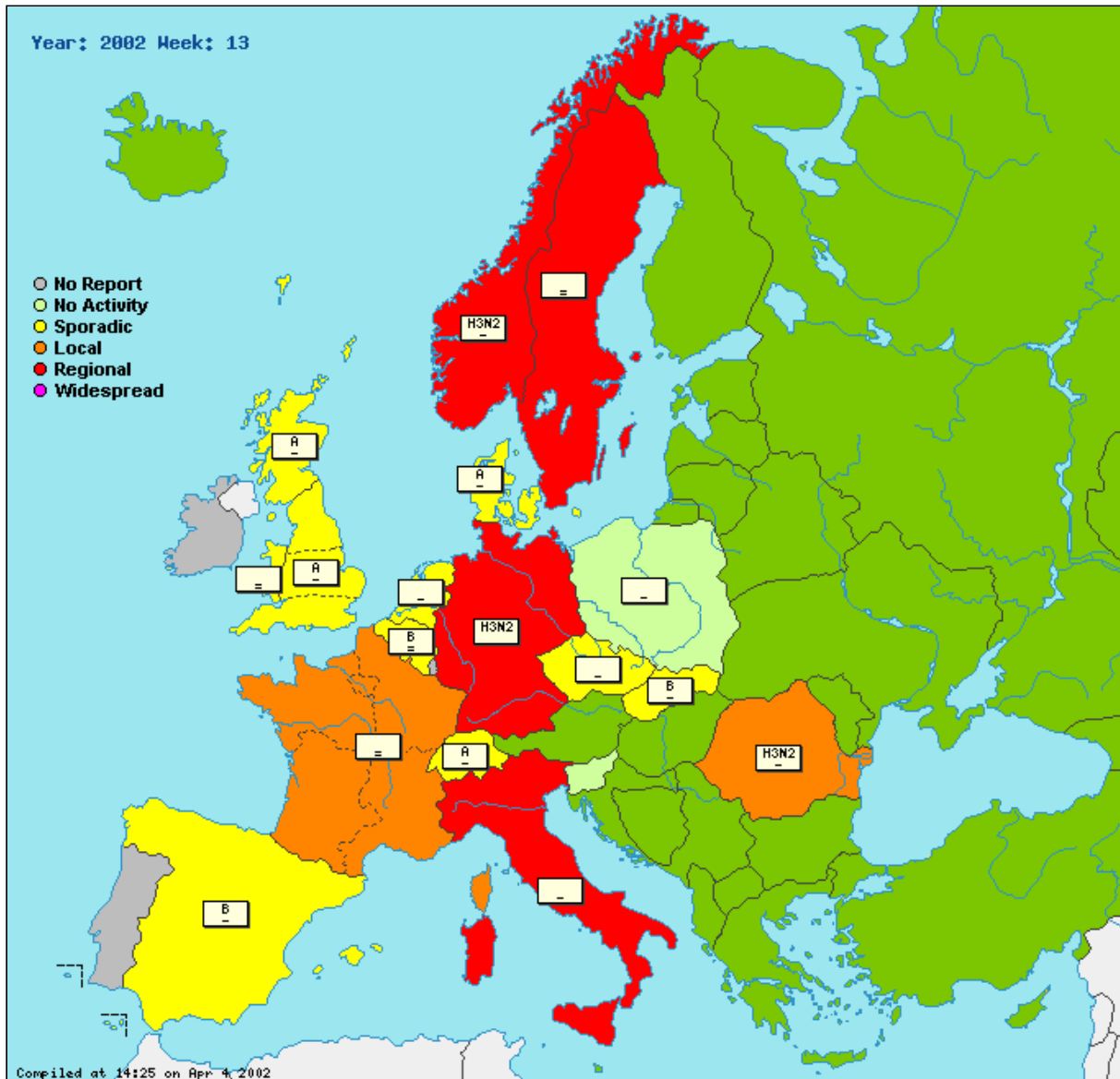
The Weekly Electronic Bulletin presents and comments influenza activity in the 18 European countries (20 networks) that are members of EISS. In week 13/2002, eighteen networks reported clinical data and sixteen networks reported virological data.



Map

The map presents the geographical spread as assessed by each of the networks.

Clicking on the map will, if available, take you through to the national web site. If 'regional' activity is reported, a pop-up text box will appear which describes the activity in greater detail.



A = Dominant virus A
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 H3N2 = Dominant virus A(H3N2)
 H1N2 = Dominant virus A(H1N2)
 B = Dominant virus B
 A & B = Dominant virus A & B
 = : stable clinical activity
 + : increasing clinical activity

Low = no influenza activity or influenza at baseline levels
 Medium = usual levels of influenza activity
 High = higher than usual levels of influenza activity
 Very high = particularly severe levels of influenza activity

No activity = no evidence of influenza virus activity (clinical activity remains at baseline levels)
 Sporadic = isolated cases of laboratory confirmed influenza infection
 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

- : decreasing clinical activity

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.

Country comments (where available)

England

Clinical and virological indicators of influenza activity remain low.
 No sentinel data are available this week.

France

Influenza B still has a moderate activity in France.

Netherlands

First influenza A/H1 detected in 13-year-old boy, swab taken in week 10. Analysis NA is ongoing.

Norway

A(H3N2) viruses remain dominant. Low number of analyses due to Easter holidays.

Switzerland

The amount of patients presenting influenza-like symptoms decreased dramatically last week. Together with this observation, influenza viruses detected is also decreasing. 4 influenza A viruses and 2 influenza B viruses have been detected.

Table and graphs (where available)

Network - region	Geographic Spread	Intensity	Sentinel swabs	Percentage positive	Dominant type	Rate	Numerator / denominator	Network graphs
Belgium	Sporadic	Medium	14	28.6%	Type B	72.7/100,000	ILI / Population	Click here
Czech Republic	Sporadic		18	22.2%	None	1244.6/100,000	ARI / Population	Click here
Denmark	Sporadic	Low	1	100.0%	Type A	138.4/100,000	ILI / Population	Click here
England	Sporadic	Low	0	0%	Type A	9.0/100,000	ILI / Population	Click here
France	Local	Medium	38	15.8%	None	1276.2/100,000	ARI / Population	Click here
Germany	Regional	Medium	125	40.8%	Type A, Subtype H3N2	1411.0/100,000	ARI / Population	Click here
Italy	Regional	Low				125.9/100,000	ILI / Population	Click here
Netherlands	Sporadic	Medium	2	0%	None	29.2/100,000	ILI / Population	Click here
Norway	Regional	Low	0	0%	Type A, Subtype H3N2		ILI / Population	Click here
Poland	None	Low	0	0%	None	47.5/100,000	ILI / Population	Click here
Portugal			0	0%	None		ILI / Population	Click here
Romania	Local	Low	33	75.8%	Type A, Subtype H3N2	212.1/100,000	ARI / Population	Click here
Scotland	Sporadic	Low	22	22.7%	Type A	16.1/100,000	ILI / Population	Click here
Slovakia	Sporadic	Low	4	25.0%	Type B	450.3/100,000	ILI / Population	Click here
Slovenia	None		1	0%	None		ILI / Population	Click here
Spain	Sporadic	Low	15	6.7%	Type B	8.5/100,000	ILI / Population	Click here
Sweden	Regional	Medium				21.8/100,000	ILI / Population	Click here
Switzerland	Sporadic	Medium	4	0%	Type A	48.8/100,000	ILI / Population	Click here
Wales	Sporadic	Low	0	0%		2.8/100,000	ILI / Population	Click here

Preliminary data

Intensity: Low = no influenza activity or influenza activity at baseline level; Medium = usual levels of influenza activity; High = higher than usual levels of influenza activity; Very high = particularly severe levels of influenza activity.

Geographical spread: No activity = no laboratory-confirmed cases, or evidence of increased or unusual respiratory disease activity; Sporadic = isolated cases of laboratory-confirmed influenza infection; Localized = limited to one administrative unit in the country (or reporting site) only; Regional = appearing in multiple but <50% of the administrative units of the country (or reporting sites); Widespread = appearing in ≥50% of the administrative units of the country (or reporting sites).

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Trend: Increasing = evidence that the level of respiratory disease activity is increasing compared with the previous week; Stable = evidence that the level of respiratory disease activity is unchanged compared with the previous week; Decreasing = evidence that the level of respiratory disease activity is decreasing compared with the previous week.

Percentage positive: percentage of sentinel swabs that tested positive for influenza A or B

Dominant type: this assessment is based on data from sentinel and non-sentinel sources

ARI: acute respiratory infection

ILI: influenza-like illness

Sentinel SARI: severe acute respiratory illness

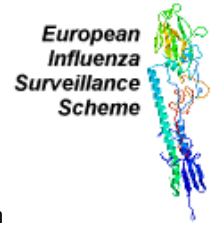
Population: per 100,000 population

*: the value in the table for these countries reflects the percent (e.g. from 0.0 to 100.0) of total outpatient encounters that were due to ILI/ARI rather than a consultation rate per 100,000

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Low or declining influenza activity in Europe



In week 14/2002, most of the networks participating in the European Influenza Surveillance Scheme (EISS) reported low or declining levels of influenza activity. The geographical spread of influenza ranged from none in Poland, Portugal and Spain to regional in Germany and Norway. The clinical morbidity rates in Europe were low or declining.

Influenza activity was above the national baseline level in the North and West of Norway. In Germany, it was higher in the East and Northeast. Compared to previous weeks, the percentage of sentinel specimens that tested positive for influenza A or B in Europe declined to 18%.

Influenza A was the dominant virus in Europe, but influenza B was also common and was the dominant virus in Belgium, France, Italy and Slovenia.

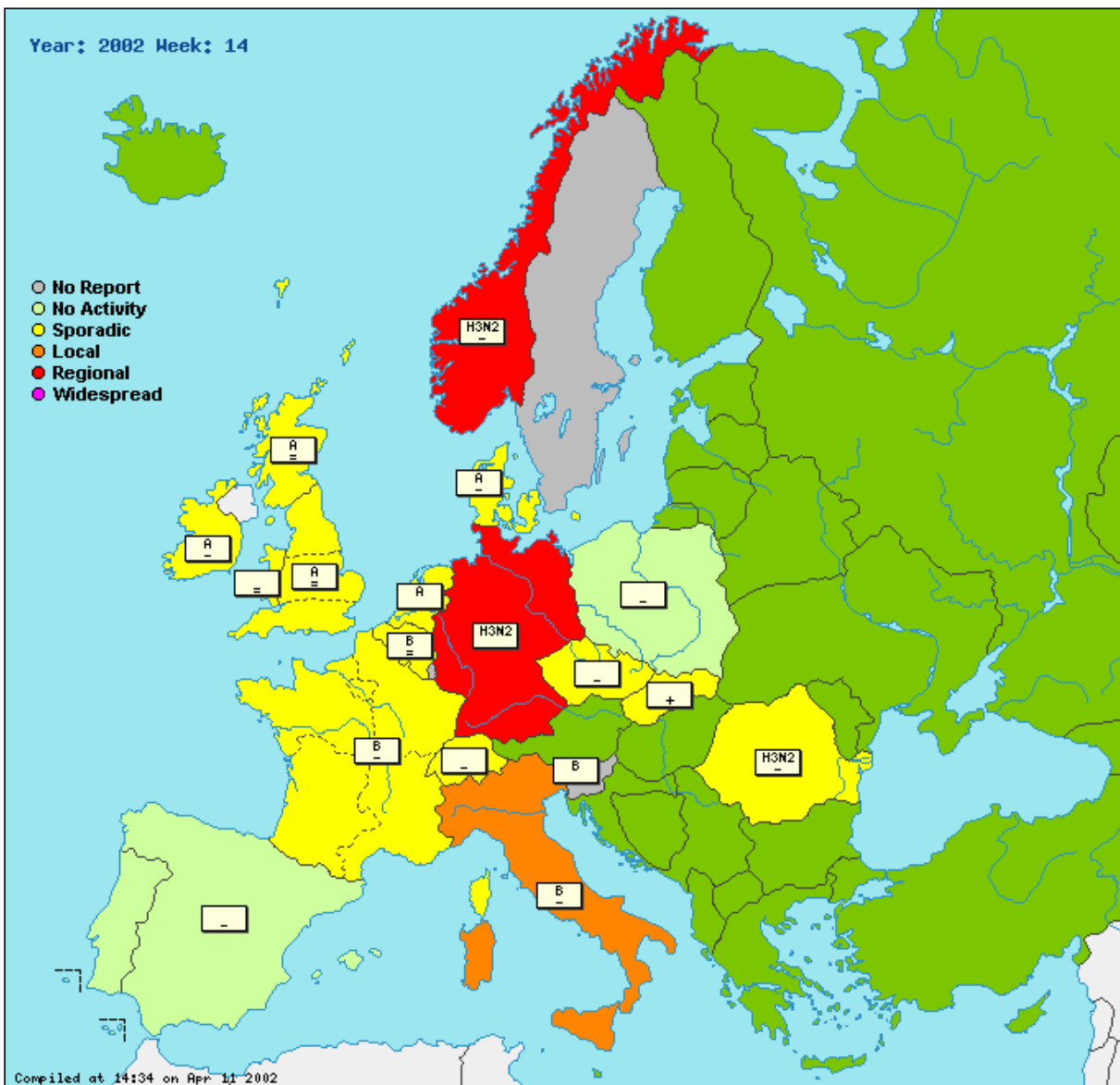
No new cases of influenza A(H1N2) were reported to EISS in week 14/2002. Norway reported that there have now been four cases of influenza B/Victoria/2/87-like virus detected in patients sampled in February and March 2002. These cases are of the Hong Kong/330/2001 lineage, which is a component of the 2002-2003 influenza vaccine.

The Weekly Electronic Bulletin presents and comments influenza activity in the 18 European countries (20 networks) that are members of EISS. In week 14/2002, eighteen networks reported clinical data and eighteen networks reported virological data.

Map

The map presents the geographical spread as assessed by each of the networks.

Clicking on the map will, if available, take you through to the national web site. If 'regional' activity is reported, a pop-up text box will appear which describes the activity in greater detail.



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A & B = Dominant virus A & B

= : stable clinical activity
+ : increasing clinical activity
- : decreasing clinical activity

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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.

Country comments (where available)

England

Clinical and virological indicators of influenza activity remain low.

Italy

The level of influenza-like illness (ILI) decreased to 1,04 per 1,000 patient population. Sporadic detection of B viruses. The isolated strains, from weeks 11 and 12, are from Trento (northern Italy).

Norway

Clinical flu activity is below the threshold nationally, but still above in two of the five health regions (West and North). A(H3) viruses remain dominant. The majority of recent influenza B viruses appear to be of the B/Hong Kong/330/2001 lineage.

Spain

No influenza virus detected this week.

Table and graphs (where available)

Network - region	Geographic Spread	Intensity	Sentinel swabs	Percentage positive	Dominant type	Rate	Numerator / denominator	Network graphs
Belgium	Sporadic	Medium	10	50.0%	Type B	81.5/100,000	ILI / Population	Click here
Czech Republic	Sporadic	Low	11	0%	None	1192.3/100,000	ARI / Population	Click here

Denmark	Sporadic	Low	2	0%	Type A	168.9/100,000	ILI / Population	Click here
England	Sporadic	Low	1	100.0%	Type A	9.1/100,000	ILI / Population	Click here
France	Sporadic	Low	77	2.6%	Type B	1050.3/100,000	ARI / Population	Click here
Germany	Regional	Medium	86	32.6%	Type A, Subtype H3N2	1159.9/100,000	ARI / Population	Click here
Ireland	Sporadic		2	50.0%	Type A	5.1/100,000	ILI / Population	Click here
Italy	Local	Low	0	0%	Type B	102.9/100,000	ILI / Population	Click here
Netherlands	Sporadic	Low	1	100.0%	Type A		ILI / Population	Click here
Norway	Regional	Low	0	0%	Type A, Subtype H3N2		ILI / Population	Click here
Poland	None	Low	0	0%	None	31.1/100,000	ILI / Population	Click here
Portugal	None	Low	0	0%	None		ILI / Population	Click here
Romania	Sporadic	Low	22	18.2%	Type A, Subtype H3N2	215.9/100,000	ARI / Population	Click here
Scotland	Sporadic	Low	12	16.7%	Type A	16.7/100,000	ILI / Population	Click here
Slovakia	Sporadic	Low	2	0%	None	544.0/100,000	ILI / Population	Click here
Slovenia			0	0%	Type B		ILI / Population	Click here
Spain	None	Low	14	0%	None	11.0/100,000	ILI / Population	Click here
Switzerland	Sporadic	Medium				36.4/100,000	ILI / Population	Click here
Wales	Sporadic	Low	0	0%	None	1.9/100,000	ILI / Population	Click here

Preliminary data

Intensity: Low = no influenza activity or influenza activity at baseline level; Medium= usual levels of influenza activity; High = higher than usual levels of influenza activity; Very high = particularly severe levels of influenza activity.

Geographical spread: No activity = no laboratory-confirmed cases, or evidence of increased or unusual respiratory disease activity; Sporadic = isolated cases of laboratory-confirmed influenza infection; Localized = limited to one administrative unit in the country (or reporting site) only; Regional = appearing in multiple but <50% of the administrative units of the country (or reporting sites); Widespread = appearing in >=50% of the administrative units of the country (or reporting sites).

Impact: Low = demands on health-care services are not above usual levels; Moderate = demands on health-care services are above the usual demand levels but still below the maximum capacity of those services; Severe = demands on health care services exceed the capacity of those services.

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Percentage positive: percentage of sentinel swabs that tested positive for influenza A or B

Dominant type: this assessment is based on data from sentinel and non-sentinel sources

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ILI: influenza-like illness

Sentinel SARI: severe acute respiratory illness

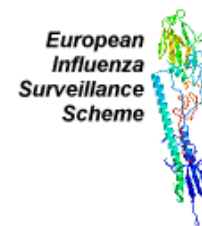
Population: per 100,000 population

*: the value in the table for these countries reflects the percent (e.g. from 0.0 to 100.0) of total outpatient encounters that were due to ILI/ARI rather than a consultation rate per 100,000

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Low or baseline levels of influenza activity in Europe



In week 15/2002, most of the networks participating in the European Influenza Surveillance Scheme (EISS) reported low or baseline levels of influenza activity. Five networks reported no influenza activity (Denmark, Ireland, Poland, Spain and Switzerland), eleven networks reported sporadic activity and two networks – Germany and Norway – reported local influenza activity.

The dominant influenza virus in week 15/2002 was influenza A in six networks and influenza B in five networks. Many networks (seven) reported no influenza viruses circulating in week 15/2002.

No new cases of influenza A(H1N2) or influenza B/Victoria/2/87-like viruses were reported to EISS in week 15/2002.

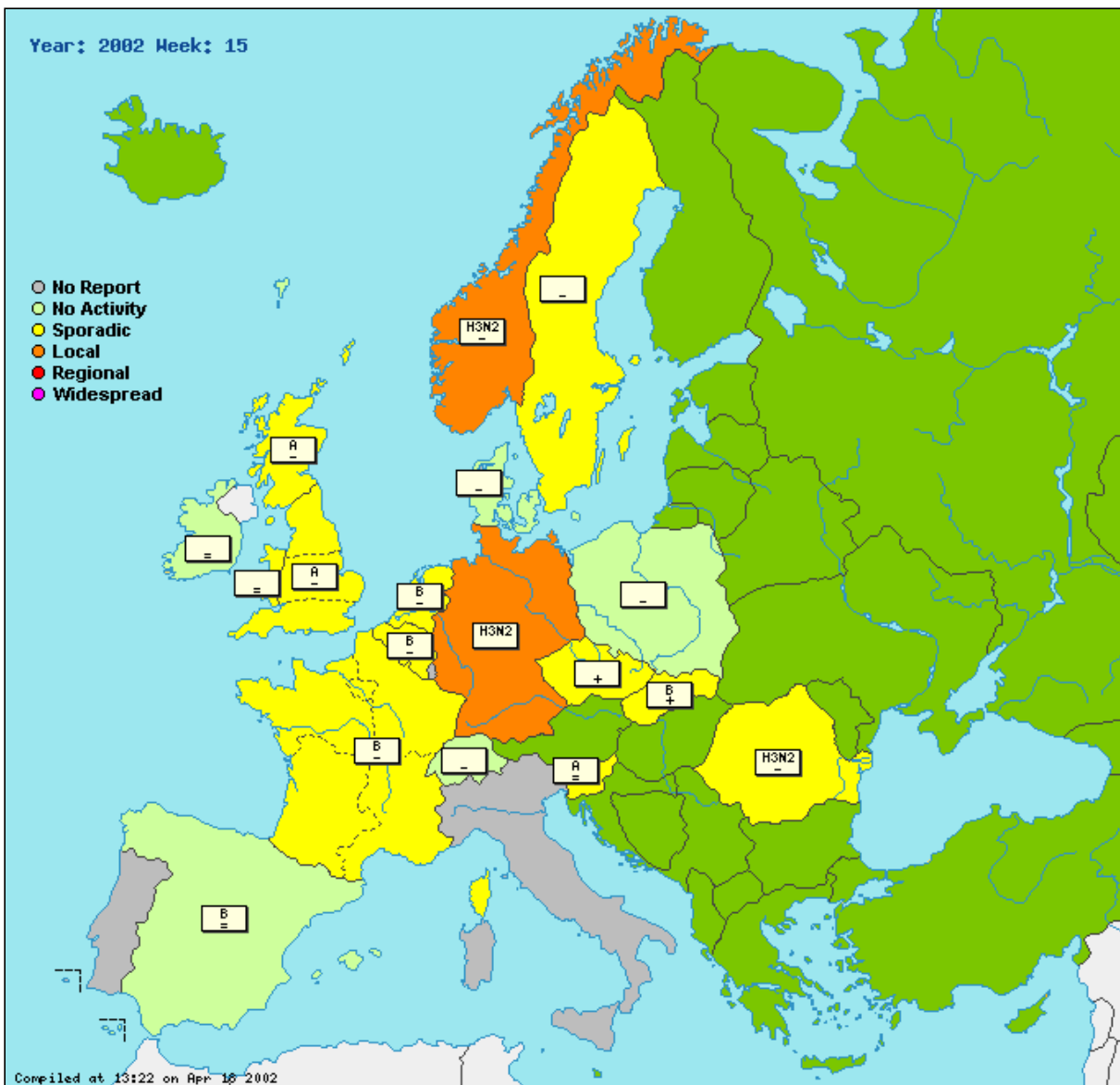
The Weekly Electronic Bulletin presents and comments influenza activity in the 18 European countries (20 networks) that are members of EISS. In week 15/2002, eighteen networks reported clinical data and eighteen networks reported virological data.

This is the last Weekly Electronic Bulletin published by EISS for the 2001-2002 influenza season. Many surveillance networks participating in EISS are no longer actively monitoring influenza or will shortly stop functioning as the influenza season is considered to be over. Countries will often continue to monitor influenza (e.g. laboratory reports of influenza viruses) and this surveillance data can be viewed on the national web sites which are listed under "Links" ([click here](#)). The EISS Weekly Electronic Bulletin will resume publication in October 2002 for the 2002-2003 influenza season.

Map

The map presents the geographical spread as assessed by each of the networks.

Clicking on the map will, if available, take you through to the national web site. If 'regional' activity is reported, a pop-up text box will appear which describes the activity in greater detail.



A = Dominant virus A
H1N1 = Dominant virus A(H1N1)
H3N2 = Dominant virus A(H3N2)
H1N2 = Dominant virus A(H1N2)
B = Dominant virus B
A & B = Dominant virus A & B

= : stable clinical activity
+ : increasing clinical activity
- : decreasing clinical activity

Low = no influenza activity or influenza at baseline levels
Medium = usual levels of influenza activity
High = higher than usual levels of influenza activity
Very high = particularly severe levels of influenza activity

No activity = no evidence of influenza virus activity (clinical activity remains at baseline levels)
Sporadic = isolated cases of laboratory confirmed influenza infection
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.

Country comments (where available)

England

Clinical and virological indicators of influenza activity remain low.

Sweden

35 cases of clinical ILI out of 5319 patient encounters were reported from the Swedish sentinel system

Switzerland

No influenza virus has been detected last week. During weeks 12 and 13, two influenza A (H3N2) and 2 influenza B viruses have been detected. They were antigenically related to the 2001/2002 vaccine strains.

Table and graphs (where available)

Network - region	Geographic spread	Intensity	Sentinel swabs	Percentage positive	Dominant type	Rate	Numerator / denominator	Network graphs
Belgium	Sporadic	Medium	0	0%	Type B	43.8/100,000	ILI / Population	Click here
Czech Republic	Sporadic	Low	45	4.4%	None		ARI / Population	Click here
Denmark	None	Low	0	0%	None	130.0/100,000	ILI / Population	Click here
England	Sporadic	Low	1	0%	Type A	8.2/100,000	ILI / Population	Click here
France	Sporadic	Low	22	27.3%	Type B	995.8/100,000	ARI / Population	Click here

Germany	Local	Medium	75	32.0%	Type A, Subtype H3N2	1238.0/100,000	ARI / Population	Click here
Ireland	None		5	0%	None	7.7/100,000	ILI / Population	Click here
Netherlands	Sporadic	Low	1	0%	Type B		ILI / Population	Click here
Norway	Local	Low	0	0%	Type A, Subtype H3N2		ILI / Population	Click here
Poland	None	Low	0	0%	None	21.3/100,000	ILI / Population	Click here
Portugal			0	0%	None		ILI / Population	Click here
Romania	Sporadic	Low	10	10.0%	Type A, Subtype H3N2	214.5/100,000	ARI / Population	Click here
Scotland	Sporadic	Low	17	5.9%	Type A	12.4/100,000	ILI / Population	Click here
Slovakia	Sporadic	Low	4	25.0%	Type B	633.0/100,000	ILI / Population	Click here
Slovenia	Sporadic	Low	2	100.0%	Type A	4.8/100,000	ILI / Population	Click here
Spain	None	Low	17	5.9%	Type B	14.1/100,000	ILI / Population	Click here
Sweden	Sporadic	Low					ILI / Population	Click here
Switzerland	None	Medium	4	0%	None	13.9/100,000	ILI / Population	Click here
Wales	Sporadic	Low	0	0%	None	3.3/100,000	ILI / Population	Click here

Preliminary data

Intensity: Low = no influenza activity or influenza activity at baseline level; Medium= usual levels of influenza activity; High = higher than usual levels of influenza activity; Very high = particularly severe levels of influenza activity.

Geographical spread: No activity = no laboratory-confirmed cases, or evidence of increased or unusual respiratory disease activity; Sporadic = isolated cases of laboratory-confirmed influenza infection; Localized = limited to one administrative unit in the country (or reporting site) only; Regional = appearing in multiple but <50% of the administrative units of the country (or reporting sites); Widespread = appearing in >=50% of the administrative units of the country (or reporting sites).

Impact: Low = demands on health-care services are not above usual levels; Moderate = demands on health-care services are above the usual demand levels but still below the maximum capacity of those services; Severe = demands on health care services exceed the capacity of those services.

Trend: Increasing = evidence that the level of respiratory disease activity is increasing compared with the previous week; Stable = evidence that the level of respiratory disease activity is unchanged compared with the previous week; Decreasing = evidence that the level of respiratory disease activity is decreasing compared with the previous week.

Percentage positive: percentage of sentinel swabs that tested positive for influenza A or B

Dominant type: this assessment is based on data from sentinel and non-sentinel sources

ARI: acute respiratory infection

ILI: influenza-like illness

Sentinel SARI: severe acute respiratory illness

Population: per 100,000 population

*: the value in the table for these countries reflects the percent (e.g. from 0.0 to 100.0) of total outpatient encounters that were due to ILI/ARI rather than a consultation rate per 100,000

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