

Influenza Update N° 405

25 October 2021, based on data up to 10 October 2021

In this update, information on SARS-CoV-2 virus detections from sentinel and non-sentinel surveillance performed by GISRS and GISRS-associated influenza surveillance systems and reported to FluNet is included in addition to the routine influenza surveillance information.

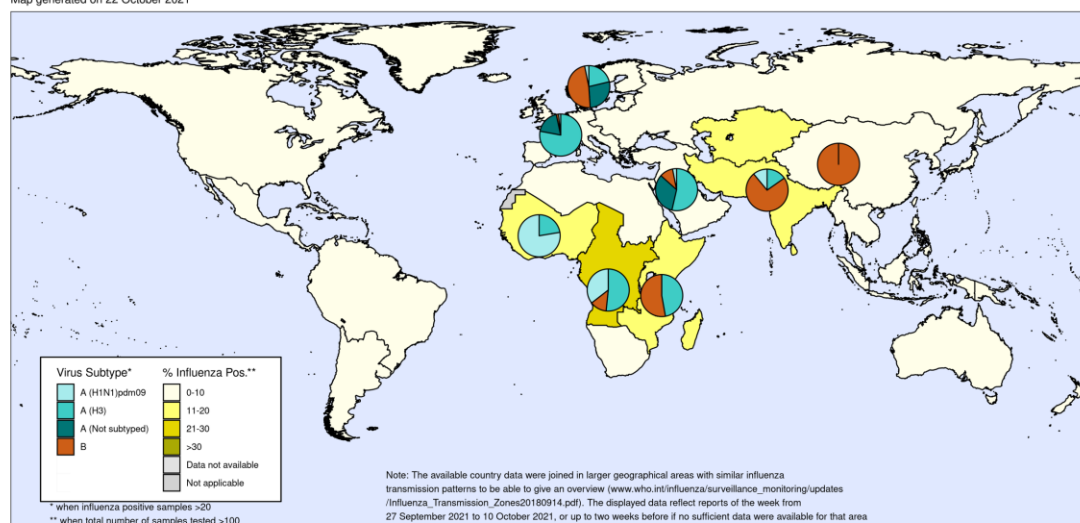
Summary

- The current influenza surveillance data should be interpreted with caution as the ongoing COVID-19 pandemic has influenced to varying extents health seeking behaviours, staffing/routines in sentinel sites, as well as testing priorities and capacities in Member States. The various hygiene and physical distancing measures implemented by Member States to reduce SARS-CoV-2 virus transmission have likely played a role in reducing influenza virus transmission.
- Globally, despite continued or even increased testing for influenza in some countries, influenza activity remained at lower levels than expected for this time of the year.
- In the temperate zones of the northern hemisphere, influenza activity remained at inter-seasonal levels. Both influenza A and B were detected, and respiratory syncytial virus (RSV) was increased and higher than in previous years in some countries.
- In the Caribbean and Central American countries, sporadic influenza B virus detections and RSV activity were reported in some countries
- In tropical South America, no influenza detections were reported, however RSV activity remained elevated in some countries.
- In tropical Africa, a few influenza detections of predominately influenza A were reported in some countries in Western, Middle and Eastern Africa.
- In Southern Asia, influenza detections of predominately influenza B continued to be reported across reporting countries.
- In South-East Asia, no influenza detection was reported.
- In the temperate zones of the southern hemisphere, influenza activity remained at inter-seasonal levels. Elevated influenza-like illness (ILI) and RSV activity was reported in some countries.
- Worldwide, influenza B/Victoria lineage viruses predominated.
- National Influenza Centres (NICs) and other national influenza laboratories from 95 countries, areas or territories reported data to FluNet for the time period from 27 September 2021 to 10 October 2021 (data as of 2021-10-22 07:48:51 UTC). The WHO GISRS laboratories tested more than 240512 specimens during that time period. 2219 were positive for influenza viruses, of which 763 (34.4%) were typed as influenza A and 1456 (65.6%) as influenza B. Of the sub-typed influenza A viruses, 169 (34%) were influenza A(H1N1)pdm09 and 328 (66%) were influenza A(H3N2). Of the characterized B viruses, 2 (0.1%) belonged to the B-Yamagata lineage and 1339 (99.9%) to the B-Victoria lineage.

Percentage of respiratory specimens that tested positive for influenza by influenza transmission zone¹. Map generated on 22 October 2021.

Percentage of respiratory specimens that tested positive for influenza
By influenza transmission zone

Map generated on 22 October 2021



The boundaries and names shown and the designations used on this map do not imply the expression of any opinion whatsoever on the part of the World Health Organization concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. Dotted and dashed lines on maps represent approximate border lines for which there may not yet be full agreement.

Data source: Global Influenza Surveillance and Response System (GISRS), FluNet (www.who.int/flu-net)
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- During the COVID-19 pandemic, WHO encourages countries, especially those that have received the [multiplex influenza and SARS-CoV-2](#) reagent kits from GISRS, to continue routine influenza surveillance, test samples from influenza surveillance sites for influenza and SARS-CoV-2 viruses where resources are available and report epidemiological and laboratory information in a timely manner to established regional and global platforms (see the guidance here: <https://apps.who.int/iris/rest/bitstreams/1316069/retrieve>).
- At the global level, SARS-CoV-2 percent positivity from sentinel surveillance continued to decrease, returning to levels last observed in mid-2021. Activity was low in the WHO African and, South-East Asian and Western Pacific regions at under 5% positivity. Activity decreased in the WHO region of the Americas, Eastern Mediterranean and European regions but remained at elevated levels between 10% and 30%. Overall positivity from non-sentinel sites continued to decrease, reaching a low of just under 7%. While activity showed a decreasing trend in the WHO South-East Asian region non-sentinel sites, activity remained elevated and above 40%.
- NICs and other national influenza laboratories from 39 countries, areas or territories from six WHO regions (African Region: 1; Region of the Americas: 13; Eastern Mediterranean Region: 3; European Region: 13; South-East Asia Region: 4; Western Pacific Region: 5) reported to FluNet from sentinel surveillance sites for time period from 27 Sep 2021 to 10 Oct 2021 (data as of 2021-10-22 07:48:51 UTC). The WHO GISRS laboratories tested more than 66 572 sentinel specimens during that time period and 15 438 (23.2%) were positive for SARS-CoV-2. Additionally, approximately 1.5 million non-sentinel or undefined

¹ Information in this report is categorized by influenza transmission zones, which are geographical groups of countries, areas or territories with similar influenza transmission patterns. For more information on influenza transmission zones, see:

https://cdn.who.int/media/docs/default-source/influenza/influenza-updates/2020/influenza_transmission_zones20180914.pdf?sfvrsn=dba8eca5_3

reporting source samples were tested in the same period and 110 981 were positive for SARS-CoV-2. Further details are included at the end of this update.

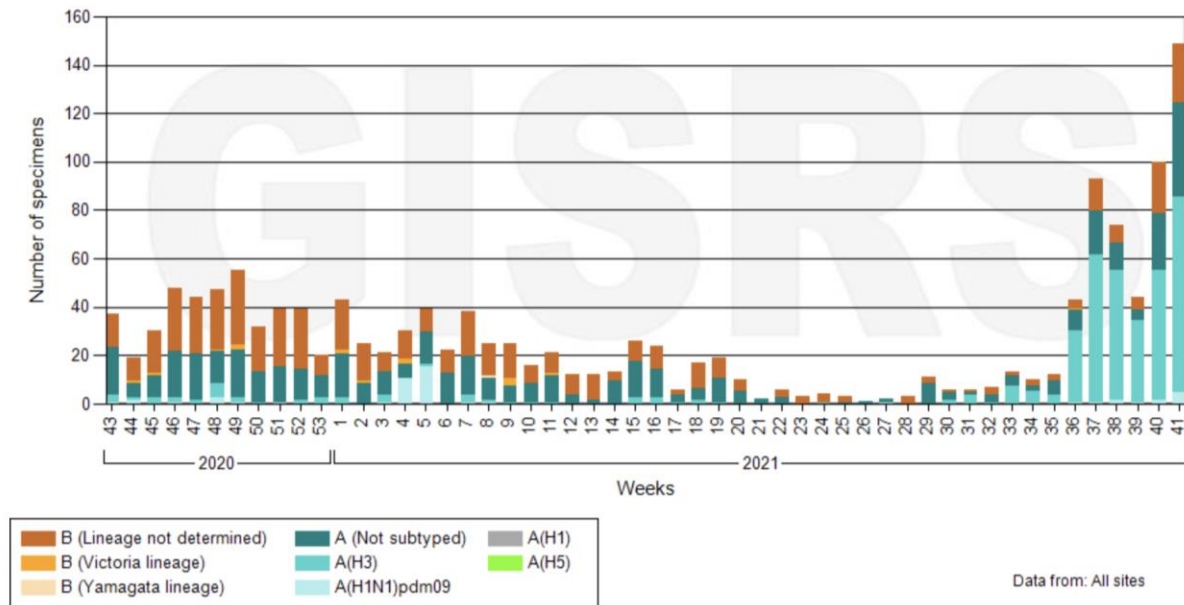
For more detailed information, see the Influenza reports from WHO Regional Offices:

- WHO Region of the Americas: www.paho.org/influenzareports
- WHO Eastern Mediterranean Region: <http://www.emro.who.int/health-topics/influenza/situation-update.html>
- WHO European Region: www.flunewseurope.org/
- WHO Western Pacific Region: <https://www.who.int/westernpacific/emergencies/surveillance/seasonal-influenza>

Countries in the temperate zone of the northern hemisphere

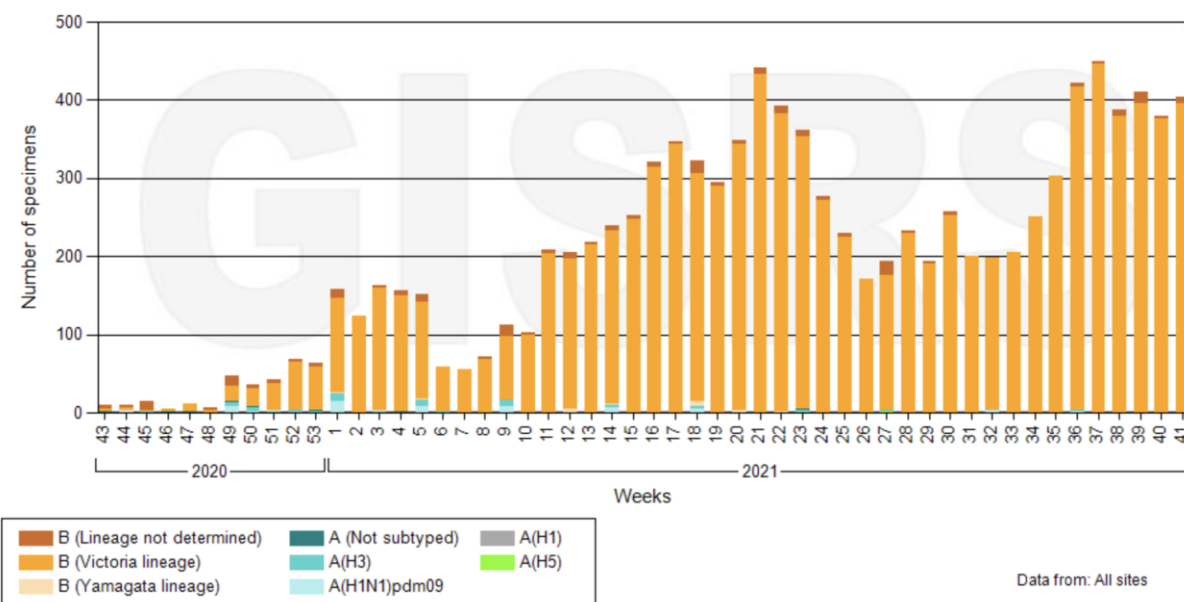
- In the temperate zones of the northern hemisphere, influenza activity remained below baseline overall.
- In the countries of North America, influenza activity indicators and detections were at low levels with sporadic detections of influenza A and B viruses. In Canada, ILI activity was below expected levels. In the United States of America (USA), ILI activity decreased slightly during this period and remained above levels seen in previous years at this time of year but below the national threshold. The percentage of deaths attributed to pneumonia, influenza or COVID-19 increased and remained above the epidemic threshold for pneumonia and influenza mortality established from historical data. RSV detections increased in some parts of Canada and the USA.
- In Europe, influenza detections increased in some countries though activity remained at inter-seasonal level. Detections were of both influenza A and B viruses. Detections of other respiratory viruses were reported in some countries performing surveillance for ORVs; RSV activity continued to be elevated and was higher than in previous years for this time of year in Germany and England (United Kingdom), particularly in younger children.
- In Central Asia, sporadic detections of influenza A(H3N2) viruses were reported in Kyrgyzstan.
- In Northern Africa, Egypt reported influenza A H3 and influenza B (no lineage determined) virus detections.
- In Western Asia, Lebanon reported influenza A(H3N2) virus detections. Oman and Qatar reported mainly influenza A (H3N2) viruses and a few influenza A(H1N1)pdm09 viruses, with Qatar also reporting some influenza B detections. Saudi Arabia reported influenza A viruses for which the subtype was not determined.
- In East Asia, influenza illness indicators and activity remained low. Influenza B/Victoria lineage viruses were detected in China at similar levels to the previous reporting period, with the vast majority of detections reported from southern provinces. The proportion of hospitalizations and deaths due to pneumonia decreased slightly though remaining very high in Mongolia; this is largely due to COVID-19.

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



Data source: FluNet (www.who.int/toolkits/flunet). Global Influenza Surveillance and Response System (GISRS)
Data generated on 22/10/2021

Number of specimens positive for influenza by subtype in Eastern Asia



Data source: FluNet (www.who.int/toolkits/flunet). Global Influenza Surveillance and Response System (GISRS)
Data generated on 22/10/2021

Countries in the tropical zone

Tropical countries of Central America, the Caribbean and South America

- In the Caribbean and Central American countries, sporadic influenza virus detections were reported in Haiti (influenza B) and Mexico (influenza (H3N2) and B). A few RSV detection were reported in some countries across the subregion, though reported as increased in Belize

and Mexico. The number of severe acute respiratory infection (SARI) cases continued to decrease, though remained at moderate levels in Mexico. In Jamaica, SARI hospitalization rates and pneumonia cases continued to decrease and were reported at low levels.

- In the tropical countries of South America, no influenza virus detection was reported. RSV detections were reported at low levels across the subregion though increased in Colombia and Peru.

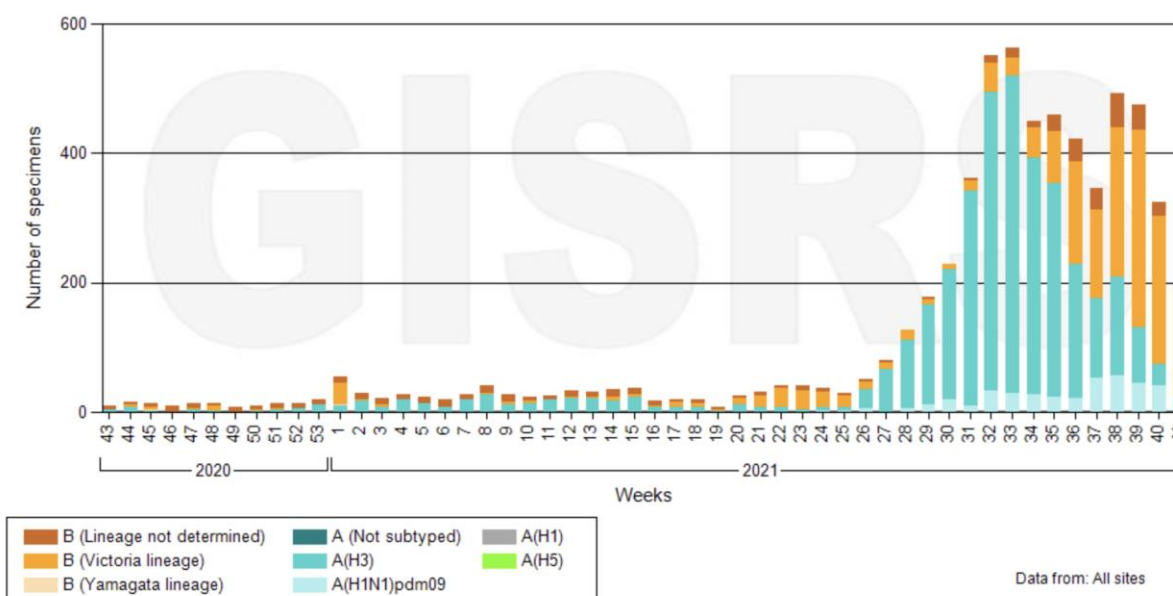
Tropical Africa

- In Western Africa, influenza A(H3N2) virus detections were reported in Burkina Faso, Ghana and Togo. Ghana and Togo also reported influenza A(H1N1)pdm09 detections.
- In Middle Africa, no detections were reported for this period.
- In Eastern Africa, influenza B (Victoria lineage where lineage was determined) detections were reported in Madagascar.

Tropical Asia

- In Southern Asia, the number of influenza virus detections reported was in a similar range to previous seasons. The majority of detections were reported from India and Nepal, with influenza B/Victoria lineage predominantly detected. Bangladesh, Maldives, Pakistan and Sri Lanka also reported positive samples, mainly influenza A(H3N2) with exception of Bangladesh where influenza A(H1N1)pdm09 viruses were detected. In Nepal, elevated levels of SARI appeared to decrease over the reporting period.
- In South-East Asia, no influenza detection was reported.

Number of specimens positive for influenza by subtype in Southern Asia

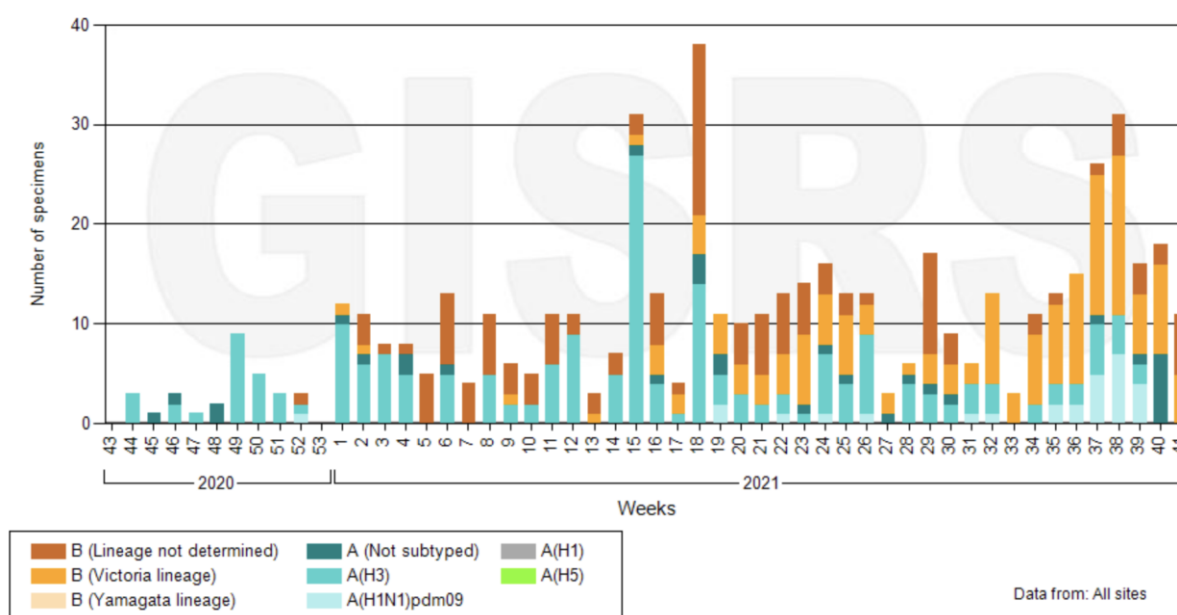


Data source: FluNet (www.who.int/toolkits/flu-net). Global Influenza Surveillance and Response System (GISRS)
Data generated on 22/10/2021

Countries in the temperate zone of the southern hemisphere

- In the temperate zones of the southern hemisphere, influenza activity remained at inter-seasonal levels.
- In Oceania, influenza was detected at very low levels, even below the already low detection in 2020, despite ongoing testing. ILI activity remained below seasonal levels for most of the region, however, was elevated in New Caledonia, Kiribati and Northern Mariana Islands. The increased ILI activity in New Caledonia coincides with increased recent RSV activity as well as current COVID-19 transmission. The uptrend in the Northern Mariana Islands appears to be decreasing, but remains elevated and coincides with current COVID-19 transmission.
- In South Africa, there were detections of influenza A(H1N1)pdm09, A(H3N2) and influenza B viruses. Both influenza and RSV were detected below seasonal levels. COVID-19 detections continued to decrease and were low in both ILI and pneumonia surveillance systems.
- In temperate South America, there were no influenza virus detections across reporting countries. RSV activity was reported at high level though decreasing in Argentina and increasing in Chile. SARI hospitalization rates decreased to low levels in Paraguay and Uruguay.

Number of specimens positive for influenza by subtype in southern hemisphere

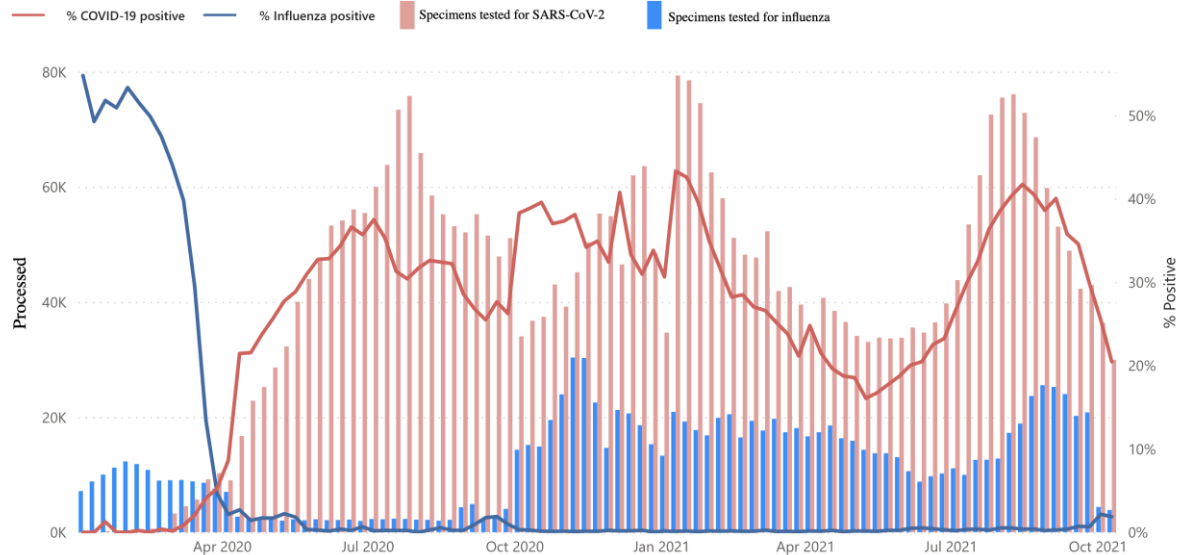


SARS-CoV-2 sentinel surveillance data reported to FluNet

- SARS-CoV-2 data are included from those countries reporting testing one or more sentinel specimens for SARS-CoV-2 per week. Influenza data are included from those countries reporting testing one or more sentinel specimens for influenza per week regardless of their reporting of SARS-CoV-2 testing data. Currently, there are a limited number of countries reporting such data to FluNet in a timely and consistent way. The charts below show the data globally and by WHO

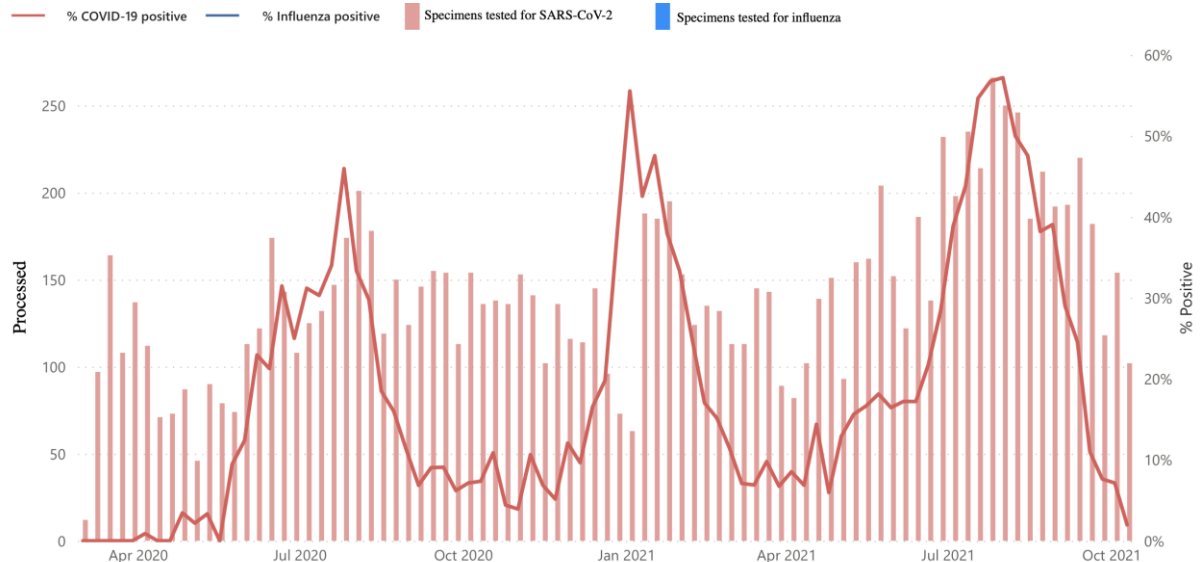
region from the data reported to date to WHO from a limited number of countries and thus the trends in percent positivity do not reflect the situation as a whole in the region.

Influenza and SARS-CoV-2 virus detections from sentinel surveillance reported to FluNet globally



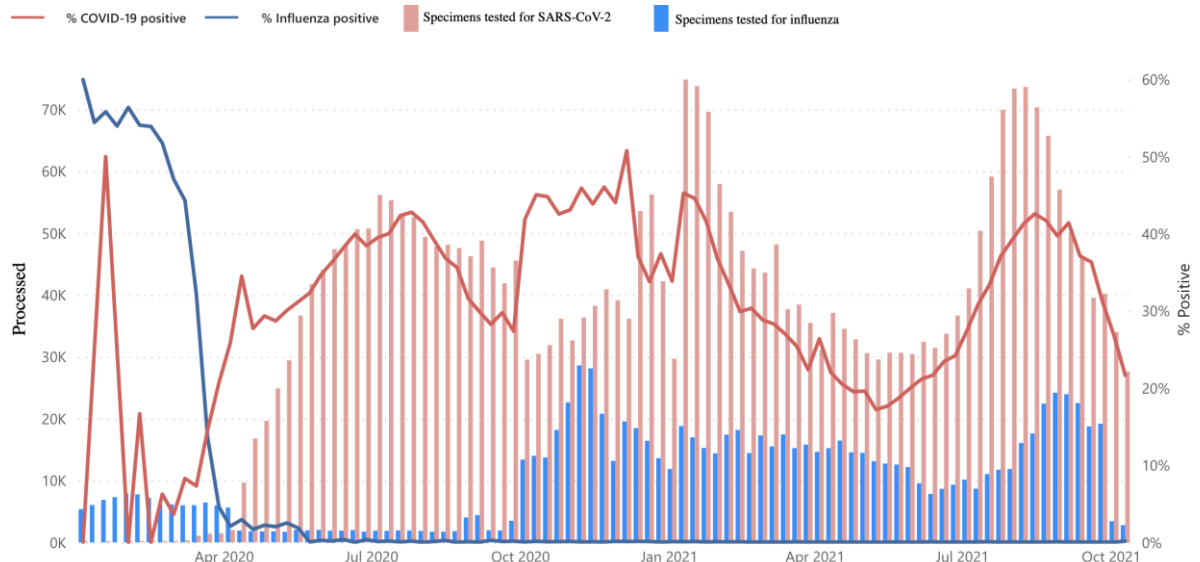
Data source: FluNet (www.who.int/toolkits/flunet). Global Influenza Surveillance and Response System (GISRS)
Data generated on 22/10/2021

Influenza and SARS-CoV-2 virus detections from sentinel surveillance reported to FluNet from countries, areas and territories in the WHO African Region



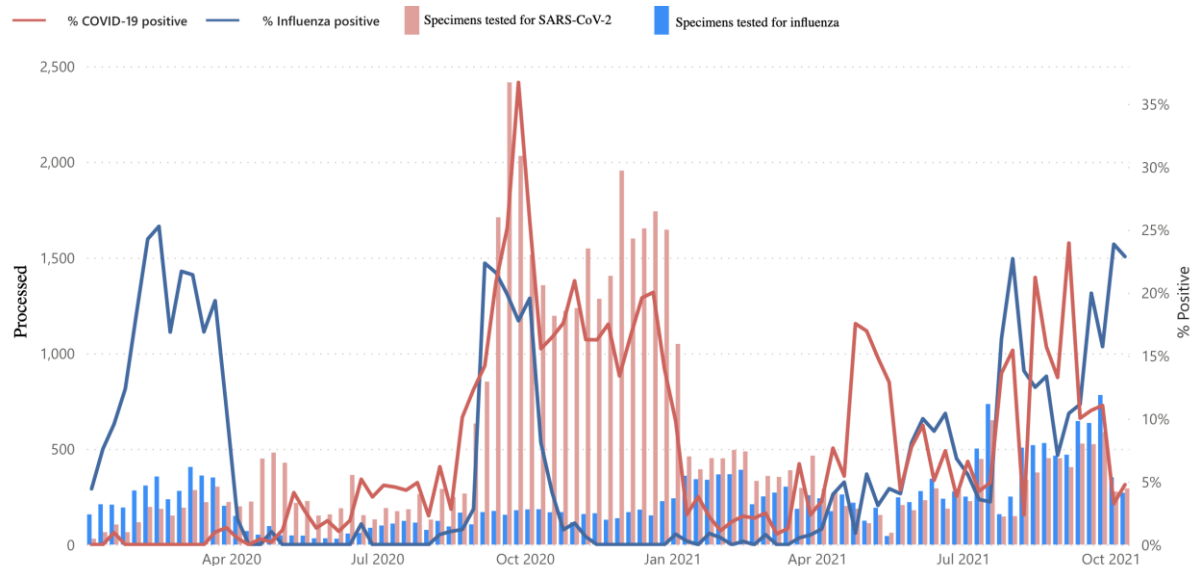
Data source: FluNet (www.who.int/toolkits/flunet). Global Influenza Surveillance and Response System (GISRS)
Data generated on 22/10/2021

Influenza and SARS-CoV-2 virus detections from sentinel surveillance reported to FluNet from countries, areas and territories in the WHO Region of the Americas



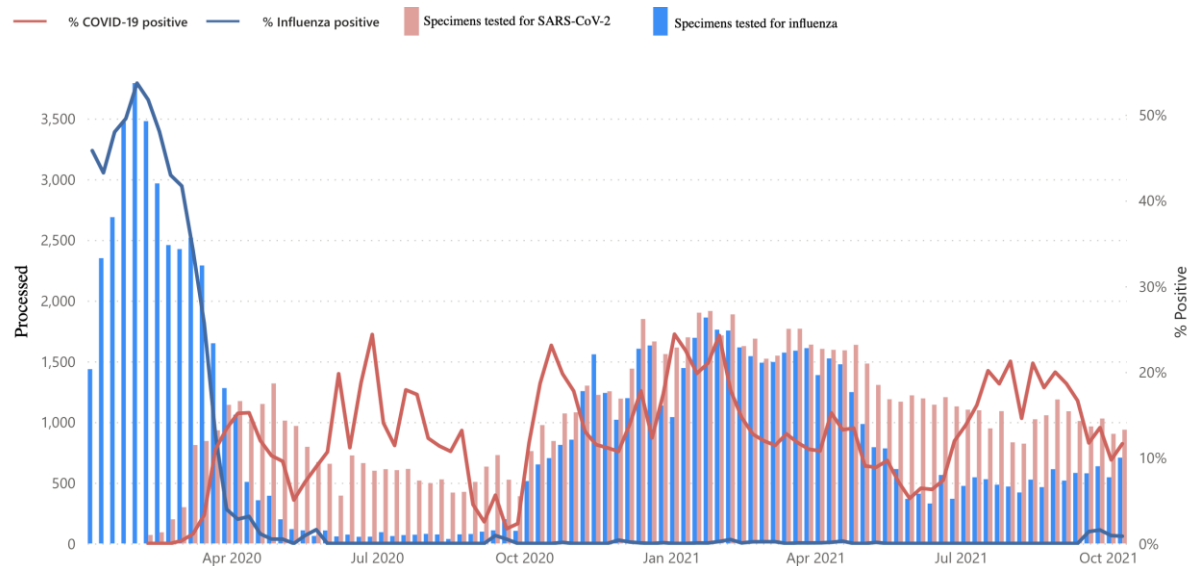
Data source: FluNet (www.who.int/toolkits/flunet). Global Influenza Surveillance and Response System (GISRS)
Data generated on 22/10/2021

Influenza and SARS-CoV-2 virus detections from sentinel surveillance reported to FluNet from countries, areas and territories in the WHO South-East Asia Region



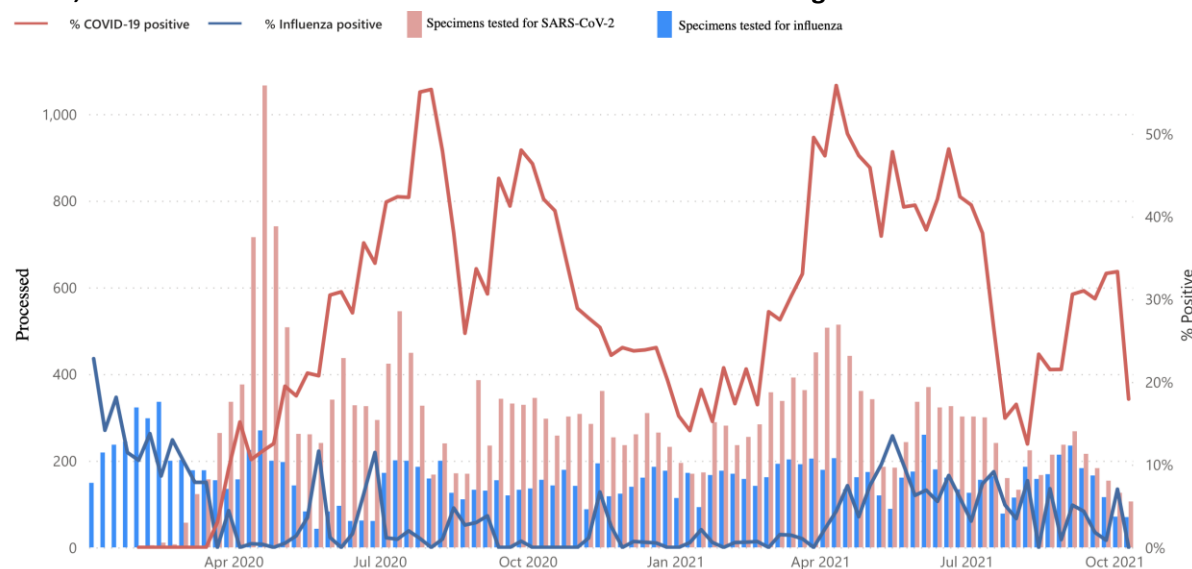
Data source: FluNet (www.who.int/toolkits/flunet). Global Influenza Surveillance and Response System (GISRS)
Data generated on 22/10/2021

Influenza and SARS-CoV-2 virus detections from sentinel surveillance reported to FluNet from countries, areas and territories in the WHO European Region



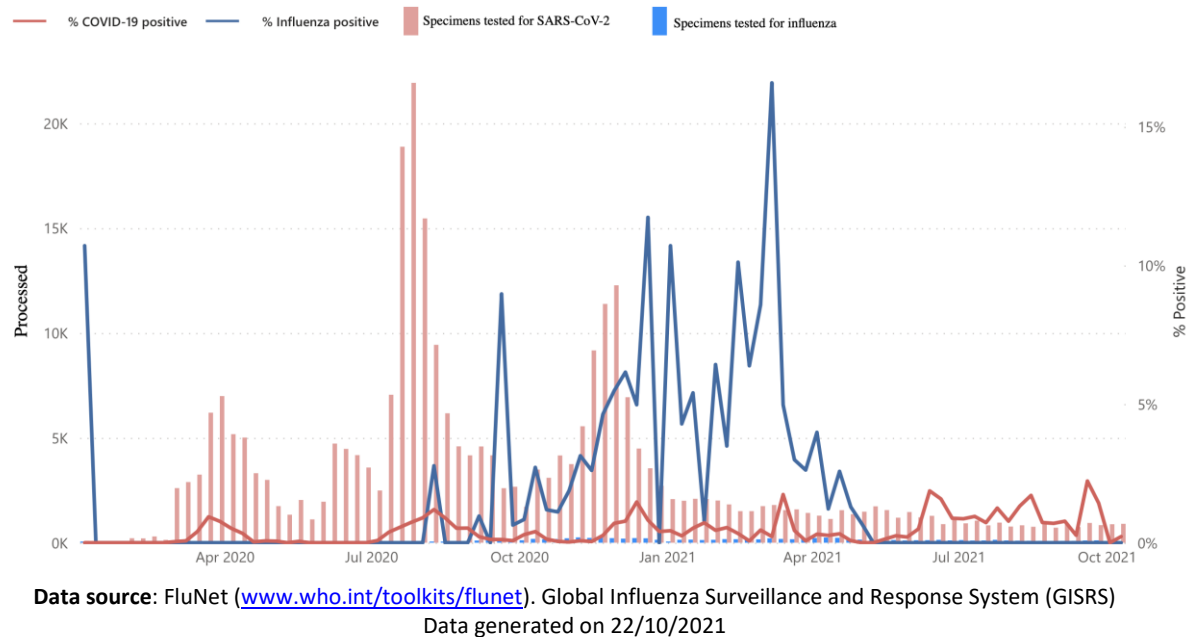
Data source: FluNet (www.who.int/toolkits/flunet). Global Influenza Surveillance and Response System (GISRS)
Data generated on 22/10/2021

Influenza and SARS-CoV-2 virus detections from sentinel surveillance reported to FluNet from countries, areas and territories in the WHO Eastern Mediterranean Region



Data source: FluNet (www.who.int/toolkits/flunet). Global Influenza Surveillance and Response System (GISRS)
Data generated on 22/10/2021

Influenza and SARS-CoV-2 virus detections from sentinel surveillance reported to FluNet from countries, areas and territories in the WHO Western Pacific Region



Sources of data

The Global Influenza Programme monitors influenza activity worldwide and publishes an update every two weeks. The updates are based on available epidemiological and virological data sources, including FluNet (reported by the WHO Global Influenza Surveillance and Response System), FluID (epidemiological data reported by national focal points) and influenza reports from WHO Regional Offices and Member States. During the COVID-19 pandemic, FluNet has also been receiving updates on testing of samples obtained from routine influenza surveillance systems for SARS-CoV-2. Completeness can vary among updates due to availability and quality of data available at the time when the update is developed.

Seasonal influenza reviews: [Review of global influenza circulation, late 2019 to 2020, and the impact of the COVID-19 pandemic on influenza circulation](#)

Epidemiological Influenza updates: <https://www.who.int/teams/global-influenza-programme/surveillance-and-monitoring/influenza-updates>

Virological surveillance updates: <https://www.who.int/tools/flunet/flunet-summary>

Influenza surveillance outputs: <https://www.who.int/teams/global-influenza-programme/surveillance-and-monitoring/influenza-surveillance-outputs>

Influenza – COVID-19 Interface, including surveillance outputs: <https://www.who.int/teams/global-influenza-programme/influenza-covid19>

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