

The objective of the bulletin is to report new health events occurring outside and inside EpiSouth area that have potential implications on EpiSouth population. It does not aim to provide an exhaustive review of international alerts. Since 2006, The French public health Institute (InVS) is issuing an online epidemic intelligence bulletin (Bulletin hebdomadaire International - BHI). In order to limit duplication and to make this already verified information available to a larger audience, information relating to health events of interest for EpiSouth population are translated and integrated in the relevant e-web sections. Despite all verifications, WPG team would not be responsible for potential errors. The recipient is responsible for the cautious use of this information. Neither the European Commission nor any person acting on behalf of the Commission is liable for the use that may be made of the information contained in this report. Data maps and commentary used in this document do not imply any opinion of EpiSouth countries or its partners on the legal status of the countries and territories shown or concerning their borders.

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- **A(H5N1) Human influenza – Egypt, Cambodia**
- **A(H5N1) Avian influenza – none**
- **“OUTSIDE” Events:**
 - **Dengue – Argentina**
- **“INSIDE” Events: none**
- **World – Pandemic A/H1N1/2009 influenza**

Location: Egypt

Event: A(H5N1) – Human

Comments

- On 19 December 2009, Egyptian health authorities reported a new confirmed human case of avian influenza A(H5N1):
- A 21 yrs old female from El Tanta District of Gharbia Governorate (map 1.):
 - ✓ presented symptoms on 15 December,
 - ✓ was hospitalized on the same day and received oseltamivir treatment,
 - ✓ is in a stable condition.
 - ✓ had close contact with dead and/or sick poultry.
- Since April 2006, Egypt has reported 90 confirmed human cases of avian influenza A(H5N1), 27 have been fatal.

Map 1. Al Gharbia Governorate, Egypt.



- The occurrence of human cases of A(H5N1) in Egypt does not constitute an unexpected event.
- Since 01 January 2009, Egyptian health authorities have reported 39 cases including 4 deaths. 8 cases had been reported in 2008, 25 in 2007 and 18 in 2006.
- To date, the available information does not indicate a change in the epidemiology of the virus.

Location: Cambodia

Event: A(H5N1) – Human

Comments

- On 18 December 2009, Cambodian health authorities reported a new confirmed human case of avian influenza A(H5N1). The case was confirmed by the National Influenza Center at the Pasteur Institute Cambodia located in the capital city of Phnom Penh.
- A 57 yr old male from Ponhea Kraek district, (map 2.):
 - ✓ presented symptoms on 11 December,
 - ✓ was hospitalized on 16 December, and received oseltamivir treatment,
 - ✓ is in a stable condition.
 - ✓ he had had close contact with dead and/or sick poultry.
- The Ministry of Health has deployed a team to conduct a field investigation to identify the source of infection.

Map 2. Ponhea Kraek district, Cambodia.



- This is the 1st human case of H5N1 avian influenza confirmed in Cambodia since 2003.
- To date, 9 cases have been confirmed in the country. 7 of them have been fatal.
- The occurrence of human cases of A(H5N1) is not unexpected in Cambodia.

***REPORT OF NEW HEALTH EVENTS OCCURRING OUTSIDE THE EPISOUTH AREA
(not occurring in one or several EpiSouth countries)***

Area: Argentina

Event: Dengue

Comments

- On 18 December 2009, the provinces of Misiones and Santa Fé (map 3.) in Argentina reported the 1st confirmed cases of dengue in the country since 01 August 2009:
 - ✓ a confirmed case in Puerto Iguazú, Misiones province, bordering Paraguay.
 - ✓ an imported case from Colombia that was detected and confirmed in the city of Santo Tomé, province of Santa Fé.
- Control measures were implemented in the region and further investigations are ongoing.
- A dengue outbreak is ongoing in Paraguay with 3 confirmed cases in the city of Presidente Franco, across the border from Argentina. As of 16 December, 81 cases of dengue serotype DEN-1 have been reported in the country.

- Between 01 January and 31 May 2009, a large dengue outbreak affected Argentina (26 879 confirmed cases, versus 40 in 2008 and 173 in 2007).
- Seasonal outbreaks usually occur during the rainy season, from December to March in Argentina.
- The occurrence of local cases of dengue in northern regions of the country is not unexpected.
- Considering Argentina is a frequent tourists destination, especially the region of Misiones where are located the Iguazú waterfalls, the situation will be followed-up further.

Map 3. Provinces of Misiones and Santa Fé, Argentina.



REPORT OF NEW HEALTH EVENTS OCCURRING OUTSIDE and INSIDE THE EPISOUTH AREA

Location: World Event: Pandemic A/H1N1/2009

EpiSouth region

As of 21 December 2009, a total of 1 592 deaths among biologically confirmed A/H1N1/2009 cases have been reported in the EpiSouth region. 279 new A(H1N1)2009 related deaths were reported since 14 December 2009:

4 in albania, 8 in Algeria, 29 in bulgaria, 1 in Cyprus, 35 in Egypt, 14 in Mainland France, 7 in FYROM, 15 in Greece, 2 in Israel, 41 in Italy, 2 in Jordan, 10 in Morocco, 14 in Romania, 5 in Serbia, 6 in Slovenia, 24 in Spain and 62 in Turkey.

In week 50, influenza activity was

- high and increasing in **Serbia**,
- medium and increasing in **Bulgaria** and **Romania**,
- increasing in **Montenegro**,
- high and stable in **Albania**,
- medium and stable in **Turkey**,
- high and decreasing in **Greece**,
- medium and decreasing in **Croatia**, **France**, **Israel**, **Slovenia** and **Spain**.

- As of 17 December, **Algerian** health authorities reported 8 000 probable cases of A(H1N1)2009, 553 confirmed cases and 32 deaths. Since 03 December 2009, only patients with influenza-like illness and severe symptoms or risk of complication or underlying chronic conditions are subject to laboratory confirmation. Analyses comparing estimates of probable cases of A(H1N1)2009 and surveillance data from the sentinel system that will serve to monitor the epidemiological situation are ongoing.
- **Montenegro** experienced a slight increase in influenza activity in week 49: 1 645 cases of influenza-like-illness and 4705 of acute respiratory infections were recorded compared with 1 451 and 3 602 respectively the previous week. **Montenegro** confirmed 230 cases since the beginning of the pandemic.
- **Morocco** (as of 17 December 2009) reported 33 A(H1N1)2009 deaths (nearly half presented underlying conditions and 8 were pregnant women), and 2 671 confirmed cases, of which 1005 (38%) were recorded in schools.
- In **Italy** the decrease in the incidence of influenza-like illness recorded by the sentinel surveillance system of community health physicians (Influnet) continued (220/100 000 compared with 370/100 000 inh. in week 49). The estimated number of cases in the Italian population in week 50 was 132 000.
- In week 50, (7-13 December 2009), A(H1N1)2009 influenza virus circulation remains moderate across **Mainland France** and seems to start a decreasing phase. Sentinel surveillance systems report a decrease in consultations for influenza-like illness and acute respiratory infections. Visits to emergency departments, severe cases and deaths have also diminished. Positivity rates for A(H1N1)2009 remain high and accounted for the great majority of influenza viruses isolated during the week. 7 more cases of resistance to oseltamivir were recorded in **France** in week 50. The occurrence of such mutations, sporadically, does not constitute an unexpected event.
- In **Spain**, the decrease observed in recent weeks continues, with a consultation rate of 78/100 000 inh. in week 50. A(H1N1)2009 is still the predominant influenza strain among isolates.

Global trends (outside the EpiSouth region)

- As of 21 December 2009, **12 040 deaths** related to A/H1N1/2009 have been reported worldwide (including EpiSouth countries).
- Since 14 December 2009, the following trends have been observed:
- **Europe (non-EpiSouth countries):** For week 50, influenza activity was moderate and globally decreasing for most countries of the European network for influenza (*Euroflu*). **Hungary** was the only non-EpiSouth European country where an increase was observed. It was stable in **Belgium, Denmark and Czech Republic**.
- Influenza activity in **Georgia** and **Ukraine** has shown signs of resurgence following declining trends in previous weeks; in particular eastern regions of **Ukraine** which recorded an increase in acute respiratory infections in week 50. In **Russia**, influenza activity varies from stable to decreasing across the country.
- In the **Middle-East** (excluding EpiSouth countries)
 - **23 new deaths** were notified since 14 December: 3 deaths in **Iraq** and 1 in **Oman**, 16 **Saudi Arabia**, and 3 **Yemen**.
 - To date, **386 A/H1N1/2009 related deaths** have been reported among **non-EpiSouth countries** of the region.
- In the **United States**, influenza activity continued to decrease in week 50. A(H1N1)2009 was still the predominant influenza virus strain. The proportion of deaths attributed to pneumonia and influenza was above the epidemic threshold for the eleventh consecutive week.

In **Canada**, for week 50 (7-13 December), the overall influenza activity continued to decline for the 4th consecutive week. Influenza-like illness consultation rate was below the expected range for this time of the year. A (H1N1)2009 still accounted for nearly 100% of the positive influenza A subtyped specimens this week.

In **Mexico**, no changes in the epidemiological situation have been recorded since last week.

- In the **Caribbean, South and Central America**, influenza activity remains weak to moderate with stable to decreasing trends.
- In **Asia**, influenza activity continues its slow increase in **India, Nepal, Sri Lanka** and **Thailand** with moderate impact on health infrastructure. The epidemic decreases in **Japan**.
- Pandemic H1N1 2009 virus appears to be the predominant influenza virus circulating in **northern and eastern Africa**. In **West Africa**, pandemic and seasonal influenza viruses have been detected. Seasonal viruses have included both seasonal H1N1 and H3N2, with the latter predominating.
- In the **Pacific region**, influenza activity remains low and varying from stable to decreasing among countries.