

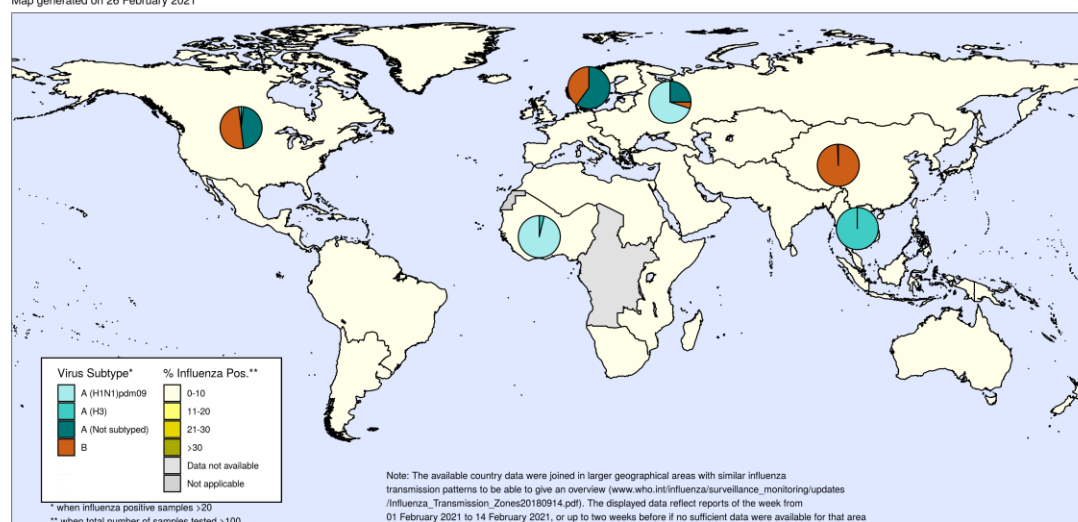
## Influenza Update N° 388

01 March 2021, based on data up to 14 February 2021

Information in this report is categorized by influenza transmission zones, which are geographical groups of countries, areas or territories with similar influenza transmission patterns. For more information on influenza transmission zones, see: [https://www.who.int/influenza/surveillance\\_monitoring/updates/Influenza\\_Transmission\\_Zones20180914.pdf](https://www.who.int/influenza/surveillance_monitoring/updates/Influenza_Transmission_Zones20180914.pdf)

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

Map generated on 26 February 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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## 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 zone of the northern hemisphere, influenza activity remained below baseline, though sporadic detections of influenza A and B viruses continued to be reported in some countries.
- In the temperate zone of the southern hemisphere, influenza activity was reported at inter-seasonal level.

- In the Caribbean and Central American countries, sporadic influenza detections were reported. Severe acute respiratory infection (SARI) activity was low in most reporting countries.
- In tropical South America, sporadic detections were reported in Colombia.
- In tropical Africa, influenza activity was reported in some reporting countries in Western, Middle and Eastern Africa in recent weeks.
- In Southern Asia, sporadic influenza detections were reported in India.
- In South East Asia, influenza A(H3N2) detections continued to be reported in most reporting countries.
- Worldwide, influenza B detections accounted for the majority of the very low numbers of detections reported.
- National Influenza Centres (NICs) and other national influenza laboratories from 96 countries, areas or territories reported data to FluNet for the time period from 01 February 2021 to 14 February 2021 (data as of 2021-02-26 07:05:21 UTC). The WHO GISRS laboratories tested more than 237021 specimens during that time period. A total of 382 specimens were positive for influenza viruses, of which 137 (35.9%) were typed as influenza A and 245 (64.1%) as influenza B. Of the sub-typed influenza A viruses, 43 (52.4%) were influenza A(H1N1)pdm09 and 39 (47.6%) were influenza A(H3N2). Of the characterized B viruses, 1 (0.5%) belonged to the B-Yamagata lineage and 182 (99.5%) to the B-Victoria lineage.
- The WHO Consultation and Information Meeting on the Composition of Influenza Virus Vaccines for Use in the 2021-2022 Northern Hemisphere Influenza Season was held on 17-25 February 2021 in the format of virtual consultation. The recommended composition of influenza virus vaccines for use in the 2021-2022 northern hemisphere influenza season can be consulted at the following link:  
[https://www.who.int/influenza/vaccines/virus/recommendations/2021-22\\_north/en/](https://www.who.int/influenza/vaccines/virus/recommendations/2021-22_north/en/).
- 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. Updated considerations for addressing disruptions in the influenza sentinel surveillance and extending to include COVID-19 wherever possible are available in the interim guidance, [Maintaining surveillance of influenza and monitoring SARS-CoV-2 – adapting Global Influenza surveillance and Response System \(GISRS\) and sentinel systems during the COVID-19 pandemic](#). Updated algorithms for testing of both influenza and SARS-CoV-2 for surveillance are also included.

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

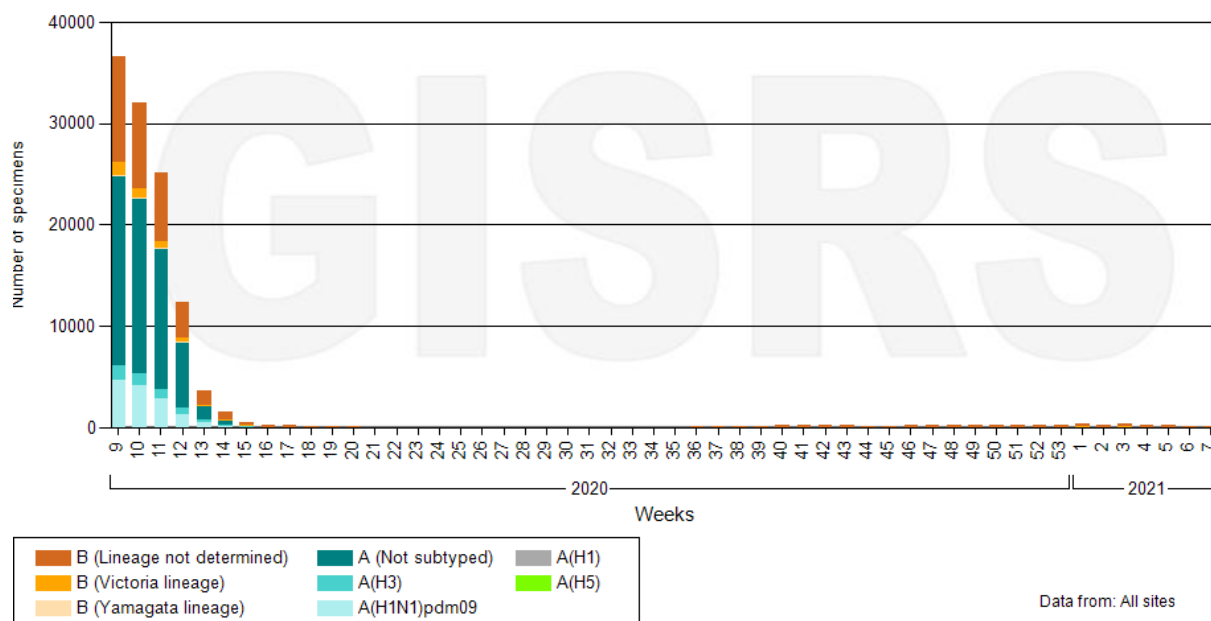
- WHO Region of the Americas (AMRO): [www.paho.org/influenzareports](http://www.paho.org/influenzareports)
- WHO Eastern Mediterranean Region (EMRO): <http://www.emro.who.int/health-topics/influenza/situation-update.html>
- WHO European Region (EURO): [www.flunewseurope.org/](http://www.flunewseurope.org/)

- WHO Western Pacific Region (WPRO): <https://www.who.int/westernpacific/emergencies/surveillance/seasonal-influenza>
  - EuroMOMO Bulletin: <https://www.euromomo.eu>
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### 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, including the percent of tests positive for influenza and influenza like illness (ILI) activity, were at very low levels, despite testing at usual or increased levels. In the United States of America, the percentage of deaths attributed to pneumonia, influenza or COVID-19 remained above the epidemic threshold for pneumonia and influenza mortality established from historical data.
- In Europe, influenza activity was at very low level with sporadic detections of influenza A and B viruses reported in some countries. Respiratory illness indicators slightly increased in some reporting countries, likely related to SARS-CoV-2 circulation. Pooled mortality estimates from the EuroMOMO network showed a decrease in excess mortality after a period with high levels, likely related to SARS-CoV-2 circulation.
- In Central Asia, no influenza detections were reported across reporting countries.
- In Northern Africa, there were no influenza detections reported for this period.
- In Western Asia, influenza and ILI activity remained low overall. Sporadic detections of influenza B virus in Oman and Saudi Arabia and influenza A(H3N2) in Armenia and United Arab Emirates were reported during this period.
- In East Asia, influenza illness indicators and influenza activity remained low or below baseline in reporting countries. ILI activity was below usual levels in China for this time of the year, with continued detections of influenza B-Victoria viruses reported at low levels in Southern China.

## Number of specimens positive for influenza by subtype in the northern hemisphere



**Data source:** FluNet ([www.who.int/toolkits/flunet](http://www.who.int/toolkits/flunet)). Global Influenza Surveillance and Response System (GISRS)  
Data generated on 26/02/2021

## Countries in the tropical zone

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

- In the Caribbean and Central American countries, sporadic influenza detections of influenza A and B were reported in Mexico and Nicaragua, respectively. Pneumonia cases increased above seasonal threshold in Jamaica, likely related with increased SARs-CoV-2 circulation. SARI cases were low in most reporting countries. Few respiratory syncytial virus (RSV) detections were reported in Guatemala in recent weeks.
- In the tropical countries of South America, sporadic influenza B and RSV detections were reported in Colombia. SARI activity decreased to below threshold in Ecuador.

### Tropical Africa

- In Western Africa, influenza activity was reported with detections of influenza A(H1N1)pdm09 in Côte d'Ivoire and Togo and A(H3N2) in Côte d'Ivoire.
- In Middle Africa, influenza virus A (both subtypes) and B detections were reported in Cameroon and influenza A(H3N2) detections in the Democratic Republic of Congo in recent weeks.
- In Eastern Africa, influenza A(H3N2) detections and increasing SARI activity (with 6.7% influenza positivity) were reported in Kenya. Ethiopia reported detections of influenza A(H3N2) and B in recent weeks.

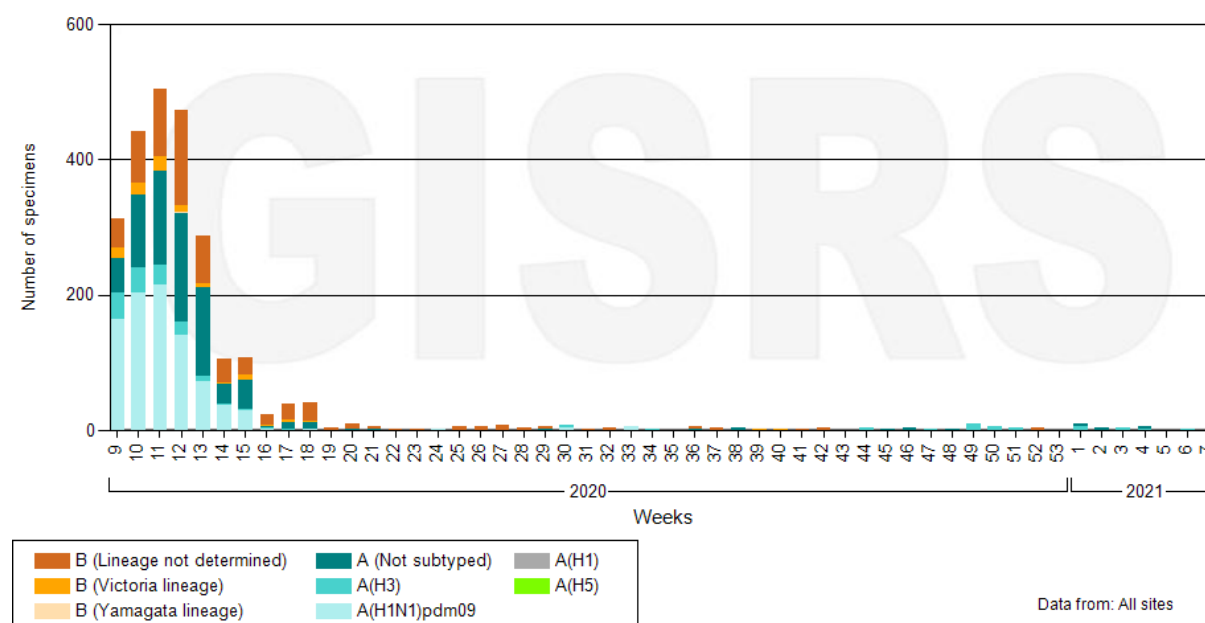
## Tropical Asia

- In Southern Asia, sporadic detections of influenza A(H3N2) viruses continued to be reported in India. Respiratory illness indicators remained elevated in Afghanistan and Bangladesh though no influenza detections reported in this period.
- In South East Asia, influenza activity continued to be reported across the region with detections of influenza A(H3N2) in Lao People's Democratic Republic (PDR), Thailand, Timor-Leste and Viet Nam. ILI and SARI rates were reported at or below the average of the previous three influenza seasons in Lao PDR.

## Countries in the temperate zone of the southern hemisphere

- In the temperate zones of the southern hemisphere, influenza activity remained at inter-seasonal level.
- In Oceania, influenza remained at inter-seasonal level. RSV continued to be reported at higher levels than the average of previous years in parts of Australia.
- In South Africa, no influenza but RSV detections continued to be reported from all surveillance sites. SARS-CoV-2 detections continued to decline among samples from ILI and pneumonia surveillance in recent weeks.
- In temperate South America, no influenza detections were reported across reporting countries. SARI activity returned below the epidemic threshold in Argentina and Chile.

## Number of specimens positive for influenza by subtype in southern hemisphere



**Data source:** FluNet ([www.who.int/toolkits/flunet](http://www.who.int/toolkits/flunet)). Global Influenza Surveillance and Response System (GISRS)  
Data generated on 26/02/2021

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### Sources of data

The Global Influenza Programme monitors influenza activity worldwide and publishes an update every two weeks. The updates are based on available epidemiological and virological data sources, including FluNet (reported by the WHO Global Influenza Surveillance and Response System), FluID (epidemiological data reported by national focal points) and influenza reports from WHO Regional Offices and Member States. Completeness can vary among updates due to availability and quality of data available at the time when the update is developed.

**Seasonal influenza reviews:** A review of the 2019 influenza season in the southern hemisphere, was published in January 2020 and can be found here:

<https://extranet.who.int/iris/restricted/bitstream/handle/10665/330368/WER9501-02-eng-fre.pdf>

**Epidemiological Influenza updates:** [https://www.who.int/influenza/surveillance\\_monitoring/updates/en/](https://www.who.int/influenza/surveillance_monitoring/updates/en/)

**Virological surveillance updates:**

[https://www.who.int/influenza/gisrs\\_laboratory/updates/summaryreport/en/](https://www.who.int/influenza/gisrs_laboratory/updates/summaryreport/en/)

**Virological surveillance updates archives:**

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