



Chinese Weekly Influenza Surveillance Report

August 5 to August 11, 2024 (Week 32)

(All data are preliminary and may change as more reports are received)

Summary

- Influenza detections were decreasing in the southern provinces, northern provinces kept at low level. A(H1N1)pdm09 was predominated. There was no ILI outbreak reported in week 32.
- Among influenza viruses antigenically characterized by CNIC since April 1, 2024, 777(96.9%) influenza A(H1N1)pdm09 viruses were characterized as A/Victoria/4897/2022-like; 347(56.6%) influenza A(H3N2) viruses were characterized as A/Thailand/8/2022(egg)-like, 385(62.8%) influenza A(H3N2) viruses were characterized as A/Thailand/8/2022(cell)-like; 945(99.1%) influenza B/Victoria viruses were characterized as B/Austria/1359417/2021-like.
- Among the influenza viruses tested by CNIC for antiviral resistance analysis since April 1, 2024, all but 4 influenza A(H1N1)pdm09 were sensitive to neuraminidase inhibitors, all A(H3N2) and B viruses were sensitive to neuraminidase inhibitors; all A(H1N1)pdm09, A(H3N2) and B viruses were sensitive to endonuclease inhibitors.

Surveillance of outpatient or emergency visits for Influenza-like Illness (ILI)

During week 32, the percentage of outpatient or emergency visits for ILI (ILI%) at national sentinel hospitals in southern provinces was 3.9%, lower than the last week (4.2%), higher than the same week of 2021~2023(2.9%, 3.8% and 4.3%). (Figure 1)

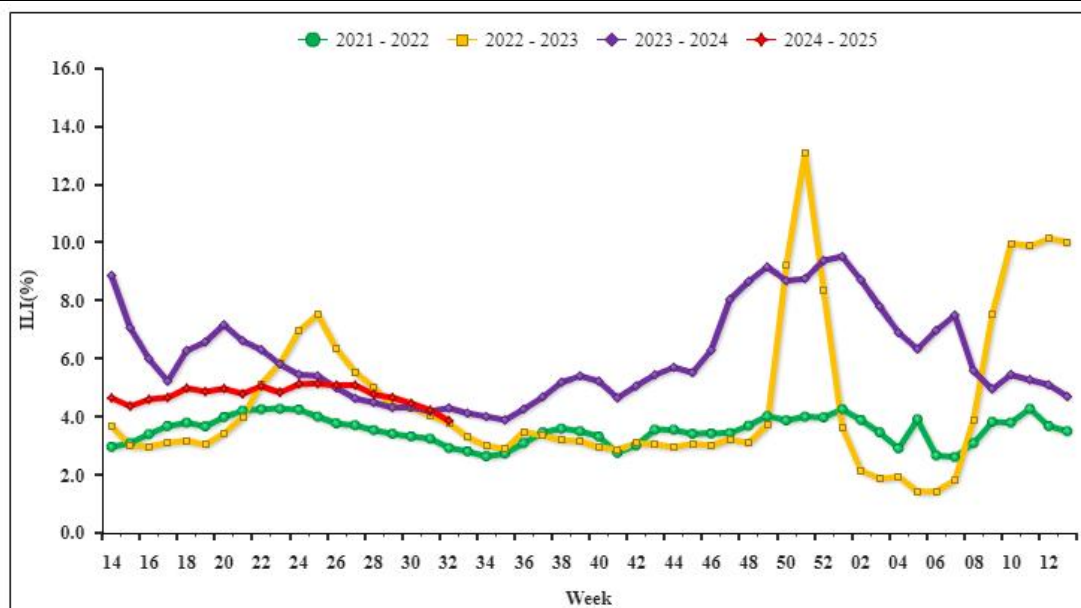


Figure 1. Percentage of Visits for ILI at Sentinel Hospitals in Southern Provinces

Note: Analysis in this part was based on data from sentinel hospitals belong to national influenza surveillance network.

During week 32, ILI% at national sentinel hospitals in northern provinces was 3.5%, lower than the last week (3.8%), higher than the same week of 2021~2023(2.2%, 2.6% and 2.8%). (Figure 2)

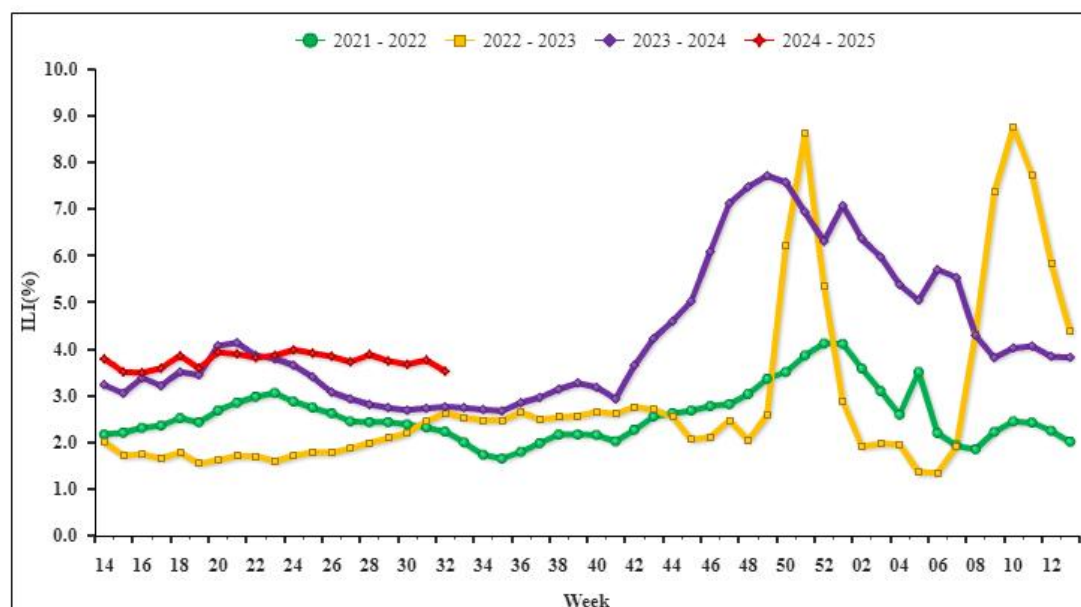


Figure 2. Percentage of Visits for ILI at Sentinel Hospitals in Northern Provinces

Note: Analysis in this part was based on data from sentinel hospitals belong to national influenza surveillance network.



Virologic Surveillance

During week 32, influenza network laboratories tested 7556 specimens, there were 377 positive detections for influenza. The number and proportion of influenza types and subtypes detected in southern and northern provinces were shown in Table 1.

Table 1 Laboratory Detections of ILI Specimens (Week 32, 2024)

	Week 32		
	Southern provinces	Northern provinces	Total
No. of specimens tested	5670	1886	7556
No. of positive specimens (%)	362(6.4%)	15(0.8%)	377(5.0%)
Influenza A	354(97.8%)	14(93.3%)	368(97.6%)
A(H1N1)pdm09	343(96.9%)	13(92.9%)	356(96.7%)
A(H3N2)	11(3.1%)	1(7.1%)	12(3.3%)
A (subtype not determined)	0	0	0
Influenza B	8(2.2%)	1(6.7%)	9(2.4%)
B (lineage not determined)	0	0	0
Victoria	8(100.0%)	1(100%)	9(100.0%)
Yamagata	0	0	0

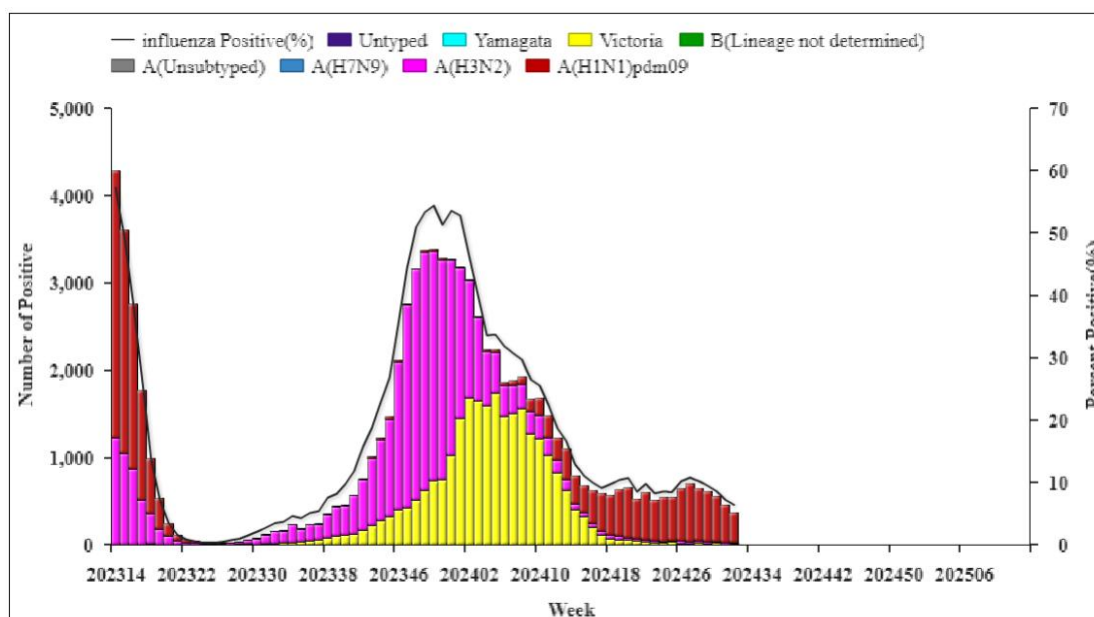


Figure 3. Influenza Positive Tests Reported by Southern Network Laboratories (Week 14, 2023–Week 13, 2025)

Note: Analysis in this part was based on the test results of network laboratories. If it were not consistent with the results of CNIC confirmation, the results of CNIC confirmation were used.

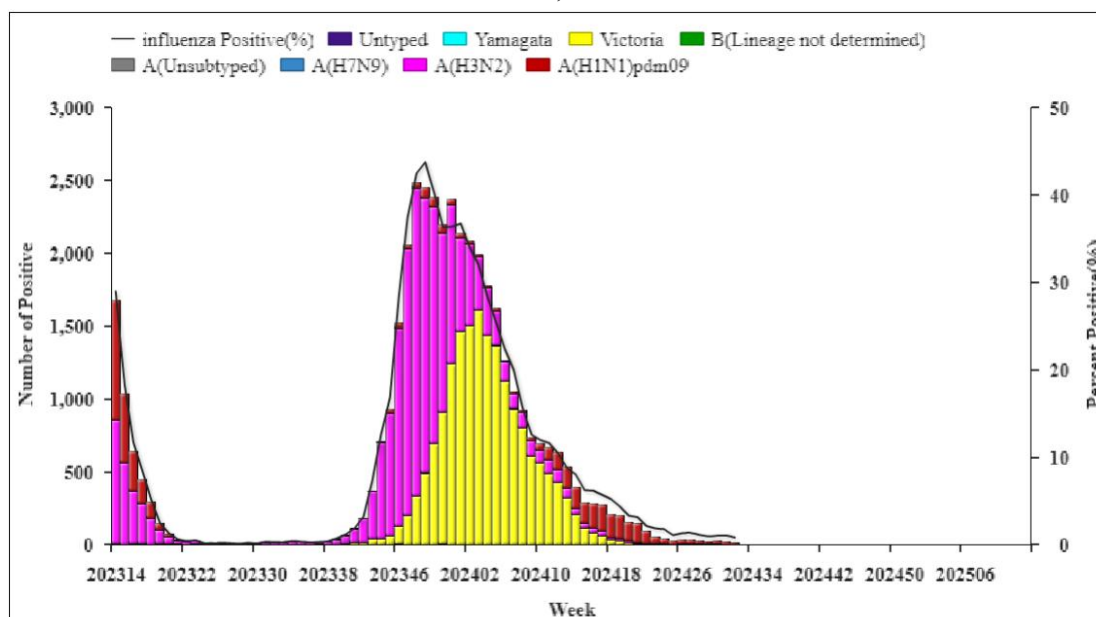


Figure 4. Influenza Positive Tests Reported by Northern Network Laboratories (Week 14, 2023–Week 13, 2025)

Note: Analysis in this part was based on the result of network laboratories. If it were not consistent with the results of CNIC confirmation, the results of CNIC confirmation were used.



Antigenic Characterization

Since April 1, 2024, 777(96.9%) influenza A(H1N1)pdm09 viruses were characterized as A/Victoria/4897/2022-like; 347(56.6%) influenza A(H3N2) viruses were characterized as A/Thailand/8/2022(egg)-like, 385(62.8%) influenza A(H3N2) viruses were characterized as A/Thailand/8/2022(cell)-like; 945(99.1%) influenza B/Victoria viruses were characterized as B/Austria/1359417/2021-like.

Antiviral Resistance

Since April 1, 2024, among the influenza viruses tested by CNIC for antiviral resistance, all but 4 influenza A(H1N1)pdm09 were sensitive to neuraminidase inhibitors, all A(H3N2) and B viruses were sensitive to neuraminidase inhibitors; all A(H1N1)pdm09, A(H3N2) and B viruses were sensitive to endonuclease inhibitors.

Outbreak Surveillance

During week 32, there was no ILI outbreak reported nationwide.