



## Respiratory infections in the beginning of 2016

The seasonal influenza epidemic of 2015–2016 did not start until the beginning of 2016 and so broke out a little later than in most preceding years. The outbreak was at its peak in the beginning of March 2016 (fig. 1). The burden of the epidemic was most prominent in the age groups 1–4 years and 15–59 years.

According to information from the Department of Infection Control at Landspítali University Hospital, the admissions due to the disease increased until the middle of March, after which the admissions decreased (fig. 2). Most patients (77) had confirmed influenza due to A(H1N1)pdm09 while 23% were diagnosed with influenza B.

It is not unusual to observe some excess mortality (mortality higher than expected) during seasonal influenza epidemics, especially among the old or those with underlying health problems. According to statistics from Registers Iceland, the death rate this year has been within the expected limits so far, (fig. 3, p. 2). There is therefore no indication of excess mortality this time.

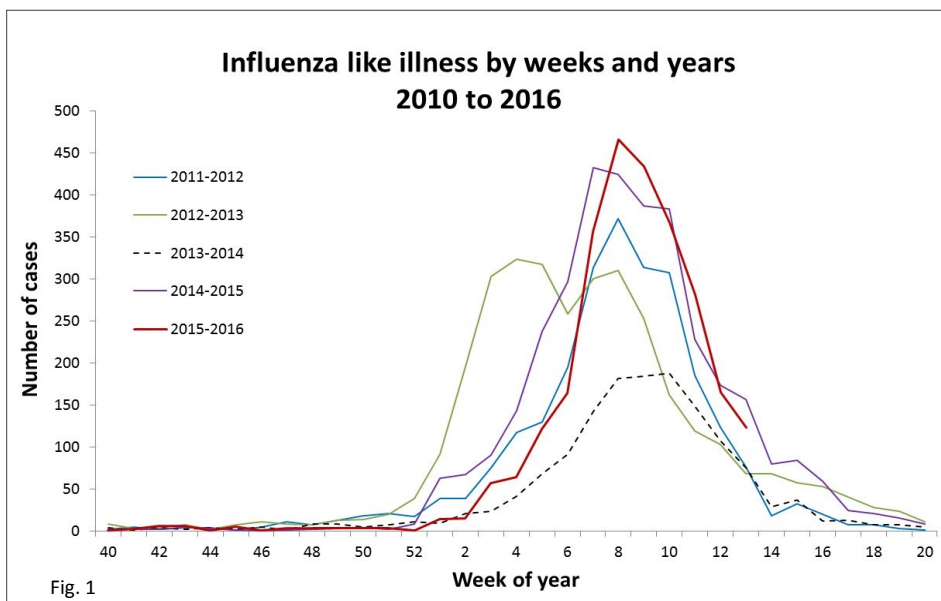


Fig. 1

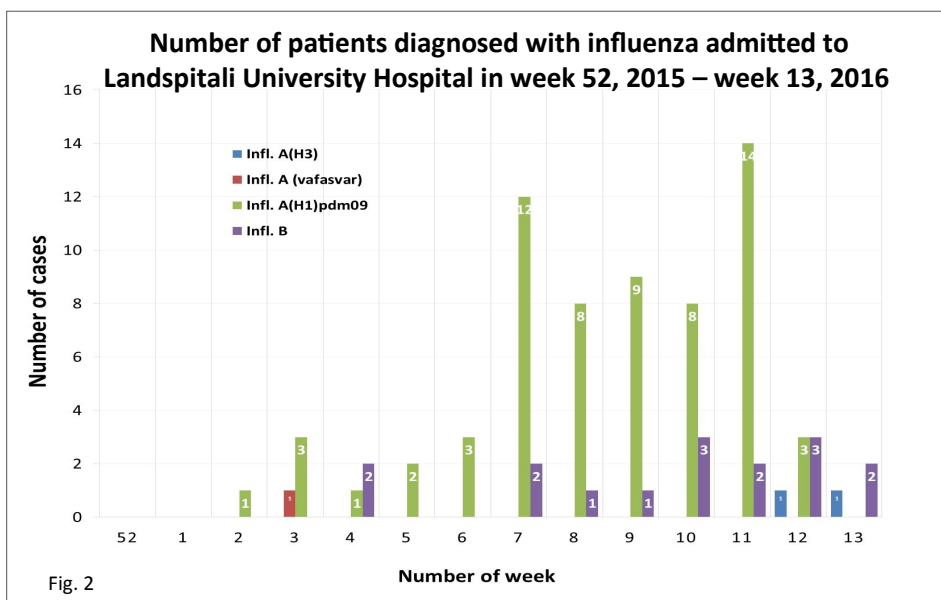


Fig. 2

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### Editorial board

Thorolfur Gudnason, Chief Epidemiologist  
Asa St. Atladottir  
Gudrun Sigmundsdottir  
Iris Marelsdottir  
Jonina M. Guðnadottir

### Editor

Haraldur Briem, Special Advisor

### Directorate of Health

Chief Epidemiologist for Iceland

Barónsstíg 47  
101 Reykjavík  
Tel: +354 5101900  
Fax: +354 5101920  
E-mail: mottaka@landlaeknir.is  
www.landlaeknir.is

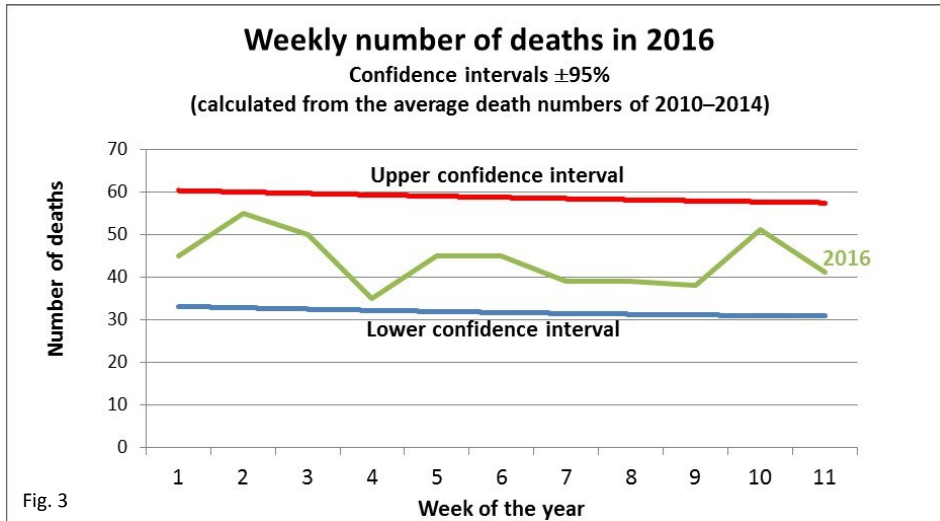


Fig. 3

## Reportable diseases

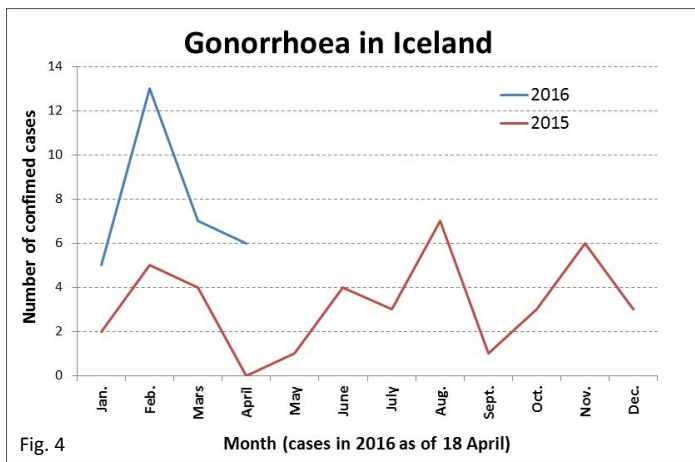


Fig. 4

So far this year, an unexpectedly high number of gonorrhoea cases (30) has been diagnosed. A total of 39 laboratory confirmed cases of gonorrhoea were diagnosed in 2015. Of the 30 patients diagnosed in 2016 (until 18 April), 26 are males and four are women. Their mean age is 30 years (20–56 years). According to the reports submitted to the Chief Epidemiologist the infection is most common among males who have sex with males and the origin of the infections is domestic. *Neisseria gonorrhoea* multi-resistant to antimicrobials have not been detected so far this year. However, only eight strains have as yet been tested from the thirty cases in question.

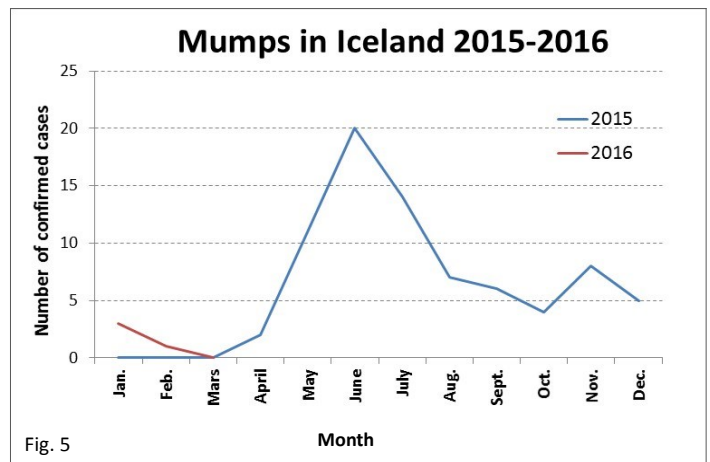


Fig. 5

In 2015, two reportable events stood out as regards numbers. On one hand, 77 patients were diagnosed with laboratory confirmed mumps. On the other hand, 44 cases of confirmed vancomycin resistant enterococcus were detected, mostly at the Landspítali University Hospital in connection with a search and destroy policy initiated after an infection from this resistant strain was detected in a sample taken from one patient in March 2015.

Most of those diagnosed with mumps were 20–35 years of age (mean age 27 years) and most of them were males (65%). The outbreak of mumps started in March 2015 and reached a peak in

June that year. Unvaccinated people born after 1980 were encouraged to get vaccinated against mumps. After the peak in June 2015, the outbreak gradually faded out and the last case of mumps was diagnosed in February 2016 (fig. 5). Of those diagnosed with the disease, 20% had a history of at least one vaccination against mumps, which is in accordance with the evidence that the mumps vaccine provides less protection than does the vaccine against measles and rubella which are given together with the mumps component in the same syringe.



## Preparedness planning and guidelines

### Preparedness planning for pandemic influenza

The second edition of the Icelandic *Pandemic Influenza Preparedness Plan* 2016 has been issued. This preparedness plan describes the structure and the management of operations in a pandemic situation. The planning is based on legislation on civil protection (Act No. 82/2008) and health security and communicable disease prevention (Act No. 19/1997). It is assumed that economic activity in the country will be reduced for a certain period of time, part of the population will be bedridden due to illness and that mortality will be in excess of what can be expected under normal circumstances.

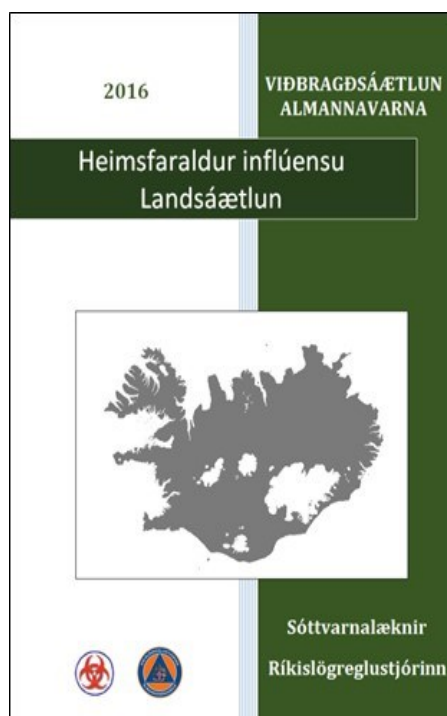
The first edition of the *Pandemic Influenza Preparedness Plan* was signed on 28 March 2008. The main changes in the second edition are as follows:

1. The time periods have been changed according to recommendations made by WHO. They were six previously but are four in the new edition. The danger levels of the Civil Protection in Iceland have been adapted to the WHO's time periods.
2. The police districts in Iceland have been reduced from 15 to nine according to the Police Act No.

90/1996. Consequently, the regions for containment of communicable diseases have been adapted to the police districts according to regulation No. 387/2015.

3. Monitoring of an influenza epidemic has been defined more fully.

The increasing number of tourists has been taken into account and the Icelandic Tourist Board and the Icelandic Travel Industry Association has undertaken to inform travel agencies when pandemic influenza occurs.



### Guidelines on investigation of food-borne infections

In March 2016, the Chief Epidemiologist, the Icelandic Food and Veterinary Authority and the Icelandic Association of Local Health Inspection Authorities issued common guidelines on procedures for outbreak investigation due to food-borne diseases.

The outbreak investigation and response to food-borne diseases are aimed at finding the source of the disease, eliminating it and protecting people from further illness. The purpose of the guidelines is to define the lines of communication, responsibility and the role of the responding parties, to secure the coordination of responses and ensure professionalism. Furthermore, information to the public must be secured.

## Announcement regarding the International Health Regulations

### Any restrictions on travel and trade due to the Ebola virus disease outbreak in West Africa terminated

Based on the advice of the Emergency Committee on 29 March 2016, the Director-General of WHO terminated the Public Health Emergency of International Concern (PHEIC) regarding the

Ebola virus disease outbreak in Guinea, Liberia and Sierra Leone, in accordance with the International Health Regulations (2005).

The Director-General terminated the Temporary Recommendations that she had issued in relation to this event, supported the public health advice of

the Emergency Committee mentioned above, and reinforced the importance of Member States immediately lifting any restrictions on travel and trade with these countries.