

Influenza in French Polynesia

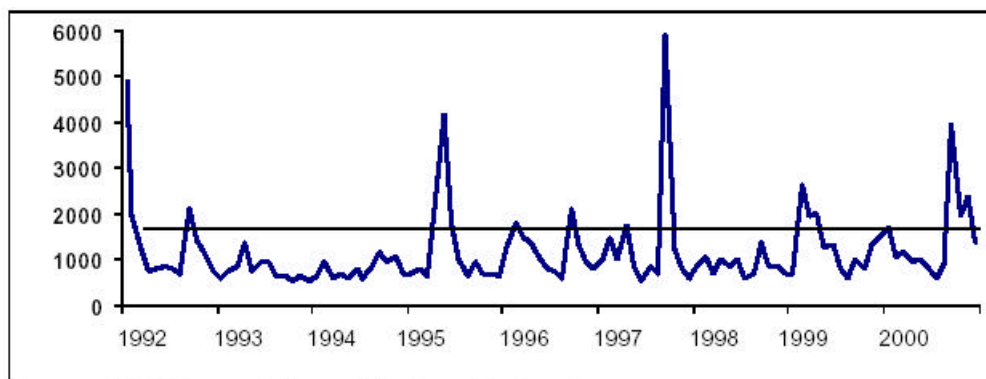
Until recently, influenza was considered a rare disease in the intertropical zone and so no particular attention was paid to it. Improved surveillance systems, particularly the Sentinel Surveillance Network for Febrile Syndromes, now make it possible to identify outbreaks rapidly and confirm the problem's existence through virus isolation.

A review of the monthly distribution of flu syndromes observed since 1992 in public facilities (excluding the Territorial Hospital and private physicians and clinics) brought to light nine outbreaks:

- five moderate outbreaks (more than 2000 patient visits in the public sector) in September 1992, September 1996, February and November 1999, and June-July 2001;
- four large-scale outbreaks (with 5000 to 6000 patient visits in the public sector) in January 1992, April-May 1995, September 1997, and September 2000.

When the seasonal variation of the nine outbreaks is examined, it can be seen that three of them occurred, for all practical purposes, at the same time as outbreaks in metropolitan France, and the other six followed outbreaks in the South Pacific during the Southern Hemisphere winter.

Monthly number of flu syndromes observed in French Polynesian public facilities, 1992-2000



Source: BMT (Epistat Office – Health Department)

The first confirmations by virus isolation took place in 1997. The viruses identified during the later outbreaks were all covered by vaccines available before the outbreaks, so protection from vaccines does not vary according to where the outbreak originates, i.e. Northern or Southern Hemisphere. Using the vaccines available in metropolitan France to vaccinate at-risk populations once each year in October would have provided effective protection during these outbreaks.

Characteristics of flu outbreaks in French Polynesia from 1992 to 2001

Date	01/1992	09/1992	04/1995	09/1996	09/1997	02/1999	11/1999	09/2000	06/2001
Season	North	South	North	South	South	North	South	South	South
Virus	?	?	?	?	A/Bayern (H1N1) A/Johannesburg (H3N2)	A/Sydney (H3N2) B/Beijing	Un-typed A	A/New Caledonia (H1N1)	B/Sichuan
Scale	++	+	+++	+	+++	++	+	+++	+
Deaths	0		4	2	5	3		4	

In terms of mortality, over a seven-year period (1994-2000), 22 deaths directly attributable to influenza (main cause) were recorded; 75% of the deceased were over the age of 65. Deaths linked to decompensation of underlying illnesses during influenza were certainly more numerous but difficult to tally.

As in most other countries, prevention is mainly based on vaccinating at-risk populations. Unfortunately, this recommendation is limited by the fact that the costs of vaccinations are not covered by the Territory.

This is an extract of the full report on Infectious Diseases in French Polynesia in 2001, published by the Health Department in December 2001.

Data were provided by the Epistat Office and the Health Department's GITE (field action and epidemiology group), Louis Malarde Institute and the Territorial Hospital (Medical Information Service and Laboratory), the French Polynesia Statistics Institute, and all the doctors who take part in surveillance.

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