# Faulty Surveillance - Influenza

## What is the issue?

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- India's surveillance system on the influenza cases seems to be flawed.
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- Given the mortality rate, it is essential to make corrections to take the right policy decisions.
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## What is the anomaly?

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- Ever since the first occurrence of H1N1 influenza in India during the 2009 pandemic, annual outbreaks are usual.
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- This year the virus has been particularly active.
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- The recent number on mortality is at 1,873.
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- However, the official figures show it to be a relatively better year in terms of low death toll.
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## What are the flaws in surveillance?

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- **Number Data** - The problem is that the official figures capture only the H1N1 numbers.
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- But influenza was present in India even before 2009 in the form of H3N2 and Influenza B virus types.
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- Notably, H3N2 is capable of causing outbreaks as big as H1N1.
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- And yet India does not track H3N2 cases as extensively as it does H1N1.
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- Data from other sources have established that influenza accounts for a considerable percentage of fever cases.
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- These are often undiagnosed and classified as “mystery fevers”.
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- **Sequence data** - India submits a small number of H1N1 genetic sequences to global open-access databases given its size and population.
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- Sequencing is important because it can detect mutations in genetic material.
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- As mutations help the virus evade human immune systems, it is essential for understanding the lethality of the virus.
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## What is the impact?

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- These flaws consequently translate to the vaccination decisions.
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- e.g India falls out in vaccinating even high-risk groups such as pregnant women and diabetics.
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- The antiviral medicine, Oseltamivir, is of doubtful efficacy unless administered early enough.
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- So vaccination is a crucial instrument for India to handle the influenza menace.
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- A better surveillance of influenza will possibly reveal the true scale of this public health issue and aid in right policy decisions.
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**Source: The Hindu**

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