In 2006, the MOH sub-committee for influenza surveillance invited the Virology Department of the U.S. Naval Medical Research Unit No. 6 (NAMRU-6) in Lima to assist in increasing surveillance coverage by establishing new sentinel sites in order to strengthen the surveillance program. Since then, NAMRU-6 has augmented the existing program by supporting the collection and processing of samples at new sentinel sites as well as providing these data to DGE and INS. Sentinel surveillance is conducted in 57 health centers throughout the country. This includes both ILI and SARI surveillance. ILI surveillance is conducted in 22 units.

**Surveillance Activities**

- Conducted advocacy meetings to raise awareness regarding influenza to government organizations and the public.
- Conducted meetings to analyze the influenza surveillance system and methods for improvement.

**Overview**

The cooperative agreement Sustaining Influenza Surveillance Networks and Response to Seasonal and Pandemic Influenza began in August 2010. The Peruvian Ministry of Health (MOH) and DGE are working with the U.S. Centers for Disease Control and Prevention (CDC) under this agreement to strengthen surveillance and detection for seasonal, avian, and human influenza in the country. Peru’s influenza surveillance system uses sentinel sites to identify ILI and SARI case-patients throughout the country. Laboratory testing for influenza takes place in the 15 regional laboratories, as well as the National Influenza Center (NIC), located in the National Institute of Health (INS) in Lima.

**Highlights**

- Implementation of enhanced surveillance of severe acute respiratory infections (SARI) in seven hospitals.
- Updated the national regulations for the surveillance of influenza and SARI in 2012. The health regulation entitled, “Directive Sanitary Epidemiological Surveillance of influenza, other respiratory viruses (OVR) and severe acute respiratory illness (SARI) in Peru” was implemented and published in the official gazette El Peruano on Friday, February 10, 2012.

**Peru**

- Capital: Lima
- Infant Mortality Rate: 20.85/1,000 live births
- Population: 29,849,303 (July 2013 est.)
Laboratory
Peru has 15 regional laboratories, all of which receive respiratory samples from influenza sentinel sites. Samples are tested by immunofluorescent assays (IFA), and those that are positive are then sent to the country’s NIC in Lima for testing by RT-PCR. At the NIC, specimens are tested the same day they are received and results are reported within 72 hours. Influenza positive samples are also cultured in MDCK cells. Positive isolates are shared with CDC at least three times per year for further characterization.

Preparedness
Peru has rapid response teams (RRT) in the regional governments. They recently updated and disseminated specialized guides on influenza outbreak management to each regional unit.

Preparedness Activities
- Conducted a Monitoring and Evaluation of the National Inventory of Core Capabilities for Pandemic Influenza Preparedness and Response with PAHO and CDC to revise the National Pandemic Preparedness Plan.

Training
- Provided training to clinical staff, epidemiologists, and laboratory staff on monitoring of SARI.
- Provided training to information technology staff to manage and operate the web-based system that connects to all the sentinel units.