



AVIAN INFLUENZA

WHO interim guidelines for health monitoring of persons involved in culling of animals potentially infected with highly pathogenic avian influenza viruses

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Highly pathogenic avian influenza (HPAI) due to influenza A/H5N1 is an extremely contagious disease of birds, which is currently causing poultry epidemics in Asia. Exposure to infected poultry, their secretions, poultry debris (such as faeces), or dust/soil contaminated with poultry faeces can result in human infection. Although human infection is rare, human cases of A/H5N1 have been identified during the current poultry epidemic (2003/2004).

To control the outbreak among birds, culling of flocks in affected areas is recommended. This limits the potential for human exposure to the virus and contributes to reducing the public health risk. However, H5 antibodies have been detected in poultry workers and cullers in previous outbreaks, indicating that cullers are at risk of becoming infected.

Recommendations for the protection of persons involved in culling operations are available from the WHO Western Pacific Regional Office website <http://www.wpro.who.int/avian/docs/recommendations.asp>. They include recommendations for the wearing of personal protective equipment for all cullers and transporters as well as vaccination with the current WHO recommended influenza vaccine.

For early case detection and treatment, health monitoring of cullers is recommended. The following measures are suggested as a minimum.

1. A register should be maintained by agriculture/animal health officials. The register should record the following **minimum** information on cullers:
 - name,
 - contact details,
 - the dates on which they participated in culling,
 - the place(s) where they were involved in culling,
 - role in the culling process,
 - results of health checks (individuals should be excluded if suffering from chronic illnesses, e.g. chronic heart or respiratory disease, that may put them at greater risk were they to become infected), and
 - influenza vaccination status (when, with what vaccine, by whom).

Cullers should be provided with the contact details for one or two designated health officials/health care facilities (contactable 24 hours a day and 7 days a week).

2. Persons involved in culling operations should check their temperature twice daily for up to 7 days following their last contact with poultry or their environment (see Appendix A for a sample health monitoring form). **If a fever (>38oC) develops they should not self-medicate, they must immediately seek medical assistance from the designated health official/health care facility.**¹ Following clinical review, if a culler is suspected of suffering from influenza A/H5 he or she should be investigated and managed for influenza A/H5 according to locally established protocols. A course of oseltamivir phosphate (brand name Tamiflu) 75 mg capsules should be started immediately and continued twice daily for 5 days. To be most effective, the course should begin within 48 hours of illness onset.
3. Symptomatic persons should limit their social interactions. They should stay at home and avoid public areas until they have been medically assessed. Once assessed, if the illness is mild, they should remain at home until free of fever for at least 24 hours, unless a diagnosis of influenza has been excluded.
4. While at home, ill persons should practise respiratory and hand hygiene to lower the risk of transmission of virus to others.

Coordination between agriculture/animal health officials and human health officials at all levels is strongly recommended to coordinate culling operations and health monitoring activities.

Available: Temperature monitoring form for cullers

¹ There should be a health facility readily accessible to people involved in culling operations in each protection zone. Stocks of oseltamivir phosphate (brand name Tamiflu) and supplies for specimen collection should be available at these facilities.