Human infection with avian influenza A(H5) viruses

Human infection with avian influenza A(H5N1) virus

Between 9 and 15 February 2018, no new cases of human infection with avian influenza A(H5N1) virus were reported to WHO in the Western Pacific Region.

As of 15 February 2018, a total of 238 cases of human infection with avian influenza A(H5N1) virus were reported from four countries within the Western Pacific Region since January 2003 (Table 1). Of these cases, 134 were fatal, resulting in a case fatality rate (CFR) of 56%. The last case was reported from China, with onset date of 27 December 2015 (1 case, no death).

### Table 1: Cumulative number laboratory-confirmed human cases (C) and deaths (D) of influenza A(H5N1) virus infection reported to WHO, by date of onset (January 2003 to 19 October 2017), Western Pacific Region.

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<tbody>
<tr>
<td></td>
<td>C</td>
<td>D</td>
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<tr>
<td>Cambodia</td>
<td>10</td>
<td>8</td>
<td>8</td>
<td>3</td>
<td>3</td>
<td>26</td>
<td>14</td>
<td>9</td>
<td>4</td>
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<tr>
<td>China</td>
<td>40</td>
<td>26</td>
<td>1</td>
<td>1</td>
<td>2</td>
<td>2</td>
<td>2</td>
<td>0</td>
<td>6</td>
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<td>Lao PDR</td>
<td>2</td>
<td>2</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
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<tr>
<td>Viet Nam</td>
<td>119</td>
<td>59</td>
<td>0</td>
<td>0</td>
<td>4</td>
<td>2</td>
<td>2</td>
<td>1</td>
<td>2</td>
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<tr>
<td>Total</td>
<td>171</td>
<td>95</td>
<td>9</td>
<td>9</td>
<td>6</td>
<td>30</td>
<td>17</td>
<td>13</td>
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</table>

Globally, from January 2003 to 7 December 2017, there were 860 cases of human infection with avian influenza A(H5N1) virus reported from 16 countries worldwide. Of these 860 cases, 454 were fatal (CFR of 52.8%). The last case was reported from Indonesia on 26 September 2017. (Source: [http://www.who.int/influenza/human_animal_interface/HAI_Risk_Assessment/en/](http://www.who.int/influenza/human_animal_interface/HAI_Risk_Assessment/en/))

Human infection with avian influenza A(H5N6) virus

Between 9 and 15 February 2018, no new cases of human infection with avian influenza A(H5N6) virus were reported to WHO in the Western Pacific Region. To date, a total of 19 laboratory-confirmed cases of human infection with influenza A(H5N6) virus, including six deaths, have been reported to WHO from China since 2014.

Public health risk assessment for human infection with avian influenza A(H5) viruses

Whenever avian influenza viruses are circulating in poultry, sporadic infections and small clusters of human cases are possible in people exposed to infected poultry or contaminated environments; therefore sporadic human cases are not unexpected.

With continued incidence of avian influenza due to existing and new influenza A(H5) viruses in poultry, there is a need to remain vigilant in the animal and public health sectors. Community awareness of the potential dangers for human health is essential to prevent infection in humans. Surveillance should be continued to detect human cases and early changes in transmissibility and infectivity of the viruses.

For more information on confirmed cases of human infection with avian influenza A(H5) virus reported to WHO, visit: [http://www.who.int/influenza/human_animal_interface/en/](http://www.who.int/influenza/human_animal_interface/en/)
For information on monthly risk assessments on Avian Influenza, visit:

Human infection with avian influenza A(H7N4) virus in China

On 14 February 2018, one new case of human infection with avian influenza A(H7N4) virus was reported to the WHO in the Western Pacific Region by the National Health and Family Planning Commission (NHFPC) of China.
http://www.nhfpc.gov.cn/yjb/s2907/201802/ba084b3bd9244067a77661e143fb2a6c.shtml

This is the first human case of avian influenza A(H7N4) infection to be reported worldwide.

The case was a 68 year old woman from Jiangsu Province with pre-existing developed symptoms on 25 December 2017. On 1 January 2018, she was admitted for treatment of “severe pneumonia” and discharged on 22 January 2018. On 12 February, China CDC confirmed that the case’s samples were positive for avian influenza A(H7N4), and the NHFPC confirmed the diagnosis on 13 February 2018. The case had a history of exposure to live poultry before onset of symptoms.

Human infection with avian influenza A(H7N9) virus in China

Between 9 and 15 February 2018, no new cases of human infection with avian influenza A(H7N9) virus were reported to WHO in the Western Pacific Region. As of 15 February 2018, a total of 1,566 laboratory-confirmed human infections with avian influenza A(H7N9) virus, including 40 two to three person clusters, have been reported to WHO since early 2013.

Between 9 February 2018 and 15 February 2018, China CDC has not reported any additional human cases with highly pathogenic avian influenza (HPAI) A(H7N9) virus, which have mutations in the hemagglutinin gene indicating a change to high pathogenicity in poultry. The total number of human cases with HPAI A(H7N9) virus during the 5th wave remains at 31. These 32 cases were from Fujian, Guangdong, Guangxi, Hebei, Henan, Hunan, Shaanxi, and Taiwan (the case had travel history to Guangdong), and Yunnan provinces, China. No increased transmissibility or virulence of the virus within human cases has been detected related to the HPAI A(H7N9) virus.

WHO is continuing to assess the epidemiological situation and will conduct further risk assessments as new information becomes available. The number and geographical distribution of human infections with avian influenza A(H7N9) viruses in the fifth epidemic wave (since October 2016) is greater than previous waves.

Further sporadic human cases of avian influenza A(H7N9) virus infection are expected in affected and possibly neighbouring areas. Should human cases from affected areas travel internationally, their infection may be detected in another country during or after arrival. However, if this were to occur, community level spread is considered unlikely as the virus does not have the ability to transmit easily among humans.
To date, there has been no evidence of sustained human-to-human transmission of avian influenza A(H7N9) virus. Human infections with the A(H7N9) virus are unusual and need to be monitored closely in order to identify changes in the virus and transmission behaviour to humans as this may have serious public health impacts.

For more information on human infection with avian influenza A(H7N9) virus reported to WHO:

**Human infection with avian influenza A(H9N2) in China**

Between 9 and 15 February 2018, no new cases of human infection with avian influenza A(H9N2) virus were reported to WHO in the Western Pacific Region. The onset date of the last reported case was 27 November 2017. There have been five human cases of avian influenza A(H9N2) reported from China to WHO in 2017.

**Animal infection with avian influenza virus**

Between 9 January and 15 February 2018, outbreaks of avian influenza were reported in Cambodia, Republic of Korea, Hong Kong (SAR), China, and Taiwan, China.

**Highly pathogenic avian influenza A(H5N1) virus infection in poultry in Cambodia**
- On 9 February 2018, an outbreak of avian influenza A(H5N1) among backyard poultries in Mondolkiri province, Cambodia was notified to OIE. Among 77 susceptible birds, 44 died and the rest have been culled.
- On 13 February 2018, an outbreak of avian influenza A(H5N1) among backyard poultries in Kandal province, Cambodia was notified to OIE. Among 62 susceptible birds, 47 died and the rest have been culled.

**Highly pathogenic avian influenza A(H5N2) virus infection in poultry in Taiwan, China**
- On 9 February 2018, 16 outbreaks of avian influenza A(H5N2) among ducks, chicken, and geese on farms in Changhua county, Chiayi county, Pingtung county, Taichung city, Tainan city, Yilan country, and Yunlin county, Taiwan, China were notified to OIE. Among 129,859 susceptible birds, 11,162 died and the rest have been culled.
- On 12 February 2018, 6 outbreaks of avian influenza A(H5N2) among chicken and ducks at farms in Pingtung county and Yunlin county, Taiwan, China were notified to OIE. Among 36,023 susceptible birds, 10,368 died and the rest have been culled.

**Highly pathogenic avian influenza A(H5N6) virus infection in wild bird in Hong Kong, China**
- On 9 February 2018, one case of avian influenza A(H5N6) in a dead black-headed gull in Hong Kong, China was notified to OIE.
Low pathogenic avian influenza A(H5N6) virus infection in poultry in Taiwan, China

- On 9 February 2018, an outbreak of avian influenza A(H5N6) among ducks at a farm in Yunlin County, Taiwan, China was notified to OIE. All 2,648 susceptible birds have been culled.

Highly pathogenic avian influenza A(H5N6) virus infection in poultry in Republic of Korea

- On 10 February 2018, an outbreak of avian influenza A(H5N6) among laying chickens at a farm in Chungcheongnam province, Republic of Korea was notified to OIE. Among 21,000 susceptible birds, 137 died and the rest have been culled.

For more information on animal infection with avian influenza viruses with potential public health impact, visit:
- World Organization of Animal Health (OIE) web page:
  http://www.oie.int/wahis_2/public/wahid.php/Diseaseinformation/WI
- Food and Agriculture Organization of the UN (FAO) webpage: Avian Influenza:
- OFFLU: http://www.offlu.net/

Other updates

WHO Risk Assessment of human infection with avian influenza A virus. 7 December 2017
http://www.who.int/influenza/human_animal_interface/Influenza_Summary伊拉哈_interface_12_07_2017.pdf?ua=1

Recommended composition of influenza virus vaccines for use in the 2018 southern hemisphere influenza season. 28 September 2017

Recommended composition of influenza virus vaccines for use in the 2017-2018 northern hemisphere influenza season. 2 March 2017

Antigenic and genetic characteristics of zoonotic influenza viruses and candidate vaccine viruses developed for potential use in human vaccines. 28 September 2017
http://www.who.int/influenza/vaccines/virus/characteristics_virus_vaccines/en/

H7N9 situation update (FAO). 24 January 2017

TIPRA Frequently Asked Questions. March 2017