From 23 December 2016 to 5 January 2017, two additional human infections with avian influenza A(H7N9) virus were notified to WHO from Hong Kong Special Administrative Region (SAR) (source; http://www.who.int/csr/don/19-december-2016-2-ah7n9-china/en/, http://www.who.int/csr/don/19-december-2016-1-ah7n9-china/en/).

On 20 December 2016, the Department of Health, Hong Kong SAR reported a human infection with avian influenza A(H7N9) virus to WHO. The case is a 75-year-old man who travelled to Guangdong province from 28 November to 9 December 2016. On 8 December he developed symptoms. On 9 December he returned to Hong Kong SAR, was directly admitted to hospital, and tested negative for influenza virus. However on 19 December he was confirmed with avian influenza A(H7N9) virus RNA. His condition deteriorated and on 25 December he passed away.

On 30 December 2016, the Department of Health, Hong Kong SAR reported another human infection with avian influenza A(H7N9) virus to WHO. The case is a 70-year old man with underlying chronic conditions, who travelled to Guangdong province from 13 to 16 December 2016. On 26 December he developed symptoms, and on 28 December he was admitted to hospital and a sputum sample tested positive for avian influenza A(H7N9) virus RNA. The patient was in serious condition at the time of report.

To date, a total of 809 laboratory-confirmed human infections with avian influenza A(H7N9) virus have been reported to WHO since early 2013.

WHO is continuing to assess the epidemiological situation and will conduct further risk assessments with new information. Overall, the public health risk from avian influenza A(H7N9) viruses has not changed.

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. If this were to occur, community level spread is considered unlikely as the virus does not have the ability to transmit easily among humans.

**Public health risk assessment for avian influenza A (H7N9) virus**

On 23 February 2015, WHO conducted a public health risk assessment for avian influenza A(H7N9). This assessment found the overall public health risk from avian influenza A(H7N9) viruses has not changed since the previous assessment, published on 2 October 2014. 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/or its transmission behaviour to humans as it may have a serious public health impact.

For more information on human infection with avian influenza A (H7N9) virus reported to WHO: http://www.who.int/influenza/human_animal_interface/influenza_h7n9/en/