Influenza at the human-animal interface

Summary and assessment of April 2011 events

Human infections with avian influenza H5N1 virus

As of 30 April, 552 confirmed human cases of infection with avian influenza H5N1 virus from 15 countries were reported to WHO. Of these, 322 died (CFR: 58%; CFR in March 59%). Epidemiologic investigations have identified only limited human to human transmission of this virus, with no community-level spread since its emergence in 2003.

Three human cases with onset dates in April 2011 have been reported from two countries: Cambodia (1) and Egypt (2). In April, Egypt also reported eight cases with onset dates in February and March that were not included in previous summaries. All of these human cases reported contact with poultry. Egypt and Indonesia have officially declared the virus endemic in poultry, and information from FAO suggests the H5N1 virus is also circulating endemically in poultry in Bangladesh (as well as in China, Egypt, India, Indonesia, and Viet Nam). In Cambodia, sporadic reintroduction into poultry populations is thought to occur.

In Egypt, human cases of avian influenza H5N1 virus infection continue to be regularly reported from several governorates, particularly Fayoum and Beheira, reflecting a functioning national disease surveillance and reporting structure as well as widespread virus circulation in poultry. Survival rates in affected children are better than for affected adults in Egypt. The recent increases in number of cases so far follows the expected seasonal pattern in the country (see figure 1). Although the overall number of cases reported per month of onset is expected to start to decline in the summer, it is anticipated that people in Egypt will continue to be exposed to the virus through contact with infected poultry or contaminated environments, and therefore sporadic human cases will occur as long as the virus continues to circulate in poultry. The animal health and public health sectors in Egypt continue to work closely together to reduce risks from H5N1 at the human-animal interface.

In Cambodia, there were reports of poultry die-offs in the case’s village in Prey Veng province, although no poultry outbreaks have been reported since February 2011 (then in Kandal province).

The trend identified last month towards a decrease in the number of non-endemic countries reporting H5N1 in poultry or wild birds continues, which was predicted based on the onset of warmer weather. However, human cases are possible whenever the virus is circulating in birds. More information on animal influenza is available from OIE (www.oie.int/animal-health-in-the-world/web-portal-on-avian-influenza/), FAO (www.fao.org/avianflu/en/index.html), and OFFLU (http://www.offlu.net/index.html).

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1 As of 30 April


3 Approaches to Controlling, Preventing and Eliminating H5N1 Highly Pathogenic Avian Influenza in Endemic Countries. Rome, United Nations Food and Agriculture Organization, 2011
Human infections with other animal influenza viruses

There were no human infections with other animal influenza viruses reported to WHO during April, 2011.

Other animal influenza

A paper just recently published⁴ reports that in live bird markets in Bangladesh, the prevalence of influenza infection in the birds is of 23.0%, similar to the numbers in other countries. Nearly all of the isolates (94%) were of the non-pathogenic H9N2 subtype. H5N1 was at very low levels (0.08%). Human infections with avian influenza H9N2 have thus far only been reported from China and China Hong Kong SAR⁵.

Relevant Links:

WHO Table: Cumulative Number of Confirmed Human Cases of Avian Influenza A/(H5N1) Reported to WHO


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WHO Table: H5N1 avian influenza: timeline of major events

WHO Archive: Avian Influenza situation updates

World Organisation of Animal Health (OIE) webpage: Web portal on Avian Influenza

Food and Agriculture Organization of the UN (FAO) webpage: Avian Influenza

Government of Egypt website: "Strengthening Avian Influenza Detection and Response" (SAIDR) website:
www.saidr.org/index.php