Influenza at the human-animal interface

Summary and assessment as of 13 November 2015

Human infection with avian influenza A(H5) viruses

Since the last WHO Influenza update on 15 October 2015, no new laboratory-confirmed human cases of avian influenza A(H5N1) virus infection were reported to WHO.

From 2003 through 13 November 2015, 844 laboratory-confirmed human cases of avian influenza A(H5N1) virus infection have been officially reported to WHO from 16 countries. Of these cases, 449 have died.

Various influenza A(H5) subtypes, such as influenza A(H5N1), A(H5N2) and A(H5N6), continue to be detected in birds in Africa and Asia, according to recent reports received by OIE. Although these influenza A(H5) viruses might have the potential to cause disease in humans, so far no human cases of infection have been reported, with exception of the human infections with influenza A(H5N1) viruses and the four human infections with influenza A(H5N6) virus detected in China since 2014.


Human infection with other non-seasonal influenza viruses

Human infections with avian influenza A(H7N9) viruses in China

Since the last WHO Influenza update on 15 October 2015, two new laboratory-confirmed human cases of avian influenza A(H7N9) virus infection were reported to WHO from China.

A total of 681 laboratory-confirmed cases of human infection with avian influenza A(H7N9) viruses, including at least 275 deaths\(^1\), have been reported to WHO.

During 2015, there have been continued avian influenza A(H7N9) virus detections in the animal population in multiple provinces in China, indicating that the virus persists in the poultry population. If the pattern of human cases follows the trends seen in previous years, the number of human cases may rise over the coming months. Further sporadic cases of human infection with avian influenza A(H7N9) virus are therefore expected in affected and possibly neighboring areas.

\(^1\) The total number of fatal cases is published on a monthly basis by China National Health and Family Planning Commission.
**Overall public health risk assessment for avian influenza A(H7N9) viruses:** Overall, the public health risk from avian influenza A(H7N9) viruses has not changed since the assessment of 23 February 2015. [http://www.who.int/influenza/human_animal_interface/influenza_h7n9/Risk_Assessment/en/](http://www.who.int/influenza/human_animal_interface/influenza_h7n9/Risk_Assessment/en/)


Due to the constantly evolving nature of influenza viruses, WHO continues to stress the importance of global surveillance to detect virological, epidemiological and clinical changes associated with circulating influenza viruses that may affect human (or animal) health, especially over the coming winter months. All human infections with non-seasonal influenza viruses are reportable to WHO under the IHR (2005). It is critical that influenza viruses from animals and people are fully characterized in appropriate animal or human health influenza reference laboratories and reported according to international standards.

**Links:**


Avian Influenza A(H7N9) Information

WHO Avian Influenza Food Safety Issues
http://www.who.int/foodsafety/areas_work/zoonose/avian/en/

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

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

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http://www.offlu.net/index.html