Influenza at the human-animal interface

Summary and assessment as of 15 October 2015

**Human infection with avian influenza A(H5) viruses**

Since the last WHO Influenza update on 4 September 2015, no new laboratory-confirmed human cases of avian influenza A(H5N1) virus infection were reported to WHO.

From 2003 through 15 October 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), A(H5N3), A(H5N6) and A(H5N8), continue to be detected in birds in West 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 4 September 2015, two new laboratory-confirmed human cases of avian influenza A(H7N9) virus infection were reported to WHO from China.

A total of 679 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

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\(^1\) The total number of fatal cases is published on a monthly basis by China National Health and Family Planning Commission.
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.

**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/)


**Figure 1**: Epidemiological curve of avian influenza A(H7N9) cases in humans by week of onset.

**Number of Confirmed Human H7N9 Cases by week as of 2015-10-15**

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**Links:**

WHO Human-Animal Interface web page

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

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