Human infection with avian influenza A (H5) viruses

Human infection with avian influenza A(H5N1) virus

From 11 to 17 December 2015, no new cases of human infection with avian influenza A(H5N1) virus were reported to WHO in the Western Pacific Region.

From February 2003 to 17 December 2015, 237 cases of human infection with avian influenza A(H5N1) virus were reported from four countries within the Western Pacific Region (Table 1). Of these cases, 134 were fatal, resulting in a case fatality rate (CFR) of 57%.

Table 1: Cumulative number laboratory-confirmed human cases (C) and deaths (D) of influenza A(H5N1) virus infection reported to WHO (January 2003 to 13 November 2015), Western Pacific Region.

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>C</td>
<td>D</td>
<td>C</td>
<td>D</td>
<td>C</td>
<td>D</td>
<td>C</td>
<td>D</td>
<td>C</td>
<td>D</td>
<td>C</td>
<td>D</td>
<td>C</td>
<td>D</td>
</tr>
<tr>
<td>Cambodia</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>4</td>
<td>4</td>
<td>2</td>
<td>2</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>0</td>
<td>1</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>China</td>
<td>1</td>
<td>1</td>
<td>0</td>
<td>0</td>
<td>8</td>
<td>5</td>
<td>13</td>
<td>8</td>
<td>5</td>
<td>3</td>
<td>4</td>
<td>4</td>
<td>7</td>
<td>4</td>
</tr>
<tr>
<td>Lao PDR</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>2</td>
<td>2</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Viet Nam</td>
<td>3</td>
<td>3</td>
<td>29</td>
<td>20</td>
<td>61</td>
<td>19</td>
<td>0</td>
<td>0</td>
<td>8</td>
<td>5</td>
<td>6</td>
<td>5</td>
<td>5</td>
<td>7</td>
</tr>
<tr>
<td>Total</td>
<td>4</td>
<td>4</td>
<td>29</td>
<td>20</td>
<td>73</td>
<td>28</td>
<td>15</td>
<td>10</td>
<td>16</td>
<td>11</td>
<td>9</td>
<td>13</td>
<td>9</td>
<td>6</td>
</tr>
</tbody>
</table>

From 2003 to 17 December 2015, there have been 844 cases of human infection with avian influenza A(H5N1) virus reported from 16 countries worldwide. Of these cases, 449 were fatal, resulting in a CFR of 53%.

Human infection with avian influenza A (H5N6) virus

From 11 to 17 December 2015, no new cases of human infection with avian influenza A(H5N6) virus were reported to WHO in the Western Pacific Region. Since May 2014, four human cases of influenza A(H5N6) have been reported. All four cases were reported from China.

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 would not be unexpected.

With the rapid spread and magnitude of avian influenza outbreaks due to existing and new influenza A(H5) viruses in poultry in areas that have not experienced this disease in animals recently, there is a need for increased vigilance 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 enhanced to detect human infections if they occur and to detect 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:

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

On 11 December 2015, the National Health and Family Planning Commission (NHFPC) of China notified WHO of 2 additional laboratory-confirmed cases of human infection with avian influenza A(H7N9) virus; one from Guangdong province and one from Zhejiang province. The cases, respectively, are a 74-year-old male with symptom onset on 19 November 2015, and a 60-year-old male with symptom onset on 20 November 2015. Both cases reported exposure to poultry.


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) 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) viruses

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.

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

For more information on risk assessment for avian influenza A(H7N9) virus:
Animal infection with avian influenza

From 11 to 17 December, 3 outbreaks of avian influenza virus in birds were reported in the Western Pacific Region; two in Viet Nam and one in China.

HPAI H5N6 outbreak in poultry, Viet Nam
One new outbreak of HPAI H5N6 infection in backyard quails was reported in Quang Nam province. The outbreak began on 4 December. In total there were 500 bird deaths with an additional 3,500 birds destroyed. 

HPAI H5N1 outbreak in poultry, Viet Nam
One new outbreak of HPAI H5N1 infection in poultry was reported in Vung Tau province. The outbreak started on 3 December. In total there were 1,900 bird deaths with an additional 40,100 birds destroyed.  

HPAI H5N6 outbreak in poultry, China
One new outbreak of HPAI H5N6 infection in farmed peacocks was reported in Hunan province. The outbreak started on 7 December. In total there were 381 bird deaths with an additional 5,433 birds destroyed.  

For more information on animal infection with avian influenza viruses with potential public health impact, visit:
- World Organization of Animal Health (OIE) web page: 

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

- OFFLU:  
  http://www.offlu.net/

- EMPRES:  
Latest information on human seasonal influenza

For the latest information on the seasonal influenza situation in the Western Pacific Region, visit:

http://www.wpro.who.int/emerging_diseases/Influenza/en/index.html

For latest information on the global seasonal influenza situation, visit:

- Epidemiology: http://www.who.int/influenza/surveillance_monitoring/updates/latest_update_GIP_surveillance
- Virology: http://www.who.int/influenza/gisrs_laboratory/updates/summaryreport

Other updates

Influenza at the human-animal interface — Summary and assessment as of 13 November 2015

http://www.who.int/influenza/human_animal_interface/Influenza_Summary_IRA_HA_interface_13November_2015.pdf?ua=1

WHO Risk Assessment of human infection with avian influenza A(H7N9) virus
23 February 2015 posted on WHO website

http://www.who.int/influenza/human_animal_interface/influenza_h7n9/RiskAssessment_H7N9_23Feb20115.pdf?ua=1

WHO Recommended composition of influenza virus vaccines for use in the 2016 southern hemisphere influenza season—24 September 2015


Antigenic and genetic characteristics of zoonotic influenza viruses and candidate vaccine viruses developed for potential use in human vaccines—24 September 2015

http://www.who.int/influenza/vaccines/virus/characteristics_virus_vaccines/en/

H7N9 situation update (FAO) —8 December 2015