



Influenza A(H7N9) Cases in Humans

Chinese health & government authorities continue to update WHO (World Health Organization), with other public health authorities and agencies, such as the CDC and ECDC, participating in the investigation of the virus, including known and potential animal hosts.

Although there are limited human cases infected with this virus (as of April 7, there have been 21 cases with six deaths; three more cases are listed as mild while twelve others are considered severe). The WHO reported that there are 520 close contacts that are being followed with one contact displaying flu-like signs and symptoms. During a briefing by the CDC, the Director reported that the Chinese are investigating possible related illnesses in families of two confirmed cases. However, there has NOT been evidence of human an-to-human transmission. Even if these flu-like illnesses did turn out to be cases, the transmission may have been the same as the rest of the cases or, if there is human-to human transmission, it has not occurred often or been ongoing. Here is an outline of the reasons there is concern about this new virus:

1. H7N9 is an avian flu that has not been found in humans before this outbreak, which means that humans will not have any immunity should this become an easily transmitted human virus. Unfortunately, this is one of the factors found with pandemic flus.
2. This virus has been found in both domestic poultry and wild birds, but it doesn't cause the birds to appear sick which makes it difficult to figure out what birds might be infected and therefore infectious, or how long the virus has been circulating in domestic or wild birds. For birds, it is a low-pathogenic strain which means that birds are very unlikely to die or be outwardly sick from this virus.
3. Several different scientists have indicated that this H7N9 subtype either may be capable of infecting mammals or already has (other than the humans noted above). Pigs may be another host that is capable of increasing human-to-human risk (pigs are good host for re-assorting the virus). They are still unsure of the source. The plan by Chinese and other nations' public health officials includes continued surveillance for both those with severe respiratory illness, signs of influenza, developing a process for diagnosis, treatment, a vaccine, as well as surveillance to determine viral spread, when and if travel restrictions need to be put in place, infection control and prevention recommendations, etc.

For more information, use the following links:

CDC Primer on this A(H7N9) novel virus:

<http://www.cdc.gov/flu/avianflu/h7n9-virus.htm>

CDC Recommendations for travel and Americans living in China:

<http://wwwnc.cdc.gov/travel/notices/watch/avian-flu-h7n9-china.htm>



Updated Information on the Cases of A(H7N9):

http://www.who.int/csr/don/2013_04_07/en/index.html

The WHO has Frequently Asked Questions:

http://www.who.int/influenza/human_animal_interface/faq_H7N9/en/index.html

The ECDC has published a Risk Assessment:

http://www.who.int/influenza/human_animal_interface/faq_H7N9/en/index.html

This document is provided by FirstWatch as a service to prehospital and public health providers. The information has been compiled from a variety of sources such as the CDC, Health Canada and WHO. It is copyrighted, but may be freely copied and distributed as long as it remains intact. www.firstwatch.net