

Important Health Notice

Information for Healthcare Professionals

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Update on Avian Influenza A (H5N1) in Asia

Highlights:

- New human avian influenza cases confirmed: Viet Nam
- Heightened vigilance as per Health Canada Alert and Surveillance recommendations to be continued

Dear Colleagues:

The World Health Organization (WHO) has confirmed three new human cases of avian influenza (H5N1) in Vietnam; all three patients, ages six, nine and 16 years old, have died.

All three of these most recent cases occurred in the southern part of the country after contact with poultry, where poultry outbreaks have been recurring since December of last year.

Close contacts of these cases are being monitored for any signs of illness. Health authorities in Viet Nam, supported by WHO staff, have undertaken several measures to strengthen case detection. Activities associated with the approach of the Lunar New Year festivities (poultry marketing, transportation, and consumption) in early February may also increase the risk of further human cases.

The current season flu shot does not protect against avian influenza. Immunization with the current season flu vaccine would be important though for those in close contact with infected poultry because it could reduce the likelihood of being infected with the human and avian forms of influenza at the same time. If a person were infected with both viruses at the same time, there is a possibility that the two viruses will "mix" and create a new virus against which people have no immunity. This would pose a risk for an influenza pandemic.

The second wave of Avian Influenza A (H5N1) commenced in June 2004 and continues to date. The countries involved in this second wave are Vietnam, Thailand, China, Indonesia, Cambodia and Malaysia. To date the number of people infected in this second wave is 13, of whom 12 have died.

It is important to consider avian flu in the differential diagnosis of those returning from tsunami-affected areas where avian influenza outbreaks have occurred if they have been in contact with poultry.

Avian influenza can affect all species of birds. In rare instances people can contract avian flu. To date, the H5N1, H7N7 and H9N2 subtypes of the avian influenza virus have been known to cause

illness in people, with H5N1 associated with the most serious illness in humans. The risk for humans to contract avian influenza is low, unless they are in close contact with infected poultry. Close contact means either handling or being in a confined airspace with infected birds.

Health Canada's earlier recommendations regarding increased vigilance in the surveillance for influenza-like illness (ILI) and the recognition, reporting and prompt investigation of any unexpected outcomes of ILI remain in effect. Specific recommendations from Health Canada were circulated on September 28, 2004 in an Important Health Notice and should be continued, together with use of the Febrile Respiratory Illness (FRI) screening tool.

Recommended measures for individuals travelling to countries where avian influenza A (H5N1) outbreaks occur have not changed (e.g. practice good hand hygiene, avoid contact with poultry).

The MOHLTC continues to monitor the avian influenza situation closely and will provide updates if significant new information becomes available.

Additional information is available at:

WHO: www.who.int/csr/don/en/

Public Health Agency of Canada: www.phac-aspc.gc.ca/tmp-pmv/index.html

Ministry of Health and Long-term Care: http://www.health.gov.on.ca/english/providers/program/emu/emu_mn.html

MOHLTC 24/7 Healthcare Provider Hotline: 1-866-212-2272

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