TALKING POINTS FOR CDC SPOKESPERSONS

For use in answering questions.

First Case of Avian Influenza A (H7N9) Virus Infection in a Human in North America

CURRENT SITUATION:

- On January 26, 2015, the Government of Canada and the Ministry of Health in British Columbia reported the first case of human infection in North America with avian influenza A (H7N9) virus in a patient who returned home to British Columbia following a trip to Hong Kong and mainland China.
- CDC has requested this virus, but has not received the virus at this time or confirmed these findings. The virus' genetic sequence has not been posted in GenBank.
- The patient had recently traveled to Hong Kong and areas in mainland China where human cases have been reported earlier this month. Human infections with the H7N9 virus were first reported in China in April 2013.
- While in China, the individual reportedly visited a location where poultry and poultry droppings were present, and Canadian public health authorities claim the individual was likely infected following exposure in China.
- The individual was not symptomatic during travel and was not sick enough to require hospitalization. The person is now recovering and has been treated with oseltamivir.
- All close contacts of the individual have been identified and are being monitored by provincial public health authorities.
- This is the first detected case of human infection with Eurasian avian influenza A (H7N9) virus in North, Central or South America.
- The Eurasian H7N9 virus has not been detected in birds in Canada.
- The current health risk posed by detection of this case of H7N9 in Canada is very low.
- No Eurasian H7N9 viruses have been detected in people or in animals in the United States
- Rarely, cases of human infection with H7N9 virus occur after exposure to infected poultry or contaminated environments.
- While human infection is rare, it often results in serious illness with 37% mortality.
- At this time, Eurasian H7N9 viruses do not spread easily from person to person.
- Canadian public health authorities are investigating the situation. No additional cases of H7N9 in Canada have been detected at this time.
- Most of the human cases of infection with H7N9 virus in China have resulted from direct or close contact with infected poultry or surfaces contaminated with poultry excretions or visiting live poultry markets.
- There is no risk of catching the virus by eating well-cooked poultry.

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- Transmission of H7N9 viruses from person-to-person is uncommon, and when it occurs is not sustained.
- The few cases of person-to-person transmission that have occurred in China are thought to have resulted after prolonged and close unprotected contact with someone who is very sick with H7N9 virus, usually among family members.
- "Novel influenza A infections" such as H7N9, have been nationally notifiable diseases in the United States since 2007.
- Novel influenza A virus infections include all human infections with influenza A viruses that are different from currently circulating human seasonal influenza H1 and H3 viruses. These viruses include those that are subtyped as nonhuman in origin and those that are unsubtypable with standard laboratory methods and reagents.
- Rapid reporting of human infections with novel influenza A viruses facilitates prompt detection and characterization of influenza A viruses and accelerates the implementation of effective public health responses.
- The United States has had enhanced surveillance measures to detect possible cases of avian influenza in this country in place since 2003.
- While the current risk from H7N9 virus is low and CDC believes it very unlikely that cases of H7N9 have occurred in the United States, CDC will send out a reminder to clinicians in this country about when and how to test for H7N9 infection.
- The recommendations for testing for H7N9 include testing of symptomatic people with recent travel (within 10 days) to China, where H7N9 virus infections in birds or people have occurred. See the H7N9 guidance now posted on the CDC website at http://emergency.cdc.gov/han/han00344.asp.
- CDC's guidance for H7N9 will be updated to address this current situation.
- More information about H7N9 is available on the CDC website at www.cdc.gov/flu/avianflu/h7n9-virus.htm

H7N9 in China

- As mentioned previously, avian influenza A H7N9 is endemic in poultry in China.
- Since 2013, China has reported over 500 cases of human infection with H7N9 virus, (37%) of which have died.
- Affected persons have ranged in age from 5 months to 91 years, but the average age is 54 years.
- The most recent case reported was in Hong Kong in January 2015.
- The most current information on cases is available on the World Health Organization's Global Alert and Response website (http://www.who.int/csr/don/en/).

PANDEMIC THREAT:

- The detection of one isolated case of H7N9 virus infection in a returned traveler does not signal the start of a pandemic.
- There are three criteria that must be met for a pandemic to occur:
    - one, a new influenza virus must emerge which causes human illness;
    - two, people must have little or no protection against this new virus;
    - and three, the virus must be capable of spreading easily and repeatedly from person to person.

- Although several avian influenza viruses, including H7N9, meet the first two criteria, the third has **NOT** been met. This does not change the current risk assessment for pandemic potential.
- A pandemic would only result if the H7N9 virus were to gain the ability to spread efficiently from person-to-person.
- There is no indication that this has occurred.

WHAT CDC IS DOING:

- CDC is in close contact with Canadian public health partners and has offered laboratory and other support as needed.
- CDC will issue a reminder to health-care professionals about our guidance for testing for H7N9.
- CDC will continue to monitor this situation closely and work with public health partners to rapidly test specimens and advise local and state authorities regarding control measures.
- Long-term preparedness measures against H7N9 include the existence of a stockpile of H7N9 vaccine in the Strategic National Stockpile.

WHAT YOU CAN DO

- At this point, there are no special actions that the public needs to take regarding H7N9 virus in the United States.
- More concerning for Americans right now is seasonal flu, which is widespread in much of the country. At this time, CDC continues to emphasize that people at high risk for seasonal flu related complications seek health care promptly, as your doctor can prescribe antiviral medications that shorten your duration of illness and that can help prevent more serious outcomes.
- For people traveling to China, CDC has recommendations for protecting against H7N9 and other avian influenza A viruses.
- CDC advises travelers to China to take the following precautions:
    - Do not touch birds, pigs or other animals.
    - Only eat food that is fully cooked.
    - Practice hygiene and cleanliness.
    - See a doctor if you become sick during or after your trip to China.
- This information is available on the CDC website at http://www.cdc.gov/flu/avianflu/h7n9-virus.htm.

BACKGROUND

- H7N9 is a virus that occurs mainly in birds and is highly contagious among birds. Because H7N9 is a low pathogenic virus in birds, it causes either no illness or mild illness in birds and can be difficult to detect.
- Since February 2013, over 500 cases of human infection with avian influenza A (H7N9) virus have been reported, with all but one occurring in China. The one case reported in Malaysia was in a traveler from an H7N9-affected area of China who became ill while in Malaysia. Thirty-seven percent of these cases have resulted in death.
- Human cases of H7N9 virus infection are rare and sporadic events, occurring mostly in areas where the virus is circulating endemically in poultry. These cases most often follow close contact with infected wild birds or poultry.
- Symptoms of H7N9 include:

  - Fever
  - Cough
  - Sore throat;
  - Muscle aches and fatigue;
  - Loss of appetite;
  - Runny or stuffy nose.

- Limited non-sustained person-to-person spread of H7N9 viruses is thought to have occurred in the past.
- This includes “clusters” of cases in families.
- Clusters of human H7N9 cases, usually two cases but ranging from 2-8 cases per cluster, have been identified in China.
- Many of the clusters have occurred among family members, especially those living in the same household.
- In cases where limited human-to-human transmission of H7N9 virus is thought to have occurred, spread has occurred after a very long period of unprotected close contact (hours in length) with a person confirmed to have H7N9 virus infection.
- So far, however, the spread of H7N9 virus from person-to-person has been very rare, limited, and not sustained.
- At the current time, there is no ongoing transmission of any avian influenza A viruses in humans, including H7N9 viruses.
- However, the H7N9 epizootic poses an important public health threat.
- Influenza viruses evolve and swap genes frequently.
- If H7N9 viruses gain the ability for efficient and sustained transmission among humans, an influenza pandemic could result, with potentially high rates of illness and death worldwide.
- The Centers for Disease Control and Prevention (CDC), the World Health Organization (WHO) and Food and Agriculture Organization of the United Nations (FAO) conduct routine surveillance to monitor influenza viruses, including H7N9 viruses, for changes that may have implications for animal and public health.
  - More information on H7N9 is available at www.cdc.gov/flu/avianflu/h7n9-virus.htm.
  - The World Health Organization (WHO) also provides general H7N9 information and updates at www.who.int/influenza/human_animal_interface/influenza_h7n9/en/.
  - FAO provides updates on H7N9 at www.fao.org/ag/againfo/programmes/en/empres/H7N9/background.html

For more information, visit www.cdc.gov/flu, or call CDC at
800-CDC-INFO (English and Spanish) or 888-232-6348 (TTY).