

Auckland Regional Public Health Service

Rātonga Hauora ā Iwi o Tamaki Makaurau



Working with the people of Auckland, Counties Manukau and Waitemata

Current Alert Level: **WHITE** ([what does this mean?](#))
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National

Pharmac moves to secure antibiotics for a pandemic [12/12/05, Pharmac](#). PHARMAC have invited pharmaceutical suppliers to make proposals for a guaranteed supply of antibiotics in the event of an influenza pandemic. The Ministry of Health has requested that PHARMAC secure guaranteed supplies of 845,000 courses of oral antibiotics (70% as tablets/capsules and 30% in liquid formulation) and 341,000 vials of injectable antibiotics. Antibiotics required include (in descending order of quantity) amoxicillin clavulanate, flucloxacillin, cephazolin, doxycycline and co-trimoxazole. Total cost likely to be \$6-10 million; proposals due 10 January 2006.

Call for legal protection for doctors in event of pandemic [30/12/05, Herald](#). In the December issue of Medspeak, New Zealand Medical Association chairman Ross Boswell has called for legal protection for doctors if a human influenza pandemic forces them to work in circumstances in breach of the law: "We need assurance given in legislation or regulation that doctors who use best endeavours in nightmarish circumstances will not later find themselves in difficulties with draconian OSH fines, with adverse Health and Disability Commissioner findings, or with disciplinary proceedings."

International

Avian influenza unproven as cause of death in child in Turkey [02/01/06, BBC News](#). A 14-year-old boy who died on the weekend was one of a group of six in eastern Turkey who were being tested for avian influenza after developing influenza symptoms. Turkish Ministry of Health officials have stated that although the cause of death remains unknown it was not due to influenza. This claim appears to have been made on clinical grounds only at this stage.

Oseltamivir resistance during treatment of H5N1 infection [NEJM, 22/12/05 \(de Jong et al\)](#). The Dec 22 2005 New England Journal of Medicine presents a paper describing high-level resistance to oseltamivir in influenza A/H5N1 virus isolated from two Vietnamese patients, both of whom died of A/H5N1 infection. The accompanying perspectives paper ([NEJM 22/12/05, Moscona](#)) describes how oseltamivir resistance may develop, raises the possibility that treatment of influenza A/H5N1 infection may require more medication than is currently recommended for influenza, and cautions that improper use of personal stockpiles of oseltamivir may promote resistance.

Background

Not all H5N1 highly pathogenic [CIDRAP, 30/12/05](#). In recent months, both Canada and Italy have reported detection of H5N1 influenza in wild birds, however in both cases the virus was described as dissimilar to the virus present in Asia. To help explain this distinction, a helpful discussion has been posted on the CIDRAP website. Basically, the name 'H5N1' only describes two of the eight influenza virus genes; therefore, the other six genes may differ greatly between H5N1 viruses. The H5N1 strains found in Canada and Italy were both low-pathogenic, as opposed to the high-pathogenic strains found in Asia.

Pandemic Postings

Global spread of avian influenza to date
Confirmed human cases of avian influenza A/(H5N1), to 30 December 2005,¹ and animal outbreaks of highly-pathogenic avian influenza A/H5, to 30 December 2005²

	Human ¹ cases	deaths	Animal ² outbreaks
Cambodia	4	4	15
China	7	3	78
Croatia	-	-	2
Hong Kong	-	-	4
Indonesia	16	11	216
Japan	-	-	11
Kazakhstan	-	-	1
Korea (South)	-	-	19
Laos	-	-	1
Malaysia	-	-	10
Mongolia	-	-	2
Romania	-	-	36
Russia	-	-	62
Thailand	22	14	1164
Turkey	-	-	2
Ukraine	-	-	22
Vietnam	93	42	2141
TOTAL	142	74	3786

Notes:

1 As reported to [World Health Organization](#)

2 As reported to [World Organisation for Animal Health \(OIE\)](#)

Prescribing Tamiflu for a personal stockpile [NEJM, 22/12/05 \(Brett & Zuger\)](#). A perspectives paper in the New England Journal of Medicine discusses the issues surrounding prescribing by medical practitioners of oseltamivir for a patient's personal stockpile. The authors conclude that individual doctors have no obligation to prescribe oseltamivir in response to a patient's request, and that the public health perspective clearly suggests doctors have an obligation not to prescribe. The authors also note that in the absence of formal guidelines for doctors from the (US) government, some professional societies and private medical groups in the US have issued statements recommending that doctors decline requests for oseltamivir prescriptions for the purposes of creating a personal stockpile.

Human to human transmission of H7N7 influenza in Netherlands [Eurosurveillance, 12/05](#). An outbreak of highly pathogenic avian influenza A virus subtype H7N7 (HPAI A/H7N7) began in poultry farms in the Netherlands in 2003. Infection was confirmed in 86 poultry workers, mainly causing conjunctivitis. A retrospective cohort study of household contacts of the poultry workers showed that 58.9% had positive H7 serology, and 12.9% reported symptoms (mainly conjunctivitis). Risk factors for H7 seropositivity among household contacts included use of cloth (as opposed to paper) handkerchiefs and presence of pet birds at home. This study suggests that person-to-person transmission of HPAI A/H7N7 can occur within household contacts, and that monitoring for clinical symptoms underestimates the extent of spread.

Contact phone numbers

Ministry of Health advice line: **0800 AVN FLU (286 358)**

MAF Hotline (for suspect animal cases): **0800 809 966**

[Links](#) to key pandemic planning sites NZ/worldwide

Emerging Infectious Diseases special issue on influenza ([January 2006](#))