

Auckland Regional Public Health Service

Rātonga Hauora ā Iwi o Tamaki Makaurau



Working with the people of Auckland, Counties Manukau and Waitemata

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International

Indonesia: situation update [WHO, 21/08/06](#) and [23/08/06](#). Four further confirmed cases of H5N1 Avian Influenza infection have been reported from Indonesia since the last issue of Pandemic Postings: two of these cases have been fatal. The most recent case has been in a 6-year-old girl from Bekasi district, West Java province. This case is recovering, and the source of infection is unknown.

Three earlier cases, including the two deaths, have been in people from the remote Cikelet subdistrict (Garut district, West Java province: see [map](#) for location of West Java). The Cikelet subdistrict consists of around 20 hamlets, each with population of 200-400 persons mainly living in extended family groups, in a mountainous area with difficult road access. Following introduction of poultry from outside areas in June, chickens in Cikelet began dying in large numbers during July and August. Some people died with respiratory illnesses during this time, however samples were not collected and the causes of death remain undiagnosed. The three confirmed cases (a 35-year-old woman, a 17-year-old man and a 9-year-old girl) all became unwell in late July or early August. WHO report that investigations have not found evidence of person-to-person transmission or increased efficiency of transmission from birds to humans. Households are under surveillance for febrile illnesses; antiviral agents have been administered as prophylaxis to close contacts of cases and as treatment for those with early influenza-like illness symptoms.

China: situation update [WHO, 14/08/06](#). A 62-year-old male farmer from the Xinjiang Uygur Autonomous Region in north-western China who died on 12 July has been confirmed to have had H5N1 avian influenza. Specimens initially tested negative, but repeat testing in July and August produced positive results. The source of infection is as yet unknown: no history of exposure to dead or diseased birds is known, the man had not travelled in the month prior to illness, and no poultry outbreaks had been reported in the vicinity of the man's home. No previous cases have been reported from the Xinjiang Uygur Autonomous Region.

Background

Low transmission of H5N1 from poultry to humans in Cambodian study [Vong et al, Emerg Infect Dis \[serial on the internet\], 2006 Oct \[cited 28/08/06\]](#). This article reports the findings of a retrospective survey of poultry deaths and seroepidemiologic investigation in a Cambodian village where a man died with H5N1 infection in March 2005. 27% of household poultry flocks in a 1km radius of the case's house were considered to have been recently infected with H5N1. Serum specimens were collected from 351 persons from 93 households in the village: none had neutralising antibodies to H5N1. No evidence could be found for mild disease or asymptomatic infection. The study provides evidence of low transmissibility of H5N1 avian influenza from infected poultry to humans, even in conditions of regular intense poultry-human interactions. The authors comment that their findings are limited to the investigation period in 2005.

Pandemic Postings

Current global avian influenza activity¹

Confirmed human cases of avian influenza A/(H5N1), 10 - 23 Aug 2006,² by country. The complete list of human cases and poultry outbreaks to date can be found on the [ARPHS website](#).

	Human ²		Poultry ¹
	cases	deaths	outbreaks
China	1	1	-
Indonesia	4	2	-
Total	5	3	-

Notes:

- ¹ The [World Organisation for Animal Health](#) (OIE) cumulative number of poultry outbreaks of avian influenza (H5N1) could not be accessed online at the time of writing: data from this site were therefore unavailable for inclusion in this issue of Pandemic Postings.
- ² As reported to [World Health Organization](#)

Background contd

Pandemic preparedness in the Asia-Pacific region [Coker and Mounier-Jack, Lancet \[serial on the internet\], 22/08/06 \[cited 28/08/06\]](#). Review of six national influenza preparedness plans in the Asia-Pacific region. The plans of Thailand, China and (to a lesser extent) Vietnam consisted of development strategies for building capacity to detect, prepare and respond to future disease. These plans lacked operational guides to implementation and management of available resources and healthcare capacity. By contrast, plans of Australia, Hong Kong and New Zealand took an approach aimed at harnessing available resources or preparing for resource deployment, and included comprehensive operational guidance. These latter plans are described as comparing favourably to the best European plans. Preparedness plans for Cambodia, Laos and Indonesia could not be obtained for the review.

Global initiative to share avian influenza data [Bogner et al, Nature \[serial on the internet\], 24/08/06 \[cited 28/08/06\]](#). A group of leading influenza scientists from around the world have announced the formation of a consortium designed to improve the sharing of influenza data, analyze data findings jointly, and publish the results collaboratively as part of the Global Initiative on Sharing Avian Influenza Data (GISAID). Scientists participating in the GISAID consortium would agree to share their sequence data, to analyse the findings jointly and to publish the results collaboratively. Data would be deposited in the three publicly available databases participating in the International Sequence Database Collaboration as soon as possible after analysis and validation, with a maximum delay of six months. (Website: gisaid.org).

Antigenic and genetic characteristics of candidate H5N1 vaccine viruses [WHO, 18/08/06](#). The development of representative pre-pandemic H5N1 candidate vaccine viruses by the WHO Global Influenza Programme is being conducted as one step in an overall strategy for pandemic preparedness. The WHO has published a summary of the current status of the development of new candidate H5N1 vaccine viruses, intended to provide guidance for national authorities on the production of pre pandemic vaccine.