

# Pandemic Postings

**Current Alert Level:** WHITE ([definition](#))  
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## National

**Exercise Cruickshank coverage** Exercise Cruickshank is currently underway: Cruickshank 1 (“Keep it out”) was held 10 May, and Cruickshank 2 (“Stamp it out”) will be held 16 May, followed by Cruickshank 3 (“Manage it”) on 17 May and Cruickshank 4 (“Recover from it”) on 23 and 30 May. Media coverage of day #1 is available on [stuff.co.nz](http://stuff.co.nz).

## International situation

**No reported human cases since 11/04/07 WHO.** There have been no new human cases of avian influenza A(H5N1) reported on the WHO website since 11/04/07. Cases unconfirmed by WHO have, however, been reported by the Indonesian government (see next item).

**Situation in Indonesia CIDRAP, 14/05/07.** The Indonesian government has reported two deaths due to H5N1 infection in a 29-year-old woman from Sumatra and a 26-year-old pregnant woman, also from Sumatra. These cases have not been included in WHO reports because the Indonesian government stopped sharing H5N1 virus samples with the agency in late January. The Indonesian government states that it has taken this action in opposition to the WHO practice of sharing the samples with drug companies, which, in Indonesia’s view, use the samples to make vaccines priced beyond the country’s reach.

**Poultry outbreaks in Bangladesh OIE, 30/04/07.** Nine highly pathogenic H5N1 avian influenza outbreaks, eight in Dhaka Div province and one in Khulna Div province. Susceptible populations from 125 to 4,000, with a total of 18,801 birds involved. 2,305 reported cases with a further 16,496 destroyed. All outbreaks were on poultry farms. See [map](#) for provinces.

**Poultry outbreaks in Ghana OIE, 12/05/07.** The first H5N1 avian influenza outbreaks in Ghana have been reported on three farms in the Greater Accra province. The three outbreaks involved 11743, 15 and 55 affected birds respectively out of susceptible populations of 23441, 325, and 405. See [map](#) for province location.

**Poultry outbreaks in Kuwait OIE, 07/05/07.** Three new H5N1 avian influenza outbreaks have been reported in the Al Ahmadi province of Kuwait. One outbreak was in 2 ostriches on a farm of 1,000 birds, while the remaining two were in large chicken farms of 213,868 and 250,000 birds respectively. 42 cases were reported across the two farms and the remaining birds have been destroyed. The unaffected ostriches were not destroyed. See [map](#) for province locations.

## Background

**Inclusion of swine and poultry workers in pandemic influenza planning Gray et al, Vaccine 2007 May 30;25(22):4376-81.** Excerpted from abstract: “Recent research has demonstrated that swine and poultry professionals, especially those who work in large confinement facilities, are at markedly increased risk of zoonotic influenza virus infections... [the authors suggest] that such workers should be recognized as a priority target group for annual influenza vaccines and receive special training to reduce the risk of influenza transmission. They should also be considered for increased surveillance and priority receipt of pandemic vaccines and antivirals.”

**Current global avian influenza activity**  
 No new confirmed human cases of avian influenza A/(H5N1) have been reported<sup>1</sup> 29 Apr - 14 May 2007. Outbreaks of highly-pathogenic avian influenza H5N1 in poultry, 30 Apr - 12 May 2007,<sup>2</sup> by country. The complete list of human cases and poultry outbreaks to date can be found on the [ARPHS website](#).

	Human <sup>1</sup>		Poultry <sup>2</sup>
	cases	deaths	outbreaks
Bangladesh	-	-	9
Ghana	-	-	3
Kuwait	-	-	3
<b>TOTAL</b>	-	-	<b>15</b>

## Notes:

- As recorded on the [World Health Organization](#) website
- As recorded on the [World Organisation for Animal Health \(OIE\)](#) website.

## Background (contd)

**Influenza transmission: research needs for informing policy Eurosurveillance [serial on the internet] 2007;12(5) [cited 14/05/07].** Summary of current gaps in knowledge about influenza, including the period of communicability, transmission mechanisms and effectiveness of infection control measures. Provides a number of suggestions for filling these gaps with experimental and observational strategies and trials.

**Questions and answers on pandemic influenza vaccine WHO, 09/05/07.** Useful WHO summary of issues around pandemic influenza vaccine, including production timelines.

**Predicting the next influenza pandemic Taubenburger et al, JAMA 2007;297:2025-7.** Commentary on the evolutionary changes required for influenza viruses (focusing on H5N1) to become capable of causing a pandemic. The authors conclude that “[i]t is unknown whether H5N1 viruses will be able to adapt to humans and cause efficient person-to-person transmission; however, preparation for future influenza pandemics caused by H5N1 and any number of other viral possibilities is important.”

**Prevention of influenza epidemics by voluntary vaccination Vardavas et al, PLoS Comput Biol [serial on the internet] 2007; 3(5): e85 [cited 14/05/07].** Paper presenting results of computational modelling to determine whether critical coverage for influenza can be achieved by voluntary vaccination. The authors find that severe epidemics cannot be prevented unless vaccination programmes offer incentives.

**Interim CDC guidance on use of facemasks in non-occupational settings during a pandemic CDC, 05/07.** The US Centers for Disease Control has released recommendations on use of respiratory protection in non-occupational settings in a pandemic. The report’s authors conclude that very little information is available about the effectiveness of these measures in controlling influenza spread in the community, and makes interim judgement-based recommendations:

- Whenever possible, avoid close contact and crowded conditions rather than relying on use of facemasks;
- Facemasks should be considered for use by those who enter crowded settings, and the time spent in crowded settings should be as short as possible;
- Respirators should be considered by those in unavoidably close contact with an infectious person (eg, family members caring for a sick person at home); and
- Facemasks and respirators should be used in combination with other preventive measures, such as hand hygiene and social distancing.