

2013-04-30-034 Avian influenza, human (57): H7N9 update
To: (06) Virology, general; (07) Zoonoses, general;

AVIAN INFLUENZA, HUMAN (57): H7N9 UPDATE

A ProMED-mail post <<http://www.promedmail.org>>

In this update

- [1] WHO update @ 22 Apr 2013
- [2] Now 108 cases & 22 deaths
- [3] 4th case in Anhui
- [4] Preponderance of elderly males

- [1] WHO update @ 22 Apr
- Date: Mon 22 Apr 2013

Source: World Health Organisation (WHO), CSR, Disease Outbreak news [edited]
<http://www.who.int/csr/don/2013_04_22/en/index.html>

Human infection with avian influenza A(H7N9) virus in China - update

As of 22 April 2013 (18:00 CET), the National Health and Family Planning Commission notified WHO of an additional 2 laboratory-confirmed cases of human infection with avian influenza A(H7N9) virus. Both the patients are reported from Zhejiang province. The 1st patient is a 54-year-old woman who became ill on 16 Apr 2013 and the 2nd patient is a 32-year-old man who became ill on 14 Apr 2013. Additionally, a patient earlier reported from Zhejiang province has died.

To date, a total of 104 [now 108, see below] laboratory-confirmed cases of human infection with avian influenza A(H7N9) virus in China, including 21 [now 22, see below] deaths have been reported to WHO.

Contacts of the confirmed cases are being closely monitored. National authorities continue to implement prevention and control measures.

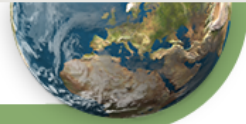
Investigations into the possible sources of infection and reservoirs of the virus are ongoing. Until the source of infection has been identified, it is expected that there will be further cases of human infection with the virus in China. So far, there is no evidence of ongoing human-to-human transmission. WHO does not advise special screening at points of entry with regard to this event, nor does it recommend that any travel or trade restrictions be applied.

At the invitation of the National Health and Family Planning Commission of China, WHO has convened a team of experts who will visit areas affected by avian influenza A(H7N9) in China in order to provide recommendations on the prevention and control of the disease.

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Communicated by:
ProMED-mail Rapporteur Marianne Hopp

- [2] Now 108 cases & 22 deaths
- Date: Tue 23 Apr 2013
- Source: English News, Xinhua report [edited] <http://news.xinhuanet.com/english/china/2013-04/23/c_132334426.htm>



China confirms 108 H7N9 cases, 22 deaths

During the 24-hour period ending at 4 p.m. on Tuesday, China confirmed 4 new cases of human H7N9 avian influenza, including 2 in Zhejiang, one in Anhui and the 1st case in Shandong. The National Health and Family Planning Commission said in its daily update on H7N9 cases that a total of 108 H7N9 cases have been reported in China, including 22 that have ended in death. Of the total, 14 H7N9 patients have been discharged from hospitals after receiving treatment, and the other 72 patients are being treated in designated hospitals, according to the commission.

A total of 33 cases, including 12 that have ended in death, have been reported in Shanghai; 24 cases, including three deaths, have been reported in Jiangsu Province, and 42 cases, including 6 deaths, in Zhejiang Province. Anhui Province has reported 4 cases, with one ending in death. Beijing has reported one case and 3 have been reported in Henan Province, with one in Shandong.

China officially confirmed the human cases infected with the H7N9 virus late last month [March 2013]. According to the commission, China's confirmed H7N9 cases are isolated and there has been no sign of human-to-human transmission.

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Communicated by:
Ryan McGinnis
<<http://bigstormpicture.com>>

[3] 4th case in Anhui
Date: Tue 23 Apr 2013
Source: English News, Xinhua report [edite] <http://news.xinhuanet.com/english/health/2013-04/23/c_132334289.htm>

East China's Anhui Province reports new H7N9 case

HEFEI: A new case of H7N9 bird flu was confirmed by the health bureau of east China's Anhui Province on Tuesday, bringing the total number of positive cases in the province to four. A 91-year-old man from the county-level city of Tianchang, Chuzhou City, tested positive for the new strain of avian influenza on Monday. He is in a critical condition. Thirty-five people who were in close contact with the patient have been placed under medical observation, but have so far shown no abnormal symptoms.

The neighboring Zhejiang Province reported two more infection cases Tuesday. An 84-year-old retired man Hong and a 62-year-old farmer were confirmed to be infected with the new strain of the virus. Both are in critical condition.

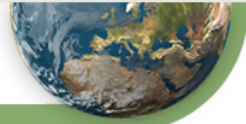
Meanwhile, east China's Shandong Province has confirmed its first case of H7N9, according to the provincial health department.

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Communicated by:
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<http://bigstormpicture.com>

[4] Preponderance of elderly males
Date: Mon 22 Apr 2013
Source: CIDRAP News [edited]
<<http://www.cidrap.umn.edu/cidrap/content/influenza/avianflu/news/apr2213wpro.html>>

WHO ponders preponderance of older men with H7N9



In a new perspective article today, experts from the World Health Organization (WHO) acknowledged the puzzling preponderance of older men among H7N9 influenza patients in China and suggested that studying the habits of elderly Chinese men may help provide some answers.

Experts from the WHO's Western Pacific Region Office (WPRO) wrote that among the 63 H7N9 cases reported from Mar 31 through Apr 16, the median age was 64, and 45 patients (71%) were male.

Thirty-nine of the

63 patients (62%) were at least 60 years old. This contrasts with the profile of the general Chinese population, "which has a large proportion of young and middle-aged adults and a greater number of women among the elderly," says the article, which was published online in the WHO's Western Pacific Surveillance and Response Journal.

The WHO experts also found a distinct difference in the case-fatality rate (CFR) between elderly men and elderly women. For all ages, the CFR for males was the same as for females: 22% (10 of 45 and 4 of 18).

But for those 60 and older, the CFR for men was 20% (6 of 30), while for women it was zero (0 of 9).

As others have pointed out, the H7N9 age distribution differs from that of the 45 H5N1 cases recorded in China, the WHO authors note. Most of the H5N1 patients were young, working-age adults, with a median age of 26, the WHO experts found.

They list 3 potential reasons for the age and sex distribution in

H7N9: gender-related differences in exposures to the virus, gender-linked biological differences in the clinical course of illness, and gender-related differences in healthcare-seeking behavior or healthcare access. Concerning possible exposure differences, the article notes that live-bird markets (LBMs) have been the primary sites where the H7N9 virus has been found in poultry and environmental samples in affected areas. However, "age- and sex-specific LBM visit patterns are unknown."

The authors go on to suggest that pet birds may be worth investigating as a possible source of the virus: "Elderly Chinese men are also well-known to be hobbyists of ornamental pet songbirds and take frequent and extended walks with their caged birds, congregating together in parks." They add, "A better understanding of the social norms and behaviors among elderly Chinese men in affected areas may better guide us in the investigation (e.g. by identifying hypotheses for case-control series)." The article offers no hypotheses about the role of possible biological differences. But it suggests that useful information might be gained from serologic investigations among close contacts of patients and studies of underlying conditions and other risk factors among the patients themselves.

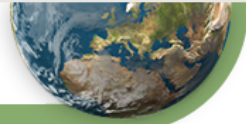
The authors doubt that H7N9 cases in elderly men are more likely to be detected than cases in other subgroups, given the high severity of illness in most cases, high public awareness of the outbreak, and nationwide enhanced surveillance for flu-like illness. "At this time, it is clear that there are more questions than answers," the WHO experts write. They suggest that investigators focus on 3 avenues of inquiry:

- â~ The "societal norms and common social practices" of elderly men in the affected provinces;
- â~ The age and sex distribution of severe acute respiratory illness and key risk factors for respiratory illness in the general population in the affected region;
- â~ The age and sex distribution of healthcare use in the general population in the affected provinces.

(By Robert Roos)

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[The pattern of the outbreak remains unchanged a slow progressive increase in the number of predominantly middle-aged and elderly patients, relatively severe illness and poor outcomes, no confirmed human-to-human transmission and no identification of an animal source of infection.

Individual maps of the Provinces, Municipalities and Autonomous Regions of China can be accessed at:

<<http://www.mapsofworld.com/china/provinces/>>. - Mod.CP]

[A wild pigeon has been found to be H7N9 positive -- see ProMED archive 20130417.1652959. If elderly Chinese men spend more time in parks more than women, they would be more exposed to infection from pigeons; from feather dust when they flap up from the ground and from their excreta -- see illustration at:

<<http://us.123rf.com/400wm/400/400/Tawng/Tawng1303/Tawng130300016/18839561-editable-vector-silhouettes-of-three-elderly-people-on-a-park-bench-feeding-pigeons-with-all-element.jpg>>.

- Mod.JW

A HealthMap/ProMED-mail map can be accessed at:

<<http://healthmap.org/r/1ucF>>.]

[see also:

Avian influenza, human (56): H7N9 update 20130422.1665044 Avian influenza, human (55): H7N9 update 20130421.1662410 Avian influenza, human (54): H7N9 update 20130420.1660408 Avian influenza, human (53): H7N9 update 20130419.1658187 Avian influenza, human (52): H7Nx sequence analysis 20130419.1657126 Avian influenza, human (51): H7N9 update 20130418.1655610 Avian influenza, human (50): China H7N9 update 20130417.1653194 Avian influenza, human (48): China H7N9 update 20130416.1650582 Avian influenza, human (47): China H7N9 update 20130415.1647864 Avian influenza, human (46): China: H7N9 stealth virus 20130415.1647713

Avian influenza, human (45): China: H7N9, update 20130414.1645270 Avian influenza, human (44): China (HE), H7N9 20130413.1643923 Avian influenza, human (43): China, H7N9 update 20130413.1643270 Avian influenza, human (42): China (BJ), H7N9 20130413.1642086 Avian influenza (35): China, LPAI H7N9, update 20130412.1641185 Avian influenza, human (41): China H7N9 update 20130412.1641464 Avian influenza, human (40): China H7N9 update 20130411.1638767 Avian influenza, human (39): China (SH, JS, ZH) H7N9 update 20130410.1636073

Avian influenza, human (38): China (SH, JS) H7N9 update 20130409.1633860 Avian influenza, human (35): China (SH, JS) H7N9 update 20130408.1630825

Avian influenza, human (34): China (SH, AH) H7N9, RFI 20130407.1628848

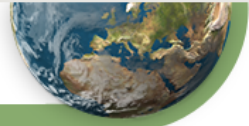
Avian influenza, human (33): vaccine development 20130407.1628472 Avian influenza, human (32): China (SH, AH) H7N9 20130407.1628294 Avian influenza, human (31): China (Shanghai) H7N9 20130406.1626812 Avian influenza, human (30): China (Hong Kong, Taiwan) H7N9, NOT 20130406.1626565

Avian influenza, human (29): China (ZH) H7N9, market quail 20130406.16264

Avian influenza, human (28): China H7N9, WHO 20130406.1626360 Avian influenza (28): China (SH) H7N9, OIE, update 20130405.1624901 Avian influenza, human (27): H7N9 update, more fatalities 20130405.1624260 Avian influenza, human (26): China H7N9 case list & map 20130404.1623110 Avian influenza, human (25): China (SH) H7N9, update 20130404.1622647 Avian influenza (27): China (SH) H7N9, avian case 20130404.1621938 Avian influenza (26): China, H7N9, RFI 20130403.0666 Avian influenza, human (24): China (ZJ) H7N9 update 20130404.1621801 Avian influenza, human (22): China (SH) H7N9, fatal: correction 20130404.1621799

Avian influenza, human (22): China (SH) H7N9 fatal 20130404.1621700 Avian influenza, human (20): China (JS) H7N9 patient details 20130403.1617279

Avian influenza, human (16): China (SH, AH) H7N9 WHO 2013]



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