

## Human infection with avian influenza A(H5) viruses

### Human infection with avian influenza A(H5N1) virus

Between 19 February and 25 February 2021, **no new cases** of human infection with avian influenza A(H5N1) virus were reported to WHO in the Western Pacific Region.

As of 25 February 2021, a total of 239 cases of human infection with avian influenza A(H5N1) virus have been reported from four countries within the Western Pacific Region since January 2003 (Table 1). Of these cases, 134 were fatal, resulting in a case fatality rate (CFR) of 56%. The last case was reported from Lao PDR, with an onset date of 13 October 2020 (one case, no death).

**Table 1: Cumulative number of laboratory-confirmed human cases (C) and deaths (D) of influenza A(H5N1) virus infection reported to WHO, by date of onset (January 2003 to 25 February 2021), Western Pacific Region.**

Country	2003-2009		2010-2014		2015		2016		2017		2018		2019		2020		Total	
	C	D	C	D	C	D	C	D	C	D	C	D	C	D	C	D	C	D
Cambodia	9	7	47	30	0	0	0	0	0	0	0	0	0	0	0	0	56	37
China	38	25	9	5	6	1	0	0	0	0	0	0	0	0	0	0	53	31
Lao PDR	2	2	0	0	0	0	0	0	0	0	0	0	0	1	0	0	3	2
Viet Nam	112	57	15	7	0	0	0	0	0	0	0	0	0	0	0	0	127	64
<b>Total</b>	<b>161</b>	<b>91</b>	<b>71</b>	<b>42</b>	<b>6</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>239</b>	<b>134</b>

Globally, from January 2003 to 25 February 2021, there were 862 cases of human infection with avian influenza A(H5N1) virus reported from 17 countries. Of these 862 cases, 455 were fatal (CFR of 53%). The last case was reported from Lao PDR on 13 October 2020 ([source](#)).

### Human infection with avian influenza A(H5N6) virus

Between 19 February and 25 February 2021, **no new cases** of human infection with avian influenza A(H5N6) virus were reported to WHO in the Western Pacific Region. To date, a total of 29 laboratory-confirmed cases of human infection with influenza A(H5N6) virus including nine deaths have been reported to WHO from China since 2014.

### Public health risk assessment for human infection with avian influenza A(H5) viruses

On 18 February 2021, the National IHR Focal Point for the Russian Federation notified WHO of detection of avian influenza A(H5N8) in seven human clinical specimens. These are the first reported detection of avian influenza A(H5N8) in humans. Positive clinical specimens were collected from poultry farm workers who participated in a response operation to contain an avian influenza A(H5N8) outbreak detected in a poultry farm in Astrakhan Oblast in the Russian Federation. The cases remained asymptomatic for the whole follow up duration (several weeks). All close contacts of these cases were clinically monitored, and no one showed signs of clinical illness. Based on currently available information, the risk of human-to-human transmission remains low. See the Disease Outbreak News for more information: <https://www.who.int/csr/don/26-feb-2021-influenza-a-russian-federation/en/>.

Whenever avian influenza viruses are circulating in poultry, there is a risk for sporadic infection and small clusters of human cases due to exposure to infected poultry or contaminated environments. Therefore, sporadic human cases are not unexpected. With continued incidence of avian influenza due to existing and new influenza A(H5) viruses in poultry, there is a need to remain vigilant in the animal and public health sectors. Community awareness of the potential dangers for human health is essential to prevent infection in humans. Surveillance should be continued to detect human cases and early changes in transmissibility and infectivity of the viruses.

For more information on confirmed cases of human infection with avian influenza A(H5) virus reported to WHO, visit: [http://www.who.int/influenza/human\\_animal\\_interface/en/](http://www.who.int/influenza/human_animal_interface/en/)

For information on monthly risk assessments on Avian Influenza, visit: [http://www.who.int/influenza/human\\_animal\\_interface/HAI\\_Risk\\_Assessment/en/](http://www.who.int/influenza/human_animal_interface/HAI_Risk_Assessment/en/)

## Human infection with avian influenza A(H7N4) virus in China

Between 19 February and 25 February 2021, **no new cases** of human infection with avian influenza A(H7N4) virus were reported to WHO in the Western Pacific Region. To date, only one laboratory-confirmed case of human infection with influenza A(H7N4) virus has been reported to WHO. This case was reported from China on 14 February 2018.

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

Between 19 February and 25 February 2021, **no new cases** of human infection with avian influenza A(H7N9) virus were reported to WHO in the Western Pacific Region. As of 25 February 2021, a total of 1,568 laboratory-confirmed human infections with avian influenza A(H7N9) virus have been reported to WHO since early 2013. Among them, 33 cases were infected with HPAI A(H7N9) virus, which have mutations in the hemagglutinin gene indicating a change to high pathogenicity in poultry. These 33 cases were from Taiwan, China (the case had travel history to Guangdong), Guangxi, Guangdong, Hunan, Shaanxi, Hebei, Henan, Fujian, Yunnan, and Inner Mongolia. No increased transmissibility or virulence of the virus within human cases has been detected related to the HPAI A(H7N9) virus ([source](#)).

WHO is continuing to assess the epidemiological situation and will conduct further risk assessments as new information becomes available. The number and geographical distribution of human infections with avian influenza A(H7N9) viruses in the fifth epidemic wave (1 October 2016 to 30 September 2017) was greater than previous waves and the subsequent waves.

Further sporadic human cases of avian influenza A(H7N9) virus infection are expected in affected and possibly neighbouring areas. Should human cases from affected areas travel internationally, their infection may be detected in another country during or after arrival. However, if this were to occur, community level spread is considered unlikely as the virus does not have the ability to transmit easily among humans.

To date, there is no evidence of sustained human-to-human transmission of avian influenza A(H7N9) virus. Human infections with the A(H7N9) virus are unusual and need to be monitored closely in order to identify changes in the virus and transmission behaviour to humans as this may have serious public health impacts.

For more information on human infection with avian influenza A (H7N9) virus reported to WHO: [http://www.who.int/influenza/human\\_animal\\_interface/influenza\\_h7n9/en/](http://www.who.int/influenza/human_animal_interface/influenza_h7n9/en/)

## Human infection with avian influenza A(H9N2) in China

**Three new cases** of human infection with avian influenza A(H9N2) virus were reported to WHO, detected through influenza-like illness (ILI) surveillance. The first case is a one-year-old female from Sichuan Province, China, with onset of illness on 30 November 2020. The patient had exposure to backyard poultry. The second case is a five-year-old female in Anhui Province, China, whose date of onset was 17 January 2021. The third case is a 2-year-old female in Jiangxi Province, China whose date of onset was 18 January 2021. All three cases had developed mild illness and recovered, and no additional cases suspected among contacts by the time of reporting. To date, five cases of avian influenza A(H9N2) were reported from China in 2021, and a total of 43 cases of human infection with avian influenza A(H9N2) in China have been reported since December 2015.

## **Animal infection with avian influenza virus**

*Note: The OIE World Animal Health Information System (OIE-WAHIS) website is currently unavailable. Any poultry or wild bird outbreaks reported during the reporting week will be included in subsequent reports.*

### **For more information on animal infection with avian influenza viruses with potential public health impact, visit:**

- [World Organization for Animal Health \(OIE\) web page: Weekly disease information and Latest report on Avian Influenza](#)
- [Food and Agriculture Organization of the UN \(FAO\) webpage: Avian Influenza](#)
- [OFFLU: Animal Influenza](#)
- [Emergency Prevention System for Transboundary Animal and Plant Pests and Diseases \(EMPRES\)](#)

## Other updates

- [WHO Risk Assessment of human infection with avian influenza A virus.](#) 9 December 2020
  - Risk assessment summary: The overall public health risk from currently known influenza viruses at the human-animal interface has not changed, and the likelihood of sustained human-to-human transmission of these viruses remains low. Human infections with viruses of animal origin are expected at the human-animal interface wherever these viruses circulate in animals.
- [Recommended composition of influenza virus vaccines for use in the 2021 southern hemisphere influenza season.](#) 25 September 2020
- [WHO SAGE Seasonal Influenza Vaccination Recommendations during the COVID-19 Pandemic Interim guidance.](#) 21 September 2020
- [WHO Consultation and Information Meeting on the Composition of Influenza Virus Vaccines for Use in the 2021 Southern Hemisphere Influenza Season.](#) 16 September - 02 October 2020
- [Recommended composition of influenza virus vaccines for use in the 2021 - 2022 northern hemisphere influenza season.](#) 26 February 2021
- [WHO Consultation and Information Meeting on the Composition of Influenza Virus Vaccines for Use in the 2021-22 Northern Hemisphere Influenza Season.](#) 17 February - 03 March 2021
- [Antigenic and genetic characteristics of zoonotic influenza viruses and candidate vaccine viruses developed for potential use in human vaccines.](#) 1 October 2020
- [TIPRA Frequently Asked Questions.](#) March 2017