TO: PHYSICIANS Date: Jan 8, 2014



Community Medicine Newsletter

A Fatal Case of H5N1 Avian Influenza (or Bird Flu) in Alberta, from Beijing via Vancouver

Dear Colleagues,

Alberta health officials have confirmed a fatal case of influenza caused by the strain **H5N1** in a returning visitor from Beijing. She died on Jan 4th 2014 after being treated in hospital in Edmonton for severe respiratory illness. This is different from the H1N1 strain currently circulating in British Columbia.

This patient spent 2.5 hours in Vancouver airport on December 27 between 12:30 and 3pm, awaiting a connecting flight. The purpose of this bulletin is to support you in assessing patients who have concerns about their presence at Vancouver International Airport that day.

Human-to-human transmission of H5N1 virus is very rare and is seen among close family or household contacts. Most human cases of H5N1 have acquired their illness directly from infected poultry. **It is extremely unlikely that any passengers or casual airport contacts of this case would have been at risk**. In the exceedingly unlikely event that transmission has occurred, the secondary cases would have developed symptoms by now.

We are not aware of any secondary cases of severe influenza from this exposure despite enhanced clinical and lab surveillance.

Individuals who were at the airport during this time and who remain well can therefore be reassured. As we are in the midst of influenza season, we expect that several travelers may experience illness due to circulating seasonal influenza viruses. Please use usual droplet precautions when assessing any patient with influenza-like-illness. Individuals with influenza-like-illness who experience difficulty breathing or worsening of their symptoms should be tested for influenza. Antivirals should be used when patients have underlying medical conditions, pregnancy or severe illness according to current guidelines (http://www.ammi.ca/media/48042/flu_algorithms.pdf).

If a traveler is ill enough to need hospital assessment, please phone ahead to inform the Emergency Department of the potential exposure. Please report all cases of influenza-like-illness linked to this particular travel history or severe influenza-like-illness requiring hospitalization to local public health (604-675-3900 or 1-855-675-3900).

Both H1N1 and H5N1 can be treated with antivirals (eg, oseltamivir) which are most effective if given within the first 48 hours of onset of symptoms. Please continue to offer seasonal influenza vaccine to your patients, especially children, pregnant women and adults 19-64 with high risk medical conditions.

Please do contact us if you have any further questions.