

本署檔號 Our Ref. : (50) in DH SEB CD/8/6/1 Pt. 27

2 June 2012

Dear medical superintendents,

**Confirmation of a Human Case H5 Avian Influenza Infection and
Activation of Serious Response Level of Government's Preparedness Plan**

I would like to draw your attention to a confirmed case of human influenza A H5 infection in Hong Kong. The patient is a 2-year-old boy with good past health. He lives with his parents and maternal grandmother in Guangzhou, Mainland China.

He developed fever since 23 May 2012 while in Guangzhou. He sought medical attention there but his symptoms persisted. He was then brought to Hong Kong on 26 May 2012 and was admitted to Caritas Medical Centre (CMC) Special Care Unit (SCU) on 28 May 2012 for febrile seizures. The clinical diagnosis was encephalitis.

His nasopharyngeal aspirate (NPA) collected on 28 May 2012 confirmed to be of subtype H5 by Public Health Laboratory Branch (PHLSB) of the Centre for Health Protection (CHP) on 1 June 2012. The patient, along with his parents, was transferred to Princess Margaret PMH for single isolation on 1 June 2012 evening. Latest radiological imaging was suggestive of obstructive hydrocephalus. Investigation is underway to exclude underlying cause. His current condition is serious.

Epidemiological investigation revealed that during the period of 17-19 of May, he was brought by mother to buy a live duck in a wet market near his residence. He travelled to Anhui province with his parents from 20 May to 22 May 2012 but had not contacted any live poultry there. CHP is communicating with the Guangdong Health Department to investigate the source of his infection. His close contacts are all asymptomatic and his parents are put under quarantine in Hong Kong.



The Government has raised the influenza response level from "Alert" Response Level to "Serious" Response Level under the Framework of Government's Preparedness Plan for Influenza Pandemic.

So far, 22 human cases of H5N1 infections were recorded in Hong Kong. Apart from the case confirmed yesterday, there was one outbreak of influenza A (H5N1) in

1997 with 18 people affected, of whom six died. In February 2003, two imported cases were detected and one of them died. According to the latest update from the World Health Organization (29 May 2012), worldwide there were so far a total of 604 confirmed cases (including 357 deaths) of human infection with the H5N1 avian influenza virus.

Please be reminded that Influenza A (H2, H5, H7, and H9) is a notifiable disease. Apart from the statutory notification system, CHP will further strengthen surveillance for suspected human case of influenza A(H5N1) infection. I attach again (Annex) for your attention the **Reporting Criteria for Human Influenza A(H5N1)**. In addition, I would like to urge you to pay special attention to *those who presented with influenza like illness and had history of visiting wet market or contacting poultry in Guangzhou within the incubation period (i.e. 7 days before onset of symptoms)*.

Any suspected case meeting the reporting criteria (<https://ceno.chp.gov.hk/casedef/casedef.pdf>) should be reported to the Central Notification Office of CHP via fax (2477 2770), phone (2477 2772) or CENO On-line (www.chp.gov.hk/ceno). Please also contact the Medical Control Officer (MCO) of the Department of Health at Pager: 7116 3300 call 9179 when reporting any suspected case.

Yours sincerely,



(Dr. SK CHUANG)
for Controller, Centre for Health Protection
Department of Health

Annex

Reporting criteria for Human Influenza A (H5N1) infection

An individual fulfilling both the *Clinical Criteria AND Epidemiological Criteria* should be reported for further investigation.

Clinical Criteria

A person with acute respiratory illness, characterized by fever (temperature >38°C) **AND** one or more of the following:

- cough, sore throat, shortness of breath, and difficulty breathing; **OR**
- person with severe pneumonia; **OR**
- person died of unexplained acute respiratory illness.

Epidemiological Criteria

One or more of the following exposures in the 7 days prior to symptom onset:

- contact with a human case of influenza A (H5N1); **OR**
- contact with poultry or wild birds or their remains or to environments contaminated by their faeces in countries/areas with documented avian influenza H5N1 infection in birds and/or humans in the recent 6 months ^{see List of affected areas}; **OR**
- consumption of raw or undercooked poultry products in countries/areas with documented avian influenza H5N1 infection in poultry and/or humans in the recent 6 months ^{see List of affected areas}; **OR**
- close contact with a confirmed H5N1 infected animal other than poultry or wild birds; **OR**
- worked in a laboratory that is processing samples from persons or animals that are suspected from avian influenza infection

The list of affected areas is regularly uploaded to the Centre for Health Protection (CHP) website (<http://www.info.gov.hk/info/flu/eng/global.htm>).