監測及流行病學處



Surveillance And Epidemiology Branch

本署檔號 Our Ref. : (18) in DH SEB CD/8/6/1 Pt. 29

17 November 2010

Dear Doctors,

Confirmation of a human case H5 avian influenza infection

I would like to draw your attention to a confirmed case of human influenza A (H5N1) infection in Hong Kong. The patient is a 59-year-old Chinese lady. She lives in Tuen Mun with her husband, son and daughter. She enjoyed good past health.

She presented with running nose since 2 November 2010, fever and cough with blood streak sputum since 5 November. She consulted doctors with medications given. Her symptoms persisted and she attended the Accident and Emergency Department of Tuen Mun Hospital (TMH) on 12 November with chest X-ray (CXR) showing left middle zone haziness. She was given a course of Augmentin. She had increasing haemoptysis and persistent fever and was admitted to isolation ward in TMH on 14 November. CXR taken on admission showed left middle zone and left lower zone consolidation. She was transferred to isolation ward and treated as community acquired pneumonia with antibiotics. Her condition deteriorated and CXR taken on 16 November showed consolidation of entire left lung field and right lower zone haziness. She was then transferred to intensive care unit for close monitoring. She was treated with oseltamivir since 16 November and was given 100% oxygen but did not require ventilatory support. She is now in serious condition. Her nasopharyngeal aspirate taken on 17 November was tested positive for H5 influenza A virus by PCR by the Public Health Laboratory Centre of the Centre for Health Protection (CHP).

She travelled to Mainland China (Shanghai, Nanjing and Hangzhou) with her husband and daughter from 23 October 2010 to 1 November 2010. She had history of visiting a wet market in Mainland China during the incubation period. She came back to Hong Kong on 1 November. The CHP is investigating the source of her infection. Her 60-year-old husband had history of running nose and productive cough but has recovered. Her close contacts are put under quarantine.

衛生防護中心乃衛生署 轄下執行疾病預防 及控制的專業架構 The Centre for Health Protection is a professional arm of the Department of Health for disease prevention and control

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, 21 human cases of H5N1 infections were recorded in Hong Kong. Apart from the cases confirmed today, 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 (18 October 2010), worldwide there were so far a total of 507 confirmed cases (including 302 deaths) of human infection with the H5N1 avian influenza virus.

Please be reminded that Influenza A (H5, H7, and H9) is a notifiable disease. Any suspected case meeting the reporting criteria (<u>https://ceno.chp.gov.hk/casedef/casedef.pdf</u>) should be reported to the Central Notification Office of CHP via fax (24772770), phone (24772772) or CENO On-line (<u>www.chp.gov.hk/ceno</u>). Please also contact the Medical Control Officer (MCO) of the Department of Health at Pager: 7116 3300 call 9179 when reporting any suspected case.

Apart from the above statutory notification system, CHP has also enhanced surveillance for avian influenza. Doctors should refer patients fulfilling the following criteria to the nearest Accident and Emergency Department under the Hospital Authority for further management:

- A person presented with influenza-like illness (fever >38°C and either sore throat or cough); <u>AND</u>
- History of visiting wet market or contacting poultry in Shanghai, Nanjing or Hangzhou within the incubation period (i.e., 7 days before onset of symptoms).

Yours sincerely,

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(Dr. Monica Wong) for Controller, Centre for Health Protection Department of Health