

本署檔號 Our Ref. : (21) in DH SEB CD/9/17/1

25 February 2008

Dear Doctor,

**Suspected Human Case of H5N1 Infection in Guangdong and
Enhanced Pneumonia Surveillance Program in Hospitals**

I would like to draw your attention to the suspected human case of avian influenza in Guangdong. The patient was a 44-year-old woman. She had onset of cough and fever on 16 February 2008 and was hospitalized on 22 February 2008. Preliminary test for H5N1 on her respiratory specimen was positive and further confirmation by Ministry of Health is pending. She had history of contact with backyard dead poultry raised by herself before onset of symptoms. She died in the morning of 25 February 2008. Her close contacts have been put under medical surveillance.

We are liaising with Guangdong health authorities and the Ministry of Health of China to obtain further details of the case. Temperature screening for inbound travellers is in place at all immigration control points and health messages on avian influenza are being displayed. Health information leaflets are being distributed at airline check-in counters for travellers going to areas with human avian influenza cases and health messages are being broadcasted on board aircrafts coming from these areas.

An enhanced pneumonia surveillance programme has been set up targeting at passengers arriving from Guangdong Province and other affected areas within 7 days of symptom onset and have signs and symptoms of pneumonia of unknown etiology admitted to public and private hospitals. Please enquire your affiliated hospitals for details.

You are reminded to report any suspected cases to the Central Notification Office of the Centre for Health Protection (CHP) via fax (24772770), phone (24772772) or CENO On-line (www.chp.gov.hk/ceno). Please also refer patients fulfilling the reporting criteria to public hospitals for further clinical management.



The latest information on avian influenza is available at our CHP website (www.chp.gov.hk).

Yours faithfully,

A handwritten signature in black ink, appearing to read 'SK CHUANG', is centered on the page. The signature is written in a cursive style with a light blue rectangular background behind it.

(Dr. SK CHUANG)
Consultant Community Medicine (Communicable Disease)
Centre for Health Protection
Department of Health

Reporting Criteria for Human Influenza A (H5, H7, or H9) infection

(revised on 27 March 2006)

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

Clinical Criteria

- person with acute respiratory illness, characterized by fever (temperature >38°C) and cough and/or sore throat, **OR**
- person with severe pneumonia, **OR**
- person died of unexplained acute respiratory illness

Epidemiological Criteria

- recent (less than 1 week) contact with a human case of Influenza A (H5), Influenza A (H7) or Influenza A (H9), **OR**
- recent (less than 1 week) contact with diseased poultry, diseased wild bird, or their carcasses in a country / area with documented avian influenza H5 infection in birds in recent 6 months ^{notes}, **OR**
- recent (less than 1 week) contact with diseased poultry, diseased wild bird, or their carcasses in a country / area with documented indigenous human case of Influenza A (H5), Influenza A (H7) or Influenza A (H9) in recent 6 months ^{notes}, **OR**
- worked in a laboratory that is processing samples from persons or animals that are suspected from avian influenza infection

Notes:

1. *According to reporting criteria issued by the World Health Organization on 29 August 2006, possible exposure may also include:*

- *consumption of raw or undercooked poultry products in areas where H5N1 infections in animals or humans have been suspected or confirmed;*
- *close contact with a confirmed H5N1 infected animal other than poultry or wild birds (e.g. cat or pig); and*
- *handling samples (animal or human) suspected of containing H5N1 virus in a laboratory or other setting.*

2. *The list of country / area with documented avian influenza H5 infection in birds (including poultry and wild birds) and indigenous human cases of Influenza A (H5), Influenza A (H7) or Influenza A (H9) in recent 6 months will be regularly updated and posted on CHP website.*