

Current major events

Human Avian Influenza in Egypt: Case No. 49

On 15 April 2008, the Ministry of Health and Population of Egypt has announced the 49th human case of avian influenza A (H5N1) virus infection. The case was a 30-year-old female from Al-Matarya, Cairo Governorate. She developed symptoms on 2 April, was hospitalized and died on 11 April. The case was confirmed as being infected with A(H5N1) by the Central Public Health Laboratories and by Cairo-based US Naval Medical Research Unit 3 (NAMRU-3). Investigations into the source of her infection indicate a history of contact with sick and dead poultry.

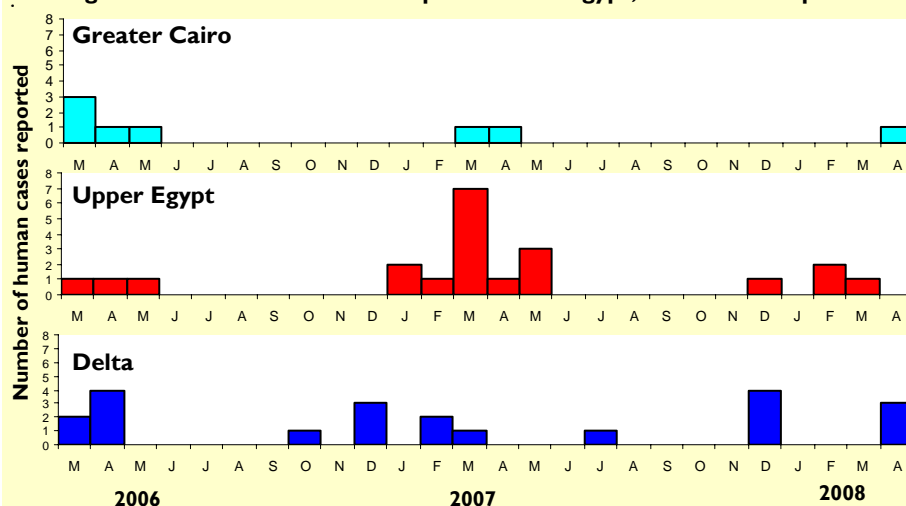
History of poultry exposure was not obtained from the patient until she reached the referral hospital. Detailed investigation of the case revealed she had purchased two chickens from a live poultry market located in the ground floor of her residence. The case had witnessed the slaughter of the chickens and then had defeathered and cleaned the chickens in the process of preparing them for a meal.

Editorial note

This case is the sixth human case of seven H5N1 infection occurred in Egypt and the third death due H5N1 to occur in 2008. Outbreaks of AI always start in the Delta (*see Figure 1*). However, appearance of a fatal case of avian influenza in Greater Cairo should be regarded as a significant event. It is indicative of one or more of the following:

- Laxity in implementing strict public health measures instituted by the government which prohibited movement of poultry from infected areas and raising and selling live poultry in the large densely populated urban settings.
- The need for refresher courses for medical doctors to ensure early diagnosis of emerging cases of avian influenza. Alternative means of keeping doctors alert could be considered.

Figure 1: Human Cases of AI Reported from Egypt, March 2006-April 2008



- To-date, 50 cases of human H5N1 infection, including 22 deaths have been reported in Egypt (Case-fatality rate = 44%).
- About three out of every four human cases of AI that occurred in 2006-2008 were reported from either Egypt or Indonesia (*See table below*)
- Number (%) of total reported of cases of avian influenza worldwide:

Year	Egypt	Indonesia	Total
2005	0 (0.0%)	20 (20.4%)	20 (20.4)
2006	18 (15.7%)	55 (47.8%)	73 (63.5)
2007	25 (28.4%)	42 (47.7%)	67 (76.1)
2008	7 (24.1%)	15 (51.7%)	22 (75.9)
Total	50 (15.2%)	132 (40.0%)	182 (55.2)

- The implementation of Egyptian plans for reform of poultry industry, (especially building new slaughterhouses), are lagging behind.

Accordingly, it would be recommended that the health and health-related authorities in Egypt consider the following in their response to this event:

- Trace the source of the infected poultry and institute appropriate control measures and identify better plans that would ensure desirable traffic of poultry between governorates.
- Revitalize public health awareness activities to reduce risk for infection with AI virus, denial of exposure, and promote early reporting to health facilities.

Update on outbreaks

in the Eastern Mediterranean Region

Avian Influenza: (Egypt) reported a new human case no. 50; **Poliomyelitis** (Sudan) New case of wild polio virus reported in Jonglei State; **AJS:** More cases in Afghanistan (*An outbreak investigation has been initiated*)

Current public health events of international concern

[cumulative N° of cases (deaths), **CFR** %]

Avian influenza

Egypt	[50 (22), 44%]
Indonesia	[132 (107), 81.1%]

Cholera

Kenya	[1155 (56), 4.8%]*
Angola	[5,028 (149), 3%]

Wild Poliomyelitis Virus

Sudan	[1 (0), 0%]
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AJS: (Prozolidine Poisoning)

Afghanistan	[111 (6), 5.4%]
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Measles

Norway	[4 (0), 0%]
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Dengue fever

Brazil	[93,498 (87), 0.1%]
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(* = Unofficial figures)
CFR = Case-Fatality Rate