

Regional Office for the Eastern Mediterranean

Current major event

Avian Influenza A (H5N1) in Egypt

The Ministry of Health and Population of Egypt recently reported eight new human cases of avian influenza A (H5N1) to WHO. Since the first reported case in 2006, Egypt has so far reported 196 laboratory-confirmed cases of avian influenza A (H5N1) including 73 deaths (CFR 37.2%).

Editorial note

This year, Egypt has reported 23 new cases of avian influenza A (H5N1) including 10 associated deaths (CFR 43.5%). Fifteen reported cases were from Menia and Suhag Governorates (9 and 6 cases respectively), two from Asyut, and one case from Bani Swaif, Buhaira, Dimyat, Giza, Menofia and Aswan Governorates.

The joint field investigation conducted by the human and animal health sector reported a direct contact between most of the cases and sick or dead poultries. It has been reported that there are active foci of transmission within the poultry in Menia and Suhag governorates in the country which may be the reason for increased number of human cases reported this year from these two governorates. Reporting of new cases from other governorates is also an indication that animal foci is spreading to other areas in the southern part of the country.

Whenever bird flu viruses are circulating in poultry, there is a risk of sporadic infections or small clusters of human cases, especially in people exposed to infected birds contaminated environments. Indonesia and Egypt remain the only countries where human cases of avian influenza A (H5N1) is continuing to occur in the human population.

In Egypt, avian influenza A(H5N1) virus occurs sporadically throughout the country and is associated with the breeding of backyard poultry. Transmission from human to human is rare. However, during this year, there is a significant increase in number of report-



Month & Year

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Age distribution of avian influenza A (H5N1) cases and deaths reported from Egypt, 2006-2014

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Age group	Cases	Deaths	CFR (%)
< 5 yrs	60	2	3.3
5 to < 15 yrs	36	5	13.9
15 to< 30 yrs	54	40	74.1
30 to< 45 yrs	40	23	57.5
45 yrs & >	6	3	50.0
Total	196	73	37.2

ed cases (please see the above graph). Most of the reported cases this year have largely been in poor rural areas in the south where villagers, particularly women tend to keep and slaughter sick poultry at home.

The increase in number of reported human cases of avian influenza A (H5N1) in Egypt this year necessitates vigilance and enhanced surveillance at the animal-human interface. Any cluster of cases need to be picked up by the surveillance system early and prompt investigation must be conducted to exclude any human-to-human transmission as the pandemic potential of the strain of avian influenza A (H5N1) has not yet waned out. Genetic sequencing of the recently detected virus is also crucial to detect and monitor any mutation changes. While aggressive intervention measures are required in the animal health sector to interrupt spread of virus from its transmission foci, early administration of anti-viral drugs to human cases that are detected early will increase the chances of survival significantly.

Update on outbreaks

in the Eastern Mediterranean Region

MERS-CoV in Saudi Influenza in Egypt	Arabia and Avian		
Current public health events of international concern [cumulative N° of cases (deaths), CFR %]			
Avian Influenza A (H5N1): 2006-2014			
Egypt	[196 (73), 37.2%]		
MERS-CoV: 2012-2014			
Saudi Arabia	[817 (316), 38.7%]		
Jordan	[11 (6), 54.5%]		
Oman	[2 (2), 100%]		
UAE	[68 (8), 11.8%]		
Kuwait	[3 (1), 33.3%]		
Tunisia	[3 (1), 33.3%]		
Qatar	[9 (4), 44.4%]		
Yemen	[1 (1), 100%]		
Egypt	[1 (0), 0%]		
Lebanon	[1 (0), 0%]		
Iran	[5 (2), 40%]		
Ebola Virus Disease: 2014			
Guinea	[2597 (1607), 61.9%]		
Liberia	[7862 (3384), 43.0%]		
Sierra Leone	[9004 (2582), 28.7%]		
Nigeria	[20 (8), 40%]		
Senegal	[1(0), 0%]		
Spain	[1(0), 0%]		
USA	[4(1),25%]		
Mali	[8(6),75%]		
Wild poliovirus: 2014			
Pakistan	[295 (0), 0%]		
Afghanistan	[28(0), 0%]		

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