

Avian Influenza risk summary



i SAFETY INFORMATION 005/24

Issue date:	21 June 2024
Content reviewed by:	Nepean Blue Mountains Local Health District, Clinical Excellence Commission, Health Protection NSW
Distributed to:	Chief Executives; Directors of Clinical Governance; Director, Regulation and Compliance Unit
KEY MESSAGE:	<p>Contact the High Consequence Infectious Diseases (HCID) team if avian influenza is suspected based on patient history and symptoms. Take a swab for influenza polymerase chain reaction (PCR) testing, if influenza A positive discuss further testing with your PHU/HCID.</p> <p>Implement infection prevention and control on early suspicion.</p>
ACTION REQUIRED BY:	Chief Executives, Directors of Clinical Governance.
REQUIRED ACTION:	<ol style="list-style-type: none"> 1. Distribute this Safety Information to all relevant clinicians and clinical departments to increase awareness of Highly pathogenic avian influenza (HPAI). 2. Ensure clinical staff have the skills and knowledge to implement clinical recommendations. 3. Include this Safety Information in relevant handovers and safety huddles.
DEADLINE:	N/A
We recommend you also inform:	<p>Directors, Managers and Staff of: Emergency Departments, Infectious Diseases departments, Public Health Units, Nursing/Midwifery Services, Medical Services, Pharmacy Services and Pathology.</p> <p>Drug and Therapeutics Committees</p> <p>Other relevant staff, committees, and departments.</p>
Website:	<p>https://www.health.nsw.gov.au/sabs/Pages/default.aspx</p> <p>http://internal.health.nsw.gov.au/quality/sabs/index.html</p>
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Situation

Avian influenza is circulating globally in birds and some other animals. In particular, a strain of avian influenza H5N1 clade 2.3.4.4b has spread to all continents except Australia. This increased global circulation of these viruses in birds increases the possibility that people may come into contact with avian influenza viruses.

In NSW and Victoria, detections of different and unrelated avian influenza viruses on poultry farms have led to Emergency Animal Disease biosecurity control measures to contain the spread of these viruses.

Background

- Avian influenza, or bird flu, is caused by various strains of influenza A viruses. Some strains cause no or mild disease in wild birds while others can cause severe disease in poultry, like chickens. High Pathogenicity Avian Influenzas (HPAI) is the term given to avian influenza viruses with high mortality rates in poultry.
- Avian influenza is not easily transmissible to people, but there is a risk that these viruses can pick up mutations which increase transmissibility to people and other mammals.
- Human infections with avian influenza are rare and usually occur after close contact with infected birds. Person-to-person transmission is rare.
- Clinical symptoms may include common influenza symptoms (e.g. cough, coryza, fever, myalgia) patients may also report conjunctivitis. Symptoms will usually appear between 2 to 10 days following exposure.

Assessment

The risk to human health in NSW remains low. Patients with recent contact with unwell poultry or wild birds in Australia or a returned traveller who has had contact with birds overseas may be at higher risk.

Contact the High Consequence Infectious Diseases (HCID) team if avian influenza is suspected based on patient history and symptoms. Take a swab for influenza polymerase chain reaction (PCR) testing if influenza A positive discuss further testing with your PHU/HCID.

Recommendations

Consider avian influenza in patients with relevant exposure history and symptoms

- Patient is unwell with influenza-like illness AND
 - Has had a close contact with unwell poultry or wild birds in Australia, OR
 - Is a returned traveller who had contact with birds overseas.

If you are concerned about a patient who meets these criteria, contact the High Consequence Infectious Diseases (HCID) Specialist Service team (1800 424 300) for guidance.

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Implement infection prevention and control on early suspicion

- Respiratory precautions
- Single room isolation

Testing

- Standard influenza testing will determine positivity for influenza A.
- Influenza A PCR positive samples that are approved by their local PHU or Health Protection NSW (HPNSW) as meeting the above criteria are to be referred to NSW Health Pathology, Westmead, for further PCR testing or subtyping.

Treatment

- Chemoprophylaxis with oseltamivir for **10 days** should be considered in people who had exposure with inadequate PPE to animals infected with avian influenza. Dosing provided below:
 - o Adult with GFR > 30 mL/min, oseltamivir 75 mg daily
 - o Adult with GFR of 10 – 30 mL/min, oseltamivir 75 mg 48-hourly OR 30 mg 24-hourly
 - o Adult with GFR < 10 mL/min, oseltamivir 30 mg 48-hourly.

Further information

[Avian influenza control guideline - Control guidelines \(nsw.gov.au\)](https://www.nsw.gov.au/health/conditions-and-diseases/avian-influenza-control-guideline-control-guidelines)

[Avian Influenza - NSW Health Factsheet](#)