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NH DIVISION OF Public Health Services
Improving health, preventing disease, reducing costs *for all*
Department of Health and Human Services

## Highly Pathogenic Avian Influenza

**Key Points and Recommendations:**

1. No human illness has been identified during this current outbreak of highly pathogenic avian influenza (HPAI) in the U.S.; however, any highly pathogenic H5 virus has potential to cause human illness.
2. No birds with HPAI have been identified in NH or New England.
3. Health care providers should ask their patients that present will influenza-like-illness or acute respiratory illness about domestic and wild bird exposure and test, treat and report appropriately.
4. Health care workers should be knowledgeable of appropriate prevention messages for their patients who have contact with birds.
5. Health care providers should continue to manage all patients who have unidentified new cough illness under droplet precautions.
6. Report all suspect and confirmed cases to the NH DPHS Bureau of Infectious Disease Control within 24 hours at 603-271-4496 (after hours 1-800-852-3345, x5300).

**Background:**

Highly pathogenic avian influenza (HPAI) was identified in birds December 19, 2014 in Oregon and has continued to spread east to Indiana and as far south as New Mexico. Wild bird and captive wild bird mortality has been documented, but the largest impact of this outbreak has been on domestic poultry. Prior to this outbreak, HPAI had not previously been documented in wild bird populations in the US.

**Epidemiology:**

The circulating HPAI viruses are reassortment viruses involving Asian H5N8 HPAI and North American LPAI in the Pacific Flyway. The Asian virus contributed the H5 portion and has contributed the highly pathogenic nature of the viruses currently circulating.

As of June 9, 2015, there have been 222 detections of HPAI across 21 states affecting over 47 million birds. The majority of detections have been in Minnesota and Iowa. Three different HPAI viruses have been identified during this outbreak: H5N8, H5N2 and H5N1 (not the same as the H5N1 virus causing illness in Asia and the Middle East). The vast majority of detections have been influenza A H5N2. The exact mechanism of continued transmission for HPAI in this outbreak remains unknown.

Current information about the outbreak is available from the USDA here:

http://www.usda.gov/wps/portal/usda/usdahome?contentidonly=true&contentid=avian_influenza.html

The majority of detections have been in commercial flocks, but backyard flocks and wild species have also been impacted. No human illness has been associated with HPAI during this outbreak. The possibility that human illness may occur remains a serious concern. The risk for

HPAI associated illness is greatest among poultry workers, those handling high risk wild birds, and HPAI outbreak responders. The greatest risk is for those exposed to sick, dead or dying birds or their contaminated environment without appropriate PPE. Health care providers should ask their patients presenting with influenza-like illness a detailed bird exposure history. Birds of concern include domestic poultry (e.g., chickens, turkeys, domestic ducks, etc.) as well as water fowl (e.g., ducks, geese, shore birds, etc.) and raptors (e.g., falcons, hawks, owls, etc.).

The time of greatest risk for HPAI to be detected in NH is anticipated to be during the fall migration as birds return to their wintering grounds. During this time, the United States Department of Agriculture, Animal and Plant Health Inspection Services, Wildlife Services (USDA APHIS WS) will be engaged in active surveillance to identify any HPAI viruses.

## NH Public Health Laboratory Testing for Human Infection with HPAI

The NH Public Health Laboratories (PHL) utilizes the CDC Human Influenza Virus Real-Time RT-PCR Diagnostic Panel for detection and subtyping of influenza viruses. This test can identify novel influenza viruses such as HPAI in human clinical specimens.

Commercially available rapid influenza diagnostic tests (RIDTs) may not detect HPAI. Therefore, a negative rapid influenza diagnostic test result does not exclude infection with HPAI.

Commercially available influenza molecular diagnostic tests may not detect Influenza AH5, or may produce a positive influenza A result with no subtype identified. Consult test manufacturer for more information.

The NH Public Health Laboratories encourages the submission of ALL specimens testing positive for influenza (by RIDT or molecular assay) from June through September, because migration patterns make HPAI more likely during this time. Respiratory specimens from patients exhibiting influenza-like illness and with a travel or exposure history concerning for HPAI or any novel influenza should be collected and sent for RT-PCR testing at the NH (PHL).

NH PHL approved specimen types are:
Nasopharyngeal swabs, nasal swabs, throat swabs, nasal aspirates, nasal washes and dual nasopharyngeal/throat swabs, broncheoalveolar lavage, bronchial wash, tracheal aspirate, sputum, and lung tissue.

To conduct RT-PCR testing for influenza:
- Collect the specimen as soon as possible after illness onset.
- Collection should be by trained personnel using droplet precautions
- Place the sample in viral transport media and store and transport at 4° C.

To acquire virus specimen collection kits, contact the NH Public Health Laboratories office at 1-(800) 852-3345, extension 4605 or (603) 271-4605.

## Reporting Cases of Avian Influenza:

Clinicians should report suspected and confirmed cases of avian or novel influenza infection to the NH DPHS Bureau of Infectious Disease Control at 603-271-4496 (after hours 1-800-852-3345, x5300) within 24 hours.

**Prevention Messages for Patients:**

- Persons handling poultry or working in a poultry facility should observe good hand hygiene and biosecurity recommendations.
- Biosecurity measures should be evaluated or established for all poultry flocks, including backyard flocks. http://healthybirds.aphis.usda.gov/
- Persons with poultry showing signs of respiratory illness or mortality should immediately call the State Veterinarian at (603) 271-2404 to arrange for testing of affected birds.
- Reports of ill domestic birds may also be made through your private veterinarian or local cooperative extension specialists: http://extension.unh.edu/About/Contact-us
- All persons exposed to affected birds will need to contact their health care providers to establish appropriate care and will be monitored by NH DPHS.
- Avoid contact with wild birds protected by state and federal law. Do not handle sick, dying or dead wild birds with bare hands. Call the USDA APHIS Wildlife Services Regional Office at (603) 223-6832 to report sick, dying or dead wild birds of concern.
- Hunters should follow all recommended carcass processing recommendations, including the use of gloves and processing birds away from other food processing areas or high use areas. http://www.aphis.usda.gov/publications/animal_health/2015/fsc_hpai_hunters.pdf

For any questions regarding the contents of this message, please contact NH DHHS, DPHS, Bureau of Infectious Disease Control at 603-271-4496 (after hours 1-800-852-3345 ext.5300).

To change your contact information in the NH Health Alert Network please call 603-271-4596 or email health.alert@nh.gov.

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| From: | Elizabeth A. Talbot, MD, Deputy State Epidemiologist |
| Originating Agency: | NH Department of Health and Human Services, Division of Public Health Services |

**Attachments**: 1. CDC Highly Pathogenic Avian Influenza HAN