

Avian Influenza – Frequently Asked Questions

What is avian influenza?

Avian influenza, or “bird flu” is a contagious disease of animals caused by viruses that normally infect only birds and, less commonly, pigs. Influenza A (H5N1) virus – also called “H5N1 virus” – is an influenza A virus subtype that occurs mainly in birds, but has on rare occasions, crossed the species barrier to infect humans.

What is special about the current outbreaks in poultry?

The current outbreaks of avian influenza, which began in South-east Asia in mid-2003, are the largest and most severe on record.

The causative agent, the H5N1 virus, has proved to be especially tenacious. Despite the death or destruction of an estimated 150 million birds, the virus is now considered endemic in many parts of Indonesia and Viet Nam and in some parts of Cambodia, China, Thailand, and possibly also the Lao People’s Democratic Republic. Control of the disease in poultry is expected to take several years.

The H5N1 virus is also of particular concern for human health, as explained below.

What are the implications for human health?

The widespread persistence of H5N1 in poultry populations poses two main risks for human health.

The first is the risk of direct infection when the virus passes from poultry to humans. Of the few avian influenza viruses that have crossed the species barrier to infect humans, H5N1 has caused the largest number of cases of severe disease and death in humans. Unlike normal seasonal influenza, where infection causes only mild respiratory symptoms in most people, the disease caused by H5N1 follows an unusually aggressive clinical course, with rapid deterioration and high fatality.

A second risk is that the virus will change into a form that is highly infectious for humans and spreads easily from person to person. Such a change could mark the start of a global outbreak (a pandemic).

Does the virus spread easily from birds to humans?

No. Though more than 100 human cases have occurred in the current outbreak, this is a small number compared with the huge number of birds affected and the numerous associated opportunities for human exposure. It is not presently understood why some people, and not others, become infected following similar exposures.

Who is at risk?

The current risk to Americans from the H5N1 birdflu outbreak in Asia is low. The strain of H5N1 virus found in Asia and Europe has not been found in the United States. There have been no cases of H5N1 flu in the United States. It is possible that travelers returning from affected countries in Asia could be infected if they were exposed to the H5N1 virus. Travelers to affected areas should follow the Centers for Disease Control (CDC) guidelines to reduce their risk of becoming infected and monitor their health post travel. See <http://www.cdc.gov/travel/seasia.htm> for more information.

Continued

How do people become infected?

Direct contact with infected poultry, or surfaces and objects contaminated by their feces, is considered the main route of human infection. Exposure is considered most likely during slaughter, defeathering, butchering, and preparation of poultry for cooking. There is no evidence that eating properly cooked poultry or eggs can be a source of infection.

Is there a vaccine available for avian flu?

There currently is no commercially available vaccine to protect humans against the H5N1 virus that is being seen in Asia and Europe. Research studies to test a vaccine to protect humans against H5N1 virus began in April 2005, and a series of clinical trials is underway. For more information about the H5N1 vaccine development process, visit the National Institutes of Health website at <http://www3.niaid.nih.gov/news/newsreleases/2005/avianfluvax.htm>.

How is bird flu treated?

Studies done in laboratories suggest that the prescription medicines approved for human flu viruses should work in preventing bird flu infection in humans. However, flu viruses can become resistant to these drugs, so these medications may not always work. Additional studies are needed to prove the effectiveness of these medicines.

What should I do if I think I might have avian flu?

If within 10 days of travel to an avian flu infected area you become ill with a fever or flu-like symptoms, seek immediate medical care. **Before you visit a health-care setting, tell your provider the following:**

- 1) your symptoms**
- 2) where you traveled**
- 3) if you had direct contact with live or raw poultry.**

Hand Washing

As with other infectious illnesses, one of the most important preventive practices is careful and frequent handwashing. Cleaning your hands often with soap and water removes potentially infectious material from your skin and helps prevent disease transmission. Waterless alcohol-based hand gels may be used when soap is not available and hands are not visibly soiled.

Excerpted from World Health Organization and Centers for Disease Control, 10/2005

Check our website: www.uhs.berkeley.edu to learn more about this medical concern or others.

For an appointment www.uhs.berkeley.edu or call **510-642-2000** Clinic Nurse **510-643-7197** for advice