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Health Advisory

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Human Infections with Avian Influenza A: H7N9

In June of this year, based on the most current epidemiology indicating that almost all H7N9 infections in humans have resulted in severe respiratory illness and that H7N9 has been found only rarely among persons with milder disease, the U.S. Centers for Disease Control & Prevention (CDC) changed its recommendation for H7N9 testing.

In the prior guidance issued in April 2013, CDC recommended that all persons with relevant exposure history and illness compatible with influenza, regardless of severity, be tested. New guidance as of June 7, 2013:

SFDPH UPDATED GUIDANCE FOR H7N9 TESTING: (see <http://emergency.cdc.gov/HAN/han00347.asp>)

Patients who meet **both** the clinical and exposure criteria described below should be considered for H7N9 testing by reverse-transcription polymerase chain reaction (RT-PCR) methods.

Clinical: New-onset severe acute respiratory infection **requiring hospitalization** (i.e., illness of suspected infectious etiology that is severe enough to require inpatient medical care in the judgment of the treating clinician), **and** for whom no alternative infectious etiology is identified; **AND**

Exposure: Recent travel (within 10 days of illness onset) to areas where human cases of H7N9 have become infected or to areas where avian influenza A (H7N9) viruses are known to be circulating in animals¹, **or** who have had recent close contact² (within 10 days of illness onset) with confirmed cases of human infection with H7N9.

ADDITIONAL H7N9 RECOMMENDATIONS

CDC and SFDPH local recommendations for Infection Control, Specimen Collection and Routing, and Antiviral Treatment of suspected H7N9 cases, as summarized in our previous H7N9 Health Advisory, dated May 1, 2013, remain current. The document is available at: <http://sfcdcp.org/healthalerts.html>

¹ As of June 3, 2013, China was the only country where H7N9 viruses were known to be circulating in animals or where human cases have become infected. Patients with direct or close contact with wild birds or poultry, or animal settings, such as live poultry markets while traveling in these areas should be strongly considered for H7N9 testing. For more information on countries affected, please see the CDC avian influenza A (H7N9) information page at <http://www.cdc.gov/flu/avianflu/h7n9-virus.htm>.

² Close contact may be regarded as coming within about 6 feet (2 meters) of a confirmed case while the case was ill (beginning 1 day prior to illness onset and continuing until resolution of illness). Close contact includes healthcare personnel providing care for a confirmed case, family members of a confirmed case, persons who lived with or stayed overnight with a confirmed case, and others who have had similar close physical contact.