

The objective of the bulletin is to report new heath events occurring outside and inside EpiSouth area that have potential implications on EpiSouth population. It does not aim to provide an exhaustive review of international alerts. Since 2006, The French public health Institute (InVS) is issuing an online epidemic intelligence bulletin (Bulletin hebdomadaire International - BHI). In order to limit duplication and to make this already verified information available to a larger audience, information relating to health events of interest for EpiSouth population are translated and integrated in the relevant e-web sections. Despite all verifications, WP6 team would not be responsible for potential errors. The recipient is responsible for the cautious use of this information. Note that may be made of the information contained in this report. Data maps and commentary used in this document do not imply any opinion of EpiSouth countries or its partners on the legal status of the countries and territories shown or concerning their borders.

INDEX e-WEB n°149

- A(H5N1) Human influenza Egypt
- A(H5N1) Avian influenza South Korea, Japan
- "INSIDE" Events: none
- "OUTSIDE" events:
 - Acute Flaccid Paralysis (AFP) Haiti
 - Crimean Congo Hemorrhagic Fever (CCHF) India

Location: Egyp	t Event:	A(H5N1) – Human	<u>Comments</u>
e sth			 The available information do

- On 26th January 2011, the Egyptian Ministry of Health reported a new A(H5N1) human infection.
- The 122nd case is:
 - A 7 year-old child from Gharbia governorate (cf. map1)
 - The child is hospitalised, he was treated by tamiflu and is in stable condition
 - Exposure to sick/dying poultry was documented.
- In Egypt, the last human case was reported on 18th January 2011 in Alexandria Governorate (<u>cf. eWEB n°148</u>)
- Since the 1st case of bird flu in Egypt, the case count is 122 cases including 40 deaths.

On 19th January 2011, the South Korean authorities reported to FAO an A(H5N1) avian influenza outbreak in 2 poultry farms located in

the Gyeonggi-do province, where the capital Seoul is located (cf.

In South Korea, the last A(H5N1) epizootics were reported on 29th December 2010 in poultries in Chungcheongnam-do and Jeolla

To date, no human avian influenza case has been reported in South

The available information does not indicate a change in the epidemiology of the virus in Egypt.

Map 1. Gharbia governorate, Egypt



Location: South Korea

provinces (cf. eWEB n°146).

map 2).

Korea.

Event: A(H5N1) – Epizootic

Comments

Map 2. Gyeonggi-do province, South Korea



Location: Japan

Event: A(H5N1) – Epizootic

<u>Comments</u>

- On 23rd January 2011, the Japanese health authorities reported to FAO an A(H5N1) avian influenza outbreak in wild birds located in the Tohoku region, located at the North East of Honshu island (cf. map 3).
- In addition, an other highly pathogenic A(H5) avian influenza outbreak was reported in poultry farms in the Kyushu-Okonawa area, at the south of the island (the neuraminidase inhibition assays are on going).
- In Japan, the last A(H5N1) epizootic were reported on 21st December 2010 in captive wild birds (zoo) in Hokuriki region (cf. eWEB n°144).
- To date, no human avian influenza case has been reported in Japan.



REPORT OF NEW HEALTH EVENTS OCCURRING OUTSIDE THE EPISOUTH AREA (Not occurring in one or several EpiSouth countries)

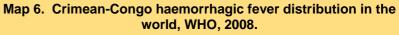
Acute Flaccid	
Area: Haiti Event: Acute Hacold Paralysis (AFP)	
 Between mid-November and end of December 2010, a cluster of 7 AFP cases including 4 deaths have been reported in Port-de-Paix, North of Haiti (cf. map 4). Among the 7 cases, 5 are male. Neurological signs appeared within 24 to 72 hours following the end of the cholera treatment. They included hypotonia followed by a bilateral ascending flaccid paralysis, reaching the respiratory muscles. A WHO investigation is on going in the area to determine whether the etiology is toxic (due to drugs, chemicals,) or infectious (poliovirus or other enteroviruses,). In the frame of the WHO polio eradication initiative, the formal exclusion of a polio diagnosis is necessary in front of an AFP. 	<text><list-item><list-item></list-item></list-item></text>

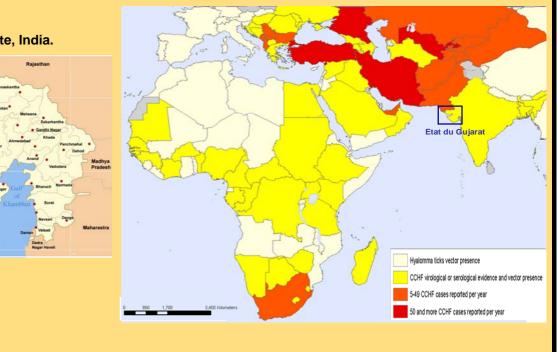


Page 2/3

REPORT OF NEW HEALTH EVENTS OCCURRING <u>OUTSIDE</u> THE EPISOUTH AREA (Not occurring in one or several EpiSouth countries)

 On 18th January 2011, Indian health CCHF virus is present in many control 	
 authorities reported 5 Crimean-Congo Hemorrhagic fever (CCHF) infections in the Gujarat State (West of the country), at the border with Pakistan (cf. map 5). Among the 5 CCHF cases: 3 died: the index case and 2 health care workers; 2 others are still under treatment: the index case's husband and additional health care worker. Active case finding has been set up in hospitals and at community level. Surveillance in domestic animals has been implemented too. To date, no additional cases have been detected. Active case, no additional cases have been detected. Active case finding has been set up in hospitals and at community level. Surveillance in domestic animals has been implemented too. 	HF was circulating with urkey, Islamic Republic es and Eastern Asia d. In Pakistan, cases are ological studies found numans and domestic outh of the country. are the first CCHF r reported in India. In Pakistan, cases are ological studies found numans and domestic outh of the country. are the first CCHF r reported in India. In Pakistan, cases are onfirmation. In Pakistan, the ecosystem of countries and the dia, the occurrence of





Map 5. Gujarat state, India.

PAKISTAN

ate of Gujarat, INDI