

Chinese Notifiable Infectious Diseases Surveillance Report

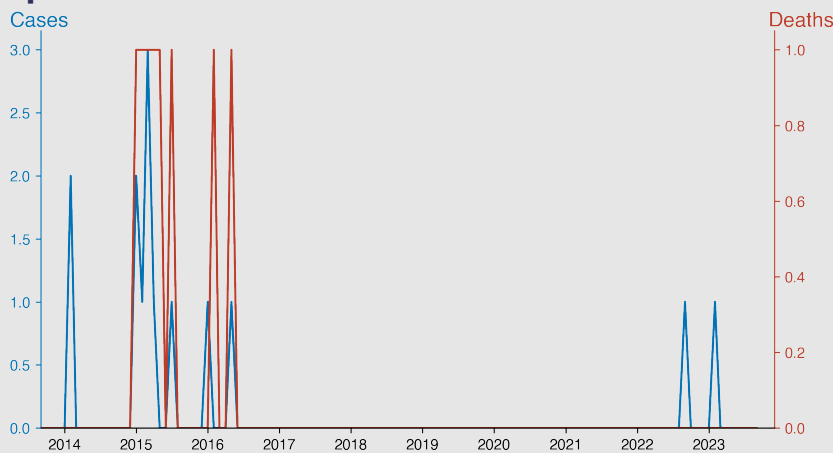
Human infection with H5N1 virus

September 2023

Introduction

Human infection with H5N1 virus, a highly pathogenic avian influenza strain, occurs when the virus crosses the species barrier from infected birds to humans. First identified in 1997 during an outbreak in Hong Kong, the virus has since caused sporadic infections globally, primarily in Asia and the Middle East. Transmission to humans typically involves direct or close contact with infected live or dead birds. H5N1 is concerning due to its high mortality rate in humans and the potential for pandemic spread if it gains the ability to transmit efficiently between people.

Temporal Trend



Highlights

Cases of the H5N1 virus in mainland China display a sporadic and infrequent pattern since it was first recognized in 2010, with a notable absence of consistent outbreaks.

- A particularly high case spike occurred in early 2015, with a total of seven reported infections, some of which led to fatalities. Since 2015, the prevalence has reduced significantly.
- Since 2018, no H5N1 cases were detected until September 2022, when a single infection was reported, followed by another in February 2023. No deaths were recorded from these cases.
- As of September 2023, the disease situation sees no active H5N1 infections. The apparent control of H5N1 suggests successful public health measures and control efforts.

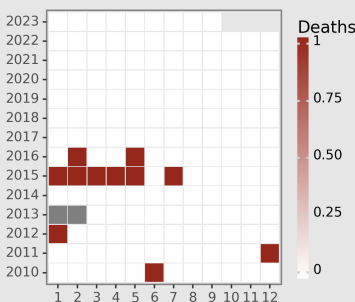
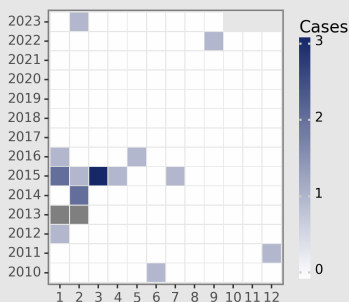
Cases Analysis

From the data set spanning 2010 to 2023, there were sporadic occurrences of human H5N1 virus infections in mainland China, with most months reporting no cases at all. The periods of 2015 and 2014 saw a slight upsurge, with 2015 having the highest record of cases at 8 in total. Despite these occasional peaks, the general trend depicts a very low prevalence rate for the virus in mainland China, and infection instances are largely isolated.

Deaths Analysis

The mortality rate from the H5N1 virus in mainland China is conspicuous by its occasional, but not regular occurrence. The years 2010, 2011 and 2012 each have reported death cases. 2015 observed the highest mortality with 4 deaths, however, the succeeding years saw a substantial decrease in deaths. The fatality rate appears sporadic and underscores the relatively low lethality of the H5N1 virus in the given period. The few fatalities coupled with isolated cases depict a scenario where the virus, although deadly, was not a prominent threat.

Distribution



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