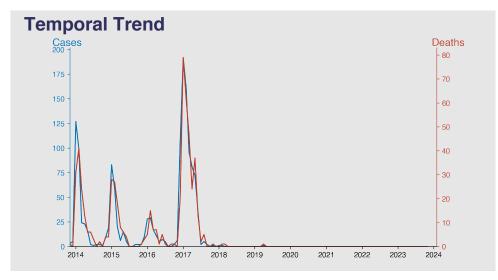
Chinese Notifiable Infectious Diseases Surveillance Report

Human infection with H7N9 virus

November 2023

Introduction

The H7N9 virus is a strain of influenza found mostly in birds. It first emerged in China in 2013, causing severe respiratory illness in humans. Through exposure to infected poultry or contaminated environments, H7N9 can occasionally infect humans and potentially cause serious disease, including pneumonia and acute respiratory distress syndrome. It is important to note that sustained human-to-human transmission of H7N9 has not yet been reported. International vigilance and cooperation remain crucial due to the virus's pandemic potential.



Highlights

High infection rate in 2014 and 2017: H7N9 virus saw two major waves in mainland China, peaking during the early months of 2014 and 2017, registering the highest numbers in cases and deaths.

- 2. Diminishing trend after 2017: Notably, after the last significant wave in 2017, the infection trends sharply down, with minimal cases, and eventually zero, observed since late 2018.
- 3. No new cases or deaths since 2019: The data reveal a stable state with no reported cases or deaths due to the H7N9 virus in mainland China from 2019 until the most recent record in November 2023.
- 4. High fatality rate during outbreaks: From the data, the fatality rate during major outbreaks was considerable, hinting at the high potential lethality of the virus.

Cases Analysis

From late 2013 until 2023, the data exhibits distinct fluctuations of human H7N9 infections in mainland China. High levels of cases were reported particularly in early 2014 and 2017, with sharp spikes observed in January of those years. The highest number of reported cases occurred in January 2017 (192 cases). Overall, the trend indicates a decrease in H7N9 cases from mid-2017, with no reported cases from July 2018 through 2023.

Deaths Analysis

The number of recorded deaths due to H7N9 virus also shows a peak in early 2014 and 2017, with the highest fatalities reported in January and February of 2017, accounting for 79 and 61 deaths, respectively. However, the trend from mid-2017 suggests a significant reduction in H7N9-related mortality, similar to the infection rate, with no reported deaths from July 2018 onward. The overall data suggests that mortality fluctuated in synchrony with reported H7N9 cases over the years.



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