LENAWEE COUNTY
HEALTH DEPARTMENT

HEALTH INFORMATION FOR HEALTH CARE PROVIDERS

For more information, contact:
Meredith Mackey, Public Health Nurse, Phone: (517) 264-5243, Fax: (517) 264-0790, meredith.mackey@lenawee.mi.us
Susie Dice, Emergency Preparedness Coordinator: (517) 264-5209, Fax: (517) 264-0790, Susie.dice@lenawee.mi.us

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Highly Pathogenic Avian Influenza (HPAI) Information

On February 24, 2022, HPAI was detected in a non-commercial backyard flock in Kalamazoo County. **As of now, no additional cases of HPAI have been detected in Michigan.** Cases of HPAI continue to be detected in other states. **These HPAI detections do not present an immediate public health concern and no human cases of these avian influenza viruses have been detected in the United States.**

While CDC considers the current risk to the general public from these HPAI A(H5) virus detections in U.S. wild birds and poultry to be low, risk depends on exposure, and people with more exposure may have a greater risk of infection. Sporadic human infections with HPAI A(H5) bird flu viruses in the U.S. resulting from close contact with infected birds/poultry would not be surprising given past human infections that have occurred sporadically in other countries and would not significantly change CDC's risk assessment.

Infected birds shed avian influenza A viruses in their saliva, mucous and feces. Human infections with bird flu viruses can happen when enough virus gets into a person's eyes, nose or mouth, or is inhaled. People with close or prolonged unprotected contact with infected birds or contaminated environments may be at greater risk of infection. There is no evidence that any human cases of avian influenza have ever been acquired by eating properly cooked poultry products.

Illnesses in humans from avian influenza A virus infections have ranged from mild (e.g., eye infection, upper respiratory symptoms) to severe illness (e.g., pneumonia) resulting in death. The spread of avian influenza A viruses from one sick person to another is very rare, and when it has happened, it has not led to sustained spread among people. The spread of bird flu viruses from one infected person to a close contact is very rare, and when it has happened, it has only spread to a few people. However, because of the possibility that bird flu viruses could change and gain the ability to spread easily between people, monitoring for human infection and person-to-person spread is extremely important for public health.

Poultry owners and caretakers should watch for unusual deaths, a drop in egg production, a significant decrease in water consumption, or an increase in sick birds. If avian influenza is **suspected**, contact MDARD **immediately** at 800-292-3939 (daytime) or 517-373-0440 (after-hours).
https://www.michigan.gov/mdard/about/media/pressreleases/2022/02/24/highly-pathogenic-avian-influenza-detected-in-michigan-backyard-flock

Recommendations for Surveillance, Testing, and Investigation. Clinicians should consider the following for surveillance and testing:

People at greatest risk for potential exposure are those who have been in contact with birds from commercial or backyard flocks that have tested positive for an avian influenza A/H5 virus.

1. Consider the possibility of infection with novel influenza A viruses with the potential to cause severe disease in humans in patients who present with influenza-like illness (ILI) or acute respiratory infection (ARI) symptoms. The reported signs and symptoms of bird flu virus infections in humans have ranged from no symptoms or mild illness [such as eye redness (conjunctivitis) or mild flu-like upper respiratory symptoms], to severe (such as pneumonia requiring hospitalization) and included fever (temperature of 100ºF [37.8ºC] or greater) or feeling feverish (fever may not always be present), cough, sore throat, runny or stuff nose, muscle or body aches, headaches, fatigue, and shortness of breath or difficulty breathing. Less common signs and symptoms include diarrhea, nausea, vomiting, or seizures.

   AND who have had recent direct or close contact (**particularly unprotected exposure, e.g., without use of respiratory protection and eye protection)**[1] <10 days prior to illness onset to the following birds with known or suspected avian influenza A virus infection:

   1. Domestic poultry (e.g., sick or dead chickens or turkeys)
   2. Captive birds of prey (e.g., sick, dead, or well-appearing falcons that have had contact with wild aquatic birds)
   3. Wild aquatic birds (e.g., sick, dead, or well-appearing ducks, geese, swans).
2. If infection with a novel influenza A virus with the potential to cause severe disease in humans is suspected, respiratory specimens should be collected while following recommended infection control precautions. The Michigan Department of Health and Human Services (MDHHS) should be notified at Division of Communicable Disease: 517-335-8165 (during office hours) and 517-335-9030 (after hours) as soon as possible, and respiratory specimens should be sent to the state health department for immediate testing. Please also contact the local health department in the county in which the patient lives.

[1] Exposure, especially unprotected exposure (e.g., without use of respiratory protection and eye protection) may include: direct contact with birds (e.g., handling, slaughtering, defeathering, butchering, preparation for consumption); or direct contact with surfaces contaminated with feces or bird parts (carcasses, internal organs, etc.); or prolonged close exposure to birds.

[2] For questions or concerns about possible human infection in patients with exposures to birds not listed here, please contact CDC. Exposures that occur in geographic regions in the United States where newly detected HPAI A(H5) viruses are of most concern.

3. **Specimen Collection**:

   - A nasopharyngeal swab, or
   - A nasal aspirate or wash, or
   - Two swabs combined into one viral transport media vial (e.g., nasal or nasopharyngeal swab combined with an oropharyngeal swab). (If these specimens cannot be collected, a single nasal, or oropharyngeal swab is acceptable. Endotracheal aspirate or bronchoalveolar lavage fluid may be preferred for patients with lower respiratory tract illness. Swab specimens should be collected using swabs with a synthetic tip and an aluminum or plastic shaft.)

For more Information:

https://www.michigan.gov/mdard/animals/diseases/avian/avian-influenza

https://www.cdc.gov/flu/avianflu/index.htm

https://www.michigan.gov/mdard/about/media/pressreleases/2022/02/24/highly-pathogenic-avian-influenza-detected-in-michigan-backyard-flock

https://www.michigan.gov/documents/emergingdiseases/MDHHS_HPAI_Monitoring_Protocol_FINAL_20150612_491697_7.pdf

https://www.michigan.gov/documents/emergingdiseases/Suspect_AI_H5_Flu_Data_Collection_Form_-_May_2015_490177_7.pdf

https://www.michigan.gov/documents/emergingdiseases/Education_for_HPAI_Exposed_Individuals_491696_7.pdf

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https://www.michigan.gov/documents/mdhhs/MDHHS_Interim_Guidance_for_Novel_Influenza_Home_Isolation_2.10.17_602634_7.pdf