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HEALTH ADVISORY: Summer Monitoring for Novel Influenza A Virus Infections

July 3, 2024

Dear Colleagues,

We hope this message finds you well. Benton County is sharing an Oregon Health Authority (OHA) Summer Monitoring for Novel Influenza A (H5N1) advisory.

To date, H5N1 surveillance includes (list not exhaustive): 3 human H5N1 cases have been reported in the United States (Texas & Michigan) during 2024. The 3 human cases were associated with dairy cattle exposure. No cases have been reported in Oregon as of today (July 3, 2024). 32 American dairy herds have been affected. 12 dairy cow outbreaks have been reported. Please see [CDC's Avian Influenza Surveillance](#) site for more information.

OHA's H5N1 recommendations for clinicians are as follows: **All patients seeking care for influenza-like illness outside of the influenza season should be asked about cattle and pig exposure, fair attendance, and contact with birds with known or suspected avian influenza virus infection. Patients who report cattle and pig exposure, fair attendance, or contact with ill animals should have a nasopharyngeal swab collected in viral transport medium for [molecular testing at Oregon State Public Health Laboratory](#).**

Empiric antiviral treatment should be started as soon as possible on all patients with possible infection with novel influenza A viruses as they have the potential to cause severe disease in humans. Antiviral treatment should be based on the exposure risk factors outlined above and not be delayed pending laboratory testing.

The complete OHA H5N1 HAN can be reviewed below.

We appreciate your diligence in protecting the health of our collective communities.

Respectfully,

A handwritten signature in blue ink, appearing to read "Carolina Amador".

Carolina Amador, MD, MPH
Public Health Officer

A handwritten signature in blue ink, appearing to read "April Holland".

April Holland
Public Health Administrator



As the multistate outbreak of avian influenza A(H5N1) in dairy cows, poultry and other animals continues and fair season begins, monitoring for novel influenza A virus infections in humans is critical to determine whether these viruses are moving from animals to humans and spreading between humans. Rapid detection of, and treatment for, novel influenza A viruses and efforts to reduce transmission to other people remain important components of national efforts to prevent the emergence of new viruses that could have pandemic potential. **To accomplish this, testing for influenza viruses and monitoring for novel influenza A virus infections should continue year-round.**

Recommendations for Clinicians

All patients seeking care for influenza-like illness outside of the influenza season should be asked about cattle and pig exposure, fair attendance, and contact with birds with known or suspected avian influenza virus infection. Patients who report cattle and pig exposure, fair attendance, or contact with ill animals should have a nasopharyngeal swab collected in viral transport medium for [molecular testing at Oregon State Public Health Laboratory](#).

Empiric antiviral treatment should be started as soon as possible on all patients with possible infection with novel influenza A viruses as they have the potential to cause severe disease in humans. Antiviral treatment should be based on the exposure risk factors outlined above and not be delayed pending laboratory testing. Choice of antiviral drug depends upon clinical severity. For outpatients with uncomplicated mild illness, treatment with a neuraminidase inhibitor (oral oseltamivir, inhaled zanamivir, IV peramivir) or oral baloxavir can be used. For outpatients with severe, progressive, or complicated illness, or for hospitalized patients, oral oseltamivir should be administered. For information on dosing and duration of antiviral therapy, see CDC's [interim guidance on the use of antiviral medication for treatment of human infections with novel influenza A viruses associated with severe human disease](#).

Recommendations for Laboratories

Oregon Health Authority (OHA) currently asks all Oregon hospital laboratories to submit all influenza-positive specimens from hospitalized patients for subtyping and species typing to the Oregon State Public Health Laboratory (OSPHL) to bolster surveillance for novel influenza cases and strains, including highly pathogenic avian influenza A(H5N1). In addition, all laboratories are required to submit any specimen exhibiting atypical features on their assays (e.g., un-subtypeable) for further characterization. Please review the complete guidance for [Submitting Specimens for 2024 Off-Season Influenza Surveillance](#) (pdf) for laboratories.

Oregon 24/7 disease reporting: 971-673-1111