

# 6 Protection of human beings

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## 6.1 How are people infected?

Direct contact with an infected bird, poultry, or spaces and surfaces and objects contaminated by their faeces, is presently considered the main route of human infection. As infected birds shed large quantities of virus in their faeces, opportunities for exposure to infected droppings or to environments contaminated by the virus are abundant under such conditions. Exposure is considered most likely during slaughtering, defeathering, butchering, and preparation of poultry for cooking.

### What precautions should be taken by people involved in the food chain?

#### Vaccination for public health purposes:

Health authorities may consider vaccination against seasonal influenza for persons at risk of occupational exposure to the H5N1 virus. Vaccination against seasonal influenza is a public health measure aimed at reducing opportunities for the virus to re-assort during co-infection of a human with both avian and currently circulating human influenza viruses. At least some pandemic viruses are known to have emerged following a re-assortment event. Vaccination against seasonal influenza will not protect people against infection with the H5N1 virus; no vaccine against H5N1 is presently available.

Persons who are in close contact with live animals including birds and poultry should wash their hands frequently with soap, particularly after change of a process.

Persons undertaking slaughtering and those in selling operations should wear clean, light coloured protected clothing, including clean aprons and rubber boots everyday and avoid wearing the same clothes and boots while returning home.

Following slaughter and processing, the concerned persons should preferably take a bath at the market personnel facilities or change into clean clothes and shoes after washing hands, arms and feet thoroughly with soap and potable water and drying with clean towel / cloth.

Food handlers /consumers should avoid buying live animals (poultry) and then slaughtering them at home / food service establishments.

Food handlers / consumers involved in food processing / preparation should wash their hands thoroughly with soap and warm water. They should clean and disinfect equipment and surfaces in contact with the meat products.

All concerned persons at risk, both environmentally and occupationally<sup>23</sup>, should be vaccinated with the current WHO recommended influenza vaccine as soon as possible, to avoid simultaneous infection by human influenza and Avian Influenza. This, however, does not specifically protect against H5N1.

### How do you know if you are infected?<sup>24</sup>

Be aware of the early clinical symptoms of H5N1 infection, but also know that many other common diseases - of far less concern - will show similar early symptoms.

- ◆ Most patients infected with the H5N1 virus show initial symptoms of fever (38.0 C or higher) followed by influenza-like respiratory symptoms, including cough, rhinorrhea, sore throat, and (less frequently) shortness of breath. Watery diarrhoea is often present in the early stages of illness, and may precede respiratory symptoms by up to one week. Gastrointestinal

symptoms (abdominal pain, vomiting) and headache may occur.

- ◆ Check for these signs (especially fever) each day during potential exposure and for 14 days after last exposure.
- ◆ Communicate any symptoms to a designated local physician and provide background information on history of exposure.



Children especially should be made aware of the risks involved in having close contact, or playing with birds (WHO, 2006)

<sup>23</sup> Persons at risk include poultry workers, poultry transport and slaughtering workers, cullers, veterinarians, food inspectors, local health authority personnel and other professional groups.

<sup>24</sup> [http://www.who.int/csr/disease/avian\\_influenza/guidelines/firstoutbreak/en/print.html](http://www.who.int/csr/disease/avian_influenza/guidelines/firstoutbreak/en/print.html)