



**Health, Seniors and Long-Term Care
Public Health**
300 Carlton Street
Winnipeg, Manitoba Canada R3B 3M9

Re: Letter for contacts of avian influenza – important information to protect yourself and your community

You have received this letter because you have been at a location where avian influenza virus has been detected. If you have any questions after reading this letter, please contact your local public health office or Health Links – Info Santé at 204-788-8200 or toll-free at 1-888-315-9257.

What is avian influenza?

Avian influenza is a contagious viral infection that mainly affects birds but can sometimes infect humans and other mammals. Human infections with avian influenza are rare and usually occur after close contact with infected birds or highly contaminated environments such as poultry farms or live animal markets. Most avian influenza viruses are rarely spread from person-to-person.

What is the risk to me?

Although the risk is generally low, it is possible for people to become infected with an avian influenza virus if they have contact with a living or dead infected bird or animal or its feces, respiratory secretions, products or contaminated surfaces. Another concern is if a person is infected with both an avian influenza virus and a human influenza virus at the same time. The two viruses can exchange information leading to mutations in the virus. Mutations in influenza viruses can allow them to spread more easily between people or cause more severe illness. When these changes occur, there is the risk that large scale human outbreaks may start. For this reason, it is important for everyone to follow public health and workplace safety recommendations to help prevent outbreaks.

How do I protect myself and others when exposed to an avian influenza outbreak?

The following safety guidelines should be followed when at a site with an avian influenza outbreak:

- You should receive the current season's influenza vaccine as soon as possible and ideally two weeks before planned work or other exposure. Although the vaccine will not protect you from avian influenza, it will lower your risk of being infected with both avian and human influenza viruses at the same time. The vaccine can be obtained free from your local pharmacy, health care provider or public health. For more information on where to access the vaccine, please visit: manitoba.ca/respiratoryviruses/vaccinefinder.html.
- Follow personal protective measures while exposed including wearing disposable gloves, protective clothing and shoes, safety goggles and disposable fit-tested masks (particulate respirators, N95 type). After contact with living or dead infected birds or animals, products or contaminated surfaces and after removal of personal protective equipment, wash your hands with soap and water thoroughly for at least 15 seconds. Full safety precautions should be reviewed with your supervisor and/or workplace health and safety representative before entering the site.

- Watch for signs of illness such as fever, respiratory symptoms (e.g., cough, sore throat, runny nose, and difficulty breathing), eye irritation including redness or tearing, or other flu-like symptoms for 10 days after your last exposure to live or dead avian influenza-infected birds or animals, products, secretions or contaminated surfaces. Early symptoms may also include diarrhea or vomiting.
- If you have had significant exposure to the infected birds or animals or contaminated surfaces without wearing protective equipment, it is recommended that you see your health care provider within 24 to 48 hours to discuss if you should receive treatment to prevent infection. Post-exposure treatment may be recommended for people at higher risk of complications from influenza or have had intense exposures.

If you develop symptoms:

- Seek immediate medical care. Notify the health care provider of your exposure to avian influenza and take this letter from public health with you so they can take proper precautions and prescribe appropriate testing and treatment. Treatment is most effective if given within 48 hours of onset of symptoms so see your physician right away.
- Notify Health Links – Info Santé at 204-788-8200 or toll-free at 1-888-315-9257, who will notify your local public health office that you have developed symptoms. Your local public health office will contact you.
- You may wish to notify your workplace health and safety representative, if applicable.
- Except for visiting your health care provider, stay home and minimize contact with others until you are advised by your local public health office that you can return to normal activities (usually 24 hours after you no longer have symptoms).

For more information, please visit:

- Manitoba Health: www.gov.mb.ca/health/publichealth/environmentalhealth/avian.html
- Manitoba Agriculture: www.gov.mb.ca/agriculture/animal-health-and-welfare/animal-health/avian-influenza-and-your-farm.html
- Health Canada: www.canada.ca/en/public-health/services/diseases/avian-influenza-h5n1.html
- Canadian Food Inspection Agency: inspection.canada.ca/animal-health/terrestrial-animals/diseases/reportable/avian-influenza/eng/1323990856863/1323991018946

Sincerely,

Communicable Disease Control Unit
Public Health Division
Health, Seniors and Long-Term Care

FOR HEALTH CARE PROVIDERS

Guidance for testing and treatment post-avian influenza exposure in someone with symptoms:

If the patient is presenting with fever, respiratory symptoms, conjunctivitis or other influenza-like illness with symptom onset within 10 days of last exposure to live or dead avian influenza infected animals, products, secretions or contaminated surfaces, please do the following:

- Use airborne, droplet and contact precautions when in contact with the patient (i.e.: fit-tested N95 respirator, protective eye wear, gowns, and gloves). Perform hand hygiene with donning and doffing of personal protective equipment. For more information, see Appendix VIII and IX– Elements That Comprise Airborne, Droplet and Contact Precautions in the Routine Practices and Additional Precautions document: www.gov.mb.ca/health/publichealth/cdc/docs/ipc/rpap.pdf.
- Notify the local public health office by completing a clinical notification form found here: www.gov.mb.ca/health/publichealth/cdc/protocol/mhsu_0013.pdf.
- Obtain a nasopharyngeal swab for influenza virus testing. On the laboratory requisition, specify under clinical indication/history: “Exposure to avian influenza”.
- Prescribe antiviral treatment, unless contraindicated. Oseltamivir is the preferred treatment. Ideally, treatment should be started within 48 hours of symptoms onset but can be considered if patient is presenting after that. Note: if avian influenza infection is suspected, antiviral treatment should be provided without delay; waiting for laboratory confirmation is not recommended. If laboratory testing is negative for influenza virus, antiviral treatment can be stopped.

Guidance for post-exposure antiviral prophylaxis for individuals who have had significant avian influenza exposure and are asymptomatic:

Prophylaxis with influenza antiviral medications can be considered for the purposes of protecting the individual and/or preventing further transmission. Prophylaxis can be started up to 10 days after the last exposure. Canadian guidelines for H5N1 recommend offering prophylaxis to those at high risk of exposure to avian influenza, and consideration of prophylaxis to those at intermediate risk of exposure to avian influenza. To assess the risk level to the exposure of avian influenza, consider the following factors:

- the use of PPE, and whether any breaches occurred,
- the type and duration of exposure (e.g. farm workers working directly with affected birds/ animals or contaminated surfaces, open air vs closed air environment),
- the time since exposure.

Refer to Table 1 in section 11.4.1 of the Interim Public Health Guidelines for H5N1 Avian Influenza for further information on exposure categories:

www.gov.mb.ca/health/publichealth/environmentalhealth/docs/avian_interim_guidelines.pdf. The decision to initiate post-exposure antiviral prophylaxis should also consider factors such as the individual's underlying medical condition and risk of progression to severe disease.

If post-exposure antiviral prophylaxis is initiated, treatment dosing for oseltamivir (twice daily dosing) has been recommended instead of the typical antiviral prophylaxis regimen (once daily) used for seasonal influenza. Antiviral post-exposure prophylaxis should begin as soon as possible (ideally within 48 hours) after the first exposure to the symptomatic confirmed or probable case and should be provided for 10 days.