



The objective of the bulletin is to report new health events occurring outside and inside EpiSouth area that have potential implications on EpiSouth population. It does not aim to provide an exhaustive review of international alerts. Since 2006, The French public health Institute (InVS) is issuing an [online](#) epidemic intelligence bulletin (Bulletin hebdomadaire International - BHI). In order to limit duplication and to make this already verified information available to a larger audience, information relating to health events of interest for EpiSouth population are translated and integrated in the relevant e-web sections. Despite all verifications, WP6 team would not be responsible for potential errors. The recipient is responsible for the cautious use of this information. Neither the European Commission nor any person acting on behalf of the Commission is liable for the use that may be made of the information contained in this report. Data maps and commentary used in this document do not imply any opinion of EpiSouth countries or its partners on the legal status of the countries and territories shown or concerning their borders.

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- A(H5N1) Human influenza – Egypt
- A(H5N1) Avian influenza – China (Tibet)
- “OUTSIDE” Events: None
- “INSIDE” Events:
 - France – Imported Chikungunya

| Area: | Event: | A(H5N1) – Human | <u>Comments</u> |
|-------|-----------------|--|--|
| Egypt | A(H5N1) – Human | <p>Egyptian authorities reported to WHO 3 human A(H5N1) influenza cases:</p> <ul style="list-style-type: none"> • A 25 year-old pregnant woman, from Cairo governorate: <ul style="list-style-type: none"> ✓ Symptomatic on April 6th 2009; ✓ Hospitalised on April 11th; ✓ Notified on April 21st; ✓ To date, her condition is critical; • A 33 year-old woman, from Kafr El Sheikh governorate: <ul style="list-style-type: none"> ✓ Symptomatic on April 7th 2009; ✓ Hospitalised on April 15th; ✓ Notified on April 17th; ✓ To date, her condition is critical; • A 18 month-old girl, from Kafr El Sheikh governorate: <ul style="list-style-type: none"> ✓ Symptomatic on April 15th 2009; ✓ Hospitalised on April 18th; ✓ Notified on April 21st; ✓ To date, her condition is stable and satisfactory; ✓ This case has no link with the 33 year-old woman from the same governorate mentioned above. • Contacts with sick or dead poultry were reported for the 3 cases. | <ul style="list-style-type: none"> • Available information does not indicate a change in the transmission of the virus. |

| Area: | Event: | A(H5N1) – Epizootic | <u>Comments</u> |
|---------------|---------------------|---|--|
| China (Tibet) | A(H5N1) – Epizootic | <ul style="list-style-type: none"> • On April 19th 2009, Chinese authorities reported a new A(H5N1) outbreak among poultry in Tibet. • The last avian outbreak in Tibet was notified in December 2008. | <ul style="list-style-type: none"> • The occurrence of avian A(H5N1) outbreaks in China is not an unexpected event. |

**REPORT of NEW HEALTH EVENTS OCCURRING OUTSIDE THE EPISOUTH AREA
(not occurring in one or several EpiSouth countries)**

No events reported this week

REPORT of NEW HEALTH EVENTS OCCURRING INSIDE THE EPISOUTH AREA
(Occurring in one or several EpiSouth countries)

Area: France **Event:** Imported chikungunya infection

Comments

- The European Travel and Tropical Medicine Network (EuroTravNet) has reported an imported chikungunya case, in Marseille, France. The diagnosis was lab confirmed through molecular tests.
- The patient is a French woman:
 - ✓ Returning from a 2-day stay in Singapore (from 2 to 4 March 2009). No excursion out of Singapore or other international travels in the previous month were reported.
 - ✓ Documented exposures were: Botanic gardens, Rain forest, Sentosa Island, Little India and Chinatown.
 - ✓ She developed fever, polyarthritis, and rash on 6 March 2009.
- According to the Global surveillance programme of the International Society of Tropical Medicine, the only one travel-related case of chikungunya attributed to Singapore occurred in a US traveller in January 2009.
- Autochthonous chikungunya vector-borne transmission has never been documented in metropolitan France: cf. [eWEB n°18](#).
- The occurrence of imported chikungunya cases in France from endemic areas is not an unexpected event and does not constitute an alert.
- The peak of *Ae. albopictus* activity occurs during the rainy season in South and South East Asia: from May to September, corresponding also to the peak for metropolitan France:
 - ✓ In 2007, 52% of imported cases occurred during this period and 55% in 2008

- Chikungunya and Dengue are notifiable diseases in metropolitan France. The surveillance is reinforced in Albo+ areas during the period of *Ae. albopictus* activity.
- The entomological surveillance has shown that the mosquito presence progressed in Southern France (from 2 to 4 departments between 2003 and 2008).
- Regarding the Mediterranean area, this event is interesting considering the geographic spread of *Ae. albopictus* which has probably grown in southern Europe.
- The chikungunya outbreak in Italy in July 2007 demonstrated the real risk of transmission in Southern Europe and the need to implement preventive and control measures.
- There is no entomological data from Southern Mediterranean countries. Entomological evaluation is needed as climatic conditions are similar in neighbouring Mediterranean coasts.

Map 4. Ratio of imported chikungunya cases per 100,000 habitants, by laboratories, by department of cases residence, from April 2005 to December 2007. (source: [InVS](#))

