



International Health
Surveillance Division (IHS)

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Department of Health
Bureau of Quarantine
International Health Surveillance Division
Quarantine Services and International Health Surveillance System (QSIHSS)
Health Information Update

Source: WHO, Event Information Site for IHR National Focal
Event Updates: 03 June 2019 to 04 June 2019

Event Updated	Country	Hazard	Disease	Event Description	IHR Assessment
2019-06-04	United States of America (the)	Infectious	Influenza due to identified avian or animal influenza virus A(H1N1)v	<p>On 1 June 2019, the United States IHR National Focal Point (NFP) informed PAHO/WHO of human infection with influenza A(H1N1) variant virus (A(H1N1)v). According to the report, on 3 May 2019, an adult >65 years of age with multiple underlying medical conditions developed an influenza-like illness in Michigan. Symptoms included chills, cough, shortness of breath and fatigue. The patient sought medical care at an emergency department on 5 May; and was admitted to the hospital as a result of their illness and a respiratory specimen obtained.</p> <p><u>This is the first influenza A(H1N1)v virus identified in the United States so far during 2019.</u> The patient has completely recovered. While no exposure to swine has been reported to date, and there is no history of recent travel, an investigation is ongoing into the source of the patient's infection, as well as contact follow up to exclude further human-to-human transmission.</p> <p><i>WHO does not advise special traveler screening at points of entry or restrictions</i> with regard to the current situation of influenza viruses at the human-animal interface.</p>	Public Health Risk
2019-06-03	Cameroon	Infectious	Poliomyelitis Acute Paralytic, Vaccine Associated	<p>On 23 May 2019, WHO received notification through the Global Polio Laboratory Network (GPLN) of the detection of circulating vaccine-derived poliovirus type 2 (cVDPV2) from an environmental sample collected on 20 April 2019 in Far North province, Cameroon, in Mada Health district bordering Borno state in Nigeria and Chad. In the Far North region, the IPV coverage in 2018 was 73% and 72% for OPV3. The environmental sample collection site is located in Mada hospital. The virus was detected in an environmental sample only – no associated cases of paralysis have been detected so far.</p> <p>Genetic sequencing confirms that it is related to ongoing cVDPV2 outbreak circulating in neighboring Nigeria which originated in Jigawa state and had previously spread to other areas of Nigeria, as well as internationally to the Republic of Niger in 2018. Cameroon had already been participating in outbreak response to the</p>	Public Health Risk



				<p>Nigeria cVDPV2 across the Lake Chad sub region with mOPV2.</p> <p><i>WHO assesses the risk of further international spread of cVDPV2 from the Lake Chad region to be high, given large-scale population movements and subnational immunity and surveillance gaps across the Lake Chad region.</i></p> <p><i>WHO does not recommend any restriction on travel and/or trade to Cameroon</i> based on the information available for the current polio outbreak.</p>
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*A **public health risk** is something that is (or is likely to be) hazardous to human **health** or could contribute to a disease or an infectious condition in humans.

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