Objectives

For surveillance purposes:

- to propose a case definition for reporting cases of avian influenza A(H7N9) virus infection at EU level;
- to propose an algorithm for laboratory investigation of persons requiring testing for infection with the novel avian influenza A(H7N9) virus.

Limitations

This case definition and case finding algorithm have been prepared for surveillance purposes only. They do not provide guidance for clinical diagnosis, nor for management of persons requiring investigation or confirmed cases as this is outside of ECDC’s mandate. However, Member States may wish to adapt the document for this purpose as has already been done by some EU countries with diagnosis management algorithms.

The algorithm and the case definition will be adjusted as the current avian influenza A(H7N9) situation develops.

Current situation for application

- Refer to ECDC Risk Assessments and epidemiological updates for the current situation.
- The rapid availability of specific diagnostic testing for human A(H7N9) in all EU/EEA Member States in National Influenza Centres.

Sources of information

The following information on cases, case definitions and protocols were analysed:


1 Case definition of avian influenza A(H7N9) infection

**Confirmed case:** A patient for which avian influenza A(H7N9) nucleic acid has been detected by RT-PCR according to ECDC/WHO Regional Office Guidance1.

**Probable case:** Not applicable.

**Possible case:** Not applicable.

All confirmed cases should be reported to the national authorities and to ECDC through the EWRS platform.

2 Person requiring laboratory testing for avian influenza A(H7N9) infection

A person with both the following clinical and exposure criteria.

**Clinical criteria:**

A severe acute respiratory infection (SARI)2 with onset within the last 10 days:

1. History of fever or measured fever of ≥ 38° C; AND
2. Cough; AND
3. Requiring hospitalisation for clinical care purposes.

**Exposure criteria:**

1. Recent travel (within 10 days of illness onset) to a risk area3 where human cases of avian influenza A(H7N9) viruses were notified or where avian influenza A(H7N9) viruses are known to be circulating in animals; OR
2. Close contact with confirmed case (within 10 days of illness onset)

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3 Risk area: regions or countries in which transmission of laboratory-confirmed human infection with influenza A(H7N9) is known to have occurred or where influenza A(H7N9) was detected in domestic birds or poultry: http://www.who.int/influenza/human_animal_interface/influenza_h7n9/Data_Reports/en/index.html
3 Algorithm for laboratory testing

A person meeting the clinical and exposure criteria for laboratory testing for avian influenza A(H7N9) infection as defined in section 2 should be investigated using the algorithm below. Member States could consider testing close contacts with a confirmed case presenting with clinical criteria 1 and 2, even if they do not require hospitalisation (criteria 3).