

SWINE INFLUENZA

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The International Civil Aviation Organization has been monitoring events in Mexico, the United States and Canada concerning recent cases of 'swine influenza'. On the 25th of April 2009, the World Health Organization (WHO) convened a meeting of its Emergency Committee, and subsequently determined that the situation represented a 'public health emergency of international concern' under the terms of the International Health Regulations (2005). However, the WHO did not consider that the level of pandemic alert (phase 3) in force at that time should be increased.

On the 27th of April 2009 the WHO Emergency Committee reconvened. It determined that the situation had changed and that the level of pandemic alert be raised from phase 3 to phase 4. This indicates that the probability of a pandemic had increased from 'uncertain' to 'medium to high' and that human to human transmission that is able to sustain a community outbreak has been verified. The WHO considers that containment is no longer possible, as the virus had been identified in three different countries and, therefore, the current focus should be on mitigation measures. Importantly, the WHO recommended **'not to close borders, and not to restrict international travel.'** Further, individuals who are unwell should delay international travel and those developing symptoms following such travel should seek medical attention.

On the 29th of April 2009, in response to the recent outbreak of swine flu that originated in Mexico, the WHO raised its pandemic alert to level 5, characterized by human-to-human spread of the virus into at least two countries in one WHO region. While most countries will not be affected at this stage, the declaration of Phase 5 is a strong signal that a pandemic is imminent and that the time to finalize the organization, communication and implementation of the planned mitigation measures is short. The agency continues to focus efforts on mitigating, rather than containing, the virus.

Given the potential magnitude and unprecedented nature of the threat posed by this influenza outbreak and the catastrophic possible consequences, all countries are encouraged to activate their pandemic preparedness plans, which in our setting is under the National Department of Health.

Frequently asked questions

1. What is swine influenza?

Swine influenza, or "swine flu", is a highly contagious acute respiratory disease of pigs, caused by one of several swine Influenza A viruses. Morbidity (sickness) tends to be high and mortality (death) low (1-4%). The virus is spread among pigs by aerosol, direct and indirect contact, and asymptomatic carrier pigs.

Outbreaks in pigs occur year round, with an increased incidence in the autumn and winter in temperate zones. Many countries routinely vaccinate swine populations against swine influenza.

Swine influenza viruses are most commonly of the H1N1 subtype, but other subtypes are also circulating in pigs (e.g., H1N2, H3N1, and H3N2). Pigs can also be infected with avian influenza viruses and human seasonal influenza viruses as well as swine influenza viruses.

Although swine influenza viruses are normally species-specific and only infect pigs, they do sometimes cross the species barrier to cause disease in humans.

2. What are the implications for human health?

The clinical symptoms are similar to seasonal influenza but reported clinical presentation ranges broadly from asymptomatic infection to severe pneumonia resulting in death. Since typical clinical presentation of swine influenza infection in humans resembles seasonal influenza and other acute upper respiratory tract infections, most of the cases have been detected by chance through seasonal influenza surveillance. Mild or asymptomatic cases may have escaped recognition; therefore the true extent of this disease among humans is unknown.

3. Is it safe to eat pork and pork products?

Yes. Swine influenza has not been shown to be transmissible to people through eating properly handled and prepared pork (pig meat) or other products derived from pigs. The swine influenza virus is killed by cooking temperatures of 160°F/70°C, corresponding to the general guidance for the preparation of pork and other meat.

4. What about the pandemic risk?

It is likely that most people, especially those who do not have regular contact with pigs, do not have immunity to swine influenza viruses that can prevent the virus infection. If a swine virus establishes efficient human-to human transmission, it can cause an influenza pandemic.

5. Is there a human vaccine to protect against swine influenza?

There are no vaccines that contain the current swine influenza virus causing illness in humans. It is not known whether current human seasonal influenza vaccines can provide any protection. Influenza viruses change very quickly.

6. What medicines are available for treatment?

There are two classes of such medicines, 1) adamantine (amantadine and remantadine), and 2) inhibitors of influenza neuraminidase (oseltamivir and zanamivir). Most of the previously reported swine influenza cases recovered fully from the disease without requiring medical attention and without antiviral medicines.

South Africa's Response to the Swine Influenza

On the 28th of April 2009, the National Department of Health in South Africa issued an appeal to members of the public not to panic as a result of the swine influenza (swine flu) as there are no cases reported in South Africa. Adequate measures have been taken to ensure the country's preparedness and response should any case(s) be identified in the country. These measures include, amongst others:

1. Drafting guidelines such as the National Pandemic Influenza Preparedness
2. Plans and Influenza Case Management guidelines.
3. Outbreak Response Teams are operational in all provinces
4. Training of Provincial Rapid Response Teams on Influenza pandemic preparedness and response has been conducted in all provinces.
5. Assessment of capacity for Epidemic Preparedness and Response including Port Health services within the context of International Health Regulations.
6. Heightened clinical and laboratory surveillance are in place to identify any suspected human case(s) of Swine Influenza.

Generally, the Department of Health is working closely with various stakeholders including the National Institute of Communicable Diseases (NICD), Department of Agriculture and the World Health Organization in closely monitoring the situation, and the public is assured of information should any case(s) be identified.

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For more information, visit the following websites:

1. <http://www.icao.int/icao/en/med/guidelines.htm>
2. http://www.who.int/mediacentre/news/statement/2009/h1n1_20090427/en