Influenza (seasonal and zoonotic influenza)

Last update: 2025-05-09

Key facts

- Seasonal influenza refers to different flu viruses that circulate together among humans in the same cyclical or seasonal pattern each year.
- There are around a billion cases of seasonal influenza annually, including 3–5 million cases of severe illness, causing 290 000 to 650 000 respiratory deaths annually.
- Though the viruses which cause seasonal influenza are circulating all the time, different regions tend to be most affected at different times, year after year, based on global position. For instance, seasonal influenza in the northern hemisphere usually peaks between October and March, while the southern hemisphere peak is usually April to September.
- There are many different influenza (flu) viruses, and they often circulate at the same time. Also, some are seasonal, circulating among humans, while others may be zoonotic, transmitted from birds and pigs.

Transmission: Seasonal influenza - Airborne or droplet-borne, direct contact; Avian influenza – Direct or indirect contact with mucous membranes (for example, the eyes, nose or mouth)

** Seasonal influenza **

- When infected people cough, sneeze, blow their nose or spit, they spread small particles or droplets through the air, which are then breathed in by other people
- Direct or indirect contact (for example, through kissing, sharing cups or eating utensils) with infected saliva or nose mucous

** Avian influenza **

- Direct or indirect contact with an infected bird or contaminated items from the bird's environment, such as feathers or eggs
  - For example, if a person touches an infected bird and then touches their own nose, mouth or eyes, the virus can spread to the person

- Though it is not common, there is the chance the virus could mutate once a human has been affected. If this happens, human-to-human transmission (same as seasonal influenza transmission) is possible.

Most vulnerable to severe consequences

- Children under five years old
- Elderly
- People with weakened immune systems or other respiratory problems are at highest risk of severe illness

Most vulnerable to contracting the disease

- Displaced populations and others who live in overcrowded environments

Symptoms

- Cough and runny nose (cough may be dry or may cough up mucous or phlegm)
- Difficulty breathing
- Sore throat
- Muscle aches
- Fever (sometimes)
- Headache (sometimes)
- Tiredness (sometimes)
- Eye inflammation (sometimes)

The severity of the disease will often depend upon the virus causing the infection and the characteristics (e.g, immunity, health status) of the infected individual.

What can you do to prevent and control an epidemic?

Monitoring the community and identifying sick people

- Identify and isolate sick people before they spread the disease to others

Treatment and management

- Referral of serious cases (example: high fever, difficulty breathing, rapid respirations) to health facilities
- Manage and improve nutritional situation, especially of children
  - Encourage exclusive breastfeeding for the first six months of life
- Check the nutritional status of children under five (MUAC screening), refer cases of suspected malnutrition to health services and support nutritional programming

Safe shelters and spaces

- Reduce overcrowding and improve ventilation in living shelters, workplaces, and schools if possible

Hand and respiratory hygiene

- Promote good hand hygiene (handwashing with soap)
- Promote respiratory hygiene and coughing etiquette (cover your cough or sneeze using your sleeve or a tissue, wash hands after coughing or sneezing, do not spit onto the ground or in public)
- Use personal protection (for example, face mask)

Social mobilization and behaviour change

- Find out the specific advice being given by health and other relevant authorities
  - Promote recommended health practices (such as social distancing)
- Model following this advice and inform community members of current health practice advice
- Offer support and encouragement to follow the advice
  - Try to gain understanding about if and why health practice advice is not being followed
  - With the guidance of your supervisor and health authorities, work with communities to overcome barriers to following health advice and recommended practices

Mapping and community assessment

- Make a map of the community.
- Mark the following information on the map:
  - How many people have fallen sick with seasonal/avian influenza? Where?
  - How many people have died? Where? When?
  - Who and where are the vulnerable people?
  - Where are the local health facilities and services? (include traditional healers)
  - ** for avian influenza ** Where are the local poultry farms or bird markets? (include markets that sell live

and dead birds)

- Record the following information on the back of the map:
  - When did people start to fall sick with seasonal/avian influenza?
  - How many people live in the affected community? How many are children under five years? ** Avian Influenza ** How many people work directly with birds on poultry farms, in markets, etc?
  - How common is it for people to live together in crowded spaces? Is there ventilation and fresh air in homes, schools and workplaces?
  - Are children badly affected by seasonal/avian influenza? Are there other groups (specific ages, occupations, geographic areas, etc.) that are badly affected?
  - What are the community's habits, practices and beliefs about caring for and feeding sick people? Consider any differences in roles and responsibilities between women and men.
    - When babies and infants are sick, do women continue to breastfeed them?
  - Is a social mobilization or health promotion programme in place?
  - Which sources do people use/trust the most for information?
    - Are there rumours or misinformation about seasonal/avian influenza? What are the rumours?

Other resources

WHO – World Health Organization; Influenza (Seasonal), 2023

WHO – World Health Organization; Influenza (Avian and other zoonotic), 2023

World Organization for Animal Health; Avian Influenza, 2024

WHO - WHO public health research agenda for influenza: minimizing the impact of pandemic, zoonotic, and seasonal epidemic influenza, 2017 update; 2017

WHO - WHO public health research agenda for influenza: limiting the spread of pandemic, zoonotic and seasonal epidemic influenza, 2017 update. https://iris.who.int/handle/10665/259892; 2017

World Health Organization. (2023). Public health resource pack for countries experiencing outbreaks of influenza in animals. World Health Organization. https://iris.who.int/handle/10665/372248