



EUROPEAN COMMISSION
DIRECTORATE-GENERAL FOR HEALTH AND FOOD SAFETY

Public health
Health Security

Joint Health Security Committee and Chief Veterinary Officers meeting

Friday 24 May – 15:00-17:00

Summary Report Report

Chair: Director-General Sandra Gallina, European Commission, DG SANTE

Participants: AT, BE, CY, CZ, DE, DK, EL, ES, FI, FR, HU, IE, IT, LT, LU, LV, MT, NL, PL, PT, SI, SE, SK, IS, LIE, NO, DG SANTE, DG HERA, EMA, EFSA, ECDC, WHO, USDA, WOA, FDA, CDC, CVOs.

Agenda points

1. Introduction
2. Avian influenza – international situation
3. Zoonotic avian influenza – situation in the EU
4. Conclusion and next steps

Key messages:

1. Introduction and expectations

Opening the meeting the Director General for DG SANTE welcomed the Health Security Committee and Chief Veterinary Officers (CVOs) to this joint meeting dedicated to Highly Pathogenic Avian Influenza (HPAI) to discuss the situation given recent outbreaks in the United States and need for potential EU actions. DG SANTE has been working with Member States, EC services, the European Food Safety Authority (EFSA), the European Centre for Disease Prevention and Control (ECDC) and the EU Reference Laboratory on Avian Influenza to ensure a coordinated response as well as to track a genetic evolution in the virus.

2. Avian Influenza - international situation

The US Department of Agriculture (USDA) gave an update on the situation among cattle, with cases detected in herds in 9 states. USDA said the first cases were detected in Texas, where they began swab tests of cattle and testing milk samples. From initial investigations, it seems there was a single spillover event from wild birds to cattle in late 2023. USDA has put in place measures to avoid spread of the virus, including biosecurity measures, movement requirements for cattle, equipment and vehicles, increased surveillance and testing of cattle including pre-movement testing for inter-state trade. There is consistent evidence to indicate that B3.13 is the prevalent viral genotype, and there have been no significant changes in virus genome to indicate that it is becoming more effective at transmitting to humans. Preliminary investigations show there is cow-to-cow transmission through mechanical transmission around milk, given that raw milk has a high viral load in affected cows. There is so far no evidence of the virus moving from cattle back to wild birds. USDA has been doing outreach and communication targeting producers and private practitioners to encourage monitoring of clinical signs in cattle, submission of samples, and that they have appropriate measures in place to make sure

animals are taken care of. Affected cattle have been put into isolation, and most have seen their clinical signs resolved, and return to milk production within 10 days.

The US Food and Drug Administration (FDA) is working on assessing and evaluating the safety of milk and dairy products through having milk producers follow the [Grade “A” milk safety program](#) and the [Pasteurized Milk Ordinance](#). The FDA has been working with the USDA to carry out pasteurization validation studies to determine the viral load in raw milk. FDA collected retail samples of various milk and milk products and found that all 297 retail dairy samples were negative for viable HPAI through egg culture studies. Other universities across the United States are carrying out studies on retail products and the FDA is planning additional sampling and will publish the results once they are available.

The US Centers for Disease Control (CDC) gave an update of the situation in the United States, where there have been two confirmed human cases of H5N1. The first identified case was detected on 01 April 2024 in Texas and the second on 22 May in Michigan. Both were adults working in commercial dairy farms and are still under investigation. The samples are being analyzed and sequenced. The only reported symptom in both cases was conjunctivitis. CDC reported on their wastewater monitoring methods which detect influenza A viruses but do not distinguish the subtype. CDC assesses the risk to the general population as low, however, there is an increased risk for people with exposure to infected animals or environment. Exposed individuals should monitor for symptoms after first exposure and for 10 days after last exposure. CDC will publish summer guidance and is pushing for additional testing for influenza and increased surveillance and monitoring for workers. Their recommendation on testing is to focus on people who are exposed to infected animals and if they have any symptoms.

The World Health Organization (WHO) has a global influenza surveillance and response system with specialized testing centers in 123 countries. WHO has strengthened routine surveillance and based on available information, WHO assesses the overall public health risk posed by A(H5N1) to be low and low-to-moderate for those with exposure to infected birds or animals. There has been no reported human-to-human transmission of A(H5N1) virus since 2007. WHO published an [interim assessment on the genetic and antigenic characteristics of clade 2.3.4.4b A\(H5N1\) virus](#) and concluded that based on current genetic, antigenic and epidemiological data, no new candidate vaccine viruses are proposed. In the WHO European region, there have been 21 zoonotic influenza infections reported since 2021, with five H5N1 infections in the United Kingdom being of the 2.3.4.4b clade. WHO recommends a risk-based approach to human testing. The WHO Regional office for Europe advises its Member States to revise their pandemic plans and preparations, to report any outbreaks in animals and human cases, and to look at their animal surveillance strategies. Food safety messages to the public remain unchanged: pasteurized milk and dairy products, and cooked meat are safe for consumption.

The World Organization for Animal Health (WOAH) reported an increase in the number of detected cases of Highly Pathogenic Avian Influenza (HPAI) in domestic and wild animals. The concern is that there has been an increase of the number of cases across different species, including companion animals, terrestrial mammals, and farmed fur-bearing mammals. WOAH put out a call to its members to increase surveillance in domestic and wild birds. WOAH also recommends monitoring clinical signs and risk-based surveillance, and reporting of confirmed cases.

3. Zoonotic avian influenza - Situation in the EU

The European Centre for Disease Prevention and Control (ECDC) gave an overview of the situation in the EU, where so far, there have been no observed or detected cases of avian influenza in humans. Although the virus has been circulating in Europe, it remains avian-like with no sustained human-to-

human transmission. The virus has had no mutation or reassortment to suggest it has become human-adapted or transmissible between humans. The genotype found in the United States (B.3.13) has not been detected in Europe. ECDC's assessment stressed that sporadic human infections are likely to continue occurring in settings where people are exposed to infected animals. The risk to the public remains low, and low-to-moderate for people who are occupationally or otherwise exposed to animals infected with avian influenza. ECDC and the European Food Safety Authority (EFSA) recently published a document on [Drivers for a pandemic due to avian influenza and options for One Health mitigation measures](#), where they recommend enhanced surveillance, genomic analysis, access to diagnostic processes, minimizing exposures through appropriate personal protective measures and equipment, increasing communication and awareness, use of antivirals and seasonal influenza vaccination to reduce the risk of reassortment.

EFSA gave an overview on outbreaks in Europe: 69 reported since 2023. EFSA recommends continuing monitoring and surveillance of local and migratory wild birds based on risk assessments. There is no evidence that food should be considered a pathway for HPAI. EFSA will continue to monitor scientific evidence and continue the assessment of drivers for a potential pandemic due to HPAI viruses. EFSA will continue to actively monitor data on HPAI virus detections in mammals.

The European Union Reference Laboratory (EURL) for Avian Influenza and Newcastle Disease gave an overview on their work on genomic sequencing and analysis in animals. In 2023, outbreaks in mammals, among cats and fur animals were reported. No key mutations associated to the switch in the virus binding preference from avian to human-type receptors have been identified in the H5 viruses collected in Europe.

The ECDC also gave an overview on the work of the European Reference Laboratory Network for Human Influenza (ERLI-Net) and how they are prepared to respond in case of any suspected cases of avian influenza in humans in the EU/EEA.

DG HERA gave an overview of the availability of medical countermeasures and the work they have been carrying out. DG HERA and the Joint Research Centre (JRC) have been working on wastewater monitoring as a tool for early detection. HERA explained the "DURABLE" project in which 15 labs work together on testing transmission hypotheses, immune responses and other viral characteristics. They also develop tools to screen for H5-specific immune responses. DG HERA has launched a joint procurement for securing an adapted zoonotic influenza vaccine produced by the company "SEQUIRUS". As of 2024, stockpiles of antivirals (Oseltamivir), ventilators and oxygen concentrators and relevant personal protective equipment established under rescEU can be mobilized.

DG SANTE gave an overview of the EU rules when avian influenza is detected in animals of mammalian species. Union Surveillance Programmes for avian influenza laid down in the Delegated Regulation (EU) 2020/689, include surveillance in animals of mammalian species when these animals may be a risk for animal and human health. Member States need to follow guidance of the EU Reference Laboratory for avian influenza on the sampling and diagnosis. In accordance with EU Animal Health Law, when detected in animals of mammalian species, avian influenza may be classified as an emerging disease. Member States must immediately inform the Commission and the other Member States on the detection and on the emergency measures taken. In addition, the Commission may adopt safeguard measures, if needed. DG SANTE concluded that the EU is well equipped, legally, and operationally, to cope with possible findings of HPAI in mammals in the EU and this has already been seen with Member States' reactions and actions during previous incidents.

4. Conclusion and next steps

The Director General for DG SANTE concluded the meeting by stressing the importance of continued cooperation, vigilance and discussion between the CVOs, the HSC, US authorities and EU agencies. DG SANTE will draft a survey to the HSC as follow up to the [Opinion of the Health Security Committee on zoonotic avian influenza](#) on what actions have been taken or are being discussed in Member States and to see if there is a need for additional guidance.