



Avian Influenza Fact Sheet (Bird Flu)

What is an avian influenza A (H5N1) virus?

Influenza A (Bird Flu) virus – also called “H5N1 virus” – is a disease caused by avian influenza type A viruses that usually spread between birds, not people.

How does bird flu spread?

Infected birds shed flu virus in their saliva, nasal secretions, and feces. Susceptible birds become infected when they have contact with excretions from infected birds or surfaces that are contaminated with excretions. It is believed that most cases of bird flu infection in humans have resulted from contact with infected poultry or contaminated surfaces.

What is the risk to humans from bird flu?

The risk from bird flu is generally low to most people because the viruses occur mainly among birds and do not usually infect humans. However, human infections can happen when the virus gets into a person’s eyes, nose, mouth or is inhaled. People with close contact or contact with contaminated material without wearing personal protective equipment (such as respiratory and eye protection) with infected birds or places where sick birds

or their mucous, saliva, or feces have contaminated, might be at greater risk of avian influenza A virus

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Person to person transmission of H5N1 virus is not reported in the United States. However, the limited human-to-human spread of H5N1 virus has occurred in other countries, and transmission has not been observed to continue beyond one person.

What are the symptoms of bird flu in humans?

Bird flu virus infections in humans can cause a range of symptoms, from none to severe illness. Common symptoms include eye redness (conjunctivitis), mild flu like respiratory symptoms, pneumonia, and shortness of breath. In severe cases, pneumonia may require hospitalization.

How is the infection with H5N1 virus in humans treated?

Flu antiviral drugs such as oseltamivir, can effectively treat bird flu infections. Anyone who develops symptoms after exposure to infected animals should begin antiviral treatment as soon as possible. Additionally, individuals who had contact with infected animals without proper personal protective Equipment (PPE) or experienced a PPE breach may also receive antiviral medication, even if they do not experience symptoms.

Antiviral treatment works best within 48 hours of

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developing symptoms. Antiviral treatment should not be delayed while waiting for testing results.

Who is at increased risk for H5N1 virus?

In the United States, people with job-or recreational-related exposures to birds, dairy cows, or other avian influenza A virus-infected animals or to contaminated products (e.g., raw milk) from infected animals are at greater risk of infection.

Can H5N1 become a pandemic?

So far, spread of H5N1 virus from person to person has been rare and has not continued beyond one person. However, because all influenza viruses have the ability to change, scientists are concerned that the H5N1 virus one day could be able to infect humans and spread easily from one person to another. Because these viruses do not commonly infect humans, there is little or no immune protection against them in the human population. If the H5N1 virus were able to infect people and spread easily from person to person, an influenza pandemic (worldwide outbreak of disease) could begin. No one can predict when a pandemic might occur.

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Is there a vaccine to protect humans from H5N1 virus?

There currently is no commercially available vaccine to protect humans against the H5N1. However, vaccine development efforts are taking place. Research studies to test a vaccine to protect humans against H5N1 virus began in April 2005, and a series of clinical trials is under way.

*For further information, contact the
Oklahoma City-County Health Department
(405) 425-4437*

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