Due to media publicity, much public awareness has been created regarding avian flu. It would be therefore appropriate to focus on the potential problems facing Sri Lanka.

In April–June 1998 Sri Lanka was ravaged by an island-wide epidemic of viral fever [1]. During a period of 12 days 37,000 patients were treated as out-patients in government hospitals alone and over 5,500 patients were admitted for inpatient care. During this 12-day period over 500 patients were admitted for inpatient care at Lady Ridgeway Hospital; there were 18 deaths. There was human-to-human transmission during this epidemic. Many children developed multi-organ failure including a Reye-like syndrome [1]. The virus isolated during this epidemic by the University of Hong Kong was influenza A H3N2. In 1997 during an avian influenza outbreak in Hong Kong the influenza A H5N1 virus was isolated for the first time [2,3].

Although influenza H5N1 virus has not been isolated in Sri Lanka as yet, the flu epidemic in 1998 should alert all of us towards the potential danger. It is heartening to note the precautionary steps already taken by the Ministry of Health and other ministries such as banning the import of live birds, establishing a fast-track virological diagnostic service, identifying sentinel hospitals for tackling an outbreak and establishing a buffer stock of the anti-viral agent Tamiflu.

References

Sanath P Lamabadusuriya, Senior Professor of Paediatrics, Faculty of Medicine, University of Colombo, Sri Lanka. e-mail: <sanath.lamabadusuriya@yahoo.com> (Competing interests: none declared). Received 31 March 2006 and accepted 6 April 2006.