



Public Health
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Region IV Public Health
Clark, Cowlitz, Skamania, Wahkiakum counties
and Cowlitz Tribe

Health Advisory

Please deliver a copy of the accompanying advisory to each provider in your organization. Questions regarding this advisory may be directed to the following Region IV health officers:

Alan Melnick, MD, MPH, CPH

Clark County Public Health, (360) 397-8412

Sarah D. Present MD, MPH

Skamania County Community Health, (509) 427-3850

Wahkiakum County Health & Human Services, (360) 795-8630

Jennifer Vines, MD, MPH

Cowlitz County Health & Human Services, (360) 414-5599

Please distribute

Categories of Health Alert messages:

Health Alert: conveys the highest level of importance; warrants immediate action or attention.

Health Advisory: provides important information for specific incident for situation; may not require immediate action.

Health Update: provides updated information regarding an incident or situation; no immediate action necessary.



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HEALTH ADVISORY

December 5, 2014

TO: Physicians and other Health Care Providers

FROM: Alan Melnick, MD, MPH, CPH, Health Officer
Sarah Present, MD, MPH, Health Officer
Jennifer Vines, MD, MPH, Health Officer

RE: CDC Advisory recommends treating patients who are at high risk of complications from flu and who have influenza-like illness as early as possible with oseltamivir or zanamivir. Do not wait for influenza test results to begin antivirals.

Summary

CDC reports that this winter's flu season is likely to be a bad one for two reasons:

- 91 percent of the samples tested through Nov. 22 are Influenza A (H3N2), and the rates of hospitalizations and deaths are higher in seasons when H3N2 is dominant.
- Half of the H3N2 samples tested are poorly matched with the vaccine that was prepared for this year's season. That's because the virus has "drifted," or mutated, since the vaccine was formulated early this year.

While vaccination remains the single most effective means of protection, rapid treatment with antiviral drugs is especially critical as a second line of defense this year. Do not wait for a positive test to prescribe antiviral drugs because such drugs are most effective within 48 hours of flu symptoms. Clinicians should administer antivirals as soon as possible to patients who may be at higher risk for flu complications. Two antiviral medications -- oseltamivir (Tamiflu) and zanamivir (Relenza) -- have been approved by the FDA for treatment of the flu.

The drifted strain is being incorporated into 2015 vaccines. Since nearly half of the H3N2 specimens tested so far this year match the current season's vaccine, which will also offer partial protection to the drifted strain, CDC encourages use of the vaccine in patients who have not been vaccinated this season.

The advisory can be seen at <http://emergency.cdc.gov/han/han00374.asp>. Main points from this advisory follow:

CDC recommends:

- Encourage all patients >6 months of age to be vaccinated against influenza
- Encourage high-risk persons with influenza-like illness to seek care promptly, to determine whether antiviral treatment is recommended.
- Treat the following patients with influenza-like illness as early as possible with oseltamivir or zanamivir. Do not wait for influenza test results to begin antivirals.
 - Hospitalized patients
 - Patients with severe, complicated, or progressive illness
 - Persons at higher risk for influenza complications:
 - Children <2 years of age
 - Adults >65 years of age
 - Persons with chronic pulmonary (including asthma), cardiovascular (except hypertension alone), renal hepatic, hematological (including sickle cell disease) and metabolic disorders (including diabetes mellitus), or neurological and neurodevelopmental conditions (including disorders of the brain, spinal cord, peripheral nerves, and muscle such as cerebral palsy, epilepsy, stroke, intellectual disability, moderate to severe developmental delay, muscular dystrophy, or spinal cord injury)
 - Persons with immunosuppression, including that caused by medication or HIV infection
 - Women who are pregnant or within 2 weeks after delivery
 - Persons <19 years of age who are receiving long-term aspirin therapy
 - American Indians and Alaskan Natives
 - Persons with morbid obesity (body-mass index >40)
 - Residents of nursing homes and other chronic-care facilities

For suspect influenza cases, the use of triage phone nurses is recommended:

- for patients to report symptoms
- for patients to receive instructions as indicated
- to call in antiviral prescriptions to the patient's pharmacy

Remind all employees and clients to stay home from work when they feel ill.

CDC recommends antiviral chemoprophylaxis to control outbreaks among high-risk persons in institutional settings. An influenza outbreak is likely when at least two residents are ill within 72 hours, and at least one has laboratory-confirmed influenza. Report such outbreaks promptly to the local public health authority.

When influenza is identified as a cause of a respiratory disease outbreak among nursing-home residents, CDC recommends chemoprophylaxis with antiviral medications for residents regardless of whether they have received influenza vaccination, and for unvaccinated health care personnel. For newly-vaccinated staff, antiviral chemoprophylaxis can be administered up to two weeks (the time needed for antibody

development) following influenza vaccination. Chemoprophylaxis may also be considered for all employees, regardless of their influenza vaccination status, if the outbreak is caused by a strain of influenza virus that is not well matched by the vaccine. Antiviral chemoprophylaxis should be administered for a minimum of two weeks, and continue for at least seven days after the last known case was identified.

If you have any questions, please call:

- Clark County Public Health: (360) 397-8182
- Cowlitz County Health Department: (360) 414-5599
- Skamania County Community Health: (509) 427-3850
- Wahkiakum County Health and Human Services (360) 795-6207

Thank you for your partnership.