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HEALTH ADVISORY: INFLUENZA UPDATE

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The San Francisco Dept. of Public Health (SFDPH) provides this guidance based on current information. SF recommendations may differ from those issued by the Centers for Disease Control and Prevention (CDC) and the California Department of Public Health (CDPH). For updates, forms and FAQs visit: sfdcp.org/flu

SITUATIONAL UPDATE

Although it is early in the influenza season, influenza activity is expected to increase substantially in the coming weeks to months. **The predominant influenza virus this season to date is influenza A(pH1N1). This is the same virus that caused the 2009 pandemic.** Some hospitals are reporting cases of non-elderly adults with critical illness due to pH1N1 virus, similar to the epidemiology observed during the 2009 pandemic. To date one death due to pH1N1 has occurred in San Francisco, in a non-elderly adult with an underlying medical condition. **Vaccination and good infection control practices remain the best prevention strategies for seasonal influenza.**

This advisory is an update to our Influenza Advisory dated 11/7/13. For detailed information concerning seasonal influenza, please refer to the 11/7/13 document. sfdcp.org/healthalerts.html

ACTIONS REQUESTED OF ALL CLINICIANS

- 1. Vaccination:** All persons aged 6 months and older, including healthcare personnel should receive influenza vaccination now. The pH1N1 strain is included in this year's influenza vaccine formulations.
- 2. Empiric antiviral treatment:** Start treatment with oral/enteric oseltamivir for suspected influenza as soon as possible for the following groups:
 - Hospitalized patients
 - Outpatients with severe/progressive illness
 - Patients at high risk for influenza complications, including
 - persons age <2 years or ≥65 years;
 - persons with chronic pulmonary, cardiovascular, renal, hepatic, hematological, neurologic (including neurodevelopmental), and metabolic disorders
 - persons with immunosuppression, including from medications or by HIV infection;
 - women who are pregnant or postpartum (within 2 weeks after delivery);
 - persons aged <19 years who are receiving long-term aspirin therapy;
 - American Indians/Alaska Natives;
 - persons who are morbidly obese (i.e., BMI ≥40); and
 - residents of nursing homes and other chronic-care facilities.

Healthy, non high-risk persons can also experience severe and fatal complications associated with influenza, especially with pH1N1 virus infection, so antiviral treatment is reasonable in healthy, symptomatic outpatients.

For detailed guidance concerning antiviral treatment in critically ill patients, including issues of antiviral resistance and the use of investigational medications, see

cdph.ca.gov/programs/dcdc/Documents/CDPHUpdateSevereInfluenzaH1N1.pdf

Categories of urgency levels

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

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

Health Update: provides updated information regarding an incident or situation; unlikely to require immediate action

3. Testing: For influenza testing in severely ill patients hospitalized more than 24 hours, RT-PCR is recommended.

- Specimens collected on critically ill or fatal cases with suspected or laboratory-confirmed influenza may be referred to the SFDPH Laboratory for further PCR confirmation and subtyping.
- SFDPH may request retained specimens from fatal cases, which will be forwarded to CDPH for viral culture, strain typing, and antiviral resistance testing in order to characterize the circulating strains, guide antiviral treatment recommendations and look for the emergence of novel strains.
- Oseltamivir resistance, sometimes within 1 week of treatment initiation, has been reported particularly among immunocompromised patients with pH1N1 virus infection who were receiving treatment with oseltamivir. SFDPH can coordinate testing of these specimens for antiviral resistance in certain circumstances.
- ALL requests for flu testing by SFDPH laboratory must be coordinated through and approved by SFDPH Disease Control (415) 554-2830. Instructions and forms can be found at: sfcdcp.org/influenzareporting

4. Reporting: Fatal cases of lab-confirmed influenza in persons 0-64 yrs, whether hospitalized or not, are reportable by California law. As soon as possible (but no later than 7 days after the death), complete a case report form (see sfcdcp.org/influenzareporting) and fax to SFDPH at (415) 554-2848, or call (415) 554-2830 to speak with a disease investigator.

5. Infection control: Cases of critically ill patients with healthcare-associated influenza have already been reported in the U.S. this season.

- Vaccination of healthcare personnel is essential, and vaccination or masking is mandated for workers in hospitals, skilled nursing and other long term care facilities in San Francisco. See sfcdcp.org/fluproviders.html for more information concerning the San Francisco vaccination mandate. Healthcare personnel should also be instructed not to come to work when ill.
- Standard and droplet precautions should be implemented for confirmed and suspected influenza patients. Influenza patients should be isolated in a single room or cohorted with other influenza patients if a single room is not available.
- For detailed information concerning infection control practices for influenza, see cdc.gov/flu/professionals/infectioncontrol/index.htm

SOLICITATION FOR SENTINEL PROVIDERS FOR INFLUENZA SURVEILLANCE

Primary care providers are invited to enroll as sentinel providers for influenza surveillance in San Francisco. Compiling and reporting data usually takes less than 30 minutes per week. If interested in participating, contact the CDPH Immunization Branch at influenzasurveillance@cdph.ca.gov or (510) 620-3737.

REMINDERS

- SFDPH website influenza page: sfcdcp.org/flu
- SFDPH website health alerts page: sfcdcp.org/healthalerts.html
- CDPH website influenza page: [cdph.ca.gov/healthinfo/discond/pages/influenza\(flu\).aspx](http://cdph.ca.gov/healthinfo/discond/pages/influenza(flu).aspx)
- To report influenza deaths and/or cases or outbreaks as described above, call (415) 554-2830.
- Within San Francisco, the public can call 311 for basic information about influenza.