

TO: Vermont Healthcare Providers, Healthcare Facilities, Long-term Care Facilities, and Institutional Settings

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TREATING Patients who have INFLUENZA with ANTIVIRAL MEDICATIONS

Key Information

- Widespread influenza activity is being reported in most U.S. states, including Vermont. We expect activity to remain at high levels for several more weeks.
- National and state surveillance data have shown that influenza A (H3N2) viruses are the most common strain circulating this year. Historically, H3N2-predominant flu seasons have been associated with more hospitalizations and deaths in older people and young children.
- Data so far this season indicate that influenza vaccination reduced a vaccinated person's risk of having to go to the doctor for flu illness by about 23 percent across all ages. These early vaccine efficacy estimates are lower compared to some other seasons, likely reflecting the fact that more than two-thirds of circulating H3N2 viruses this season have been antigenically or genetically different from the H3N2 vaccine virus.
- In this context, the use of influenza antiviral drugs for treatment and prophylaxis should be considered. Antiviral medications are effective in treating influenza and reducing complications. Antivirals are available and recommended, but evidence from the current and previous influenza seasons suggests they are severely underutilized.
- Three antiviral neuraminidase inhibitors are approved by the U.S. Food and Drug Administration (FDA) and recommended by the Centers for Disease Control and Prevention (CDC): oral oseltamivir, inhaled zanamivir, and intravenous peramivir.

Recommendations for All Health Care Providers

- Treat any patient with suspected or confirmed influenza who is **hospitalized**, at **high risk for influenza complications** (http://www.cdc.gov/flu/about/disease/high_risk.htm), or has **severe, complicated, or progressive illness** as soon as possible after illness onset with one of three available influenza antiviral medications.
- Initiate antiviral treatment empirically, without waiting for confirmatory influenza testing. While antiviral drugs work best when given early (within first 48 hours of illness), therapeutic benefit has been observed even when treatment is initiated later.

- Rapid influenza diagnostic tests may not be accurate, so a negative rapid test result does not exclude a diagnosis of influenza in a patient with suspected influenza.
- Consider use of antivirals for the prevention of influenza for institutional outbreaks (such as in nursing homes or other closed populations).
- National antiviral supply is sufficient to meet the increased demand this season, but there may be some spot shortages for some formulations. Providers may have to contact more than one pharmacy to fill a prescription for an antiviral medication.

For more information:

- Summary of influenza Antiviral Treatment Recommendations for Clinicians:
<http://www.cdc.gov/flu/professionals/antivirals/summary-clinicians.htm>
- Clinical Description and Lab Diagnosis of Influenza:
<http://www.cdc.gov/flu/professionals/diagnosis>
- Guidance for Clinicians on the Use of RT-PCR and Other Molecular Assays for Diagnosis of Influenza Virus Infection: <http://www.cdc.gov/flu/professionals/diagnosis/molecular-assays.htm>
- Weekly Vermont Department of Health surveillance update on influenza disease activity:
<http://healthvermont.gov/prevent/flu/flusurveillance.aspx>
- Vermont Department of Health 2014-2015 Influenza Prevention and Control Measures for Long-Term Care Facilities:
<http://healthvermont.gov/prevent/flu/documents/2014guidelinesLTCF.pdf>
- CDC Resources for patient antiviral education:
<http://www.cdc.gov/flu/antivirals/whatyoushould.htm>

HAN Message Type Definitions

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.

Info Service Message: Provides general correspondence from VDH, which is not necessarily considered to be of an emergent nature.