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** NOTICE: This health alert provides written guidance for health care professionals and others who may need to take action to prevent or control a notifiable condition. It is not intended to provide guidance for the general public.*

Influenza Update

Action Requested:

- 1) Encourage all eligible persons to get the influenza vaccine. The influenza vaccine is recommended for most people age 6 months and older. People seeking vaccination can go to www.vaccines.gov/, visit their local pharmacy, or contact their health care provider.
- 2) Encourage patients and community members to reduce the spread of viral respiratory illness by staying home when sick until fever free for 24 hours without use of fever reducing medications and symptoms have greatly improved, frequent handwashing, respiratory etiquette, and wearing a mask in indoor public spaces. Individuals with symptoms consistent with COVID-19 should test for COVID-19 and follow [Washington State Department of Health guidance](#) if they test positive.
- 3) Consider testing and early treatment for influenza for people who are at high risk for severe disease.
The Centers for Disease Control and Prevention (CDC) treatment guidelines are available here: <https://www.cdc.gov/flu/professionals/antivirals/summary-clinicians.htm>
The American Academy of Pediatrics (AAP) guidelines are available here: <https://publications.aap.org/pediatrics/article/150/4/e2022059274/189385/Recommendations-for-Prevention-and-Control-of>
- 4) When supply of Oseltamivir (Tamiflu) is limited the Washington State Department of Health recommends the following:
 - ❖ The use of oseltamivir for the purpose of **chemoprophylaxis** is discouraged with rare exceptions (e.g. influenza outbreak in LTCF).
 - ❖ Treatment of influenza with oseltamivir is recommended for the following populations:
 - Hospitalized patients of any age with confirmed or suspected influenza and respiratory illness symptoms.
 - Patients with confirmed or suspected* influenza at higher risk for decompensation/complications within 48 hours of symptom onset, or within 5 days if symptoms are progressive. These include the following groups:
 - Children younger than 5 years old and adults 65 years of age and older

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- Chronic conditions
 - Asthma, COPD, or other chronic respiratory conditions
 - Severe kidney and liver disease
 - Poorly controlled diabetes or metabolic disorders (such as inherited metabolic or mitochondrial disorders)
 - History of heart disease and/or stroke
 - Neurologic and neurodevelopmental conditions
 - Morbid obesity (BMI≥40)
 - Active malignancy/hematologic disorder
 - Severely immunocompromised
- Nursing home and long-term care facility residents
- Pregnant people (up to 2 weeks post-partum)
- ❖ The use of **higher doses of oseltamivir** (more than 75 mg per dose) for the treatment of seasonal influenza is discouraged; Recommended duration for antiviral treatment is 5 days for oseltamivir.
- ❖ **Oral suspension formulation** should be reserved for pediatric patients unable to take pills
 - [If oral suspension is unavailable](#), consider opening capsules and mixing with a thick sweetened liquid.**
- ❖ **Alternatives for Outpatient Treatment** ([inhaled zanamivir, intravenous peramivir, or oral baloxavir](#)) may be considered for outpatient treatment. Current limited evidence suggests oral baloxavir is effective for both treatment of uncomplicated influenza and post-exposure prophylaxis. Consideration of alternative antiviral medication for *hospitalized* patients should be made in conjunction with expert consultation. Before choosing and prescribing an alternative antiviral be sure to review approved age groups, contraindications, and any applicable renal/hepatic dosing recommendations.

**Given the increased circulation of numerous respiratory viruses in the community, testing is recommended to confirm the diagnosis of influenza as long as testing does not delay treatment for priority groups per CDC influenza antiviral medication guidance.*

***Oral capsules come in 30, 45 and 75mg strengths. Attention should be paid to ensure appropriate weight-based dosing.*

- 5) Report outbreaks of influenza and influenza like illness. A reportable outbreak for influenza is a single case of influenza in a resident at a long-term care

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facility or two individuals with influenza like illness within 72 hours at a long-term care facility. Please call 360-867-2610 to report influenza outbreaks seven days a week.

- 6) Long Term Care Facilities should follow testing guidance for when COVID-19 and Influenza are circulating which can be accessed here:
<https://doh.wa.gov/sites/default/files/legacy/Documents/5100//420-301-Flu-COVID-LTCF-TestRecs.pdf> When an influenza case is detected in a facility follow the guidance for antiviral treatment and prophylaxis where appropriate which can be accessed here: [Recommendations for Prevention and Control of Influenza Outbreaks in Long Term Care Facilities \(wa.gov\)](#)

Background:

Washington State is currently experiencing a surge in viral respiratory illnesses including influenza and RSV which have been straining the healthcare system. Two influenza related deaths were reported in Thurston County on December 2, 2022. To date twenty-six influenza related deaths and twenty-five influenza like illness outbreaks have been reported in Washington State for the 2022-2023 Influenza Season.

Antiviral treatment of influenza is an important adjunct to influenza vaccination in the prevention and control of influenza and, when given early, reduces the duration of symptoms and may reduce the risk of some complications. Four FDA approved prescription antiviral medications (oseltamivir, baloxavir, zanamivir, and peramivir) are available for use for early treatment of outpatients with influenza. These antivirals have different formulations, routes of administration, dosing, duration of treatment, and recommendations for administration by age group. The clinical benefit of antiviral treatment of influenza is greatest when treatment is started early (within 2 days of illness onset) in people with mild, uncomplicated illness [3-4]. Oseltamivir treatment also is recommended as soon as possible for suspected or confirmed influenza requiring hospitalization, and to help control institutional influenza outbreaks [4].

Resources:

- Centers for Disease Control HAN Alert 482 [Interim Guidance for Clinicians to Prioritize Antiviral Treatment of Influenza in the Setting of Reduced Availability of Oseltamivir](#)

COMMUNICABLE DISEASE UPDATE

COMMUNICABLE DISEASE CONTROL AND PREVENTION SECTION
THURSTON COUNTY PUBLIC HEALTH AND SOCIAL SERVICES DEPARTMENT
412 LILLY RD NE
OLYMPIA, WA, 98506-5132
DISEASE REPORTING: (360)786-5470



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- Centers for Disease Control. [Information for Clinicians on Influenza Virus Testing.](#)
- Centers for Disease Control. [Influenza Antiviral Medications: Summary for Clinicians.](#)
- Centers for Disease Control. [Interim Guidance for Influenza Outbreak Management in Long-Term Care and Post-Acute Care Facilities.](#)
- Centers for Disease Control. [Testing and Management Considerations for Nursing Home Residents with Acute Respiratory Illness Symptoms when SARS-CoV-2 and Influenza Viruses are Co-circulating.](#)
- Washington State Department of Health. [Recommendations for Prevention and Control of Influenza Outbreaks in Long Term Care Facilities.](#)
- Washington State Department of Health. [Laboratory Testing and Cohorting Recommendations for Respiratory Outbreaks in Long-Term Care when SARS-CoV-2 and Influenza Viruses are Co-Circulating.](#)
- Washington State Department of Health. [Influenza \(Flu\) Information for Public Health and Healthcare.](#)

THANK YOU FOR REPORTING

TO REPORT A NOTIFIABLE CONDITION IN THURSTON COUNTY	
Voice mail for reporting non-immediately reportable conditions (24 hours a day)	Phone: 360-786-5470 Fax: 360-867-2601
Day time immediately notifiable conditions – Call detailed information to the 24-hour Notifiable Condition Reporting Line at 360-786-5470. Messages are picked up hourly. If a call back can't wait call 360-867-2500 and ask staff to locate a Communicable Disease staff.	Phone: 360-786-5470
After hours immediately and 24-hour reportable conditions or a public health emergency	Call 1-800-986-9050
No one is available with Thurston County Public Health and condition is immediately notifiable	1-877-539-4344

Communicable Disease Updates are posted online at: <http://bit.ly/CDUpdatePHSS>