



DATE:	January 31, 2018
TO:	Health Alert Network
FROM:	Rachel Levine, MD, Acting Secretary of Health
SUBJECT:	Influenza Update
DISTRIBUTION:	Statewide
LOCATION:	Statewide
STREET ADDRESS:	Statewide
COUNTY:	Statewide
MUNICIPALITY:	Statewide
ZIP CODE:	Statewide

This transmission is a “Health Advisory” provides important information for a specific incident or situation; may not require immediate action.

Summary

- Influenza continues to be **widespread** across the United States, including Pennsylvania.
- The 2017-18 influenza season has been the **heaviest**, in terms of influenza cases reported per week, since the 2009 pandemic.
- **It’s not too late to get your influenza vaccine. The best way to prevent influenza is to get your influenza vaccine.**
- **Prevention messages:** Avoid close contact; Stay home when you are sick; Cover your mouth and nose; Clean your hands; Avoid touching your eyes, nose, and mouth; Practice other good health habits.
- Antiviral treatment should be used for high-risk, severely ill and all hospitalized patients immediately without waiting for confirmatory results and these **include sole caretakers of diagnosed influenza patients.**
- **Lab-confirmed influenza is a reportable condition** under Pennsylvania disease reporting laws; please report all positive results from antigen detection tests, point-of-care tests, molecular assays and viral cultures.

Background

Influenza activity continues to increase and is widespread across the United States, including Pennsylvania. Influenza A(H3N2) is the predominant circulating subtype, comprising 90 percent of tests reported to the CDC through January 27, 2018.¹ However, other influenza viruses have also been identified, including influenza A(H1N1)pmd09 and influenza B from both the Yamagata and Victoria lineages. Influenza seasons where A(H3N2) predominates are typically associated with more hospitalizations and deaths in persons aged 65 years and older and young children compared to other age groups.² Vaccine effectiveness against influenza A(H3N2) also tends to be lower compared to vaccines against other influenza strains.³ Through January 27th, the 2017-18 influenza season has been the heaviest A(H3N2) season since case-based influenza surveillance began in 2003.

The Pennsylvania Department of Health (PADOH) recommends the following:

1. **Influenza vaccine:**

Flu vaccines are offered in many locations, including doctor's offices, urgent care clinics, and pharmacies. In Pennsylvania, pharmacists are permitted to provide all immunizations including influenza vaccine to patients nine years of age and older. The website <https://vaccinefinder.org/> is a useful tool for finding vaccine in your area.

Influenza vaccines are approved for use in people as young as 6 months of age and up. Influenza vaccines are approved for use in pregnant women and people with chronic health conditions. People younger than 65 years of age should not get the high-dose influenza vaccine or the influenza vaccines with adjuvant, and people who are younger than 18 years old or older than 64 years old should not get the intradermal influenza vaccines.

2. **Simple Influenza Prevention Measures⁴:**

a. **Avoid close contact.**

- i. Avoid close contact with people who are sick. When you are sick, keep your distance from others to protect them from getting sick too.

b. **Stay home when you are sick.**

- i. If possible, stay home from work, school and errands when you are sick. This will help prevent spreading your illness to others.

c. **Cover your mouth and nose.**

- i. Cover your mouth and nose with a tissue when coughing or sneezing, or cough and sneeze into your elbow. It may prevent those around you from getting sick.

d. **Clean your hands.**

- i. Washing your hands often will help protect you from germs. If soap and water are not available, use an alcohol-based hand rub.

e. **Avoid touching your eyes, nose or mouth.**

- i. Germs are often spread when a person touches something that is contaminated with germs and then touches his or her eyes, nose or mouth.

f. **Practice other good health habits.**

- i. Clean and disinfect frequently touched surfaces at home, work or school, especially when someone is ill. Get plenty of sleep, be physically active, manage your stress, drink plenty of fluids and eat nutritious food.

3. **Antiviral Medications:**

Neuraminidase inhibitor antiviral medications play an important role in preventing, treating and reducing complications of influenza during A(H3N2) predominant-seasons⁵. All hospitalized, severely ill and high-risk patients with suspected or laboratory confirmed influenza should be treated with antiviral medications **and these include sole caretakers of diagnosed influenza patients.**

Clinical benefit is greatest when antiviral treatment is administered as early as possible after illness onset. Therefore, antiviral treatment should be started as soon as possible after illness onset; **do not wait for the results of testing.** Ideally, treatment should be initiated within 48 hours of symptom onset. However, antiviral treatment initiated later than 48 hours after illness onset can still be beneficial for some patients.

Persons who are at higher risk of complications from influenza include those aged ≥ 65 years or < 2 years; pregnant women; persons with chronic lung disease (including asthma), heart disease, renal, metabolic, hematologic and neurologic disease; immunosuppression; and morbid obesity; American Indians or Alaska Natives, and residents of chronic care facilities. Antiviral treatment may also be prescribed on the basis of clinical judgment for any previously healthy (non-high risk) outpatient with suspected or confirmed influenza who presents within **two** days after illness onset. Neuraminidase inhibitors can reduce the duration of uncomplicated influenza illness by approximately one day when started within two days after illness onset in otherwise healthy persons. For more information refer to the CDC HAN published on December 27, 2017 at: <https://emergency.cdc.gov/han/han00409.asp>)

4. Influenza reporting

Lab-confirmed influenza cases and influenza outbreaks are reportable in Pennsylvania.⁶

Uncomplicated outpatient influenza cases may be reported as weekly aggregate case counts, through the aggregate reporting module in Pennsylvania's electronic disease reporting system, PA-NEDSS. A document with instructions on aggregate reporting is attached to this HAN. All influenza-related deaths and hospitalizations must be reported individually to PA-NEDSS.

PADOH posts current influenza surveillance data weekly at:

<http://www.health.pa.gov/My%20Health/Diseases%20and%20Conditions/I-L/Pages/20172018-Influenza-Season.aspx#.Wk-n7zco47w>.

References:

1. DC FluView report: <https://www.cdc.gov/flu/weekly/index.htm#S1>
2. Frequently Asked Flu Questions, 2017-2018 Influenza Season: <https://www.cdc.gov/flu/about/season/flu-season-2017-2018.htm>
3. Vaccine Effectiveness - How Well Does the Flu Vaccine Work?: <https://www.cdc.gov/flu/about/qa/vaccineeffect.htm>
4. <https://www.cdc.gov/flu/protect/habits.htm>
5. Antiviral medications with activity against influenza viruses are an important adjunct to influenza vaccine in the control of influenza: <https://www.cdc.gov/flu/professionals/antivirals/summary-clinicians.htm>
6. Pennsylvania reportable disease regulations: <https://www.pacode.com/secure/data/028/chapter27/chap27toc.html>

Categories of Health Alert messages:

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.

This information is current as of January 31, 2018 but may be modified in the future.