

MaineHealth

Holiday Edition
H1N1 Update Newsletter
November 30, 2009

Welcome to the MaineHealth H1N1 Weekly Update Newsletter
A Publication of the MaineHealth H1N1 Workgroup

About this Newsletter:

This publication will be released each week throughout the fall and early winter to assist healthcare providers and infection prevention specialists in preparing for the effects of the H1N1 virus on the Maine population.

In This Issue:

- Maine CDC Update
- Health Care Providers Update

Maine CDC Update:

H1N1 continues to be widespread in 32 states, including Maine. However, emergency room and office visits for influenza like illness were down over the past week. This was seen nationally as well, although visits for influenza like illness were still higher than average for this time of year.

- There is very preliminary evidence that the fall surge of H1N1 may be peaking in the rest of New England, though it is early to know for sure, and double peaks have occurred with H1N1 surges. Maine's fall surge started about 1 - 2 weeks after most of the rest of New England.
- Almost all of what is being seen for flu is the H1N1 pandemic strain. There is virtually no seasonal influenza being detected in Maine or across the country. The CDC does expect to see the onset of the seasonal flu season sometime in the coming weeks to months, as well as future surges in the H1N1 pandemic strain.
- Two deaths were reported last week, both in adults with underlying medical conditions.
- About half of the recent hospitalizations in Maine are among children, including several who have been or are on ventilators in ICUs. Nationally, the data still indicate that children are at the highest risk for being hospitalized from the pandemic strain of H1N1. The hospitalization rate for children is over twice that of adults, and the rate for children under 5 years of age is about 3 times that of adults. The number of children dying from confirmed pandemic H1N1 since April is over twice that reported in any recent flu season.

Vaccine Supply: The Maine CDC expects H1N1 vaccine to continue to arrive in Maine over the next few weeks, although more slowly than originally anticipated. The vaccine distribution will continue to be targeted to high risk populations, especially pregnant women and young children, and will most likely not meet anticipated demand in December.

Health Care Providers:

Health care providers should be aware that **flu infections can make people more susceptible to developing pneumococcal infections, which can cause serious complications, including death.** Increases in pneumococcal disease were seen during all three of the flu pandemics that occurred in the twentieth century, and a number of the US CDC's Active Bacterial Core surveillance (ABCs) sites have seen greater than expected numbers of cases of invasive pneumococcal disease coincident with increases in influenza-associated hospitalizations. A causal relationship between 2009 H1N1 influenza and this increase has not yet been established, but CDC is pursuing that question with state and local public health officials.

- The complete Health Alert on pneumococcal vaccine and prevention of secondary bacterial infections can be found at the following site:
<http://www.cdc.gov/H1N1flu/HAN/111609.htm>.
- The CDC has also issued a Q&A on influenza and invasive pneumococcal disease (http://www.cdc.gov/h1n1flu/vaccination/qa_pneumococcal_disease.htm).

Personal Protective Measures: The Maine CDC has posted a **new infection control webpage** that can be found on the health care provider webpage at: www.maineinfl.gov. It contains information on how health care facilities can document a shortage of N95s and how they can access the state's stockpile. The stockpile can only be used when a shortage is documented, and for very highly prioritized uses such as aerosolized procedures. There is an algorithm describing the prioritized use of N95s. For more information, visit the Maine CDC Infection Control Webpage: <http://www.maine.gov/dhhs/boh/maineinfl/h1n1/infection-control.shtml>.

Antiviral Medications: The supply of antiviral medicines appears for the most part to be meeting the demand. However, **antiviral medicines continue to appear to be under-utilized.** The CDC has reviewed the numbers of prescriptions filled by MaineCare clients and filled from the stockpile for individual patients. It has found that the numbers are relatively low compared with the populations eligible and likely in a high-risk group with symptoms. Additionally, the CDC has received reports about people in high-risk groups with poor outcomes who were not given antiviral medicines initially.

When treatment of influenza is indicated in a patient with suspected influenza, health care providers should **initiate empiric antiviral treatment as soon as possible.** Early empiric treatment with oseltamivir or zanamivir is **recommended for all persons with suspected or confirmed influenza requiring hospitalization.** Prompt empiric outpatient antiviral therapy is also recommended for persons with suspected influenza who have symptoms of lower respiratory tract illness or clinical deterioration regardless of age or previous health. Early empiric treatment should be considered for persons with suspected or confirmed influenza who are at **higher risk for complications**, even if not hospitalized, including:

- Children younger than 2 years old
- Adults 65 years and older
- Pregnant women
- Persons with the following conditions: chronic pulmonary (including asthma), cardiovascular (except hypertension), renal, hepatic, hematological (including sickle cell disease), or metabolic disorders (including diabetes mellitus); disorders that can compromise respiratory function or the handling of respiratory secretions, or that can increase the risk for aspiration (e.g., cognitive dysfunction, spinal cord injuries, seizure disorders, or other neuromuscular disorders); immunosuppression, including that caused by medications or by HIV
- Persons younger than 19 years of age who are receiving long-term aspirin therapy, because of an increased risk for Reye Syndrome.

Antiviral medications and patient safety: The US CDC has posted information for providers on the safety and use of antivirals on its web site:

http://www.cdc.gov/H1N1flu/antivirals/safety_info.htm.

Publisher:

If you have additional questions or suggestions for this newsletter, please feel free to contact the publisher.

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