

MaineHealth

Weekly H1N1 Update Newsletter
December 11, 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 Friday throughout the fall and early winter to assist healthcare providers and infection prevention specialists in dealing with the effects of the H1N1 flu virus on the Maine population.

In This Issue:

- Maine CDC Update – Pages 2-3
- Health Care Providers Update – Page 4-6
- Supplies – Page 7
- Publisher's Contact Information – Page 7

Quick Hits:

- **H1N1 Continues to Decline in Maine, but Surges Anticipated:** There continues to be a decrease in flu activity, however the Maine CDC expects the H1N1 flu virus to continue to circulate and surges to occur. A seasonal flu surge is expected as well.
- **Vaccine Supply:** There was a significant increase in vaccine supply this past week; however this is still only about 65% of what is needed for priority populations in Maine.
- **Nasal Vaccine vs. Injectable Vaccine:** The nasal spray vaccine is a safe and effective vaccine option for healthy people ages 2 through 49 who are not pregnant. The Maine CDC requests that the nasal spray form of H1N1 vaccine be used for all healthy non-pregnant health care workers younger than 50, unless they are caring for patients undergoing bone marrow or stem cell transplants.
- **Portland H1N1 Clinics for Young Children:** Clinics will be open to children between the ages of 6 months and 5 years. Only the H1N1 vaccine will be offered. A table of upcoming clinic dates and locations is included in this newsletter.

Maine CDC Update:

There continues to be some decrease in flu activity, however, the Maine CDC expects the H1N1 flu virus to continue circulating and to anticipate additional surges. The CDC does expect a seasonal flu surge as well, which normally occurs during the winter season. Influenza is still more prevalent across the country than is usually seen this time of year, and vaccination remains the best protection against the flu.

This week's statistics:

- **Hospitals:** There were 31 new hospitalizations due to H1N1 in the last week, up from 25 the week before. Of those hospitalized, only 2 were children. Six people required intensive care, all of whom were age 50 or older.
- **Other Facilities:** Only one school reported a high rate of absenteeism this past week, down from 17 the week before. Outbreaks were also reported in an acute care facility and a long-term care facility. These outbreaks occurred in Aroostook, Hancock, and York counties.
- **Deaths:** Three deaths were reported over the past week, all in older adults with serious underlying medical conditions. All 13 deaths since August occurred in people with multiple underlying health conditions. The CDC recommends that **people with an underlying health condition seek vaccine at their specialty providers, primary care providers, or at public clinics listed at: www.maine flu.gov. Additionally, anyone with underlying health conditions who experiences flu-like symptoms should contact his or her health care providers immediately** to receive a prescription for antiviral medications (such as Tamiflu®).

H1N1 Vaccine Supply: Since October, Maine has received approximately 455,300 doses of H1N1 vaccine. There was a significant increase in vaccine supply over the past week; however, this is only **about 65% of what is needed for priority populations in the state.**

- The CDC's current priorities for vaccine are:
 - **Pregnant women** and recently pregnant women;
 - **Caregivers and household members of infants younger than 6 months old;**
 - **All people 6 months through 24 years of age;**
 - **People ages 25 through 64 with underlying medical conditions**, including COPD, asthma, chronic heart disease (except hypertension), kidney disease, liver disease, cognitive disability, neurologic/neuromuscular, blood disorder, metabolic disorders (including diabetes) or compromised immune systems (including HIV, organ transplant, people undergoing chemotherapy);
 - Health Care Workers in **inpatient and outpatient setting that have frequent direct contact with high priority patients and infectious materials.** This includes all EMS as well as nurses and doctors working in outpatient primary care practices, specialty practices, and schools. Any other health care worker who falls into one or more of the other priority groups above should also be vaccinated.

Distribution of Nasal Vs. Injectable Vaccine: The Maine CDC requests that the **nasal spray form of H1N1 vaccine be used for all healthy, non-pregnant health care workers younger than 50**, unless they care for patients undergoing bone marrow or stem cell transplantation (i.e., patients who require a protected environment) or have another contraindication. Currently there are not sufficient supplies of injectable vaccine for those with underlying conditions who can only be given the injectable vaccine. If healthy health care workers who qualify for the nasal spray are given injectable vaccine, this can easily deplete the injectable vaccine supply for those who are most vulnerable to being hospitalized or dying from H1N1.

Distribution Sites

- **Schools:**
Nearly all K-12 schools in the state have offered initial doses of vaccine to their students; and some schools are beginning to hold second dose clinics for children ages nine and younger and for students who were unable to receive vaccine during the initial clinics.
- **Healthcare Provider Offices:**
Vaccine has been distributed to over 360 health care providers in the state, including specialty providers who serve people with high risk health conditions, family practices, obstetric and pediatric providers, and hospitals for distribution within their health networks.
- **Residential Colleges:**
Several residential colleges have received vaccine for their highest risk students and are beginning to receive nasal spray vaccine for additional students who are prioritized due to their age and due to the fact that students often live, work, and study in close proximity.
- **Public Clinics:**
These are organized for those in the current priority groups listed above. All public clinics are required to be listed at: www.maine flu.gov.

E-mail Hoax: The CDC has **not** implemented a state vaccination program requiring registration on www.cdc.gov. Users who click on e-mails directing people to create a personal H1N1 vaccination profile are at risk of having a computer virus installed on their system. To prevent computer viruses:

- Do not follow unsolicited links and do not open or respond to unsolicited email messages.
- Use caution when visiting untrusted websites.
- Use caution when entering personal information online.

For more information: http://www.cdc.gov/hoaxes_rumors.html.

Reporting Vaccine Administration: The Maine CDC requires all H1N1 vaccine providers and/or administrators to submit the vaccine administration data into Maine CDC's weekly vaccine reporting system. The weekly vaccine reporting form can be found at: <http://www.maine.gov/dhhs/boh/maineflu/h1n1/health-care-providers.shtml>. Detailed instructions are also available at: <http://www.maine.gov/dhhs/boh/maineflu/h1n1/H1N1-Weekly-Reporting-Form-instructions.pdf>.

Health Care Providers:

H1N1 clinics for young pre-school aged children are currently underway around Cumberland County. Portland Public Health would like the Portland provider community to help them in passing on information about these clinics to parents and other care givers (see below for a grid of locations.) It is expected that community clinics for all target populations will be scheduled over the next few weeks as vaccine supply continues to increase in Maine. For more information on public clinics, please link to: www.maineflu.gov.

Portland H1N1 Clinics for Young Children: Clinics will be **open to children between the ages of 6 months and 5 years**. Only H1N1 vaccine will be offered (not seasonal). **People do not have to be from the town where the clinic is located to attend.** Children must be accompanied by a parent (unless the child is part of an organized daycare group that has worked with the clinic coordinator and collected signed consent forms in advance). Parent consent forms will be available at the door. These clinics are for first doses; a smaller round of booster clinics will be held in January – dates and locations to be determined. Third party insurance will be billed (parents should bring their insurance card with them); and patients without insurance will not be charged.

CLINIC DATES and LOCATIONS

Date	Time	Town	Place	Address
12/14/09	9:00 am – 1:00 pm	Yarmouth	Sacred Heart Church	326 Main Street
12/15/09	9:00 am – 1:00 pm	South Portland	St. John the Evangelist Church	29 Aspen Avenue
*12/15/09	9:00 – 11:30 am	Gray	Gray Country Daycare	199C Portland Avenue
12/16/09	9:00 am – 1:00 pm	Falmouth	Falmouth Congregational Church	267 Falmouth Road
12/16/09	9:00 am – 1:00 pm	Bridgton	Bridgton Municipal Building	3 Chase Street
12/17/09	9:00 am – 1:00 pm	Raymond	Raymond Public Safety Building	1443 Roosevelt Trail
12/18/09	9:00 am – 1:00 pm	Westbrook	St. Anthony's Church	Brown Street
**12/18/09	8:30 am – 2 pm	Portland	Riverton Community School, Recreation Community Room	1600 Forest Avenue

Notes:

* Rescheduled from the December 9th snow date.

**At the December 18th Portland clinic, the target population is children 6 months through 9 years old including those needing boosters who bring a record of a first vaccine at least 1 month earlier.

Nasal Spray Vaccine: The nasal spray vaccine is a safe and effective vaccine option for healthy people ages 2 through 49 who are not pregnant. In fact, the Maine CDC requests that the nasal spray form of H1N1 vaccine be used for all healthy, non-pregnant health care workers younger than 50, unless they care for patients undergoing bone marrow or stem cell

transplantation (i.e., patients who require a protected environment) or have another contraindication.

Even if people come into regular contact with others who cannot receive the nasal spray vaccine, **they may still be able to receive it as long as they are healthy, not pregnant, and between the ages of 2 through 49.** The nasal spray vaccine **is also safe** for breastfeeding mothers. **Health care workers who cannot receive the vaccine themselves (due to pregnancy, health condition, or age) may still administer the vaccine.**

People who should **not** receive the H1N1 nasal spray vaccine include:

- Children younger than 2 years-old;
- Pregnant women;
- People age 50 and older;
- People with a medical condition that places them at higher risk for complications from flu, including those with chronic heart or lung disease, such as asthma or reactive airways disease; people with medical conditions such as diabetes or kidney failure; or people with illnesses that weaken the immune system, or who take medications that can weaken the immune system;
- Children younger than 5 years-old with one or more episodes of wheezing in the last year;
- Children or adolescents receiving aspirin therapy;
- People who have had Guillain-Barré syndrome (GBS), a rare disorder of the nervous system, within 6 weeks of getting a flu vaccine;
- People who have a severe allergy to chicken eggs or who are allergic to any of the nasal spray vaccine components;
- Health care workers who are providing medical care for patients who require special environments in the hospital because they are profoundly immunocompromised (i.e., patients undergoing bone marrow or stem cell transplantation).

H1N1 Vaccine Safety: The benefits of getting the H1N1 vaccine far outweigh the very small risk of serious complications from vaccination.

- The US CDC and the FDA are carefully monitoring the H1N1 vaccine reports, and after millions of doses of vaccine being administered in the U.S., the number, pattern and types of adverse event reports are similar to what is seen for seasonal influenza vaccine.
- More than 90% of adverse event reports nationwide have been classified as "not serious" and are symptoms frequently seen after vaccinations, such as soreness at the vaccination site. For more information please refer to this MMWR report on H1N1 vaccine safety at <http://www.cdc.gov/mmwr/preview/mmwrhtml/mm58e1204a1.htm>.

Nasal Spray Vaccine: Nasal spray flu vaccine is not new. It has been used successfully in many settings for seasonal flu vaccination since 2003. Questions often arise about nasal spray vaccine because it contains live viruses. The viruses in the nasal spray vaccine are weakened and **cannot cause the flu.** Side effects, such as runny nose or sore throat, are usually mild and short-lasting, especially compared to getting the flu itself.

Injectable Vaccine: Some people who have been vaccinated will experience mild side effects such as pain, redness or swelling in the arm where the shot was given, or a runny nose and headache after the nasal spray vaccine.

Healthcare Provider Education and Questions:

Vaccine Dose Spacing and Administration: Do you have questions about H1N1 vaccine dose spacing and administration with seasonal flu or other vaccines? To get the information you need please consult the following table from US CDC:

http://www.cdc.gov/H1N1flu/vaccination/dosespacing_admin.html.

Additional vaccine-related information for health care providers can be found on the Maine CDC web site at: <http://www.maine.gov/dhhs/boh/maineflu/h1n1/hc-providers/vaccine-info-hcp.shtml>.

Antiviral Treatment: The Maine CDC continues to encourage physicians to prescribe antivirals as appropriate. Recent data demonstrates that antiviral use has increased in Maine. For more information about antivirals, visit the Maine CDC web site at:

<http://www.maine.gov/dhhs/boh/maineflu/h1n1/anti-viral.shtml>.

The US CDC has made the following updates to its interim recommendations on the use of antivirals:

- Information regarding use of intravenous peramivir under an emergency use authorization;
- Information on availability of renal dosing for peramivir;
- Updated oseltamivir dosing instructions for children younger than 1 year of age based on weight;

The updated recommendations can be viewed at the US CDC website at:

<http://www.cdc.gov/h1n1flu/recommendations.htm>.

Supplies:

Many health care organizations continue to face severe supply chain shortages, especially with regard to Personal Protective Equipment (PPE). To help address this issue, the Southern Maine Regional Resource Center has identified access to four additional brands of NIOSH-approved N95 Particulate Respirators for purchase:

- Gerson N95 NIOSH Approved cup-style Particulate Respirator 1730
- Radnor® N95 NIOSH Approved Particulate Respirator With Adjustable Nose Clip
- Liberty 1895N: N95 NIOSH Approved
- Moldex 2200N95 NIOSH Approved Particulate Respirators

All of the respirators listed above are available immediately through Gloves, Etc., Inc., 1 Diamond Street, Biddeford, ME 04005 Tel: (800) 987-2999 * Fax: (207) 286-3267.

Full details, including prices, are in the attached document.

Please contact Gloves, Etc. directly to inquire further and to place orders. Let them know that Southern Maine Regional Resource Center referred you!

Publisher:

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

Jackie Cawley, DO

Senior Medical Director for Clinical Integration

MaineHealth

541-7521

cawlej@mainehealth.org