



Health **Alert** Network

Tri-County Health Department

Serving Adams, Arapahoe and Douglas Counties

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John M. Douglas, Jr., M.D. Executive Director

The pages that follow contain information critical to protecting the health of your patients and the citizens of Colorado.

HAN ADVISORY

Number of pages including cover: 4

Subject: **Advisory - Increasing influenza activity and the importance of antiviral use - Jan. 9, 2019**

Message ID: 1/10/2019 9:30:00 AM

Recipients: HAN Community Members.

From: TRI-COUNTY HEALTH DEPARTMENT

Adams, Arapahoe and Douglas County, Colorado

Recipient Instructions: **Tri-County Health Department is forwarding you the attached HAN. You may have already received this broadcast if you are on the CDPHE distribution list, however, we wanted to ensure you did not miss this important information. No response is required.**

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You have received this message based upon the information contained within our Health Alert Network Notification System. If you have a different or additional e-mail or fax address that you would like us to use, or if you have additional questions, call 720-200-1477.

Categories of Health Alert Network 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.

Info Service/Public Health Brief: Provides general information that is not necessarily considered to be of an emergent nature.

You may download a copy of this HAN from the TCHD website at
<http://www.tchd.org/259/Health-Alert-Network>



COLORADO
Department of Public
Health & Environment

Dedicated to protecting and improving the health and environment of the people of Colorado

HEALTH ALERT NETWORK BROADCAST

MESSAGE ID: 01092019 16:00

FROM: CO-CDPHE

SUBJECT: HAN Advisory | Increasing influenza activity and the importance of antiviral use

Healthcare providers: Please distribute widely in your office

RECIPIENTS: Local Public Health Agencies / IPs / EDs / ID Physicians

RECIPIENT INSTRUCTIONS: Local Public Health Agencies - Please forward to healthcare providers

HEALTH ADVISORY | Increasing influenza activity and the importance of antiviral use | Jan. 9, 2019

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Key points

- The first pediatric death in Colorado related to flu was reported on Jan. 9, 2019. The child resided in the Denver metro area.
- Influenza continues to circulate widely across Colorado and the United States, with Influenza A (H1N1) viruses predominating. From Sept. 30, 2018, through the week ending Jan. 5, 2019, 962 influenza hospitalizations have been reported in Colorado.
- At this time, hospitalization rates in children younger than 5 years are the highest among all age groups. A (H1N1) virus-predominant influenza seasons are frequently associated with more illnesses in children.
- There have been 11 outbreaks in long-term care and residential facilities reported statewide since Sept. 30, 2018.
- Antiviral treatment is recommended for hospitalized patients; children under age 5 years (and especially those under age 2 years); adults age 65 years and older; pregnant women and those up to two weeks postpartum; and individuals with underlying health conditions.
- Antiviral chemoprophylaxis is also recommended for all eligible long-term care facility residents during a facility outbreak; **regardless** of whether they received influenza vaccine.

Background information

A child residing in the Denver metro area with a positive test for Influenza A died on Jan. 9, 2019. Influenza activity is widespread across Colorado and the United States, with Influenza A (H1N1) viruses predominating. Since the H1N1 virus emerged in 2009, it has been associated with significant and severe illness among young children. From Sept. 30, 2018, through the week ending Jan. 5, 2019, 962 influenza hospitalizations have been reported in Colorado. The highest hospitalization rate in Colorado is among 0-4 year olds (44.6 per 100,000). There have been 11 outbreaks in long-term care and residential facilities reported statewide since Sept. 30, 2018.

Recommendations / guidance

CDC antiviral recommendations for the 2018-2019 influenza season

- Antiviral medications with activity against influenza viruses are an important adjunct to influenza vaccine in the control of influenza.
- Clinical trials and observational data show early antiviral treatment can shorten the duration of fever and illness symptoms; and may reduce the risk of some complications from influenza (e.g., otitis media in young children, pneumonia, and respiratory failure). Early treatment of hospitalized adult influenza patients with oseltamivir has been reported to reduce death in some observational studies. In hospitalized children, early antiviral treatment with oseltamivir has been reported to shorten the duration of hospitalization in observational studies.
 - Clinical benefit is greatest when antiviral treatment is administered early, especially within 48 hours of influenza illness onset in clinical trials and observational studies.
 - Antiviral treatment is recommended as early as possible for any patient with confirmed or suspected influenza who is hospitalized;* has severe, complicated, or progressive illness;* or is at higher risk for influenza complications. Patients in this group include:
 - Children younger than 2 years (although all children younger than 5 years are considered at higher risk for complications from influenza, the highest risk is for those younger than 2 years)
 - Adults aged 65 years and older.
 - People with chronic pulmonary (including asthma), cardiovascular (except hypertension alone), renal, hepatic, hematological (including sickle cell disease), and metabolic disorders (including diabetes mellitus), or neurologic and neurodevelopmental conditions (including disorders of the brain, spinal cord, peripheral nerve, and muscle such as cerebral palsy, epilepsy (seizure disorders), stroke, intellectual disability (mental retardation), moderate to severe developmental delay, muscular dystrophy, or spinal cord injury).
 - People with immunosuppression, including that caused by medications or by HIV infection.
 - Women who are pregnant or postpartum (within two weeks after delivery).
 - People younger than 19 years who are receiving long-term aspirin therapy.
 - American Indians/Alaska natives.
 - People with extreme obesity (i.e., body-mass index is equal to or greater than 40).
 - Residents of nursing homes and other chronic-care facilities.
- Oral oseltamivir is the recommended antiviral for patients with severe, complicated, or progressive illness who are not hospitalized, and for hospitalized influenza patients.
- Oral baloxavir, a new antiviral agent, is approved by the FDA for treatment of acute uncomplicated influenza within 2 days of illness onset in people 12 years and older. Baloxavir is not recommended for treatment of pregnant or breastfeeding mothers due to lack of safety and efficacy data.
- Antiviral treatment also can be considered for any previously healthy, symptomatic outpatient not at high risk for influenza complications, who is diagnosed with confirmed or suspected influenza, on the basis of clinical judgment, if treatment can be initiated within 48 hours of illness onset.

- Additional information about antiviral medications can be found at <http://www.cdc.gov/flu/professionals/antivirals/summary-clinicians.htm>
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For more information

- Colorado Influenza Report: <https://www.colorado.gov/pacific/cdphe/influenza>
- CDPHE Disease Reporting Line: 303-692-2700 or 303-370-9395 (after hours)

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John W. Hickenlooper, Governor | Karin McGowan, Interim Executive Director

