

KENT COUNTY HEALTH DEPARTMENT

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New Treatment Guidelines for Novel Influenza A H1N1

As of May 7, 2009, eleven confirmed and 28 probable cases of novel influenza A H1N1 have been reported in Kent County. Because of changes in testing guidelines, the health department will be doing far fewer individual case investigations on probable and confirmed cases. Consequently, providers need to continue to be vigilant in identifying suspect cases and their close contacts that may benefit from prophylaxis based on current guidance from CDC. Use of the anti-viral stockpiles for treatment and prophylaxis is encouraged.

Keep in mind that this guidance is extremely fluid based on the specifics of the outbreak and the availability of anti-virals. Please regularly review the online treatment guidelines on <http://www.cdc.gov/h1n1flu/recommendations.htm>. The last update was May 6, 2009 and emphasizes the following:

Treatment

- Hospitalized patients.
- High risk patients (see below).
- Use clinical judgment when the illness appears mild. The benefit of anti-virals in these cases, which are numerous, is likely to be modest at best.

Chemoprophylaxis

- High risk contacts (see below) of confirmed, probable, or suspect cases.
- Health care personnel, public health workers, or first responders who have had a recognized, unprotected close contact exposure to a person with novel (H1N1) influenza virus infection (confirmed, probable, or suspected) during that person's infectious period.

High Risk Groups for Treatment and Prophylaxis

- Children younger than 5 years old. The risk for severe complications from seasonal influenza is highest among children younger than 2 years old.
- Adults 65 years of age and older.
- Persons with the following conditions: Chronic pulmonary (including asthma), cardiovascular (except hypertension), renal, hepatic, hematological (including sickle cell disease), neurologic, neuromuscular, or metabolic disorders (including diabetes mellitus).
- Immunosuppression, including that caused by medications or by HIV.
- Pregnant women.
- Persons younger than 19 years of age who are receiving long-term aspirin therapy.
- Residents of nursing homes and other chronic-care facilities.

Remember Relenza® (zanamivir)

Relenza represents 20% of the initial stockpile, and is being used far less than Tamiflu®. It has the advantage of showing activity against the residual seasonal influenza A, which is very much a part of the influenza you are seeing. It's dosed the same for all ages, but as an inhaled medication, is only indicated for children age 7 or older. It should not be used with underlying lung disease or lactose allergy. A situation where the only anti-viral remaining is Relenza, making it impossible to treat children less than 7 years old, needs to be avoided.

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