Swine Flu Update #2

Current Situation
The Centers for Disease Control and Prevention (CDC) has identified confirmed human cases of swine influenza A (H1N1) virus infection in 10 states including Nevada. The first confirmed case of swine flu in Nevada was indentified in 2-year-old girl from Washoe County. The first death from swine flu in the United States was reported in Texas in a 22-month-old from with underlying health issues who had travelled from Mexico City. The World Health Organization reported that eight countries in addition to the United States have lab-confirmed cases, including Austria, Canada, Germany, Israel, Mexico, New Zealand, the United Kingdom, and Spain.

Surveillance is ongoing in Southern Nevada; no laboratory-confirmed cases have yet been identified in the district.

The World Health Organization has raised the current level of influenza pandemic alert from phase 4 to phase 5. This phase is characterized by human-to-human spread of the virus in at least two countries. Recommendations at this phase are heightened surveillance, early detection and treatment of cases, and infection control measures in health facilities. These recommendations are consistent with the current response in Southern Nevada and the United States and should not require significant changes to patient care or disease surveillance.

Testing
SNHD is slightly expanding recommendations for testing to include patients hospitalized for influenza-like illness with or without travel-related risk factors. The testing process remains the same as provided in earlier recommendations.

Clinicians should consider the possibility of swine influenza virus infections in patients presenting with febrile respiratory illness who:

- Have travelled to any of the affected areas in the seven days prior to the onset of illness, or
- Have been in contact with ill persons from the affected areas within the seven days prior to the onset of illness, or
- Are hospitalized with a febrile respiratory illness.

The Southern Nevada Health District recommends that patients who meet these criteria be screened for influenza A infection by rapid testing. For patients with a positive screening test for influenza A, viral typing by PCR is performed by the Southern Nevada Public Health Laboratory (SNPHL), and confirmatory testing is performed at the CDC.

Rapid testing can be performed in a clinician’s office or at a commercial or hospital laboratory.

- Healthcare providers who have the ability to run their own rapid influenza tests should collect two swabs or one nasal wash from the patient. If positive for influenza A then place the second swab or nasal washing in viral transport media and contact the Office of Epidemiology at 759-1300, option 2 to make arrangements for specimen pickup.
- Healthcare providers who are not conducting rapid influenza testing at their facilities should contact their reference laboratory for instructions on submission of samples for rapid influenza testing including submission of a sample to SNPHL for molecular testing if rapid influenza A is positive.
- Healthcare providers who utilize commercial laboratories but do not collect specimens should order testing from the laboratory by their usual process. Commercial laboratories have been instructed to submit specimens positive for influenza A to SNPHL for PCR testing. Healthcare providers should provide a mask for the patient to wear to the collection site in order to minimize the risk of exposure for other patients.

Patients who screen positive and meet the above criteria should be reported to the Office of Epidemiology at 759-1300, option #2.

For More Information
Updates on the progress in the investigation and any additional recommendations will be posted on the SNHD website http://www.southernnevadahealthdistrict.org/outbreaks/swine-flu-index.htm and the CDC website at http://www.cdc.gov/flu/swine/investigation.htm.