

Swine Flu Update #5

Current Situation

On May 5, 2009, the Southern Nevada Health District (SNHD) identified two cases of swine influenza in Clark County, laboratory confirmed by the Centers for Disease Control and Prevention (CDC). These cases were identified through the enhanced surveillance established in Southern Nevada for this purpose and are not unexpected. Our community should continue to expect additional cases with some patients requiring hospitalization, and even some fatalities.

Of 76 specimens collected in Clark County for which testing has been completed, 38 (50%) of specimens were negative for influenza infection by RT-PCR despite testing positive for influenza A by rapid test. Of the 38 confirmed by PCR to be influenza, 28 (74%) were typed as influenza A strains typical of seasonal influenza, 3 (8%) were typed as influenza B, and 7 (18%) were untypable, indicating the likely presence of the H1N1 swine influenza virus.

As both seasonal influenza viruses and H1N1 swine influenza are circulating in the community, providers should consider both types of influenza viruses in the differential diagnosis for patients with acute febrile respiratory illness.

Testing

Most patients ill with influenza have mild illness and do not seek medical attention, thus it is not possible to use routine diagnostic testing to identify the extent of disease transmission in the community. The current surveillance goal of SNHD is to identify any changes in the epidemiology or virulence of the virus through the targeted testing of patients hospitalized with severe acute febrile respiratory illness. **Given the limited testing resources in the community, PCR typing and confirmatory testing is now only being performed for hospitalized patients. The Southern Nevada Public Health Laboratory (SNPHL) requests that physicians no longer submit specimens from non-hospitalized patients, but testing will be completed on non-hospitalized patient samples that were submitted to SNPHL prior to Wednesday, May 6.**

Clinicians may consider using rapid diagnostic tests as part of their evaluation of patients with signs and symptoms compatible with influenza, but results should be interpreted with caution. CDC has not yet issued specific recommendations on the use of rapid influenza diagnostic tests in patients with novel H1N1 virus infection, and CDC reports receiving anecdotal reports of both false negative and false positive results on rapid diagnostic tests.

Testing in non-hospital settings should focus on those patients where laboratory findings will guide treatment and management, and provide for better informed clinical decisions. Not all people with suspected novel H1N1 swine influenza infection need to have the diagnosis confirmed, and cases should be tested as for seasonal influenza. Testing should be considered for patients ill with serious acute febrile respiratory illness or patients with mild or typical influenza-like illness but who are at high risk for complications. Testing is also not necessary for the readmission of children to school or daycares, as ill children should be excluded from school based on symptoms, not laboratory findings. In general, providers should approach diagnostic testing of patients as they would during seasonal influenza, and laboratory confirmation of H1N1 swine influenza is not necessary for the management of patients as confirmatory testing is being used as a public health surveillance tool.

Reporting

Hospitalized patients who test positive rapid test for influenza A should be reported to SNHD by telephone at 759-1300, option 2 (24 hours a day, 7 days a week).

Patients who test positive in the community setting should be reported by fax to the Office of Epidemiology at 759-1414 using standard communicable disease reporting forms (available on the physician information section of the SNHD website at http://www.southernnevadahealthdistrict.org/physician/physician_only.htm). It is unnecessary to report these cases immediately by telephone.

(more...)

Treatment

CDC recommends that antiviral treatment be focused on those with severe respiratory illness and those at highest risk of complications from influenza.

Antivirals should be prescribed to:

- Hospitalized patients with probable, or confirmed H1N1 swine influenza infection, or positive influenza A rapid testing
- Patients with mild or uncomplicated febrile respiratory illness who are at higher risk for severe illness or complications of influenza because of underlying health conditions
- Health-care workers involved in direct patient care of suspected, probable, or confirmed cases of H1N1 swine influenza and who have not used appropriate personal protective equipment

Antivirals should **not** be prescribed to:

- Patients with mild or uncomplicated febrile respiratory illness with no underlying conditions that place them at risk for more severe illness or complications of influenza
- Asymptomatic close contacts of suspected, probable, or confirmed cases with no underlying conditions that place them at risk for more severe illness or complications of influenza
- Health-care workers involved in direct patient care who used appropriate personal protective equipment
- Patients or health-care workers who wish to take the antiviral medications prophylactically in the absence of exposure to disease
- Patients who wish to stockpile the antivirals for future use

Advice for Patients

Patients should be instructed to handle their illness as they would seasonal influenza. Non-hospitalized patients with febrile respiratory illness are being advised to stay home for seven days after symptom onset or 24-48 hours after symptom resolution, whichever is longer. Current recommendations to the public encourage good health habits to minimize the spread of influenza:

- Cover your nose and mouth with a tissue when you cough or sneeze. Throw the tissue in the trash after you use it.
- Wash your hands often with soap and water, especially after you cough or sneeze. Alcohol-based hand cleaners are also effective.
- Avoid touching your eyes, nose or mouth. Germs

spread this way.

- Try to avoid close contact with sick people.
- If you get sick with influenza, stay home from work or school and limit contact with others to keep from infecting them.
- Plan ahead. Have enough food and supplies on hand to ensure you can rest comfortably at home if you do become ill but don't require professional medical care.

For More Information

Updates on the progress in the investigation and any additional recommendations will be posted on the SNHD website at <http://www.southernnevadahealthdistrict.org/outbreaks/swine-flu-index.htm> and the CDC website at <http://www.cdc.gov/h1n1flu/>.