

December 9, 2009 Novel H1N1 Pandemic Influenza Update

Report submitted by Barbara Earley, RN, MSN
HCPHA Health/Emergency Preparedness Planner

Updated information based in part on yesterday's videoconference with State Public Health. Go to www.cdc.gov/h1n1flu/ or flu.nc.gov for additional general information. Clinicians should visit www.cdc.gov/h1n1flu/clinicians/ and www.epi.state.nc.us/epi/gcdc/H1N1flu.html for NC specific guidance on vaccinations, testing, etc.

Getting vaccinated is the best method for preventing the flu. Even though the incidence of novel H1N1 has decreased in our area, there is a chance that those who have not been vaccinated can get the novel H1N1 flu AND the seasonal flu when it begins circulating in January-March.

New information is in *italics* and underlined.

- *Over 99% of all subtyped influenza A viruses reported to CDC this week were 2009 influenza A (H1N1) viruses.*
- *81 people received an H1N1 vaccine during the December 5th vaccination clinic at Merherrin Baptist Church.*
- *An estimated 28% of the target population in Hertford County received the novel H1N1 vaccine during October and November.*
- *The State Health Director is now encouraging all vaccine providers to offer vaccine to all interested individuals.*
- *The H1N1 vaccine will continue to be provided free in the HCPHA clinic through January. Please call for an appointment.*
- *Additional off-site vaccination clinics are being planned.*
- *NC Flu activity is still categorized as widespread. Visits to an ED by Hertford County residents with influenza like illness and public school absenteeism rates have continued to decrease since the end of October.*
- Tamiflu has been stockpiled by the state. If needed, one must go through local Emergency Management to request assets from the state.
- The H1N1 vaccine is as safe and effective as the seasonal flu vaccine. Nasal H1N1 vaccine is safe.
- NC is now following the CDC recommendations that healthcare workers wear well-fitting N-95 masks when working with clients who have or are suspected of having the novel H1N1 virus. HCPHA received a shipment of N-95 masks from the strategic national stockpile two weeks ago for the hospital, emergency medical services and private medical providers. Please call Barbara Earley if your practice needs additional N-95 masks. A respiratory projection program is recommended but not mandatory to receive N-95 masks from the SNS stockpile at this time.
- As of October 1st, ALL Influenza deaths, both in adults as well as usual for children, are to be reported to Hertford County Public Health Authority or directly to the state epidemiology office.
- If a resident received the novel H1N1 flu mist then has the flu within 2 weeks, you can treat with Tamiflu if High Risk but should probably revaccinate.

- Vaccination Information Sheets (VIS) will not accompany vaccines. VIS for the live, intranasal and killed vaccines are now posted at cdc.gov/h1n1flu/clinicians.
- The state lab will now only accept lab specimens for novel H1N1 testing if the patient was admitted to an ICU or died from suspected flu. Local Health Department permission is no longer needed before submitting specimen from ICU patient. Specimens can be submitted to private labs.
- Sentinel sites are asked to submit only three samples per week. The state lab has moved from a diagnostic mode to a surveillance mode for the novel H1N1 virus.
- Rapid flu tests are not recommended for the novel H1N1 virus. If used, do not trust negative results until additional seasonal flu viruses are circulating.
- CDC is recommending the following for dosing:
 - Children 9 years and younger-2 doses roughly 21 days apart (30 days apart if they receive the flu mist).
 - Individuals 10 and older-1dose.
- State Immunization Branch call center for novel N1H1 vaccine questions: 919-707-5550
- People should not receive an antiviral medication 48 hours prior to flu mist and 2 weeks after receiving the flu mist because flu mist contains live, though weakened, virus.
- Seasonal flu mist and novel H1N1 flu mist cannot be given at the same time. There should be a 28 day wait period between flu mist administrations.
- ACIP says both seasonal and novel H1N1 injectable vaccines can be given at the same time because they contain dead viruses.

- Local Planning:
 - HCPHA is continuing to educate and reeducate the public about flu prevention and vaccine availability through various media and avenues.
 - Informational presentations are available to groups. Call Kathryn Sellers at 358.7833.
 - Diane McLawhorn and the clinic staff are planning for special hours and possible off-site locations for giving the H1N1 vaccine based on demand.
 - HCPHA is currently out of seasonal flu vaccine. We have been told that we will not receive the remainder of our order that was placed last April. Vaccine manufacturers are no longer making 2009 seasonal vaccine.