



- Please bring to the attention of all doctors -

Date: 9 August 2010 Contact telephone number: **8226-7177 (24 hours/7 days)**

Influenza update 2010

After a relatively quiet start to the influenza season in South Australia notifications have been increasing over the past 4 weeks. As of July 31 2010 there have been 163 influenza notifications, compared with 5,194 notifications at the same time last year. The majority of these continue to be the pandemic H1N1 2009 influenza strain. Peak incidence is in the 20-30 year age group with very few notifications in those under 5 years or over 65 years.

Whilst we are expecting a normal influenza season in 2010, Australia remains in the 'PROTECT phase' in the response to pandemic H1N1.

Infection prevention and control

- Vaccination with either the monovalent H1N1 vaccine (Panvax®) or trivalent seasonal influenza vaccine remains an extremely effective way to prevent potentially serious disease. (Note: The use of *Fluvax*® (CSL) in children less than 5 years is not recommended but alternative products can now be used).
- All health care workers providing clinical care are strongly encouraged to be vaccinated.
- People with influenza like illness should not attend school, child care, work or public gatherings while symptomatic.
- Urgent notification by telephone on 8226 7177 is required for outbreaks in high risk settings such as residential care facilities, Aboriginal or Torres Strait Islander communities and in health care settings. Other laboratory confirmed notifications should be routinely faxed to CDCB on 8226 7187.

Clinical management

- Given the anticipated lower influenza activity this year combined with the expected wide commercial availability of antiviral medications in Australia, antivirals will not be provided from National or State stockpiles. Clinicians should prescribe antiviral medications using normal community pharmacy arrangements.
- Antiviral treatment should be targeted at: (1) Those at an increased risk for severe disease from including those with chronic respiratory conditions, pregnant women, particularly in the 2nd and 3rd trimester, persons with morbid obesity, Aboriginal or Torres Strait Islander people of any age, those who smoke and persons with chronic illnesses predisposing to severe influenza (further information available at: <http://www.healthemergency.gov.au/internet/healthemergency/publishing.nsf/Content/clinical-national-statement>) and; (2) Those who have moderate or severe disease, or who are rapidly deteriorating.
- Antiviral medications are most effective if commenced within 48 hours of onset of illness
- Post-exposure prophylaxis is rarely needed. Please discuss with a CDCB medical officer if this is considered necessary.
- Laboratory testing may be used to assist with the clinical management of patients, but is not routinely required.

Dr Ann Koehler – Director, Communicable Disease Control Branch