

DPHHS HAN HEALTH ADVISORY

Cover Sheet

DATE: March 28, 2019

SUBJECT: Influenza Season Continues with an Increase in Influenza A(H3N2) Activity CDC reminds clinicians to have a high suspicion for influenza and recommends rapid antiviral treatment of high-risk patients with suspected influenza.

**For LOCAL HEALTH
DEPARTMENT reference only**

DPHHS Subject Matter Resource for more information regarding this HAN, contact:

**DPHHS CDCP
Epidemiology Section
1-406-444-0273**

INSTRUCTIONS:

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Categories of Health Alert Messages:

Health Alert: conveys the highest level of importance; warrants immediate action or attention.

Health Advisory: provides important information for a specific incident or situation; may not require immediate action.

Health Update: provides updated information regarding an incident or situation; unlikely to require immediate action.

Information Service: passes along low level priority messages that do not fit other HAN categories and are for informational purposes only.

Please update your HAN contact information on the Montana Public Health Directory

Information Sheet

Date: March 28, 2019

Subject: Influenza Season Continues with an Increase in Influenza A(H3N2) Activity CDC reminds clinicians to have a high suspicion for influenza and recommends rapid antiviral treatment of high-risk patients with suspected influenza.

Background: CDC has alerted state health departments that the influenza season continues to be elevated and widespread and that this year and recently there has been an upsurge in H3N2 activity. In Montana, we have seen a similar trend. So, and unusually, Influenza A(H1N1)pdm09, influenza A(H3N2), and influenza B viruses continue to co-circulate with H3N2 viruses now dominating. This is particularly concerning because in the past when A(H3N2) virus-predominant seasons have been associated with severe disease in older adults especially those 65 and older and hospitalized and high-risk patients. Once again, this occurrence is unusual and could result in a different presentation versus cases seen earlier in the influenza season. Weekly updates detailing Montana's influenza activity are available at: dphhs.mt.gov/publichealth/cdepi/diseases/influenza

Information:

Recommendations: Please read the attached CDC Health Advisory for detailed recommendations on how to address cases at this point in the influenza season.

The key messages are:

- All Hospitalized, Severely Ill, and High-Risk Patients with Suspected or Confirmed Influenza Should Be Treated with Antivirals
- Timing of Treatment and Implications for Patient Evaluation, Treatment, and Testing
- Consider Antivirals in Non-High Risk Patients with Uncomplicated Influenza

Treatment

- For outpatients with acute uncomplicated influenza, oral oseltamivir, inhaled zanamivir, intravenous peramivir, or oral baloxavir may be used for treatment.
- Oral or enterically-administered oseltamivir is the only recommended antiviral medication for treatment of hospitalized patients with suspected or confirmed influenza and patients with severe or complicated illness with suspected or confirmed influenza (e.g., pneumonia, exacerbation of underlying chronic medical condition) who are not hospitalized.
- Oral oseltamivir is preferred for treatment of pregnant women.

Clinical benefit is greatest when antiviral treatment is administered as early as possible after illness onset. Therefore, antiviral treatment should be started as soon as possible after illness onset and should not be delayed, even for a few hours to wait for the results of testing.

[Link to CDC HAN 419](#)