

## Alaska Public Health Update

### Novel Influenza A (H1N1) Virus

### Interim Guidance for Alaska Health Care Providers

May 7, 2009

#### NOVEL INFLUENZA A (H1N1) ACTIVITY IN ALASKA

As of May 7, 2009, no probable or confirmed cases of novel influenza A (H1N1) infection have been identified in Alaska.

#### RECOMMENDATIONS FOR ALASKA STATE VIROLOGY LABORATORY TESTING

To target persons who are at greatest risk for H1N1 influenza, please use the following guidelines for submitting specimens to the Alaska State Virology Laboratory (ASVL).

Please submit a specimen to the ASVL when the patient has an illness characterized by fever ( $\geq 100^{\circ}$  F) with either cough or sore throat, and one of the following conditions is true:

1. Illness is severe enough to require hospital admission, or
2. A rapid test is positive for influenza A, or
3. A rapid test is negative (or no rapid test was done), and:
  - Patient has traveled outside of Alaska or to a region within Alaska where there have been one or more confirmed cases of novel H1N1 influenza A infection within 7 days of illness onset, or
  - Patient has a history of close contact to a probable or confirmed case of novel H1N1 influenza A

*On the laboratory requisition form, please indicate any rapid influenza test results, as well as any travel history.*

Do not submit a specimen to the ASVL in the following situations:

1. A rapid test is positive for influenza B. In this case, no further testing is necessary.
2. A rapid test is negative and the patient does not have the travel or case exposure history described in #3 above.

More information about rapid influenza diagnostic testing and novel H1N1 influenza A infection can be found at: [http://www.cdc.gov/h1n1flu/guidance/rapid\\_testing.htm](http://www.cdc.gov/h1n1flu/guidance/rapid_testing.htm).

## UPDATED ANTIVIRAL RECOMMENDATIONS

A portion of the Alaska antiviral stockpile has already been positioned at hub communities throughout Alaska. In addition, hospitals throughout Alaska previously received antiviral drugs supplied by the state. The state-supplied antiviral medications should be used as follows:

- Treatment of persons with suspected, probable, or confirmed novel H1N1 influenza A infection
  - Priority should be given to treating hospitalized patients and patients who are at increased risk for complications from seasonal influenza infection (i.e., immunocompromised persons, pregnant women, children aged <5 years, persons age 65 years and older, persons with chronic medical conditions)
  - Health care providers should use clinical judgment to guide treatment decisions for patients who are not in one of the two priority groups listed above
- Chemoprophylaxis should be considered in some settings. Clinical consultation is available with the Alaska Section of Epidemiology ((907)269-8000). This recommendation might change as the epidemic evolves. Chemoprophylaxis should be considered for the following individuals:
  - Household contacts of a probable or confirmed case who are at high-risk for complications of influenza (see above), and
  - Health care workers with unprotected contact with an ill confirmed or probable case of novel H1N1 influenza A infection during the case's infectious period.
- Dosing recommendations for oseltamivir and zanamivir can be found in "Interim Guidance for Alaska Health Care Providers" at: <http://www.epi.hss.state.ak.us/id/influenza/SwineFluGuidanceAKHealthCareProviders.pdf>.
- Updated CDC interim guidance on antiviral treatment and prophylaxis, including specific recommendations regarding pregnant women, children under 1 year of age, and outbreak control in nursing homes and other long term care facilities is available at: <http://www.cdc.gov/h1n1flu/recommendations.htm>
- CDC's interim infection control guidance is available at: [http://www.cdc.gov/h1n1flu/guidelines\\_infection\\_control.htm](http://www.cdc.gov/h1n1flu/guidelines_infection_control.htm)

## **RECOMMENDATIONS FOR SCHOOL RELEASE**

Based on new information that the novel H1N1 influenza strain is not causing unusually severe disease at this time, the CDC no longer recommends that communities with suspected or confirmed cases of novel H1N1 routinely consider closing schools or child-care centers. Instead, the CDC recommends early identification of ill students and staff, good cough and hand hygiene, and staying home when sick. The Alaska Department of Health and Social Services (DHSS) supports this approach to dealing with cases of the novel H1N1 influenza in schools.

- “Guidance on School Closures for Alaska Schools due to Novel H1N1 Influenza” can be found at: [http://www.hss.state.ak.us/press/2009/H1N1school\\_os\\_050509.pdf](http://www.hss.state.ak.us/press/2009/H1N1school_os_050509.pdf)
- CDC’s interim recommendations related to school and childcare facility closure is available at: [http://www.cdc.gov/h1n1flu/K12\\_dismissal.htm](http://www.cdc.gov/h1n1flu/K12_dismissal.htm)

## **GUIDANCE FOR CRUISE SHIPS**

The CDC has developed guidance for prevention and control of H1N1 influenza on cruise ships. Cruise ships, by law, must report suspected novel H1N1 influenza illness to the nearest CDC Quarantine Station. The Anchorage Quarantine Station is working closely with cruise ship companies and the Alaska Section of Epidemiology.

- Alaska-specific information related to novel H1N1 influenza and cruise ships can be found at: <http://www.pandemicflu.alaska.gov/PDFs/CruiseShips.pdf>
- “Interim Novel Influenza A (H1N1) Guidance for Cruise Ships” can be found at: <http://www.cdc.gov/h1n1flu/guidance/cruiseships.htm>

## **RECOMMENDATIONS FOR MIGRANT AND SEASONAL WORKERS**

Migrant and seasonal workers in Alaska represent a large summer labor market, especially in the fishing and tourism industries. Alaska-specific recommendations for preventing H1N1 influenza in this population is outlined in “Interim Guidance for Alaska Employers for Protection of Migrant and Seasonal Workers from the H1N1 (Swine flu)” which can be found at: <http://www.pandemicflu.alaska.gov/PDFs/EmployerGuidance.pdf> .