



NEW YORK CITY DEPARTMENT OF
HEALTH AND MENTAL HYGIENE
Mary T. Bassett, M.D., M.P.H.
Commissioner

2018 Advisory #3: Influenza Advisory

- **Antiviral treatment is recommended as early as possible for patients with confirmed or suspected influenza who are hospitalized, seriously ill, or at high risk of serious influenza-related complications**
- **Occasional challenges in obtaining influenza antiviral medications have been reported in New York City**
- **Temporary shortages of antiviral medications at a particular pharmacy may occur; providers are encouraged to call a pharmacy to confirm availability before transmitting electronic prescriptions**
- **Such temporary shortages have been more commonly reported for oseltamivir (Tamiflu®) suspension. In the event of unavailability of suspension, pharmacists are encouraged to compound suspension from 75 mg capsules of oseltamivir (Tamiflu®) using available guidance included in this alert.**

Please distribute to staff in the Departments of Critical Care, Emergency Medicine, Family Practice, Geriatrics, Internal Medicine, Infectious Disease, Infection Control, Obstetrics, Pediatrics, Pulmonary Medicine, Pharmacy, and Laboratory Medicine

February 16, 2018

Dear Colleagues,

As in other parts of the country, influenza activity in NYC remains elevated. During the most recent surveillance week, 8.6% of outpatient visits were for influenza-like illness (ILI), and 35% of specimens submitted for respiratory virus testing were positive for influenza.

One of three influenza antiviral medications – oseltamivir (Tamiflu®), zanamivir (Relenza®), or peramivir (Rapivab®) – should be used for treating influenza infections, especially in persons at high risk for serious complications of influenza infection. Peramivir is only available as an IV formulation and is approved for use in persons two years of age and older. Only oseltamivir and zanamivir are approved for prophylaxis. Zanamivir should not be used in persons with underlying airways disease, such as asthma or COPD.

Treatment should begin as soon as influenza is suspected, regardless of vaccination status or rapid test results, and should not be delayed for confirmatory testing. Rapid antigen tests for influenza may exhibit reduced sensitivity (i.e., 50% or less), and a negative rapid antigen test result does not rule out influenza infection.

Antiviral treatment should be started as early as possible for any patients with confirmed or suspected influenza who are hospitalized, seriously ill, or ill with a high risk of serious influenza-related complications. The latter group includes:

- Persons over 65 or under 2 years of age
- Pregnant women, or those who have given birth within the previous 2 weeks

- Persons with diabetes, chronic lung (e.g., asthma), heart, kidney, liver, or blood disorders, neurological disorders compromising respiration, history of stroke, morbid obesity (i.e., body-mass index ≥ 40), or who are immunocompromised (e.g. HIV, AIDS and/or cancer)
- Persons under 19 years of age who are on long-term aspirin therapy

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Additional recommendations on the use of antiviral drugs are available at:

<http://www1.nyc.gov/site/doh/health/health-topics/flu-seasonal-treatment.page>

<http://www.cdc.gov/flu/professionals/antivirals/index.htm>

Occasional challenges in obtaining influenza antiviral medications, especially oseltamivir suspension, have been noted recently by some New York City residents. Tamiflu® remains widely available. While the supply of influenza antivirals citywide remains sufficient, these occasional challenges may constitute a functional short-term shortage in specific pharmacies.

The NYS Education Department's Board of Pharmacy advises that pharmacists may compound suspension from 75mg capsules of oseltamivir or Tamiflu®, and that:

- The ability to compound is based on immediate need and the unavailability of commercially-manufactured oral suspension.
- Pharmacists should annotate on the prescription that an emergency exists and the commercially-manufactured oral suspension is not available.
- A separate order from the prescriber is not required.
- If the prescription is written for commercially-manufactured liquid Tamiflu and “Dispense As Written” is indicated, then Tamiflu (brand name) 75 mg capsules must be used to compound.

Pharmacists wishing to compound an oral suspension of oseltamivir may refer to instructions located in the package insert, available at

<https://www.fda.gov/downloads/Drugs/DrugSafety/InformationbyDrugClass/ucm147992.pdf>

Additionally, written instructions for non-professionals for mixing oseltamivir capsule contents into a liquid suspension for pediatric or other uses are available at

https://www.cdc.gov/flu/antivirals/mixing_oseltamivir_qa.htm, and a brief video demonstrating this procedure is located at <https://www.cdc.gov/cdctv/diseaseandconditions/influenza/mixing-tamiflu-sweet-liquids.html>.

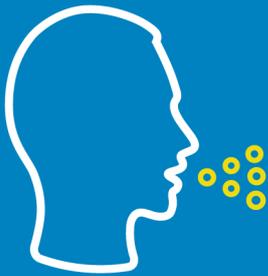
Sincerely,



Demetre C Daskalakis, MD MPH
Deputy Commissioner
Division of Disease Control

When to Prescribe a Flu Antiviral

When influenza is spreading widely in the community, prescribe antivirals as shown:*



- Fever + Cough
or
- Fever + Sore Throat
or
- Influenza otherwise suspected



- Seriously ill
or
- Age <2 or >65
- Pregnant or recently pregnant
- Asthma, COPD or chronic lung disorder
- Diabetes
- Other high-risk conditions:
 - Chronic heart, kidney, liver or blood disorders
 - Neurologic disorders that cause breathing problems
 - Immunocompromised
 - Age <19 + long-term aspirin therapy
 - Morbid obesity (BMI ≥40)

Treat as soon as possible with *oseltamivir*, *peramivir* or *zanamivir*. Do not wait for test results.

For more information, call the Health Department's Provider Access Line at 1-866-692-3641.



*Find a complete list of high-risk conditions and guidance on antiviral use at nyc.gov/health.