2019 Health Advisory #31:
Influenza Prevention and Treatment, 2019-2020

Please distribute this advisory 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

- Influenza activity is elevated in New York City.
- Flu vaccination is recommended for all persons 6 months of age and older
- Documentation of immunization status for healthcare workers is required. Unvaccinated healthcare workers must wear masks when at work while flu is prevalent in New York State.
- Antiviral treatment is recommended as early as possible for patients with confirmed or suspected influenza who are hospitalized, seriously ill, or ill and at high risk of serious influenza-related complications.
- The following are reportable to the New York City Health Department:
  - Nosocomial outbreaks of febrile respiratory disease in long-term care facilities.
  - Suspected or confirmed pediatric influenza-associated deaths.
  - Novel influenza strains with pandemic potential.

December 18, 2019

Dear Colleagues,

Influenza activity is elevated in New York City. The Health Department reminds clinicians that it’s never too late in the flu season to administer the flu vaccine, and that antiviral medications should be used for influenza treatment and prophylaxis, when indicated.

During the most recent surveillance week, 3.5 percent of outpatient visits were for influenza-like illness (ILI), and 12 percent of specimens submitted for respiratory virus testing were positive for influenza, which represents an expected steady increase in influenza activity. During the current influenza season, influenza A and influenza B viruses are co-circulating in New York City. Nationally, influenza activity is being caused mostly by influenza B viruses, followed by H1N1 viruses and H3N2 viruses. It is too early in the season to determine which influenza viruses will predominantly circulate this season. Weekly updates on current NYC influenza activity may be found by visiting nyc.gov/health and searching for “flu alerts”. For US influenza activity updates, please visit cdc.gov/flu/weekly.

**FLU VACCINATION RECOMMENDATIONS AND SUPPLY**
Flu vaccination coverage levels in NYC are below the Healthy People 2020 Goals for almost all age groups. A recommendation from a clinician is the most important factor in determining whether someone is vaccinated. Annual flu vaccination is recommended for all persons 6 months and older. Anyone who has not yet been vaccinated this season should get a flu vaccine now.
Flu vaccination is particularly important among certain groups at higher risk of serious complications from influenza, including:

- All children aged 6 through 59 months, especially children aged younger than 2 years
- Adults aged 50 years and older, especially adults aged 65 years and older
- Persons who are or may be pregnant during influenza season
- Residents of nursing homes and other long-term care facilities
- American Indians and Alaska Natives
- Adults and children with certain high-risk medical conditions including people with body mass index ≥ 40 kg/m², asthma, and diabetes (see cdc.gov/flu/about/disease/high_risk.htm for a complete list).

Caregivers or close contacts of those listed above, as well as caregivers of infants younger than 6 months, should ensure they are vaccinated. Additionally, health care workers should be vaccinated to prevent acquiring and transmitting influenza to others.

If you need more vaccine, flu vaccine is still available for purchase. For a list of available products and where to purchase to them, visit izsummitpartners.org/ivats. Providers enrolled in the Vaccines for Children (VFC) program who need to order additional vaccine or have questions about their flu vaccine order, can visit nyc.gov/health/cir and log on to the Online Registry to place or track a request. You may also send an e-mail to nycimmunize@health.nyc.gov.


**FLU VACCINATION FOR HEALTHCARE PERSONNEL**

Annual flu vaccination of all healthcare personnel is considered the standard of care. New York State (NYS) Public Health Law requires all healthcare facilities and agencies licensed under Articles 28, 36 or 40 to document their healthcare personnel flu vaccination status and require healthcare personnel who do not receive flu vaccine to wear a mask through the period that the NYS Health Commissioner deems influenza to be prevalent. On December 5, 2019, the New York State Health Commissioner declared influenza to be prevalent statewide (https://www.health.ny.gov/press/releases/2019/2019-12-05_influenza_is_prevalent.htm).

**INFLUENZA ANTIVIRAL MEDICATIONS**

One of four influenza antiviral medications — oseltamivir (Tamiflu®), zanamivir (Relenza®), peramivir (Rapivab®), or baloxavir (Xofluza®) — should be used for treating influenza infections, especially in persons at high risk for serious complications of influenza infection. Only oseltamivir and zanamivir are recommended for prophylaxis. Zanamivir should not be used in persons with underlying chronic airways disease, such as asthma or COPD. 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 persons, or those who have given birth within the previous 2 weeks.
• Persons with diabetes, chronic lung (e.g., asthma, COPD), 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; immunosuppressive medications such as chronic steroids, and/or cancer treatment)

• Persons under 19 years of age who are on long-term aspirin therapy

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. Further recommendations on the use of antiviral drugs are available at: cdc.gov/flu/professionals/antivirals

INFLUENZA REPORTING
During influenza season, clinicians should suspect influenza infection in patients with febrile respiratory illness, test specifically for influenza in patients at higher risk for complications and report nosocomial outbreaks of febrile respiratory disease. The Health Department also requires physicians to report immediately by telephone any influenza-associated deaths occurring in persons under 18 years of age, and suspected infection with any novel influenza strain with pandemic potential; please report to the Provider Access Line at 1-866-692-3641.

For information regarding control of influenza outbreaks in long-term care facilities and other congregate settings, please contact the Health Department’s influenza surveillance coordinator, Alice Yeung, during business hours at 347-396-2608 or 347-396-2600.

REPORTING OF FLU VACCINE DOSES ADMINISTERED
Providers must report all doses of vaccine administered to children less than 19 years of age to the Citywide Immunization Registry (CIR). For patients 19 years and older, providers are strongly encouraged to report vaccines with patient consent. For more information, please visit nyc.gov/health/cir. Additionally, effective October 2014, pharmacists and registered nurses in New York State must report all vaccines administered to adults 19 years and older to the CIR, with the patient’s consent. We recommend that providers use the CIR to look up doses of flu vaccine administered at locations other than their facility, particularly those given at pharmacies. Information on the reporting requirement is available at: health.ny.gov/prevention/immunization/information_system/laws_and_regulations/docs/notification_letter.pdf

Thank you for your partnership in influenza surveillance and control in NYC.

Sincerely,

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