2015 Advisory #4: Antiviral Treatment for Influenza Infection

- Influenza activity remains elevated in New York City.
- All high-risk* or severely ill patients (either hospitalized or outpatient) with suspected influenza should be treated as soon as possible with one of three available influenza antiviral medications.
- Prescribe empiric influenza antiviral therapy as soon as the diagnosis is suspected, without waiting for results of confirmatory laboratory testing.

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

January 29, 2015

Dear Colleagues,

Influenza activity remains elevated in New York City (NYC). The Health Department reminds clinicians that influenza antiviral medications should be used to treat suspected or confirmed influenza infection in: patients at high risk for complications*; patients without underlying high-risk conditions but who have severe, complicated, or progressive illness; or patients who are require hospitalization. Influenza antiviral therapy reduces secondary complications, such as secondary infection, hospitalization, and death. Initiation of antiviral therapy should occur as soon as possible, preferably within 48 hours of symptom onset, though initiation of therapy later than 48 hours after symptom onset may benefit some patients. Treatment should begin as soon as influenza infection is suspected, regardless of vaccination status or rapid test result, and should not be delayed for confirmatory testing.

One of three influenza antiviral medications—oseltamivir (Tamiflu), zanamivir (Relenza), or recently-approved peramivir (Rapivab)—should be used for treating influenza infections. Further guidelines on antiviral medications, including recommended dosages, are available on the following websites:

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

*Persons at high risk for complications secondary to influenza infection include:
- Persons over 65 or under 2 years of age
- Pregnant women, or those who have given birth, or had a miscarriage or abortion in the previous 2 weeks
- Persons with diabetes, chronic lung, heart, kidney, liver or blood disorders, neurological disorders compromising respiration, morbid obesity (i.e., body-mass index ≥ 40), or who are immunocompromised
- Persons under 19 years who are on long-term aspirin therapy

Additional information on influenza including vaccine, influenza activity, and patient education materials is available at the Health Department website listed above. Thank you in advance.

Sincerely,

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