

2014-2015 Influenza Season Start of Season Conference Call – Notes and Q&A

General information

- International update: for the most up to date information please visit http://who.int/influenza/surveillance_monitoring/updates/latest_update_GIP_surveillance/en/
 - In Europe and North America, overall influenza activity remained at inter-seasonal levels.
 - In tropical countries of the Americas, influenza B was predominant with co-circulation of respiratory syncytial virus (RSV).
 - In Africa (with exception of the southern cone) and western Asia, influenza activity was low.
 - In eastern Asia, influenza activity remained low in most countries with influenza A(H3N2) the main detected virus subtype. Influenza A(H3N2) and B activity continued in south China.
 - In the southern hemisphere, the influenza season was ongoing. In the temperate zone of South America, influenza activity associated mainly with A(H3N2) viruses decreased. In Australia and New Zealand, the influenza season was ongoing. Australia reported continued high activity associated with A(H1N1)pdm09 and A(H3N2) viruses. In South Africa the influenza season continued with A(H3N2) predominating.
 - New Hampshire has already reported one PCR confirmed case of influenza A. Maine CDC has heard of several rapid positive tests, but as of today does not have any PCR or culture confirmed cases.

Immunization

- Is there a delay in vaccine distribution?
 - There was a slight delay, but vaccine appears to be moving now
- Is there any support to the schools to receive reimbursement for administration fees?
 - Yes, administration fees can be billed to insurance during school located vaccine clinics
For more information contact Ruth Lawson-Stopps at Ruth.LawsonStopps@maine.gov
- If we have limited vaccine – how do we prioritize?
 - We would recommend prioritizing those who are at highest risk of complications due to an influenza infection including:
 - Children younger than 5, but especially children younger than 2 years old
 - Adults 65 years of age and older
 - Pregnant women
 - American Indians and Alaska Natives
 - People who have medical conditions including: asthma, neurological and neurodevelopmental conditions, chronic lung disease, heart disease, blood disorders, endocrine disorders, kidney disorders, liver disorders, metabolic disorders
 - People with weakened immune system
 - People younger than 19 years of age who are receiving long-term aspirin therapy
 - People who are morbidly obese
- Should facilities be using the high dose vaccine for individuals over the age of 65?
 - MIP does not have high dose vaccine available for long term care facilities for this season, but will be re-evaluating the data for the next season

Laboratory

- Are there any funds available to assist in influenza testing?
 - Influenza testing is available free of charge at Maine's Health and Environmental Testing Laboratory (HETL). Test kits are available by calling 287-2727 and can be returned by courier or mail. The state does not cover the cost of couriers for samples to be shipped to HETL (with the exception of some outbreaks, and ILINet providers).
- How can we get samples to the laboratory?
 - Samples can be delivered by courier (usually by coordinating with a local hospital) or through the mail with an ice pack to keep the samples cold
- Do all facilities need to submit their first 10 positive rapid influenza tests or just hospitals.
 - The standard is that hospitals are expected to submit their first ten positives. If outpatient facilities are willing and capable of submitting their first ten samples, we would love to get those as well
- How do I submit a sample after it has been tested for a rapid test kit?
 - Submit the saline that was used to complete the rapid test as well as the swab if available.
 - Instructions for submitting other samples to HETL for testing are available at <http://www.maine.gov/dhhs/mecdc/public-health-systems/health-and-environmental-testing/micro/documents/influenza-fact-sheet.pdf>
 - Do NOT use wooden swabs or calcium alginate swabs
 - Samples should be kept cold until they arrive at the laboratory

Outbreaks

- What is the cutoff to identify an outbreak in residential halls?
 - There is no specific cutoff for residential facilities. Any sudden increase is considered an outbreak, but that depends on your baseline level.

Outbreak definitions

1. Long-term care facility outbreak

Confirmed: A sudden increase of influenza like illnesses over the normal background rate, or when any resident tests positive for influenza. One case of confirmed influenza by any testing method in a long-term care facility resident is an outbreak

Probable: Three or more cases of influenza like illnesses occurring within 48 to 72 hours, in residents who are in close proximity to each other (e.g., in the same area of the facility)

2. Acute care facility nosocomial outbreak

Confirmed: One or more patients with laboratory-confirmed influenza with symptom onset greater than or equal to 48 hours post-admission

3. School (K-12) or daycare outbreak

Confirmed: Greater than or equal to 15% absenteeism among students where the majority of those absent report respiratory symptoms.

4. School (residential) or University outbreak

Confirmed: A sudden increase of influenza like illnesses over the normal background rate in this population

5. Health Care Workers

Confirmed: A sudden increase of influenza like illnesses over the normal background rate in this population

6. Other institutions (workplaces, correctional facilities etc.)

Confirmed: A sudden increase of influenza like illnesses over the normal background rate in this population

7. Summer camps

Confirmed: A sudden increase of influenza like illnesses over the normal background rate in this population

A single case of laboratory confirmed influenza (by any method) is enough to make any ILI outbreak a lab-confirmed influenza outbreak

Preparedness

- Will state supplies of Tamiflu be available for use?
 - The state does have supplies of Tamiflu that can be used in emergency situations. Report all shortages to your Regional Resource Center and if supplies aren't available in a timely manner, facilities can request use of the state cache