

MAINE PUBLIC HEALTH ALERT NETWORK SYSTEM



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****ADVISORY – Important Information****

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TO: All Maine Health Care Providers

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SUBJECT: **Updated Guidance from Maine CDC for Laboratory Testing of Persons with Suspected Swine Influenza A (H1N1) Virus**

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**Updated Guidance from Maine CDC for Laboratory Testing of Persons with Suspected Swine
Influenza A (H1N1) Virus
April 27, 2009**

Situation Update:

No cases of swine influenza (H1N1), known as swine flu, have been detected in Maine as of April 26, 2009. Maine CDC urges health care providers to increase surveillance for acute febrile respiratory illness to identify early any cases of swine influenza (H1N1) in Maine.

As part of their ongoing investigation into the outbreak, CDC yesterday announced confirmation of an additional 13 human cases of infection with swine flu in the U.S, bringing the total number of cases to 21 so far. At this time, cases of swine influenza have been confirmed in California, Kansas, New York City, Ohio and Texas. Based on the rapid spread of the virus thus far, public health officials believe that more cases will be identified over the next several weeks. Case counts are updated daily and available at <http://www.cdc.gov/swineflu/investigation.htm>.

Yesterday the Acting Secretary of the U.S. Department of Health and Human Services declared a public health emergency in the United States. U.S. CDC and Maine CDC's goals are to reduce transmission and illness severity, and provide information to assist health care providers and the public in addressing the challenges posed by this newly identified influenza virus. To this end, U.S. CDC has issued a number of guidance documents in the past 24 hours. In addition, U.S. CDC's Division of the Strategic National Stockpile (SNS) is releasing one-quarter of its antiviral drugs, personal protective equipment, and respiratory protection devices to help states respond to the outbreak. Maine CDC is working closely with U.S. CDC to arrange for these materials to be delivered to and distributed in Maine, primarily for the care of hospitalized patients seriously ill with swine flu.

Additionally, Maine CDC's laboratory, the Health and Environmental Testing Laboratory, has increased its capacity to test for swine influenza. Maine CDC senior and epidemiology staff have been in close and frequent contact with U.S. CDC and other New England states, making preparations to address this expanding outbreak.

Recommendations:

Surveillance for Swine Influenza

Maine CDC is prioritizing its surveillance efforts for swine influenza on identifying potential cases of febrile, respiratory illness in order to rapidly identify and confirm potential cases in Maine (Figure 1). Maine CDC requests that providers report and test patients with acute febrile respiratory illness who traveled to an affected area 7 days prior to their illness or who have been in contact with confirmed cases of swine flu. Health care providers may choose to perform a rapid antigen test in-house; however, a separate specimen is recommended for testing at the State Health and Environmental Testing Laboratory (HETL). Expedited transportation of clinical specimens to HETL is recommended. Instructions for collecting and submitting laboratory diagnostic specimens for swine influenza testing are available at http://www.maine.gov/dhhs/etl/micro/submitting_samples.htm. Nasopharyngeal swabs are the preferred specimens for influenza testing in the current swine influenza context.

Maine CDC requests that providers also immediately report any clusters of influenza-like illness in medical facilities, congregate settings such as long-term care facilities, or schools.

Management of Persons with Milder Influenza-like Illness

At this time, providers assessing patients with mild febrile respiratory illness in clinical settings, including emergency departments, should not administer antiviral medications for presumptive therapy, unless

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patients meet the usual criteria for empiric influenza treatment based on underlying illnesses (listed below) that put them at higher risk for complications of any type of influenza. These patients may be sent home with instructions to stay at home until 24-48 hours after their symptoms resolve and instructed on the importance of hand and respiratory hygiene. Instructions should be given to seek medical care with worsening of symptoms.

- People with respiratory illness should stay home from work or school to avoid spreading infections, including influenza, to others in the community.
- Avoid close contact with people who are coughing or otherwise appear ill.
- Avoid touching your eyes, nose and mouth.
- Wash hands frequently to lessen the spread of respiratory illness.

Infection Control

For current recommendations on infection control in medical care facilities, see http://www.cdc.gov/swineflu/guidelines_infection_control.htm.

Antiviral Treatment and Prophylaxis Guidelines

Swine influenza viruses identified in this outbreak to date have been susceptible to both oseltamivir and zanamivir. Antiviral therapy with one of these agents should be initiated empirically for patients currently hospitalized with severe unexplained febrile respiratory illness, pending testing for swine influenza. See <http://www.cdc.gov/swineflu/recommendations.htm> for specific guidelines. This document also includes detailed guidance on antiviral prophylaxis.

Disease Reporting and Consultation

To contact Maine CDC, including to report suspected cases of swine influenza and arrange for specimen testing, please call the 24/7 Disease Reporting and Consultation Line at 1-800-821-5821.

Definitions of Respiratory Illness:

1. Acute respiratory illness, defined as recent onset of at least two of the following:
 - rhinorrhea or nasal congestion
 - sore throat
 - cough
 - fever or feverishness
2. Influenza-like illness: fever $>37.8^{\circ}\text{C}$ (100°F) plus cough or sore throat

Case Definitions for Infection with Swine Influenza A (H1N1) Virus:

1. Confirmed: a person with an acute respiratory illness with laboratory confirmed swine influenza A (H1N1) virus infection at Federal CDC.
2. Probable: a person with an acute respiratory illness with an influenza test that is positive for influenza A, but H1 and H3 negative.
3. Suspected: a person with an acute respiratory illness
 - who was a close contact to a confirmed case of swine influenza A (H1N1) virus infection while the case was ill OR
 - with a recent history of contact with an animal with confirmed or suspected swine influenza A (H1N1) virus infection OR
 - who has traveled to an area where there are confirmed cases of swine influenza A (H1N1)

Conditions which increase the risk of severe influenza infection:

- chronic pulmonary, cardiovascular, renal, hepatic, hematological, or metabolic disorders,
- immunosuppression,
- compromised respiratory function, including conditions which increase the risk for aspiration,

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- long-term aspirin therapy
- pregnancy
- age > 65 years
- age < 2 years

For More Information:

This is a rapidly evolving situation and guidance should be considered interim. Updated information will be available on the websites below

Maine CDC Swine Flu:

<http://www.maine.gov/dhhs/boh/swine-flu-2009.shtml>

US CDC Swine Flu Website:

<http://www.cdc.gov/swineflu>

New US CDC guidance is available at: <http://www.cdc.gov/swineflu/recommendations>, including:

- [Interim Guidance on Antiviral Recommendations for Patients with Confirmed or Suspected Swine Influenza A \(H1N1\) Virus Infection and Close Contacts](#)
- [Interim Guidance for Swine influenza A \(H1N1\): Taking Care of a Sick Person in Your Home](#)
- [Interim Recommendations for Facemask and Respirator Use in Certain Community Settings Where Swine Influenza A \(H1N1\) Virus Transmission Has Been Detected](#)
- [Swine Influenza A \(H1N1\) Virus Biosafety Guidelines for Laboratory Workers](#)
- [Interim Guidance for Infection Control for Care of Patients with Confirmed or Suspected Swine Influenza A \(H1N1\) Virus Infection in a Healthcare Setting](#)
- [Interim Guidance on Case Definitions to be Used For Investigations of Swine Influenza A \(H1N1\) Cases](#)

Figure 1: Case detection and clinical management of suspect or probable human cases of swine influenza virus (WHO Phases 3 & 4)

Situation: No human cases of swine influenza are present in the community. Human cases are present in other regions of the United States.

