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COMMUNITY HEALTH AGENCY ■ DEPARTMENT OF PUBLIC HEALTH
■ DISEASE CONTROL BRANCH

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Influenza Antiviral Use for Persons at High Risk for Influenza Complications or Who Have Severe Influenza Illness

CDC has issued a health Advisory to reemphasize the importance of considering antiviral medications (Tamiflu and Relenza) for use in the treatment or prevention of influenza. Please share with clinicians at your facility. We continue to see increased influenza activity.

CDC Recommendations:

Given the low level of overall resistance to oseltamivir among circulating influenza viruses, the finding of resistance only in influenza A (H1N1) viruses, and no resistance to zanamivir, neuraminidase inhibitor medications continue to be recommended for the treatment and chemoprophylaxis of influenza. Antiviral treatment should begin within 48 hours of symptom onset if possible, but treatment should still be considered for persons who present more than 48 hours after illness onset if they have severe influenza illness or are at higher risk for severe complications from influenza. Oseltamivir is approved for treatment and prevention of influenza for persons aged ≥ 1 year, while zanamivir is approved for treatment of persons aged ≥ 7 years and prevention of influenza in persons aged ≥ 5 years. Enhanced surveillance for detection of oseltamivir-resistant influenza viruses is ongoing, and antiviral usage recommendations will be revised to account for changes in antiviral resistance trends as needed. Influenza A viral isolates from affected persons in institutional outbreaks should be subtyped.

Health care providers should contact Disease Control for assistance when an outbreak of influenza in an institutional setting (e.g., a long-term care facility or correctional facility) occurs. Please call (951) 358-5107 during business hours or (951) 782-2974 after hours to report disease outbreaks.

Visit our website at www.rivco-diseasecontrol.org for additional information on influenza.