



## HEALTH ALERT- THIS IS A DRILL

### AVIAN INFLUENZA A (H5N1) ACTIVITY

November 17, 2015

#### **BACKGROUND & SITUATION**

A novel strain of Avian Influenza A (H5N1) was detected in Cambodia in March 2015 and quickly spread throughout Southeast Asia and Australia. Roughly 30% of those exposed developed symptoms. By April 2015, 18 countries reported over 250 cases of H5N1. In September 2015, the CDC reported clusters of cases in the US in New York and Florida. The first confirmed H5N1 case in California was reported on November 16, 2015 at 8:30AM. The case had recently hosted visiting family from Cambodia, and a week prior had attended a fair in Pleasanton (with over 5000 attendees) with other ill family members. The CDC has begun to distribute H5N1 vaccine to local public health to prevent further infections. Alameda County has submitted a request for the vaccine via the Strategic National Stockpile (SNS), and is preparing to distribute vaccine and set up mass prophylaxis vaccine clinics.

#### **ACTIONS REQUESTED OF CLINICIANS:**

1. **IMPLEMENT AIRBORNE, DROPLET, AND STANDARD PRECAUTIONS** for patients with suspected Avian Influenza A (H5N1) and for healthcare personnel caring for patients under investigation for Avian Influenza A (H5N1).
2. **IMMEDIATELY REPORT outbreaks** of Avian Influenza A (H5N1) **in residents of large group or institutional settings** by phone to the Acute Communicable Disease (ACD) Unit at 510-268-7284 (**for exercise use only**).
3. **CONSIDER TESTING** for suspected Avian Influenza A (H5N1) in patients who meet the exposure criteria described below.
4. Consider **TREATMENT** with influenza antiviral medications for patients with suspected or confirmed Avian Influenza A (H5N1) or seasonal flu who are hospitalized for severe illness or who are at higher risk for influenza-related complications.
5. **REPORT** fatal cases of laboratory-confirmed novel H5N1 or seasonal influenza in persons 0-64 years of age by fax to ACD at 510-268-7282 (**for exercise use only**) using the CDPH case report form.
6. **Prioritize VACCINATION** for those at highest risk of exposure OR severe complications.

#### **Case Definitions for Avian Influenza A (H5N1)**

**Confirmed:** a person with an acute respiratory illness that is confirmed for H5N1 by a CDC certified public health laboratory using a real-time polymerase chain reaction (RT-PCR)

**Probable:** a person with an acute respiratory illness who is positive for Influenza A, negative for H1, negative for H1 and H3 by RT-PCR

**Suspected:** A person with an illness compatible with influenza who meets exposure criteria and for whom results from RT-PCR test results are not known or pending

#### **LABORATORY TESTING**

Influenza testing by PCR can be performed at the Alameda County Public Health Laboratory (ACPHL) for patients meeting the following criteria: **Influenza A-like illness (IALI)**, defined as fever  $\geq 38.0^{\circ}\text{C}$  ( $100.4^{\circ}\text{F}$ ) **plus** radiographically-confirmed pneumonia, acute respiratory distress syndrome (ARDS), or other respiratory illness with no alternate diagnosis established **AND** at least one of the following:

- Hospitalized or will be admitted to hospital with suspected Avian Influenza A (H5N1); **OR**
- Died of an acute illness in which Avian Influenza A (H5N1) was suspected; **OR**
- Attended the Pleasanton Fair on 11/8<sup>th</sup> **OR**
- Lives in a congregate setting such as a long term care facility or assisted living facility

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- Close contact with confirmed or suspected cases of avian influenza A (H5N1) within 10 days of symptom onset. Close contact may be regarded as coming within about 6 feet of a confirmed or suspected case while the case was ill (beginning 24 hours prior to illness onset and until resolution of fever).

### **SPECIMEN COLLECTION AND ROUTING**

Obtain an oropharyngeal (preferred over nasopharyngeal), nasopharyngeal swab, or aspirate, using Standard, Airborne, and Droplet Precautions, including eye protection (or as appropriate for your institutional guidelines for procedures such as collection of specimen(s) from the lower respiratory tract (e.g., sputum, bronchoalveolar lavage, tracheal aspirate or pleural fluid tap). Place in viral transport medium that has been kept refrigerated at 2-8 degrees Celsius and ensure that the specimen is promptly refrigerated and maintained at this temperature. Call ACPHD Acute Communicable Disease Unit at 510-268-7284 (for exercise use only) for consultation and approval before sending specimens to the Alameda County Public Health Laboratory. Viral culture should not be attempted in these cases. Specimens should be transported at 2-8 degrees Celsius to the Public Health Laboratory and will be screened by the California Department of Public Health Viral and Rickettsial Diseases Laboratory (CDPH-VRDL). CDPH-VRDL will forward suspect novel influenza A (H5N1) specimens to the Centers for Disease Control and Prevention (CDC) for confirmatory testing. For questions about specimen collection or transport, contact the ACPHL at 510-268-7284 (for exercise use only); [www.acphd.org/public-health-lab.aspx](http://www.acphd.org/public-health-lab.aspx)

### **TREATMENT OF SUSPECT OR CONFIRMED CASES**

Patients who are hospitalized with suspected or confirmed Avian Influenza A (H5N1) or who are at high risk for severe illness should be treated early and empirically with approved neuraminidase inhibitor antiviral agents (oseltamivir, peramivir and zanamivir). Do not wait for laboratory test results to start treatment. Clinical benefit is greatest when antiviral treatment is administered early, especially within 48 hours of influenza illness onset. Most influenza A viruses are susceptible to the neuraminidase inhibitors, but resistant to the adamantanes (amantadine and rimantadine). Therefore, amantadine and rimantadine are not recommended for treatment of novel influenza A (H5N1) virus. For more recommendations on the use of Antiviral Medication Treatment for H5N1 Virus, visit: <http://www.cdc.gov/flu/avianflu/novel-av-treatment-guidance.htm>

### **REPORTING**

Report outbreaks of Avian Influenza A (H5N1) influenza in residents of large group or institutional settings (e.g. long-term care or assisted living facilities) to ACD at 510-268-7284 (for exercise use only).

For lab-confirmed influenza a (H5N1) deaths in persons 0-64 years of age, please complete and fax to 510-268-7282 (for exercise use only) the case history form for severe or fatal influenza cases, available at [http://www.cdph.ca.gov/HealthInfo/discond/Documents/FINAL\\_CDPH9070\\_SevereInfluenzaCaseHistoryForm\\_Jan2014.pdf](http://www.cdph.ca.gov/HealthInfo/discond/Documents/FINAL_CDPH9070_SevereInfluenzaCaseHistoryForm_Jan2014.pdf)

### **INFECTION CONTROL**

**Airborne**, standard, and droplet precautions should be implemented for patients with suspected or confirmed Avian Influenza A (H5N1), including placement in an Airborne Infection Isolation Room (AIIR) and placing a surgical mask on patients if they must be transported to other areas of the facility. Influenza vaccination or masking of health care workers during the influenza season is mandated in licensed health care facilities in Alameda County and the City of Berkeley. Health care workers should be instructed to not come to work when ill. The mandate is posted at [http://www.acphd.org/media/324384/acph\\_bph\\_fluvaccine\\_and\\_masking\\_order\\_20130828.pdf](http://www.acphd.org/media/324384/acph_bph_fluvaccine_and_masking_order_20130828.pdf). Additional guidance for infection prevention is available at:

- CDC Guidance for infection control in Health Care Setting for Severe Novel Influenza A Viruses: <http://www.cdc.gov/flu/avianflu/novel-flu-infection-control.htm>
- CDPH Recommendations for Infection Prevention & Control of Seasonal Flu in Long-term Care Facilities: [http://www.cdph.ca.gov/programs/hai/Pages/LongTermCareFacilities\(LTCF\).aspx](http://www.cdph.ca.gov/programs/hai/Pages/LongTermCareFacilities(LTCF).aspx)

### **OTHER H5N1 RESOURCES**

**CDC Avian Flu H5N1 website:** <http://www.cdc.gov/flu/avianflu/h5/>

**FDA H5N1 Vaccine:** <http://www.fda.gov/BiologicsBloodVaccines/Vaccines/ApprovedProducts/ucm094044.htm>

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