

January 16, 2013

Dear Kitsap County Providers,

Happy New Year. I'd like to share five brief points about flu with you.

1. Testing at the state lab has confirmed most of the virus circulating this year is influenza A (H3N2). The H3N2 strain is typically associated with more severe flu seasons. It's still too early to predict how severe it will be, but so far we are beginning to get reports of higher than expected hospitalization rates, especially in people 65 and older.

2. We are not currently asking providers to collect any more samples for the state lab. However, laboratory-confirmed influenza associated deaths are reportable and give us an estimate of local severity.

3. I recommend aggressive use of anti-virals not only for your high-risk patients but also for low-risk patients who report symptoms more severe than they usually experience. For your convenience I've inserted the dosing chart for antivirals at the end of this message. I would also like to remind you that antiviral resistance to oseltamivir and zanamivir among circulating influenza viruses is currently low.

4. Later today, the Health District is issuing a media release with our customary flu guidance to the general public, in which we additionally recommend that the people I described above call their healthcare provider promptly to discuss use of antiviral medications if indicated. We realize this may result in increased calls and/or appointments, and wanted to give you a heads-up.

5. Vaccine availability:

Adult—We have surveyed area pharmacies and it appears at this time Kitsap has an adequate supply of adult vaccine. Vaccine supplies are being used as quickly as they are received, so patients may report temporary shortages but our pharmacies and most clinics are able to resupply vaccine.

Pediatric—Orders for children's vaccine (<19 yrs of age) are placed through the Kitsap Public Health District to the Washington State Department of Health Immunization Program; there is no shortage of vaccine for children and can be ordered at any time. Call us at 360-337-5235 to replenish your supply or to become a Vaccine For Children provider.

I respect your time and will send additional information only if I believe it would support your clinical practice or help with your patient communications. As always, I welcome your feedback and questions.

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Recommended Dosage and Duration of Treatment or Chemoprophylaxis for Influenza Antiviral Medications

Antiviral Agent	Use	Children	Adults
Oseltamivir (Tamiflu®)	Treatment	If <1 yr old, the dose is 3 mg/kg/dose twice daily	75 mg twice daily
		(Dose varies by child's weight) If ≥1 yr old and weigh 15 kg or less, the dose is 30 mg twice a day.	
		If ≥1 yr old and weigh >15 to 23 kg, the dose is 45 mg twice a day.	
		If ≥1 yr old and weigh >23 to 40 kg, the dose is 60 mg twice a day.	
		If ≥1 yr old and weigh more than 40 kg, the dose is 75 mg twice a day.	
	Chemo-prophylaxis	(Not FDA approved for use in children <1 yr old) If child is <3 months old, chemoprophylactic use is not recommended unless situation is judged critical due to limited data on use in this age group.	75 mg once daily
		(Not FDA approved for children <1 yr, but use in children ≥3 months and <1 yr old was approved under EUA during the 2009 H1N1 pandemic) If child ≥3 months and <1 yr old, dose is 3 mg/kg/dose once per day.	
		(Dose varies by child's weight) If ≥1 yr old, and weigh 15 kg or less, the dose is 30 mg once a day.	
		If ≥1 yr old and weigh >15 to 23 kg, the dose is 45 mg once a day.	
		If ≥1 yr old and weigh >23 to 40 kg, the dose is 60 mg once a day.	
If ≥1 yr old and weigh more than 40 kg, the dose is 75 mg once a day.			
Zanamivir (Relenza®)	Treatment	10 mg (2 inhalations) twice daily (Not FDA approved for use in children <7 yrs old)	10 mg (2 inhalations) twice daily
	Chemo-prophylaxis	10 mg (2 inhalations) once daily (Not FDA approved for use in children <5 yrs old)	10 mg (2 inhalations) once daily