



Philadelphia Department of Public Health
Division of Disease Control

DONALD F. SCHWARZ, MD, MPH
Deputy Mayor, Health & Opportunity
Health Commissioner

NAN FEYLER, JD, MPH
Chief of Staff

CAROLINE C. JOHNSON, MD
Director, Division of Disease Control

Health Update
**Swine Influenza A (H1N1) - Update and
Recommendations for Use of Antiviral Medications**
April 30, 2009

As of Thursday, April 30, 2009 the Centers for Disease Control and Prevention (CDC) has reported a total of 109 confirmed cases of human swine influenza in the United States. Eleven states have confirmed cases; additional states are reporting probable cases that are still under investigation. This update provides information on local disease activity and recent guidance regarding case management, as issued by the CDC. Further information is available at <http://www.cdc.gov/h1n1flu>, <http://www.state.pa.us> and <https://hip.phila.gov>.

- A total of three probable cases of swine influenza A H1N1 are now under investigation in Philadelphia. Further sub-typing is pending at CDC. A fourth probable case has been identified in Montgomery County, Pennsylvania and is also under investigation.
- CDC has issued interim guidance on antiviral recommendations for patients with confirmed or suspected swine influenza A (H1N1) virus and close contacts. These are available at <http://www.cdc.gov/h1n1flu/recommendations.htm>.
 - CDC recommends treatment for confirmed, probable or suspected cases of swine-origin influenza A (H1N1) infection. Treatment decisions should also be guided by the usual considerations for treating influenza with antiviral medications. Treatment for hospitalized patients and patients at higher risk for complications should be the priority. Persons who do not have febrile respiratory illness consistent with influenza are probably not candidates for empiric treatment unless they have a reason for an atypical or mild presentation (e.g., immune suppression or infants).
 - Antiviral chemoprophylaxis has been recommended for persons in the following groups:
 - Household close contacts of a *confirmed or probable* case who are at high-risk for complications of influenza
 - Healthcare workers or public health workers who were not using appropriate personal protective equipment during close contact with an ill confirmed, probable, or suspect case of swine-origin influenza A (H1N1) virus, during the case's infectious period.
 - Antiviral chemoprophylaxis can be considered for the following:
 - Household close contacts of a *suspected* case who are at high risk for complications of influenza (persons with certain chronic medical conditions, persons 65 years or older, children younger than 5 years old, and pregnant women)
 - Children attending school or day care who are at high risk for complications of influenza and who had contact with a confirmed, probable or suspected case
 - Healthcare workers who are at high-risk for complications of influenza who are working in an area of the healthcare facility that contains patients with confirmed swine influenza cases, or who are caring for patients with acute febrile respiratory illnesses
 - Travelers to Mexico who are at high risk for complications of influenza (Note: a travel warning is currently in effect discouraging nonessential travel to Mexico.

- The Philadelphia Department of Public Health emphasizes:
- Asymptomatic travelers returning from Mexico and other areas of the country or world where community-based transmission is occurring do not require chemoprophylaxis, if they are not at high risk for complications of influenza and did not have contact with persons with respiratory illness.
 - **Stockpiling of oseltamivir (Tamiflu) or zanamivir (Relenza) for personal or household usage at a later date is strongly discouraged.**

The Division of Disease Control (DDC), Philadelphia Department of Public Health is aware of isolated instances where clinicians have not been able to access supplies of oseltamivir following patient prescription. Please report problems accessing medications or appropriate laboratory supplies to DDC at 215-685-6740. **DDC does not have supplies of these materials to distribute, however DDC is working with the Pennsylvania Department of Health to develop solutions to supply and materiel shortages.**

If you have any questions about this information, please contact DDC at 215-685-6740; after-hours contact 215-686-1776 and ask to speak with the person on-call for DDC. Please report all suspected, probable or confirmed cases of swine-origin influenza infection to DDC, either via telephone or fax at 215-545-8362.