




# EMHD Weekly H1N1 Update

10/14/09

<p><b><u>At EMHD</u></b></p> 	<p><b><u>H1N1 Conference Call – Wednesday, October 14, 2009 at 2:00p</u></b> Please see attached notes from today’s conference call.</p> <p><b><u>Current Confirmed Cases of H1N1 in EMHD*</u></b></p> <p>*numbers only indicate lab confirmed cases, not suspected or probable cases in the community</p> <ul style="list-style-type: none"><li>▪ EMHD: 536 cases (ages 7 wks-87, median age 14)</li><li>▪ Gwinnett: 456 cases (ages 7 wks-87, median age 14)</li><li>▪ Newton: 31 cases (ages 2-56, median age 12)</li><li>▪ Rockdale: 49 cases (ages 1-56, median age 11)</li></ul>
<p><b><u>General</u></b></p> 	<p><b><u>Department of Health and Human Services unveils 2 new tools on flu.gov</u></b> Self-assessment tool based on material developed by Emory: <a href="http://www.flu.gov/evaluation/">http://www.flu.gov/evaluation/</a> Facts &amp; Myths: <a href="http://flu.gov/myths/index.html">http://flu.gov/myths/index.html</a></p> <p><b><u>Guidance targets pandemic-related questions about disability law</u></b> Businesses that take steps to protect workers during a pandemic have worried about staying in compliance with the Americans with Disabilities Act (ADA), and federal officials have responded by issuing new guidance that addresses many of the issues. <a href="http://www.cidrap.umn.edu/cidrap/content/influenza/biz-plan/news/oct0709eeoc.html">http://www.cidrap.umn.edu/cidrap/content/influenza/biz-plan/news/oct0709eeoc.html</a></p> <p><b><u>CDC’s What You Should Know and Do this Flu Season If You Are 65 Years and Older (Oct 9):</u></b> Actions to take this flu season: <a href="http://www.cdc.gov/h1n1flu/65andolder.htm">http://www.cdc.gov/h1n1flu/65andolder.htm</a></p> <p><b><u>Georgia Influenza Weekly Summary Report – CDC week 39–10/9/09</u></b> Click “Influenza Update” – <a href="http://health.state.ga.us/epi/flu/fluupd08.asp">http://health.state.ga.us/epi/flu/fluupd08.asp</a></p>
<p><b><u>Vaccine Providers</u></b></p> 	<p><b><u>GRITS information available online: FAQ / how to register / training</u></b> All H1N1 vaccines administered are required to be entered into GRITS. The State will provide registration and training for GRITS. This site is your one-stop shop for GRITS information. <a href="http://health.state.ga.us/programs/immunization/grits/faq.asp">http://health.state.ga.us/programs/immunization/grits/faq.asp</a></p> <p><b><u>CDC 2009 H1N1 Nasal Spray Vaccine Q&amp;A (Oct 7)</u></b> <a href="http://www.cdc.gov/h1n1flu/vaccination/nasalspray_qa.htm">http://www.cdc.gov/h1n1flu/vaccination/nasalspray_qa.htm</a></p> <p><b><u>Updated CDC H1N1 Clinician’s Q&amp;A (Oct 8)</u></b> Includes information on vaccine supply, distribution, and administration, and recommendations for reaching target groups. <a href="http://www.cdc.gov/h1n1flu/vaccination/clinicians_qa.htm">http://www.cdc.gov/h1n1flu/vaccination/clinicians_qa.htm</a></p> <p><b><u>Spanish Vaccine Information Sheet available on CDC website</u></b> Inactivated: <a href="http://www.cdc.gov/vaccines/pubs/vis/downloads/vis-inact-h1n1-sp.pdf">http://www.cdc.gov/vaccines/pubs/vis/downloads/vis-inact-h1n1-sp.pdf</a> Live (nasal spray): <a href="http://www.cdc.gov/vaccines/pubs/vis/downloads/vis-laiv-h1n1-sp.pdf">http://www.cdc.gov/vaccines/pubs/vis/downloads/vis-laiv-h1n1-sp.pdf</a></p> <p><b><u>Simplified Chinese Vaccine Information Sheet available on CDC website</u></b> Inactivated: <a href="http://www.cdc.gov/vaccines/pubs/vis/downloads/vis-inact-h1n1-ch.pdf">http://www.cdc.gov/vaccines/pubs/vis/downloads/vis-inact-h1n1-ch.pdf</a> Live (nasal spray): <a href="http://www.cdc.gov/vaccines/pubs/vis/downloads/vis-laiv-h1n1-ch.pdf">http://www.cdc.gov/vaccines/pubs/vis/downloads/vis-laiv-h1n1-ch.pdf</a></p>

**Medical  
Community**



**Interim Guidance for Influenza Surveillance: Prioritizing RT-PCR Testing in Labs (Oct 9)**

This document provides interim guidance for state and local health departments, hospitals, and clinicians participating in surveillance activities regarding which patients to prioritize for testing by RT-PCR for influenza surveillance. Based on the continuing spread of 2009 H1N1 virus and increased demand for influenza testing, these guidelines have been developed in an effort to prioritize patients for testing by RT-PCR for influenza for surveillance purposes.

<http://www.cdc.gov/h1n1flu/screening.htm>

**MMWR Update on Influenza A (H1N1) 2009 Monovalent Vaccines (Oct 9)**

<http://www.cdc.gov/mmwr/preview/mmwrhtml/mm5839a3.htm>

**New System for Monitoring Emergency Department Visits for Influenza-Like Illness**

CDC has partnered with the International Society for Disease Surveillance and the Public Health Informatics Institute to enhance surveillance for influenza-like illness (ILI) through a system called "Distribute." The Distribute system aggregates information from hospital emergency department (ED) syndromic surveillance systems operated by state and local health departments; the name reflects the shared and distributed responsibilities for developing and managing the system.

[http://www.cdc.gov/mmwr/preview/mmwrhtml/mm5839a5.htm?s\\_cid=mm5839a5\\_e](http://www.cdc.gov/mmwr/preview/mmwrhtml/mm5839a5.htm?s_cid=mm5839a5_e)

**CDC's 2009 H1N1 and Seasonal Flu: What You Should Know About Flu Antiviral Drugs**

Client geared Q&A about antivirals:

[http://www.cdc.gov/flu/freeresources/2009-10/pdf/Antiviral\\_H1N1\\_factsheet.pdf](http://www.cdc.gov/flu/freeresources/2009-10/pdf/Antiviral_H1N1_factsheet.pdf)

**Trusted  
Information  
Sources**



**Centers for Disease Control and Prevention**

[www.cdc.gov/h1n1](http://www.cdc.gov/h1n1)

<http://www.cdc.gov/h1n1flu/whatsnew.htm>

**CDC H1N1 Flu Vaccine Resources**

<http://www.cdc.gov/h1n1flu/vaccination/>

**East Metro Health District**

[www.eastmetrohealth.com](http://www.eastmetrohealth.com)

**Food and Drug Administration Influenza Page**

<http://www.fda.gov/NewsEvents/PublicHealthFocus/ucm150305.htm>

**Georgia Division of Public Health**

<http://health.state.ga.us/h1n1flu/>

**Vaccine Information Sheet (VIS) for Inactivated 2009 H1N1 Influenza Vaccination ("flu shot")**

<http://www.cdc.gov/vaccines/pubs/vis/downloads/vis-inact-h1n1.pdf>

**Vaccine Information Sheet (VIS) for Live, Intranasal 2009 H1N1 Influenza Vaccination**

<http://www.cdc.gov/vaccines/pubs/vis/downloads/vis-laiv-h1n1.pdf>

**AMA CPT Codes For H1N1 Immunizations**

For quick reference, the two codes are below:

**90470**-H1N1 immunization administration (intramuscular, intranasal)

**90663**-Influenza virus vaccine, pandemic formulation, H1N1

<http://www.ama-assn.org/ama/pub/news/news/cpt-codes-h1n1-immunizations.shtml>

All past updates are available through the "H1N1 Information" link on our website:

[www.eastmetrohealth.com](http://www.eastmetrohealth.com)

## 10/14/09 H1N1 Conference Call Notes

- Current H1N1 status – still widespread, but some decline in GA and SE. Flu pandemics tend to go in waves. People most affected continue to skew much younger than seasonal flu, people with breathing difficulties, and especially pregnant women (28 out of 100 hospitalized died) hit hard. Very small impact on 65+ population.
- Statewide H1N1 information line should be operational by end of this week through GA Poison Control. Two numbers (one for providers and one for general public) will be available to provide information and answer questions.
- 2009 H1N1 vaccination has begun but initial supplies are small. More doses are expected for shipment each week. We ask members of the public who want to receive this vaccine to be patient as this program expands and more vaccine becomes available. There will be enough vaccine available for anyone who wishes to receive it. Given the small amounts of vaccine available, initial campaigns target high risk groups:
  - Pregnant women
  - Persons who live with or provide care to infants < 6 mo. Old
  - Healthcare and emergency service personnel
  - Persons between 6 months and 24 years of age
  - Persons 25 – 64 with high risk medical conditions
- It is important to also keep in mind that there will be lag times between states placing orders and vaccine actually being distributed (we are not cutting corners in terms of steps like quality control checks) - and any number of things can create lag times between time of distribution to states and when vaccine actually arrives in provider offices or clinics.
- In our district, we have received small quantities of the nasal spray vaccine, and on Friday began offering them in our 5 health centers. Demand so far has not been high. It will continue to be offered every day. The vaccine is free, but we do ask that people bring their insurance cards with them, as we can receive reimbursement from many insurance companies. The highest target group for the first vaccine is 2 – 4 year olds, but we are not turning away any eligible people who want the vaccine. We may get some injectible vaccine as soon as next week. We expect demand to increase once this becomes available.
- LAIV, or the live vaccine does have some restrictions (between ages 2 – 49, not pregnant, not immunocompromised). It is a good vaccination option for healthy, non-pregnant health care workers. The only restriction is in the case of health care workers who care for severely immunocompromised patients (i.e. those who require protected hospital environments, defined as rooms with special air filtering systems and positive pressure rooms). These health care workers should avoid caring for these very immunocompromised patients for 7 days after receiving LAIV or they should receive the injectible vaccine (flu shot).
- Some private medical providers and hospitals have also begun to receive small quantities of the vaccine. Availability should begin to expand rapidly over the next couple of weeks,

in terms of more vaccine, adding injectibles to the mix, and expanding the number of different outlets to receive the vaccine.

- It is important to also keep in mind that there will be lag times between states placing orders and vaccine actually being distributed (we are not cutting corners in terms of steps like quality control checks) - and any number of things can create lag times between time of distribution to states and when vaccine actually arrives in provider offices or clinics. The media may not always understand these distinctions.
- Public Health Saturday Clinics. EMHD will be opening all five of our health centers (Buford, Lawrenceville, Norcross, Newton, and Rockdale) this coming Saturday, October 17 from 9 – 3 for H1N1 vaccinations ONLY. Again, there will be no cost, but we ask people to bring their insurance cards. We probably will still only be able to offer the nasal mist, but if by chance we get injectibles prior to Saturday, those will be offered as well. On the following two Saturdays, 10/24 and 10/31, we will be opening anywhere from 2 – 5 health centers depending on both vaccine supply and demand. Then, in Gwinnett County, we are planning on offering mass vaccination clinics open to the public at Norcross High School on 11/7 and Meadowcreek High School on 11/14. Additional clinics in schools and/or health centers will be scheduled as needed.
- Vaccine Safety – these notes come from the CDC:
  - All four manufacturers of the 2009 H1N1 vaccines are using the same processes that they use for making seasonal flu vaccines, which have a long record of producing safe seasonal influenza vaccines.
  - On September 21, 2009, The National Institute of Health (NIH) announced that early results from a trial testing a 2009 H1N1 influenza vaccine in children look promising. Preliminary analysis of blood samples from a small group of trial participants shows that a single 15-microgram dose of a non-adjuvanted 2009 H1N1 influenza vaccine – the same dose that is in the seasonal flu vaccine – generates an immune response that is expected to be protective against 2009 H1N1 influenza virus in the majority of 10- to 17- year-olds within eight to 10 days following vaccination. These results are similar to those recently reported in clinical trials of healthy adults. Younger children generally had a less robust early response to just one dose of the vaccine.
  - Children younger than 10 years should receive two doses of 2009 H1N1 flu vaccine. This is slightly different from CDC's recommendations for seasonal influenza vaccination which state that children younger than 9 who are being vaccinated against influenza for the first time need to receive two doses. Infants younger than 6 months of age are too young to get the 2009 H1N1 and seasonal flu vaccines. CDC recommends that when two doses of flu vaccine are required, the two doses should be separated by 4 weeks. However, if the second dose is separated from the first dose by at least 21 days, the second dose can be considered valid.
  - We expect the 2009 H1N1 influenza vaccine to have a similar safety profile as seasonal flu vaccines, which have very good safety track records.
  - This being said, it is important to remember that all vaccination is voluntary.
- Simultaneous administration of inactivated vaccines against seasonal and the 2009 H1N1 influenza viruses is permissible if different anatomic sites are used (for example, one vaccine in each arm).