



HEALTH Advisory #42

Antiviral Agents for the Treatment and Chemoprophylaxis of Influenza

TO: West Virginia Healthcare Providers, Hospitals and other Healthcare Facilities

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LOCAL HEALTH DEPARTMENTS: PLEASE DISTRIBUTE TO COMMUNITY HEALTH PROVIDERS, HOSPITAL-BASED PHYSICIANS, INFECTION CONTROL PREVENTIONISTS, LABORATORY DIRECTORS, AND OTHER APPLICABLE PARTNERS

OTHER RECIPIENTS: PLEASE DISTRIBUTE TO ASSOCIATION MEMBERS, STAFF, ETC.

CDC's Advisory Committee on Immunization Practices (ACIP) has updated their recommendations for the use of antivirals for the prevention and treatment of influenza. The guidance also contains information on chemoprophylaxis and a summary of the effectiveness and safety of antivirals.

Antiviral treatment for suspected and confirmed influenza is recommended for those persons at higher risk for influenza complications:

- Children < 2 years
- Adults > 65 years
- Persons with chronic pulmonary, cardiovascular, renal, hepatic, hematologic, metabolic disorders, neurologic and neurodevelopment conditions, stroke, intellectual disability, moderate to severe developmental delay, and muscular dystrophy
- Persons with immunosuppression
- Women who are pregnant or postpartum

In recent years widespread resistance among H3N2 and Pandemic 2009H1N1 has made adamantanes less useful. H3N2 and H1N1 are the most common flu viruses currently circulating in WV. Zanamivir (Relenza) and oseltamivir (Tamiflu) are active against both influenza A and B viruses. The ACIP recommendations can be found at: <http://www.cdc.gov/mmwr/pdf/rr/rr6001.pdf>.

Healthcare providers should continue administering or referring unvaccinated patients for flu immunization as primary prevention of this disease.

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