



COMMONWEALTH of VIRGINIA

Department of Health

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STATE HEALTH COMMISSIONER

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Dear Colleague:

Our state public health laboratory recently confirmed the first case of influenza in Virginia for the current flu season. In recent weeks, VDH has seen an increase in the percentage of visits to emergency centers that are due to influenza-like illness. This increase has been seen in every region of the state and is most pronounced in children.

You do make a big difference with influenza prevention. I am grateful for all of your past efforts to immunize, evaluate and treat individuals impacted by influenza and recognize the critical role you play in protecting communities through prevention.

It again is time for the clinical and public health communities to prepare for seasonal respiratory illnesses. Below is information I hope will prepare you to have discussions with your patients and staff about the upcoming flu season.

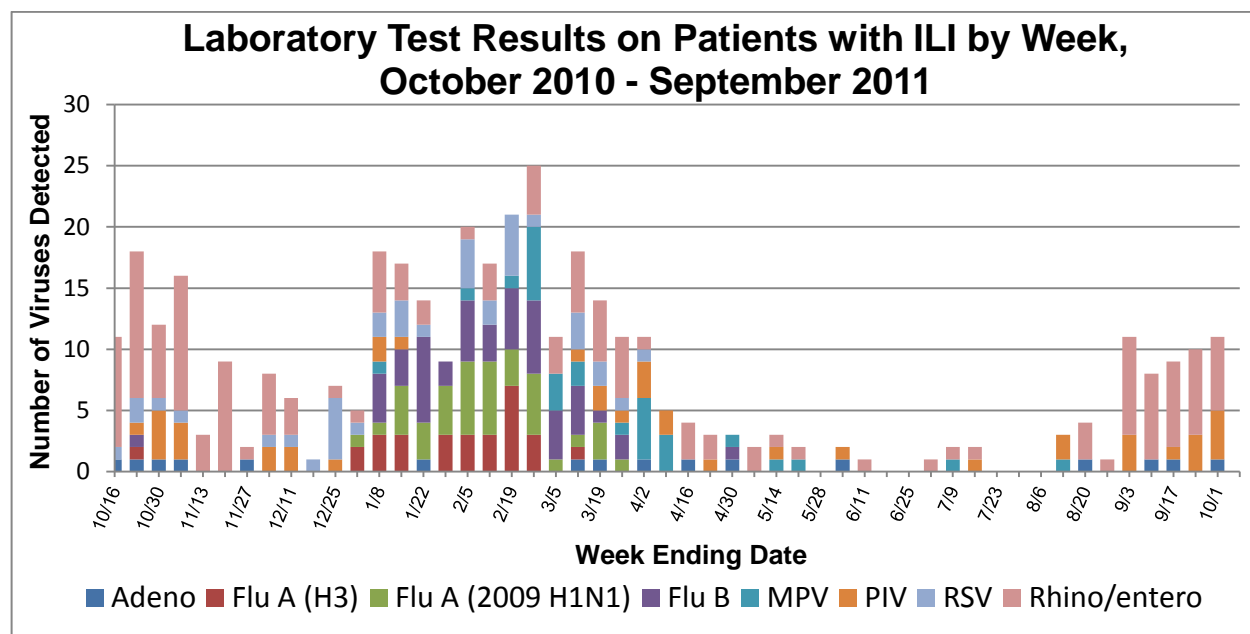
Vaccination is the best tool available to prevent influenza. The strains of influenza expected to circulate this year are the same as last year, thus the composition of this year's vaccine is the same. As you are aware, even though the formulation is identical, annual vaccination is needed to provide the best protection. Vaccine supply is plentiful this year, so I encourage you to get vaccinated as soon as possible and to make vaccine available to your fellow health care workers and your patients.

Annual influenza vaccination is recommended for everyone 6 months of age and older. Vaccination is especially important for those with chronic medical conditions, health care workers, and caregivers of infants under 6 months of age. Children younger than 5, and especially those younger than 2, are at high risk for developing flu-related complications. Pregnant women also are recommended to receive an annual influenza vaccination. A recent national study showed that pregnant women were five times more likely to get a vaccination if their health care provider offered it. Additionally, a focus group convened by the Virginia Department of Health, found that three-fourths of the participants reported that the health information and advice they trusted most came from their health care provider.

More choices are available for influenza vaccinations this year. In addition to the regular vaccination (TIV) and the live attenuated nasal spray (LAIV), the high-dose formula is a relatively new option for those age 65 years or older. In May of this year, an intradermal vaccine also was approved, which uses a lower dose of vaccine and a smaller needle, for those 18-64 years old.

VDH will continue to track influenza and influenza-like illnesses (ILI) each week and will provide the latest information on our website at <http://www.vdh.state.va.us/Epidemiology/Surveillance/Influenza/>.

To complement our routine surveillance, VDH is continuing the Influenza Incidence Surveillance Project. The project involves testing a sample of patients who present with influenza-like illness to six participating providers. The graph below illustrates that similar symptoms can be caused by a number of viruses; but during the “influenza season,” traditionally from October to May, influenza viruses were responsible for the bulk of the illnesses.



Lastly, while you are seeing patients for influenza vaccination, please be sure to recommend a dose of Tdap vaccine for all parents, siblings, grandparents, and caregivers of infants to help limit the spread of pertussis to vulnerable infant populations. In 2010, 384 cases of pertussis were reported in Virginia. That’s the highest number in six years and a 200 percent increase over the number of cases reported in 2007. While pertussis can occur in all ages, infants less than 12 months are at highest risk for severe disease and death. In Virginia between 2006 and 2010, 59 percent of infants with pertussis were hospitalized. Data show these infants most often are infected by a household member. By vaccinating infants’ close contacts, you help create a “cocoon” to protect these infants from both pertussis and influenza.

For more detailed information on influenza vaccine dosing and administration, go to <http://www.cdc.gov/flu/professionals/vaccination/>. For pertussis vaccine dosing and administration (includes DTaP and Tdap) go to <http://www.cdc.gov/vaccines/vpd-vac/pertussis/recs-summary.htm>.

Through our combined efforts we can minimize the toll influenza and pertussis take on Virginians over the upcoming months. Thank you for your continued collaborations to serve the residents of our state.

Sincerely,

Karen Remley, MD, MBA, FAAP

State Health Commissioner