



COMMONWEALTH of VIRGINIA

Department of Health

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STATE HEALTH COMMISSIONER

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September 15, 2010

Dear Colleague,

As we head into fall and begin our influenza season following last year's historic H1N1 season, there are many important changes we need to anticipate, plan and prepare for in surveillance, vaccination, mitigation and communication.

Surveillance

The only thing predictable about the influenza season is that it is unpredictable. Every influenza season has different levels of impact, so it is important to be prepared for any contingencies. Currently there is strong evidence that H1N1 illness patterns are transitioning towards patterns of seasonal influenza. Many people now have some immunity to H1N1; however, cases of illness and outbreaks associated with this strain are still expected to occur in 2010-2011. We expect that recognized risk groups, such as children, pregnant women, and those with underlying medical conditions, including obesity, will likely continue to be disproportionately affected with more severe disease.

Illness caused by H3N2 and influenza B has also been reported in other states. Globally, H1N1 (2009) has continued to circulate at lower activity levels in the southern hemisphere over the summer and is still causing significant activity in some countries. A H3N2 is also expected. It has been circulating in many countries including some in South America during their winter, and sporadic cases have been seen in the US over the summer. Influenza B has been circulating in other countries. Influenza B is generally seen more in late winter than early in the flu season.

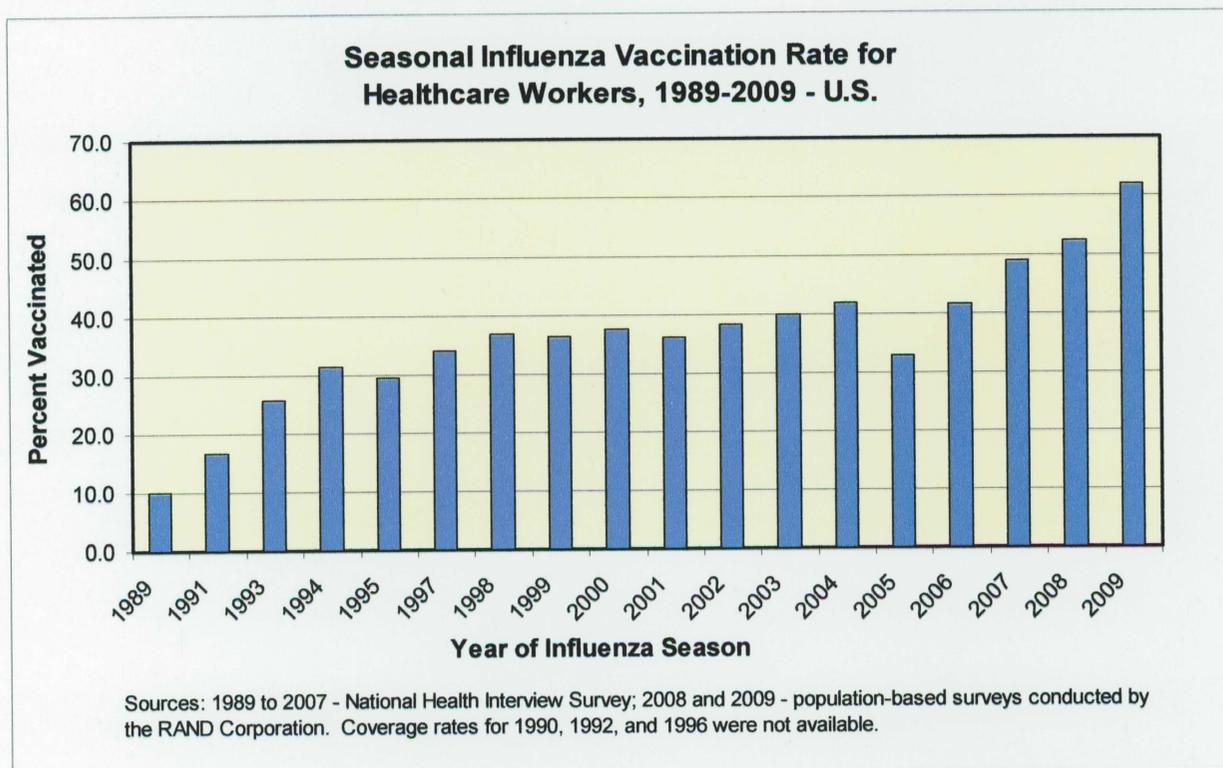
Weekly situational updates including a national and international map of influenza activity and virus subtypes may be found on the CDC site at: <http://www.cdc.gov/flu/>. For a more local perspective, please visit the Virginia Department of Health (VDH) webpage to find the Virginia Weekly Influenza Activity Report:

<http://www.vdh.virginia.gov/Epidemiology/Surveillance/Influenza/>.

Vaccination

For the first time, the Advisory Committee on Immunization Practices (ACIP) is recommending flu vaccination for **all persons aged ≥ 6 months**. The trivalent seasonal vaccine this year will include the H1N1 (2009) strain as well as two other strains (A/Perth/16/2009 (H3N2)-like and B/Brisbane/60/2008-like). Unlike last year, there has been no large-scale federal or state purchase of flu vaccine for this season. Thus, VDH will not have access to vaccine beyond what it routinely provides through local health departments and through planning and preparedness exercises.

Annual vaccination of health care providers continues to be an important consideration for you and your staff. All healthcare providers (HCPs) and persons in training for healthcare professions should be vaccinated annually against influenza. Despite serving a dual purpose of protecting both HCPs and their often high-risk patients, this simple step is often overlooked by many in the healthcare profession. I strongly encourage you to lead the way with your staff in this very simple but important public health activity.



Many clinicians still are unclear about the appropriate use of Live Attenuated Influenza Vaccine (LAIV) administered intranasally. All HCPs under 50, with the exception of providing care for hospitalized severely immunosuppressed patients who require a protected environment (i.e., inpatient hematopoietic stem cell transplant patients), are excellent candidates for LAIV.

In addition, please help continue the success of the Virginia Immunization Information System (VIIS) by integrating VIIS into your practice. Up to 85% of all vaccinations are provided in the private sector. Your participation in VIIS is crucial for its ultimate success in improving immunization coverage rates and reducing morbidity from vaccine-preventable disease. For those of you who used VIIS during the H1N1 response, thank you for your continued use of the system to record all vaccinations, including influenza, administered in your practice.

For practices interested in learning more about VIIS and its capabilities, contact the VIIS staff for questions or to schedule an in-person or phone-based training session at (804) 864-8055, M-F 8AM to 5PM.

Mitigation

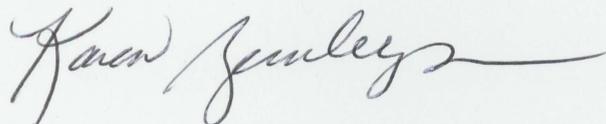
CDC recently proposed updated prevention strategies for seasonal influenza in the Federal Register (<http://edocket.access.gpo.gov/2010/pdf/2010-15015.pdf>). For Infection Control, these guidelines recommend standard and droplet precautions (e.g., surgical face masks) when entering the room of a patient with suspected or confirmed influenza. Such patients should be placed in private rooms or cohorted in a common area and should wear masks if they need to be transported to other areas of the facility. When aerosol-generating procedures are performed on patients with suspected or confirmed influenza, healthcare personnel should wear N95 respirators and should conduct procedures in an airborne isolation room or using HEPA filtration.

Regarding treatment of influenza, it is important to keep up to date on CDC's recommendations. As influenza seasons progress over time, more information regarding circulating strains and severity of illness becomes available and often leads to alterations in CDC's treatment recommendations. The most recent treatment recommendations can be found at <http://www.cdc.gov/flu/professionals/antivirals/index.htm>.

In conclusion, please join me and local health departments in mitigating the impact of flu on all Virginians by promoting vaccination among your staff, family and patients. Every year, many Virginians are hospitalized, some with very severe influenza disease which can, in some cases, lead to death. Together, we can prevent much of this morbidity and mortality from infants to adults with chronic disease through vaccination, early recognition of severe disease and appropriate treatment.

To learn more, you can visit <http://www.vdh.virginia.gov/clinicians/index.htm> and view the slide presentation, "Influenza in Virginia, 2010-2011: What's New?" and, as always, feel free to contact your local health department (www.vdh.virginia.gov/lhd) or the Division of Immunization at 804-864-8055 should you have any questions or concerns.

Sincerely,

A handwritten signature in black ink, appearing to read "Karen Remley", with a long horizontal flourish extending to the right.

Karen Remley, MD, MBA, FAAP
Commissioner