



MAY 13, 2009

HEALTH UPDATE

H1N1 Testing Criteria for North Dakota

This information provided here includes updated recommendations for North Dakota health-care providers regarding testing patients for the new H1N1 influenza virus and the use of antivirals. Two probable cases have been reported in the state in Burleigh and Ward Counties. Probable cases are defined as people who have an influenza-like illness and have confirmed influenza A infection by RT-PCR, but the influenza A was not able to be typed at the North Dakota Department of Health's Division of Laboratory Services. Confirmation is pending from the Centers for Disease Control and Prevention (CDC) on both cases.

The following three groups should be considered for testing in North Dakota:

1. People presenting with a fever ($\geq 100.0^{\circ}$) and a cough with or without a sore throat and
 - Have illness onset within seven days of out-of-state travel

Or

- Reside in Burleigh County, the city of Mandan or Ward County.
2. People presenting with a fever ($\geq 100.0^{\circ}$) and a cough with or without a sore throat who have an illness onset within seven days of having close contact to a confirmed case of novel influenza A (H1N1).
 3. Hospitalized patients with fever and respiratory illness with no obvious cause of illness, regardless of residence or travel history.

Sentinel influenza surveillance providers are encouraged to test any patient with influenza –like illness and submit specimens to the North Dakota Department of Health.

As more cases are reported, the North Dakota Department of Health will modify the testing criteria to include testing only for more serious infections.

The Centers for Disease Control and Prevention is recommending treatment with either oseltamivir or zanamavir for the following groups of people:

1. All hospitalized patients with confirmed, probable or suspected influenza (H1N1)

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2. People who are at higher risk for seasonal influenza complications from influenza.
 - a. Children younger than 5 years old
 - b. Adults 65 years of age and older
 - c. Chronic pulmonary and cardiovascular disease
 - d. Immunosuppression
 - e. Pregnant women
 - f. Persons younger than 19 receiving long-term aspirin therapy
 - g. Residents of nursing homes and other long term care facilities

Because seasonal influenza A H1 and H3 viruses continue to circulate in North Dakota, providers treating influenza empirically should consider adding an amantane to the treatment regimen when using oseltamivir.

Chemoprophylaxis can be considered for the following groups:

1. Close contacts of cases who are at high risk for complications of influenza.
2. Health-care personnel, public health workers and first responders with recognized, unprotected close contact exposure to a confirmed, probable or suspect case of H1N1 during the cases infectious period.

Complete guidance regarding the use of antivirals can be found at www.cdc.gov/h1n1flu/recommendations.htm .

More information regarding H1N1 can be found at <http://www.ndflu.com/swineflu>. For more information, please call the North Dakota Department of Health's Division of Disease Control at 701.328.2378 or 800.472.2180.

Categories of Health Alert messages:

- *Health Alert conveys the highest level of importance; warrants immediate action or attention.*
- *Health Advisory provides important information for a specific incident or situation; may not require immediate action.*
- *Health Update provides updated information regarding an incident or situation; no immediate action necessary.*
- *Health Information provides general information that is not necessarily considered to be of an emergent nature.*

This message is being sent to local public health units, clinics, hospitals, physicians, tribal health, North Dakota Nurses Association, North Dakota Long Term Care Association, North Dakota Healthcare Association, North Dakota Medical Association, and hospital public information officers.