

H1N1 influenza 09 (Human Swine Influenza) Queensland Health advice to Medical Practitioners

PROTECT phase (updated 4 July 2009)

IF THE PATIENT MEETS THE FOLLOWING CRITERIA:

- Patient has a recent onset of an acute febrile Influenza-Like Illness (ILI)**
Recent onset of fever (38°C or greater, or a good history of fever) with cough and/or sore throat.
- Presents in the first 48 hours of symptoms***
- Patient is a member of at least one of the following vulnerable groups:**
 - Those with chronic respiratory conditions (including asthma or COPD)
 - Pregnant women (particularly in the second or third trimester)
 - Persons with morbid obesity
 - Indigenous people of any age
 - Persons with conditions predisposing to severe influenza such as:
 - Cardiac disease (excluding simple hypertension)
 - Other chronic diseases such as:
Diabetes mellitus, chronic metabolic diseases, chronic renal or liver disease, haemoglobinopathies, immunosuppressed (including cancers, HIV/AIDS infection, drugs) and chronic neurological conditions

OR

Patient has moderate/severe disease, particularly those who are deteriorating, or experiencing respiratory difficulties

THEN

MANAGEMENT

- Voluntary isolation[†]
- Antiviral treatment through practitioner access to antiviral stockpile.**
- To be filled your prescription **MUST** state patient has acute febrile ILI, is member of a vulnerable group or has moderate/severe disease **AND** "THIS SCRIPT IS TO BE FILLED FROM THE ANTIVIRAL PANDEMIC STOCKPILE"
- Provide supportive treatment / seek hospitalisation as indicated.

TESTING

Laboratory testing should only be considered for those who have an acute, febrile influenza-like illness **AND** are either:

- a member of a vulnerable group; **OR**
- a health care worker / person in a high risk setting (eg special schools); **OR**
- have moderate or severe disease including those requiring hospitalisation; **OR**
- laboratory testing is required on public health grounds, such as to determine the cause of an outbreak in a closed environment.

USE TWO SWABS: ONE TO COLLECT DEEP NASAL SWAB FROM BOTH NOSTRILS AND ONE SWAB FROM THE THROAT

In the PROTECT phase stockpile antiviral medication SHOULD NOT be provided to those with mild disease, those outside the vulnerable risk groups or for prophylaxis. Public Health Physicians may recommend antivirals for contacts in high risk settings.

NB Public health Units are no longer routinely following up all notified cases. Public health management is now focused on monitoring and responding to notifications in high risk settings and Indigenous communities.

*Beyond 48 hours antiviral medication may still be indicated on clinical grounds

[†]Voluntary home isolation, if on antiviral treatment, should be for 72 hours or fever resolved for 24 hours whichever is longer. If not treated with antivirals voluntary home isolation should be for 7 days or until fever has resolved, which ever is longer.

** Patients presenting within 48 hours of the onset of an influenza-like illness who are **not** in a vulnerable group may be considered for anti-viral therapy using the standard (non-PBS) prescription for private items that would apply during normal seasonal influenza epidemics.