#### **ID CORNER**

## Influenza Update

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This flu season has been especially bad. As of epidemiological week 4 (week ending on January 27<sup>th</sup>), overall hospitalizations are now the highest we've seen in recent years and flu associated deaths in children and adults continue to be reported. According to the Centers for Disease Control and Prevention (CDC), latest tracking data indicate that the flu activity is still high and widespread across most of the nation and increasing overall. Influenza A H3N2 continues to dominate this season, but H1N1 and influenza B are also causing illness.

# WHAT YOU CAN DO AS A HOSPITALIST:

Recommend influenza vaccination: It is not too late to get the vaccine. Even though most flu vaccines have low effectiveness against H3N2 viruses, the effectiveness against other flu viruses is better, and there is more than one flu virus circulating this season. The vaccine may also reduce the severity of symptoms if you acquire the flu despite being vaccinated.

# Recommend pneumococcal vaccination:

Some of the serious consequences of influenza are bacterial pneumonias. Indications for vaccination include: age 65 or older, functional or anatomic asplenia, cerebrospinal fluid (CSF) leaks, cochlear implants, immunocompromising conditions.

Practice and teach the following: Stay

home if you are sick to help prevent spreading respiratory viruses to others, frequently wash your hands, and cover your mouth when you cough or sneeze.

## Use antivirals (neuraminidase inhibitors):

Treatment with neuraminidase inhibitors has been shown to have clinical and public health benefit in reducing illness and severe outcomes of influenza. Any hospitalized patient, those with severe illness or at risk of developing serious complications (people 65 and older, pregnant women, young children, people with heart or lung disease) should be treated as soon as possible with antiviral medications. Ideally, treatment should be initiated within 48 hours of symptom onset. However, antiviral treatment initiated later than 48 hours after illness onset can still be beneficial for some patients. Because of the importance of early treatment, decisions about starting antiviral treatment should not wait for laboratory confirmation of influenza.

## **Notes**

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## Reference

1. CDC. (2018, February 9). Influenza (flu) including seasonal, avian, swine, pandemic, and other. Retrieved from https://www.cdc.gov/flu/index.htm