Maine Health Alert Network (HAN) System

PUBLIC HEALTH ADVISORY

To: All HAN recipients  
From: Dr. Siiri Bennett, State Epidemiologist  
Subject: Influenza-Associated Pediatric Death  
Date / Time: April 1, 2016  
Pages: 3  
Priority: Normal  
Message ID: 2016PHADV008

Abstract:
Maine CDC received confirmation of an influenza-associated pediatric death this week. The child was less than five years old, unvaccinated, and tested positive for influenza B/Victoria strain. This is the first influenza-associated pediatric death in Maine during the 2015-16 season.

Influenza activity in Maine is still increasing and influenza vaccination is still strongly encouraged and is widely available, especially to protect those persons at risk of severe disease. The vaccine appears to be a good match to all strains this year, and it is not too late to get vaccinated.
Influenza-Associated Pediatric Death

Summary: Maine CDC received confirmation of an influenza-associated pediatric death this week. The child was less than five years old, unvaccinated, and tested positive for influenza B/Victoria strain. This is the first influenza-associated pediatric death in Maine during the 2015-16 season.

Influenza activity in Maine is still increasing and influenza vaccination is still strongly encouraged and is widely available, especially to protect those persons at risk of severe disease. The vaccine appears to be a good match to all strains this year, and it is not too late to get vaccinated.

Background: Influenza activity in Maine remains widespread with laboratory confirmed influenza reported in all sixteen counties. Influenza A/H1N1, influenza A/H3, influenza B/Victoria, and influenza B/Yamagata have been confirmed in Maine indicating all strains are circulating. Maine CDC has followed up on fourteen outbreaks of influenza as of Tuesday, March 29, 2016. To date, 154 individuals were hospitalized with laboratory-confirmed influenza (13.8% of all positive influenza reports received by Maine CDC) reminding us that influenza can be a serious illness.

Recommendations:

- Prevention: Maine CDC recommends following the “No Flu 4 You” guidelines which include:
  - Wash your hands: Both the general public and healthcare providers should remember to wash their hands frequently to prevent transmission of influenza
  - Cover your cough: Use tissues, or cough into your sleeve
  - Stay home when you are sick: Symptomatic individuals should remain home until 24 hours after fever resolves without the use of medications
  - Get Vaccinated: Maine CDC recommends vaccination for everyone aged 6 months and older, especially for those people who are at high risk of serious complications from influenza. Influenza vaccine is provided at no-cost by the state of Maine for children under the age of 19 years. Vaccine is still available through school sponsored vaccine clinics, healthcare providers, and many local pharmacies and offers protection in 14 days. For questions about vaccination please contact the Maine Immunization Program at 800-867-4775 or through immunizeme@maine.gov.

- Diagnostic Testing: Maine CDC recommends that healthcare providers consider influenza testing for patients with influenza-like illness (defined as fever greater than 100° F with cough or sore throat, in the absence of another known cause) who are hospitalized, who have died, or for whom a diagnosis of influenza would affect clinical care, infection control, or management of contacts.

- Treatment: Tamiflu and Relenza are both approved antivirals for influenza. Treatment should begin as soon as possible. Updated guidance for use of Antivirals for the Treatment and Chemoprophylaxis of Influenza are available at http://www.cdc.gov/flu/professionals/antivirals/summary-clinicians.htm

Clinicians are reminded to treat suspected influenza in high-risk outpatients, those with progressive disease, and all hospitalized patients with antiviral medications as soon as possible, regardless of negative rapid influenza diagnostic test results and without waiting for RT-PCR testing results. Early antiviral treatment works best, but treatment may offer benefit when started up to 4-5 days after symptom onset. Early antiviral treatment can reduce influenza morbidity and mortality.
- **Reporting:** All influenza outbreaks, laboratory confirmed influenza hospitalizations, and pediatric influenza deaths are reportable conditions to Maine CDC. Maine CDC also appreciates reports of laboratory confirmed influenza (including rapid positives) but particularly:
  - any suspicion of influenza among persons who have died
  - any laboratory-confirmed influenza associated with an outbreak


For more information:

- Maine CDC’s influenza webpage: [www.maineflu.gov](http://www.maineflu.gov)
- Federal CDC’s influenza webpage: [www.cdc.gov/flu](http://www.cdc.gov/flu)