

ADVISORY

SUBJECT:	First Reported Case of Influenza, 2024-2025 Season
Date:	September 20, 2024
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То:	Physicians, Hospitals
From:	Dr. Nicola Mercer, Medical Officer of Health and CEO

Influenza season has begun in Wellington-Dufferin-Guelph with the first confirmed case of locally acquired influenza A in a child.

- Please consider testing individuals that present with influenza-like respiratory infection (ILI).
- Ensure your offices have appropriate specimen collection kits for influenza testing.
- Consider antiviral therapy for treatment and chemoprophylaxis for high-risk groups.

Background

The first lab-confirmed case of influenza A for the 2024-2025 influenza season was reported in a child this week in our area. Sporadic influenza cases are being reported across the province; however, overall activity is low. Have an increased awareness of influenza infection in patients presenting with compatible signs and symptoms of respiratory infection. The influenza vaccine will be available for your office in mid-October for administration to high-risk patients, but in the meantime, antivirals can play a key role in the management of influenza illnesses.

To monitor local activity on respiratory illnesses, please visit the <u>WDGPH Respiratory Illness</u> <u>Activity Dashboard</u> on our website.

Clinical Signs and Symptoms of Influenza

Influenza illness can range from mild to severe. Most individuals will recover from the illness without medical attention; however, influenza may cause complications and even death in high-risk groups. Common symptoms of influenza are:

- Sudden onset of high fever (≥39°C)
- Dry cough
- Headache
- Myalgias
- Sore throat and coryza

Diagnosis for Influenza

Influenza may be difficult to diagnosis as many respiratory illnesses can have similar symptoms. A diagnosis of influenza can be confirmed with a nasopharyngeal swab (NP). Ensure the swab is transported in universal transport media (pink). There are other multiplex respiratory virus tests available for hospitals to test individuals presenting to emergency or admitted to hospital. Refer to the <u>PHO testing website</u> for more detailed information.

Treatment and Chemoprophylaxis

Antiviral medications can be used for treatment and chemoprophylaxis. Rapid initiation of antiviral treatment in high-risk groups can decrease the duration of influenza symptoms, help to prevent complications of influenza, including hospitalization and death.¹

Individuals that are considered at a high risk of complications:

- o Adults 65 years of age or older
- Pregnant individuals, up to four weeks post-partum
- Those with underlying health conditions and/or immunosuppression

Medication	Age/Weight	Treatment (5 days)	Chemoprophylaxis (10 days)
Tamiflu	Adults and adolescents ≥13 years	75mg BID	75mg OD
(Oseltamivir)	Children aged ≥12 months to 12 years according to body weight		
	≤15kg / ≤33 lbs.	30 mg BID	30mg OD
	>15-23kg / >33-51lbs.	45mg BID	45mg OD
	>23-40kg / >51-88lbs.	60 mg BID	60mg OD
	>40kg / >88lbs.	75 mg BID	75mg OD
	Children aged 3 months to <12 months	3mg/kg BID	3mg/kg OD
	Children under 3 months	3mg/kg BID	Not recommended
Zanamivir	Adults and children aged ≥7years	10mg BID (two 5 mg inhalations)	10 mg OD (two 5 mg inhalations)

Table 1. Recommended antiviral dosages²

References:

- 1. Public Health Ontario. Influenza Antiviral Treatment, September 9, 2021. Available at: <u>https://www.publichealthontario.ca/-/media/documents/f/2020/fact-sheet--antiviral-</u> <u>medications-influenza.pdf?sc_lang=en</u>
- Aoki FY, Papenburg J, Mubareka S, Allen UD, Hatchette TF, Evans GA. 2021–2022 AMMI Canada guidance on the use of antiviral drugs for influenza in the COVID-19 pandemic setting in Canada. J Assoc Med Microbiol Infect Dis Can.2022;7(1):1-7. Available from: <u>https://jammi.utpjournals.press/doi/10.3138/jammi-2022-01-31</u>

For more information, please contact:

Name/Title:	Lilliana Marinko, Manager of Infectious Diseases
Email:	lilliana.marinko@wdgpublichealth.ca
Website:	www.wdgpublichealth.ca