

From the Chief Medical Officer  
Dr Michael McBride



Department of  
**Health, Social Services  
and Public Safety**

[www.dhsspsni.gov.uk](http://www.dhsspsni.gov.uk)

AN ROINN

**Sláinte, Seirbhísí Sóisialta  
agus Sábháilteachta Poiblí**

MÄNNYSTRIE O

**Poustie, Resydènter Heisin  
an Fowk Siccar**

Castle Buildings  
Stormont Estate  
Belfast BT4 3SQ  
Tel: 028 9052 0563  
Fax: 028 9052 0574  
Email: [michael.mcbride@dhsspsni.gov.uk](mailto:michael.mcbride@dhsspsni.gov.uk)

HSS(MD)40/2008

To: Directors of Public Health, HSS Boards (*for onward distribution to all Public Health Staff*)  
All General Practitioners (*for onward distribution to practice staff, including practice nurses*)  
Directors of Primary care (*for onward distribution to GP Out of Hours Centres*)  
All Community Pharmacists  
Directors of Nursing, HSS Boards  
Medical Directors, HSC Trusts (*for onward distribution to all Consultants*)  
Nursing Directors, HSC Trusts (*for onward distribution to Community Nurses*)  
Consultants in Communicable Disease Control, HSS Boards  
Consultant Microbiologists, HSC Trusts  
Directors of Pharmaceutical Services, HSC Trusts/Boards/CSA  
Regional Epidemiologists, CDSC(NI)  
Chief Executives, HSC Trusts  
GP Medical Advisers, HSS Boards  
Medical Director, Prison Healthcare Services  
Regional Procurement Pharmacists

Your Ref:  
Our Ref: HSS(MD)40/2008  
Date: 12 December 2008

Dear Colleague

## **INCREASE IN CONSULTATION RATES FOR FLU-LIKE ILLNESS AND CONFIRMED INFLUENZA ISOLATES IN NORTHERN IRELAND – USE OF ANTIVIRALS**

1. I am writing to alert you to the fact that influenza A virus is now circulating in the community in Northern Ireland. Oseltamivir continues to be recommended, along with zanamivir, for the prevention and treatment of influenza this season.
2. General practitioner consultation rates for flu-like illness (FLI) have increased in the last few weeks. The combined GP consultation rate for 'flu and FLI has risen from 42.8 in Wk 48 to 69.2 in Wk 49. Ten influenza A isolates have been confirmed by the Regional Virus Laboratory (four of the ten were in the last week). In addition there has been an influenza A outbreak in the SHSSB area affecting residents in a nursing home. Weekly updates on enhanced influenza surveillance are available on the Communicable Disease Surveillance Centre (NI) website at [www.cdscni.org.uk](http://www.cdscni.org.uk) (CDSC(NI)). The most up to date influenza bulletin is at [www.cdscni.org.uk/publications/Wk49.pdf](http://www.cdscni.org.uk/publications/Wk49.pdf)

3. As influenza virus is now circulating in the community the NICE guidance on the use of antivirals (zanamivir and oseltamivir) now applies. Oseltamivir continues to be recommended, along with zanamivir, for the prevention and treatment of influenza A Guidance on the use of antiviral drugs for the prevention of influenza: Technology Appraisal Guidance No. 158. <http://www.nice.org.uk/Guidance/TA158/QuickRefGuide/pdf/English>  
B. Guidance on the use of antiviral drugs for the treatment of influenza: Technology Appraisal Guidance No. 58. <http://www.nice.org.uk/Guidance/TA58> (Circulars: HSS(MD)12/2003)

A summary of the NICE Guidance is given at **Annex A** for easy reference.

4. There are no supply problems for influenza vaccine and, indeed, the Seasonal Influenza Immunisation Programme should be nearing completion. The uptake rates for Northern Ireland to 30<sup>th</sup> November 2008 are good - 70.4% in the population aged 65 years and over and 63% in the under 65 “at risk” group.

## 5. Action Required by General Practitioners

It is important that all primary care staff are now made aware that:

- Influenza virus is circulating in the community.
- There is an urgent need to ensure all relevant patients are immunised, and thus protected, as soon as possible.
- They should familiarise themselves with the guidance on use of antiviral drugs for prevention and treatment of influenza.
- Residents of nursing and residential homes are particularly vulnerable, as attack rates for influenza A may be very high in such settings. GPs, together with HSC Trust staff, should ensure these patients have been immunised.
- Patients with flu/FLI should be advised of the need to stay at home during the course of their illness, in an effort to avoid onward community transmission.

## 6. Action Required by HSC Trusts

- It is important that Trusts implement their arrangements for immunisation of Trust staff as soon as possible and encourage high uptake rates. Failure to protect staff may lead to severe service difficulties.
- Acute Trusts should make plans for dealing with cases of influenza presenting to and in hospitals.



## The National Institute of Clinical Excellence (NICE) guidance on antiviral drugs

### 1. Guidance on the use of antiviral drugs for the prevention of influenza (prophylaxis)

Updated NICE guidance on the on the use of amantadine, oseltamivir and zanamivir for the prophylaxis of influenza was issued in September 2008.

NICE recommends that when influenza A or B virus is circulating in the community, oseltamivir or zanamivir should be prescribed for the post-exposure prevention of influenza if all of the following circumstances apply:

- (i) The person is in an 'at-risk' group, and
- (ii) Has been exposed to an influenza-like illness and are able to begin prophylaxis within the timescale specified in the marketing authorisations of the individual drugs (within 36 hours of contact with an index case for zanamivir and within 48 hours of contact with an index case for oseltamivir), and
- (ii) Has not been effectively protected by vaccination.

Amantadine is not recommended for the prophylaxis of influenza.

### 2. Guidance on the use of antiviral drugs for the treatment of influenza

The current NICE guidance on the on the use of amantadine, oseltamivir and zanamivir for the treatment of influenza was issued in February 2003. This guidance is currently being reviewed, and updated guidance is scheduled to be published in February 2009.

Within their respective licensed indications, zanamivir and oseltamivir are recommended for the treatment of influenza in adults who present with influenza-like illness (oseltamivir for the treatment of at-risk children aged one year and over and zanamivir for the treatment of at-risk children aged five years and over) and who can start treatment within 48 hours of the onset of symptoms.

Amantadine is not recommended for the treatment of influenza.

### 3. Further information

For more detailed information on the NICE guidance refer to the NICE web-site ([www.nice.org.uk](http://www.nice.org.uk)).