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Pandemic H1N1 (2009) Influenza Update

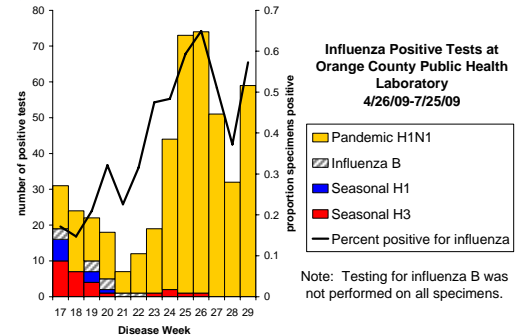
Current WHO pandemic alert level: Phase 6 (Pandemic).

Current CDC pandemic severity index (PSI): Category 2 (of 5)

(see <http://www.pandemicflu.gov/plan/community/commitigation.html> for definitions of PSI)

- **Orange County (OC) update:** As of July 31, 2009, 151 hospitalized cases of pandemic H1N1 influenza and 13 fatalities have been reported in Orange County residents. **Almost all (98%) of the influenza subtyped at OC Public Health since late May has been pandemic H1N1.**

Note: Surveillance is not population-based and underestimates the true number of cases. Certain groups may be over-represented given current priorities for testing, which includes patients with influenza-like illness who are hospitalized, health care workers, pregnant, part of a cluster/outbreak, or residing in an institutional setting.



- **CDC Advisory Committee on Immunization Practices (ACIP) recommends five target groups for initial vaccination against pandemic H1N1.** Initial target groups include:

- Pregnant women
- People who live with or care for children younger than 6 months of age
- Healthcare and emergency services personnel
- Persons between the ages of 6 months through 24 years, and
- People from 25 through 64 years of age who are at higher risk for novel H1N1 because of chronic health disorders or compromised immune systems.

If vaccine supply is initially inadequate to vaccinate the approximately 159 million people in the U.S. in the above groups, the following groups would be prioritized:

- Pregnant women
- People who live with or care for children younger than 6 months of age
- Healthcare and emergency services personnel with direct patient contact
- Children 6 months through 4 years of age, and
- Children 5 through 18 years of age who have chronic medical conditions.

See CDC press release: <http://www.cdc.gov/media/pressrel/2009/r090729b.htm>.

- **Study emphasizes need to treat pregnant women promptly with antivirals if influenza is suspected.** Of the 45 deaths from novel H1N1 in the U.S. through 6/16/09, six (13%) were in pregnant women. All of the pregnant women who died had primary viral pneumonia and required mechanical ventilation. None had been treated with oseltamivir within 48 hours of symptom onset, the time when treatment is thought to provide the most benefit. See *Lancet* (<http://www.thelancet.com/>) on-line 7/29 edition or <http://www.cidrap.umn.edu/cidrap/content/influenza/swineflu/news/jul2909pregnancy.html>.
- **WHO issues list of danger signs for severe H1N1 disease.** As progression can be very rapid, medical attention should be sought when any of the following danger signs appear in a person with confirmed or suspected H1N1 infection:

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| • shortness of breath, either during physical activity or while resting | • turning blue |
| • difficulty in breathing | • chest pain |
| • bloody or colored sputum | • high fever that persists beyond 3 days |
| • altered mental status | |
| • low blood pressure. | |



In children, danger signs include fast or difficult breathing, lack of alertness, difficulty in waking up, and little or no desire to play. See:

http://www.who.int/csr/disease/swineflu/notes/h1n1_pregnancy_20090731/en/index.html.

- **ACIP publishes recommendations on “Prevention and Control of Seasonal Influenza with Vaccines”.** See www.cdc.gov/mmwr.

If you have any comments about this flyer, contact Michele Cheung, MD MPH, at (714) 834-8180.

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