HEALTH ADVISORY:
Updated Recommendations for Prevention and Control of Influenza for the 2015-2016 Season

As of October 26, 2015, eleven cases of laboratory confirmed influenza have been reported to the Boston Public Health Commission (BPHC), mirroring a low number of cases reported to date nationwide. Annual influenza vaccination is recommended for everyone ≥6 months who does not have a specific vaccine contraindication.

*Healthcare providers and laboratories in Boston are required by city health department regulations to report all laboratory-confirmed cases of influenza, as well as any clusters of illness, to BPHC by phone (617) 534-5611 or fax (617) 534-5905.*

BACKGROUND
During the 2014-2015 influenza season, 2,327 cases of laboratory-confirmed influenza were reported in Boston residents. Of these, 591 (25%) were hospitalized, and 38 (2%) died. Influenza A (H3N2) predominated through most of the season, and the H3N2 component of the 2014-2015 vaccine was not well-matched to the circulating strain. Influenza B appeared later in the season and was well-matched to the vaccine strain. Detailed information on the 2014-2015 Boston influenza season can be found by clicking here: [Boston's 2014-2015 Influenza Season in Review.](#)

_Preliminary data from the CDC and WHO on antigenically characterized influenza viruses circulating between May and September 2015 indicate that the H3N2 component of the 2015-6 influenza vaccine appears to be well matched to circulating strains._

VACCINATION
- Annual influenza vaccination is recommended for everyone ≥6 months who does not have a specific vaccine contraindication. Vaccination of an individual offers protection to the person vaccinated as well as to those around them who may be at higher risk from influenza such as young children, the elderly, pregnant women, and those with underlying medical conditions.
- There is _no_ preferential recommendation for one vaccine type over another in any age group. CDC recommends either live attenuated influenza vaccine (LAIV) or inactivated influenza vaccine (IIV) in children and either standard dose or high dose IIV in those >64 years old. There is no preferred vaccine type within either of these groups.

TREATMENT
- Antiviral treatment is recommended as early as possible for any patient with confirmed or suspected influenza who:
  - is hospitalized;
  - has severe, complicated, or progressive illness; or
  - is at higher risk for influenza complications. This includes:
    - children aged younger than 2 years;
- adults aged 65 years and older;
- persons with chronic pulmonary (including asthma), cardiovascular, renal, hepatic, hematological, metabolic, or neurologic disorders; and persons with immunosuppression;
- women who are pregnant, or postpartum (within 2 weeks after delivery);
- persons under 19 years old who are receiving long-term aspirin therapy;
- persons who are morbidly obese (i.e., body-mass index >= 40); and
- residents of chronic-care facilities.

- Antiviral treatment can also be considered for suspected or confirmed influenza in previously healthy, symptomatic outpatients not at high risk on the basis of clinical judgment, especially if treatment can be initiated within 48 hours of illness onset.

- In prior years, localized shortages of influenza antivirals have been reported. Healthcare providers in Boston who become aware that patients are experiencing difficulty obtaining these medications are asked to contact the BPHC Medical Intelligence Center (MIC) by calling (617) 343-6920 or emailing MIC@bphc.org.

TESTING
- CDC guidance on diagnostic testing for influenza is available at: http://www.cdc.gov/flu/professionals/diagnosis/rapidlab.htm.
- Rapid influenza diagnostic tests (RIDTs) have sensitivities ranging from 50-70% and may produce false negative results
- PCR testing offers greater sensitivity and specificity. Contact your laboratory to see if PCR testing is available at your facility.

EDUCATION
- A 30 second PSA on influenza and vaccination is available in both English and Spanish through YouTube: BPHC Influenza PSA (English), YouTube, BPHC Influenza PSA (Spanish), YouTube.

REPORTING
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