



# Public Health Message

## from the Fort Wayne-AlLEN County Department of Health

**Topic: H1N1 Update**

**Date: July 6, 2009**

### ***National and local update:***

- To date, Indiana has had 267 confirmed cases in 16 counties, 7 cases in Allen County. There have been 34 hospitalizations, with some patients requiring ventilatory support, however no reported deaths. Across the United States there have been 27, 717 confirmed cases, 3,065 hospitalizations and 127 deaths. Only 6% of the hospitalized cases have been in persons over age 65, just opposite of what we see during seasonal influenza. The median age for hospitalizations is 37 years old. Most of the patients who have died (88%) have had underlying medical conditions, including obesity (in 34%), asthma (11%), other pulmonary disease (24%), neurocognitive disorders (15%), and diabetes (13%).
- To date there have been no changes in treatment or infection control recommendations.

### ***H1N1 and Healthcare Workers (<http://www.cdc.gov/mmwr/preview/mmwrhtml/mm5823a2.htm>):***

According to a report in the MMWR: "As of May 13, CDC had received 48 reports of confirmed or probable infections with H1N1; of these, 26 reports included detailed case reports with information regarding risk factors that might have led to infection. Of the 26 cases, 13 (50%) HCP were deemed to have acquired infection in a health-care setting, including one instance of probable HCP to HCP transmission and 12 instances of probable or possible patient to HCP transmission. Eleven HCP had probable or possible acquisition in the community, and two had no reported exposures in either health-care or community settings. Among 11 HCP with probable or possible patient to HCP acquisition and available information on PPE use, only three reported always using either a surgical mask or an N95 respirator. These findings suggest that transmission of novel influenza A (H1N1) virus to HCP is occurring in both health-care and community settings and that additional messages aimed at reinforcing current infection-control recommendations are needed."

"Most of the probable or possible patient to HCP transmissions in this report occurred in situations where the use of PPE was not in accordance with CDC recommendations. Among the three HCP who reported always using either a surgical mask or an N95 respirator while caring for a patient with either confirmed novel H1N1 infection or respiratory illness, one had not been fit-tested for the respirator, and none used all of the PPE recommended by CDC for infection control. Even so, these findings cannot definitively establish that patient to HCP transmission was related to nonuse of certain PPE, nor can the findings be used to determine the effectiveness of PPE in protecting HCP from infection with the novel influenza A (H1N1) virus."

"These results highlight the need to maintain adherence to comprehensive infection-control strategies to prevent transmission of novel H1N1 in health-care settings. These strategies should include administrative controls (e.g., visitor policies and triage of potentially infectious patients), provision of infection-control resources, training in infection-control practices and correct use of PPE, identification of all ill HCP, and exclusion of ill HCP from work."

Obviously, this data was collected early in the course of this outbreak and has certain limitations. However, I encourage you to read the entire article and be sure to adhere to the recommendations made by the infection control officer at your facility.

### ***Tamiflu Resistance (<http://www.newsinferno.com/archives/7582>):***

A Tamiflu-resistant strain of Swine Flu—the 2009 H1N1 pandemic virus—has emerged in Denmark. According to Bloomberg.com, Tamiflu drug maker Roche Holding AG said a patient treated with the Tamiflu in Denmark exhibited drug resistance, the first time this has occurred in this outbreak.

Please feel free to call with any questions  
Deb McMahan, MD