

January 5, 2018

**UPDATE: Re: Increasing Influenza Activity in Manitoba**

In addition to the information communicated on December 20, 2017 (included below), please be advised of the following update:

- With recent increased **TESTING** volumes, health care providers should only test:
  - Inpatients or long term care (LTC) residents with influenza-like-illness (ILI), and
  - Outpatients with ILI who meet one or more risk factors (listed below). Patients meeting these criteria are eligible for treatment or prevention of influenza with oseltamivir.
- Current data indicate that patients with ILI being tested have influenza A approx. 45% of the time. High-risk patients and potentially exposed health care workers with ILI may benefit from empiric oseltamivir treatment pending investigation.

Interim estimates of vaccine effectiveness are not yet available. Please continue to offer the flu vaccine to all Manitobans at no charge, particularly for those individuals at increased risk of serious illness from the flu, and for their caregivers and close contacts.

December 20, 2017

**Re: Increasing Influenza Activity in Manitoba**

**Influenza (flu) activity is now being detected in multiple regions across Manitoba.** Influenza A H3N2 virus is the primary strain circulating at this time. The H3N2 strains seen in Manitoba and Canada overall have been characterized as similar to the strains seen in the southern hemisphere.

**Health care providers are encouraged to offer flu vaccine to all Manitobans at no charge.** An annual flu vaccine is especially important for those at increased risk of serious illness from the flu, and for their caregivers and close contacts.

For information on Manitoba's Seasonal Influenza Immunization program, visit the website at <http://www.gov.mb.ca/health/flu/index.html>

**The Use of Antiviral Drugs**

So far this season, >99% of all Canadian influenza strains tested have been sensitive to the antiviral drugs oseltamivir and zanamivir.

Manitoba Health, Seniors and Active Living (MHSAL) encourages health care providers to refer to the most recent **Association of Medical Microbiology and Infectious Diseases Canada (AMMI) guidelines for the use of antiviral drugs for influenza**, available at: <https://www.ammi.ca/Update/79.ENG.pdf>

Oseltamivir is eligible for Part 2 Pharmacare coverage when the criteria below are met. If eligible, the physician is to indicate "Meets EDS" on the prescription and the pharmacy will then process the prescription accordingly.

**Oseltamivir: For the treatment OR prevention of Influenza in persons who meet one or more of the following risk factors:**

- (a) Asthma or other chronic pulmonary disease, including bronchopulmonary dysplasia, cystic fibrosis, chronic bronchitis and emphysema;
- (b) cardiovascular disease (excluding isolated hypertension), including congenital and acquired heart disease such as congestive heart failure, and symptomatic coronary artery disease;
- (c) Malignancy;
- (d) Chronic renal insufficiency;
- (e) Chronic liver disease;
- (f) Diabetes mellitus or other metabolic diseases;
- (g) hemoglobinopathies such as sickle cell disease;
- (h) Immunosuppression or immunodeficiency due to disease (eg. HIV infection, or iatrogenic due to medication);
- (i) rheumatologic diseases, including rheumatoid arthritis, systemic lupus erythematosus, psoriatic arthritis, antiphospholipid syndrome, scleroderma, spondyloarthropathies, Sjorgen's syndrome, dermatomyositis, vasculitis, sarcoidosis and polyarteritis nodosa;
- (j) Neurological disease or neurodevelopmental disorders that compromise handling of respiratory secretions (eg. Cognitive dysfunction, spinal cord injury, seizure disorders, neuromuscular disorders, cerebral palsy, metabolic disorders);
- (k) Children younger than 2 years of age;
- (l) Individuals 65 years of age or older;
- (m) Individuals of any age who are residents of nursing homes or other chronic care facilities;
- (n) Pregnant women and women up to 2 weeks post partum regardless of how the pregnancy ended;
- (o) Individuals younger than 18 years of age who are on chronic aspirin therapy;
- (p) Morbid obesity (BMI 40 or greater);
- (q) Persons of Indigenous ancestry, including First Nations, Inuit or Metis ancestry.

Regularly updated **2017/2018 influenza surveillance reports in Manitoba** are available at <http://www.gov.mb.ca/health/publichealth/surveillance/influenza/index.html>

**Manitoba's Communicable Disease Management Protocol for Influenza** can be found at <http://www.gov.mb.ca/health/publichealth/cdc/protocol/influenza1.pdf>.

Please share this communication with all colleagues in your department, facility or clinic. For questions, please contact MHSAL at 204-788-6737.

Sincerely,



Richard Baydack, PhD  
Director  
Communicable Disease Control



Richard Rusk, DVM, MD, CCFP, MPH  
Medical Officer of Health  
Communicable Disease Control