

From the Acting Chief Medical Officer
Dr Elizabeth Mitchell

URGENT COMMUNICATION

HSS(MD) 26/2009

Chief Executive, HSC Board
Chief Executive, Public Health Agency
Chief Executives, HSC Trusts
Director of Public Health, Public Health Agency
(for onward distribution to Consultants in Communicable Disease Control, Regional Epidemiologists, Public Health Doctors)
Director of Nursing, Public Health Agency
Family Practitioner Service Leads, HSC Board
(for cascade to Out of Hours centres)
GP Medical Advisers, HSC Board
Medical Directors, HSC Trusts
(for onward distribution to, A& E doctors, ID Physicians, Microbiologists, Virologists, Consultant Physicians).
Medical Director, NI Ambulance Service
Nursing Directors, HSC Trusts
All General Practitioners
(for onward distribution to practice staff including practice nurses)
PHA EOC

Dear Colleague

SWINE FLU A (H1N1) OUTBREAK - MANAGEMENT OF PATIENTS WITH A FLU-LIKE ILLNESS

Purpose of this letter

The purpose of this letter is to clarify the current management of patients presenting with a flu-like illness in Northern Ireland.

Background

The number of cases of influenza A(H1N1) nationally and internationally continues to rise. Infection with influenza A(H1N1) virus in the UK is generally mild in most people, but proving more severe in a small number of cases.

At this stage we are seeing an uneven pattern of spread of infection across the UK. For example, a number of 'hot-spots', (Glasgow, West Midlands and London) have seen large numbers of cases and have progressed to the stage of confirmed community transmission. In contrast, other regions, including Northern Ireland, have gradually increasing numbers of cases but have not yet reached the stage of community transmission. **This uneven pattern of spread means that national advice and guidance on outbreak management needs to be tailored to fit the stage of the outbreak in each region.**



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

www.dhsspsni.gov.uk

AN ROINN

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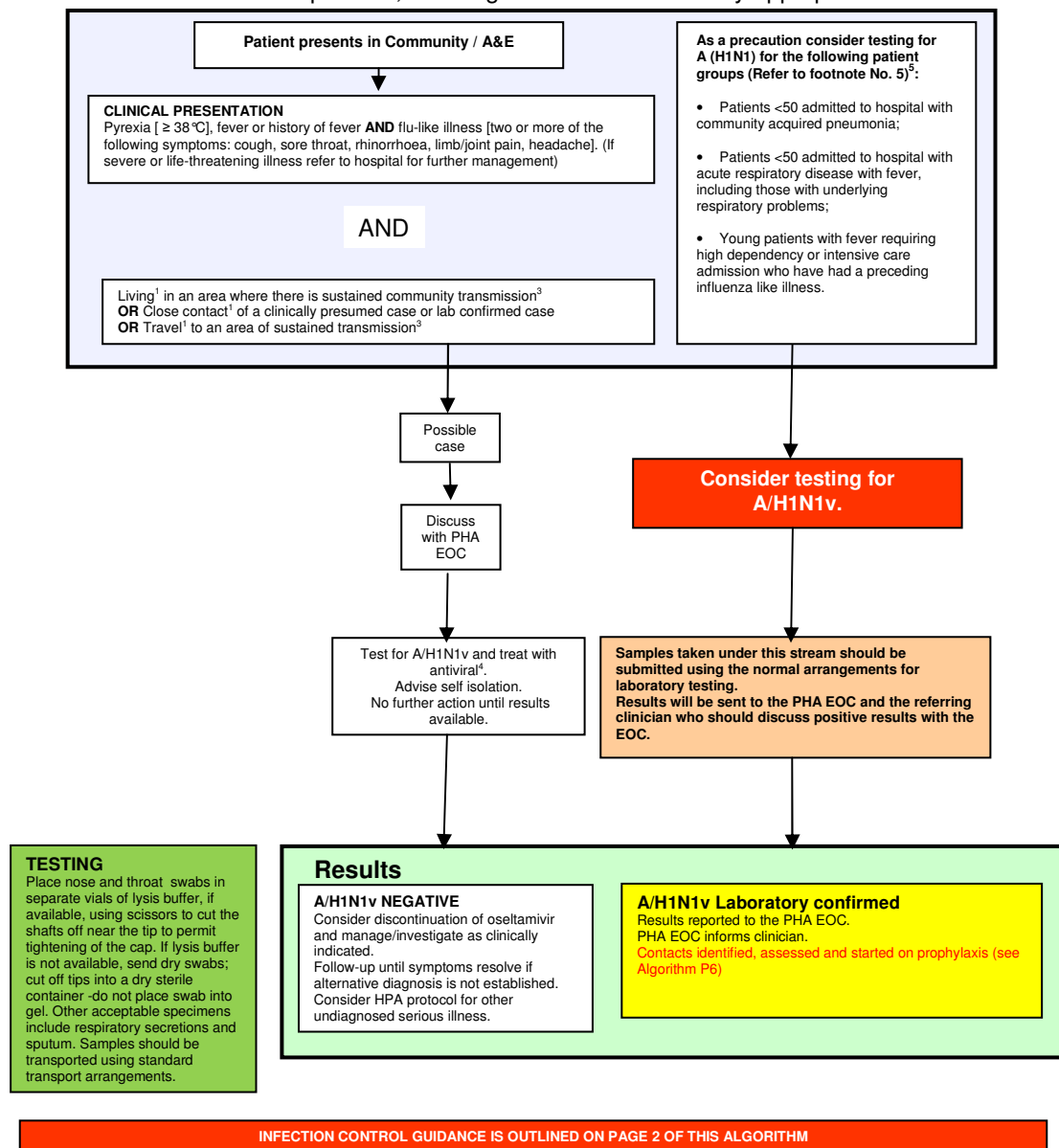
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Our Ref: HSS(MD) 26/2009

Date: 26 June 2009

WHO PANDEMIC PHASE 6: Algorithm for the management of patients with a flu-like illness in Northern Ireland. (This advice reflects that at present Northern Ireland is at an earlier stage with no sustained community transmission)

Clinicians should note that they remain able to request testing in any patients, as per their normal practice, if testing is considered clinically appropriate



Footnotes:

1 Onset of symptoms within seven days

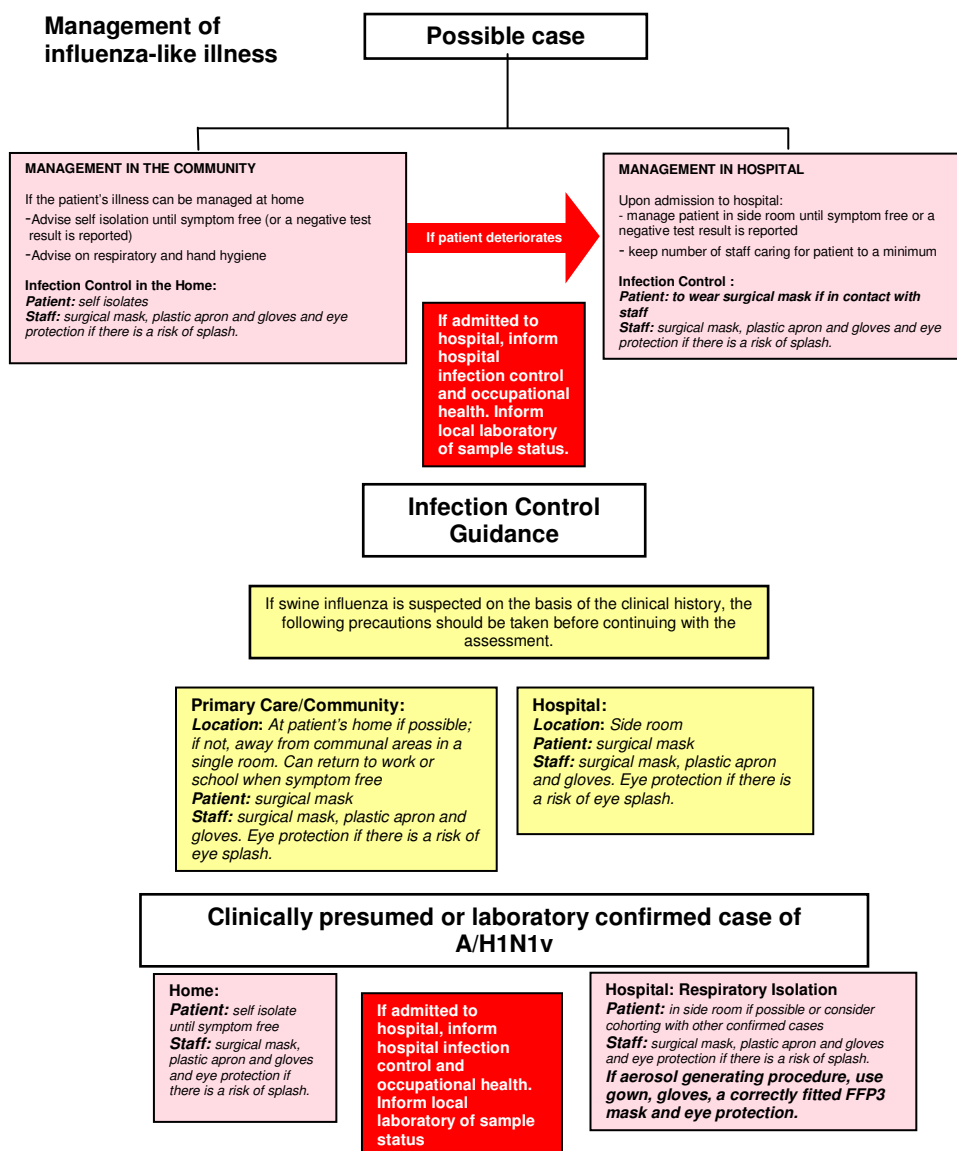
2 Specific advice has been developed for managing cases and their contacts in the school setting

3 In the UK currently - Greater Glasgow, Birmingham and London. Abroad currently - USA, Mexico, Canada or Australia

4 Standard treatment dose of oseltamivir in adults (age >13 years old) is 75mg bd for 5 days. Standard treatment dose of zanamivir is 10mg bd for 5 days. (www.medicines.org.uk) Treatment for seasonal influenza should only be given within 48 hours of onset of symptoms. In swine influenza, however, it can be offered at any point if, on clinical assessment, the patient is judged to have symptoms associated with acute infection.

5 Please read in conjunction with CMO urgent communication *Interim policy on patients who should be considered for possible testing for influenza A (H1N1)* at www.dhsspsni.gov.uk/hss-md-24-2009.pdf

Infection Control Guidance



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