

From the Acting Chief Medical Officer
Dr Elizabeth Mitchell



Department of

**Health, Social Services
and Public Safety**

www.dhsspsni.gov.uk

AN ROINN

**Sláinte, Seirbhísí Sóisialta
agus Sábháilteachta Poiblí**

MÄNNYSTRIE O

**Poustie, Resydènter Heisin
an Fowk Siccar**

Castle Buildings
Stormont Estate
Belfast BT4 3SQ
Tel: 028 9052 0563
Fax: 028 9052 0574
Email: eizabeth.mitchell@dhsspsni.gov.uk

HSS(MD) 34/2009

To: Chief Executive, HSC Board
Chief Executive, Public Health Agency
Chief Executives, HSC Trusts
Director of Public Health, Public Health Agency (*for onward distribution to all Public Health Doctors and Nurses*)
Regional Epidemiologists, CDSC
Director of Nursing, Public Health Agency
Directors of Pharmaceutical Services, HSC Board / HSC Trusts
Business Support Organisation
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*).
Nursing Directors, HSC Trusts (*for onward distribution to all Community Nurses*)
All General Practitioners (*for onward distribution to practice staff including practice nurses*)
All Community Pharmacists
Medical Director, NI Ambulance Service
Medical Director, RQIA (*for cascade to independent hospitals and clinics*)
PHA EOC

Your Ref:
Our Ref: HSS(MD) 34/2009
Date: 28 July 2009

Dear Colleague

A/H1N1 PANDEMIC INFLUENZA (SWINE FLU) IN NORTHERN IRELAND FURTHER UPDATE

SUMMARY

- **Further update on clinical management;**
- **Antiviral medicines for pregnant women, women who are breastfeeding and children under the age of one year;**
- **Advice for the general public**
- **Advice for pregnant women;**
- **Flu surveillance; and**
- **Changes to DHSSPS website.**

Further update on clinical management

Following the launch of the National Pandemic Flu Service in England last week, I am writing to clarify the arrangements in Northern Ireland. These remain as set out in the urgent communication of 10th July (HSS(MD)30/2009) and reflect the continued relatively low level of flu and flu-like illness in the community locally. **Access to antiviral drugs will continue to follow standard practice with prescription through the HS 21 prescription form, dispensed through community pharmacists.**

GPs may find the algorithm produced by the RCGP useful in determining the appropriate management of people presenting with symptoms suggestive of flu. This can be accessed at www.rcgp.org.uk/PDF/Assessment_Algorithm_updated.pdf .

Recommendations on the use of antiviral medicines for pregnant women, women who are breastfeeding and children under the age of one year

Alongside pregnant women, care needs to be exercised in prescribing antiviral medication for infants and breast feeding women. Additional advice is available at www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_100361?IdcService=GET_FILE&dID=196525&Rendition=Web .

Advice for the general public

Our advice to the general public in Northern Ireland is that those who experience flu-like symptoms should stay at home, check the information about symptoms and follow the advice set out at www.nidirect.gov.uk/index/health-and-well-being/swine-flu/health-wellbeing-swine-flu-and-you.htm . This advice emphasizes that most previously healthy people with swine flu will recover with rest, drinking plenty of fluids and taking medication such as paracetamol for pain relief and to control fever. The advice to this group is that if their condition suddenly deteriorates or their condition is still getting worse after 7 days (5 for a child) they should phone their GP.

People who are at higher risk of serious illness or death should they develop influenza (unchanged from HSS(MD)29/2009 of 2nd July 2009, see below for list) should be given antiviral medication as soon as possible, preferably within 48 hours of the start of their flu-like symptoms and are therefore advised to phone their GP for advice and assessment for antivirals.

List of at risk groups who should receive antiviral treatment for clinically diagnosed swine flu (this is unchanged from HSS(MD)29/2009 of 2nd July 2009)

1. People aged 6 months or over with:
 - chronic respiratory disease (including asthma that requires continuous or repeated use of inhaled or systemic steroids or with previous exacerbations requiring hospitalisation);
 - chronic heart disease;
 - chronic renal disease;
 - chronic liver disease;
 - chronic neurological disease;
 - immunosuppression (whether caused by disease or treatment); or
 - diabetes mellitus.
2. People who have had medical treatment for asthma within the past 3 years (in addition to those included above);
3. Pregnant women;
4. Children under 5 years of age; and
5. People aged 65 years and older.

Doctors should continue to exercise clinical discretion and may wish to prescribe for those they have specific concerns about, such as those who have moderate to severe symptoms.

Advice for Pregnant Women

As stated above, pregnant women are considered a group at higher risk of complications than others. However, it is still important to bear in mind that most pregnant women who acquire the

