

Pandemic Influenza H1N1: Update

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Pandemic H1N1 vs. Seasonal Flu

- **Similar severity**
 - Not “mild”
- **Similar transmissibility**
- **Affects younger populations**
- **Will likely infect more people than seasonal flu**
 - More severe illnesses
 - More deaths

How Flu Spreads



- Most spread through coughing and sneezing
- Contact transmission also important
 - Hand to hand, contaminated surfaces
- Airborne transmission also possible

Pandemic Influenza

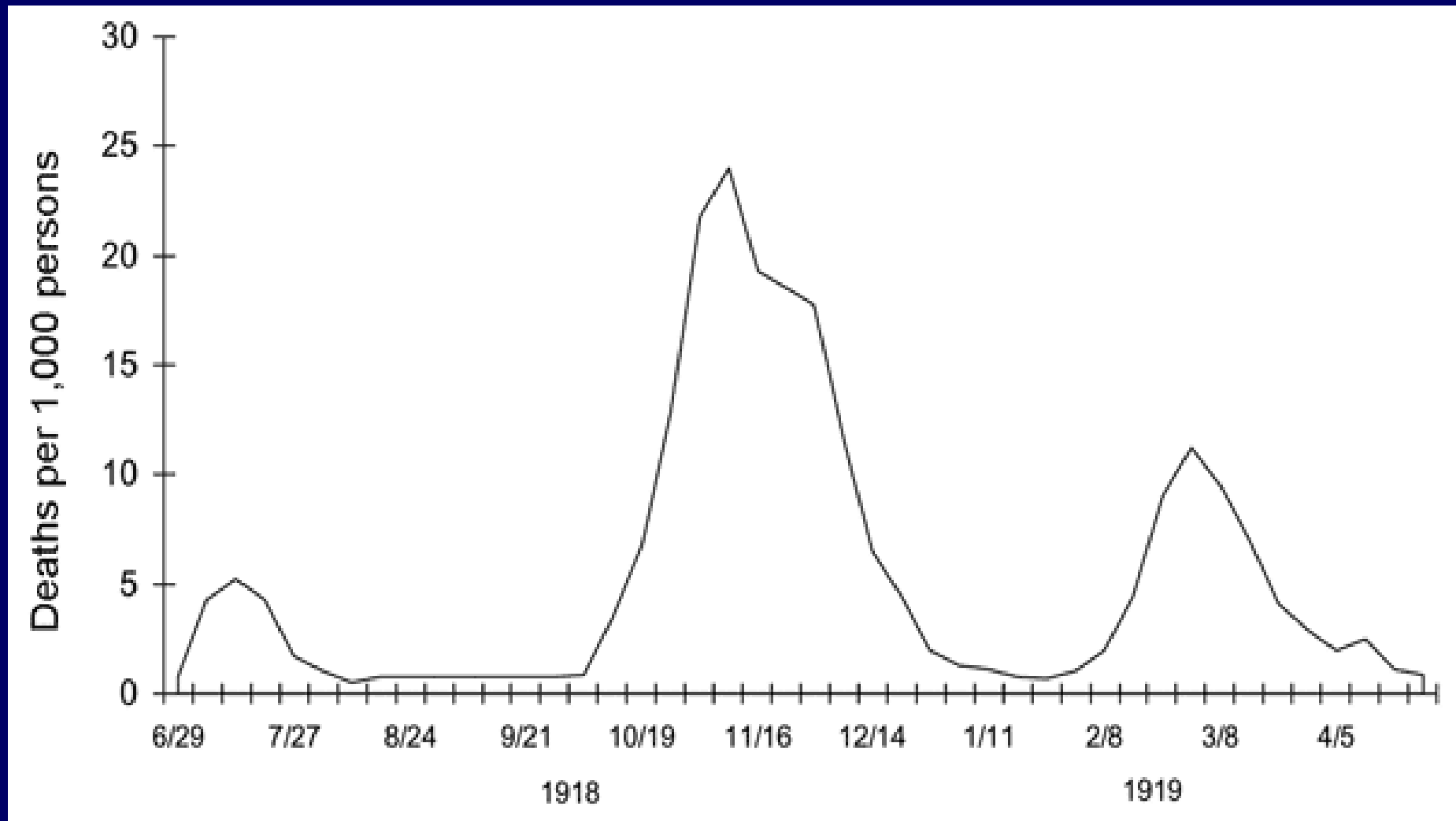
Three Conditions:

- 1. Novel virus (all or most susceptible)**
- 2. Transmissible from person to person**
- 3. Wide geographic spread**

Impact of Past Influenza Pandemics

Pandemic, or Antigenic Shift	Excess Deaths in US	Populations Affected
1918-19 (A/H1N1)	500,000	Persons <65 years
1957-58 (A/H2N2)	70,000	Infants, elderly
1968-69 (A/H3N2)	36,000	Infants, elderly
2009-10 (A/H1N1)	???	Persons <65 years

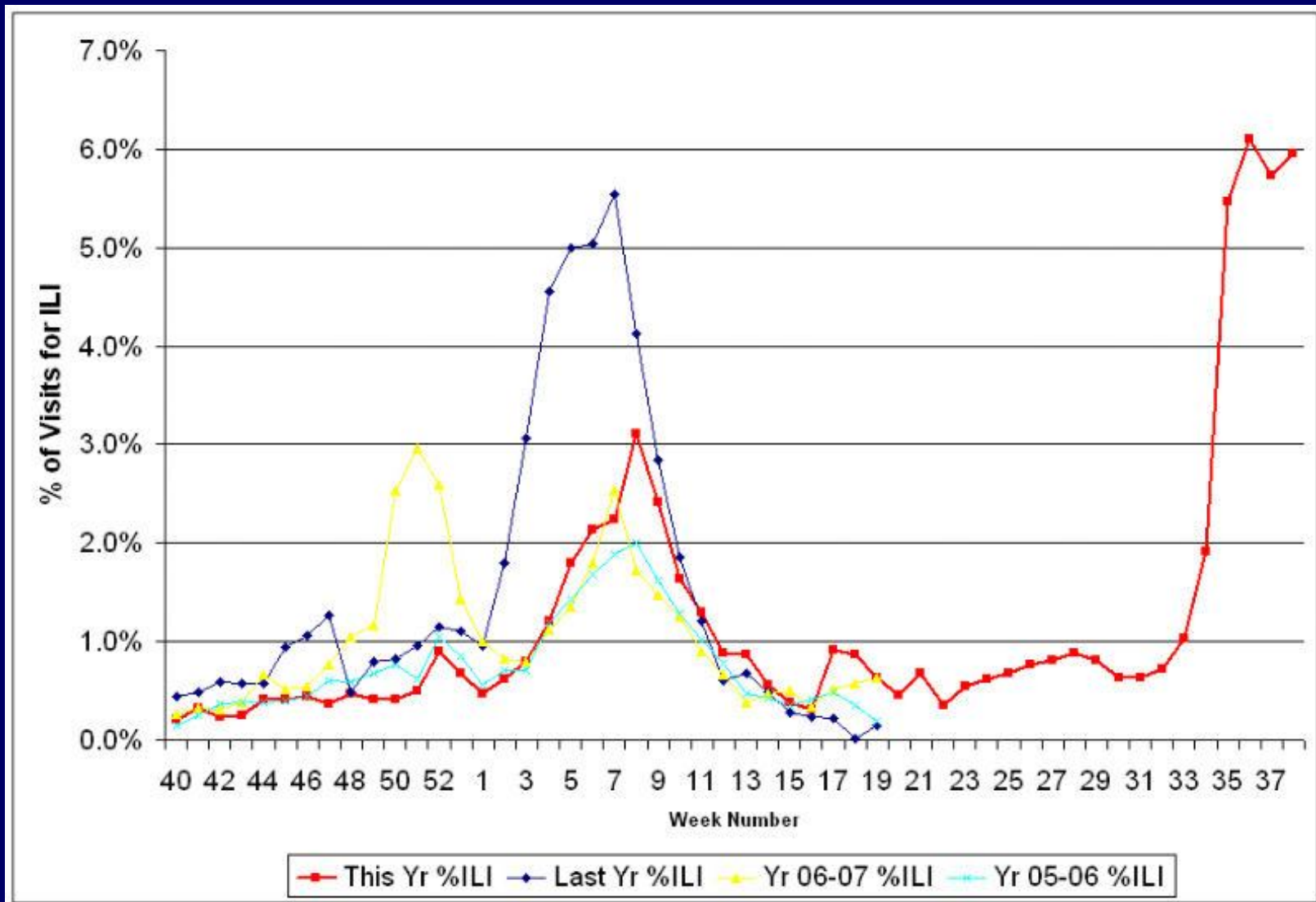
1918 Pandemic: 2nd Wave



Pandemic influenza: Waves

- **Highly unpredictable**
- **1957: second wave began 3 months after peak of the first wave**
- **1968: second wave began 12 months after peak of the first wave**

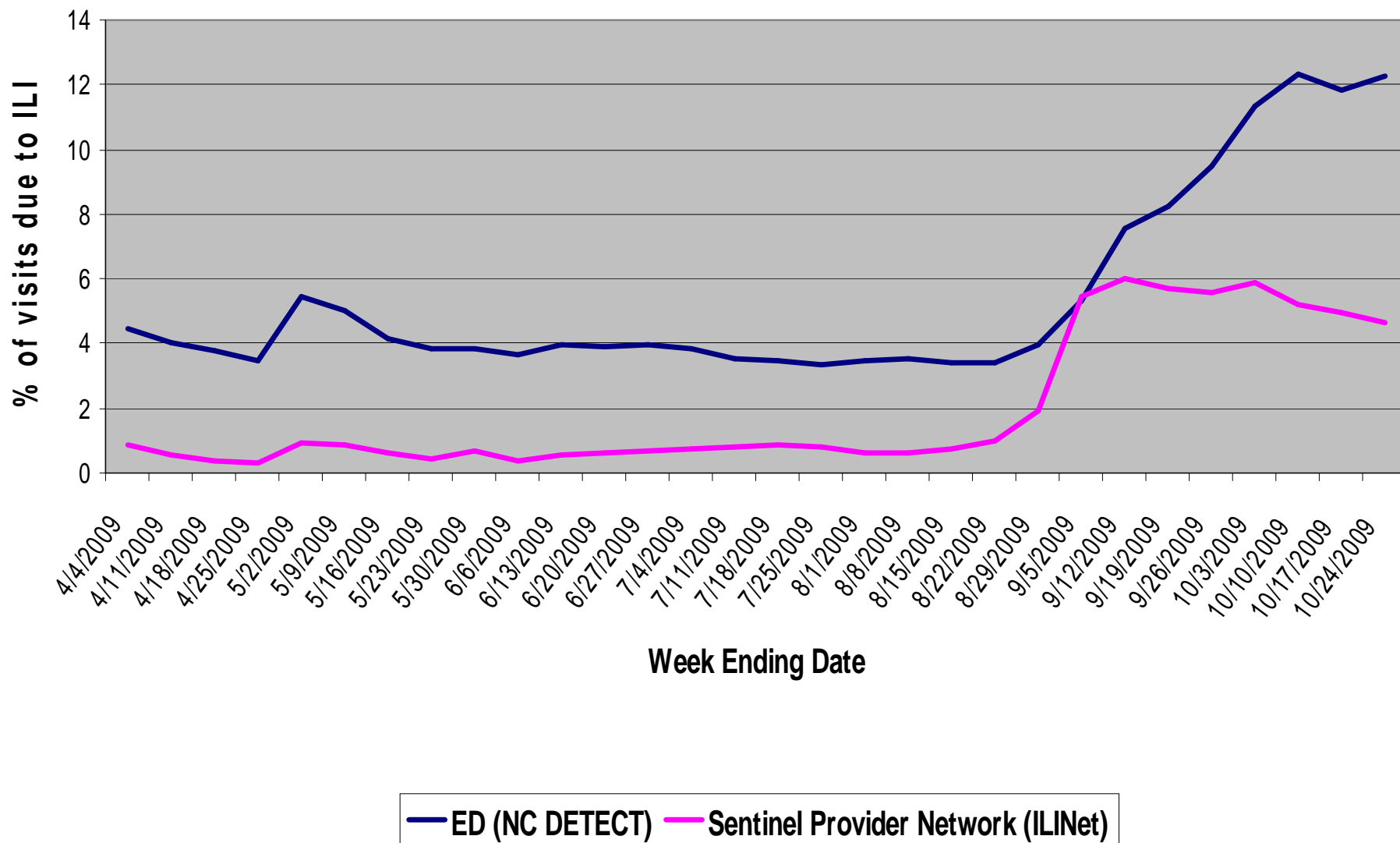
2009 H1N1 Pandemic Waves, NC



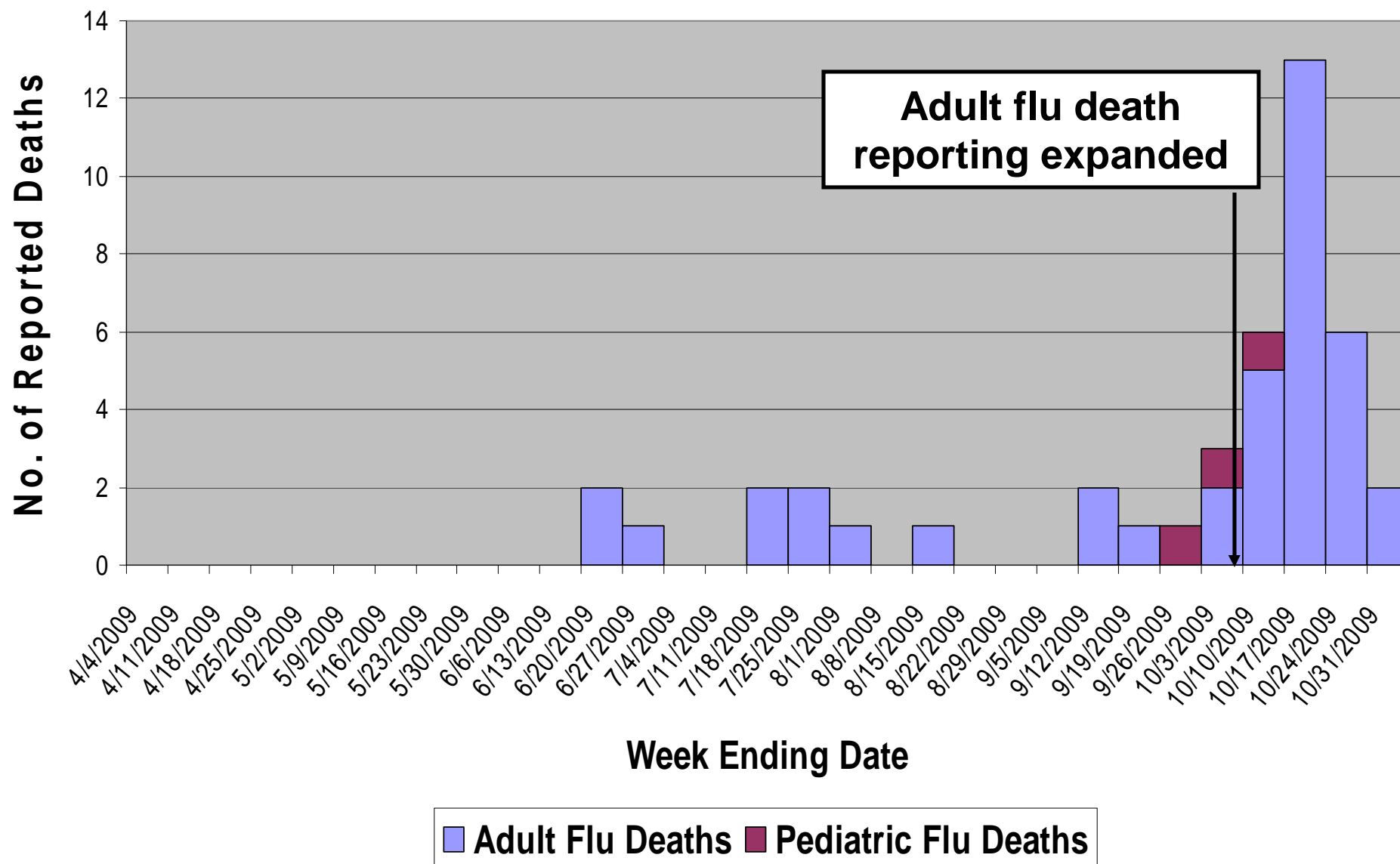
Where We Are Now

- **WHO Phase 6 Pandemic**
 - Determined by global spread, not severity
- **High levels flu activity across NC**
- **Planning for mixed season with several strains circulating**
- **Monitoring for increases in (1) severity, (2) transmissibility, or (3) antiviral resistance**

Influenza-Like Illness Surveillance in North Carolina, 2009-2010

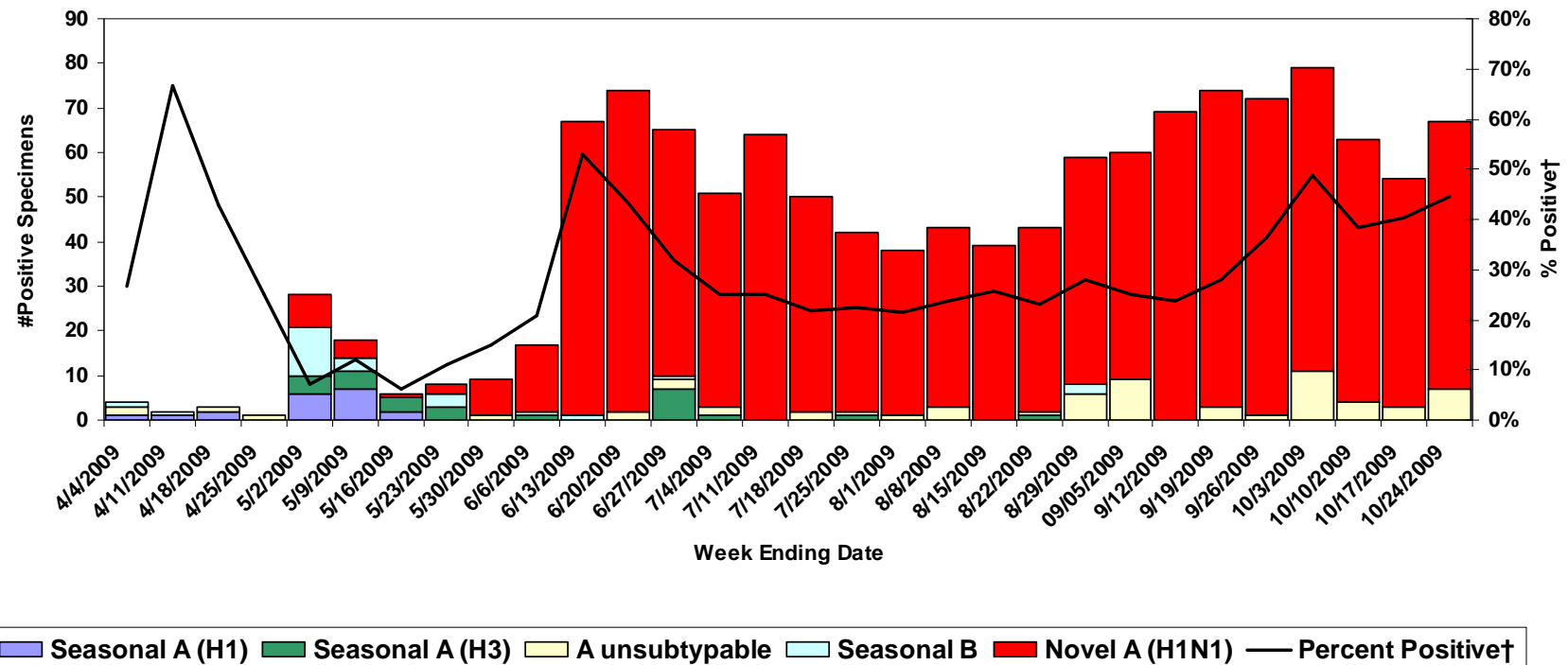


Influenza-Associated Deaths Reported in North Carolina as of October 29, by Week of Death (N=43)



NC State Lab Influenza Virus Testing Results by Week, 2008–2009

Influenza Positive Tests Reported by the N.C. State Laboratory of Public Health by Week



Antiviral Treatment

- Healthy patients with uncomplicated illness do not need to be treated with antivirals
- Treatment recommended for
 - All hospitalized or severely ill patients with confirmed or suspected influenza*
- Consider treatment for
 - Patients at higher risk complications

***REGARDLESS OF TIME SINCE SYMPTOM ONSET**

Nonpharmaceutical Interventions

- Recommendations based on disease severity
- Guidance issued for specific settings
 - Workplace
 - Farms
 - Schools
 - Camps
 - Health care facilities
 - Long-term care facilities
- www.flu.nc.gov and www.cdc.gov/h1n1flu

Isolation Recommendations

- **Remain at home until at least 24 hours after fever resolves (without fever-reducers)**
 - 3–5 days in most cases
 - Duration NOT influenced by use of antivirals
- **Practice good respiratory hygiene after return**
 - Many still shedding >24 hours after fever

What's Next?

- **Seasonal and H1N1 flu vaccination campaigns**
- **Continue enhanced surveillance**
 - **Communicate information to partners**
- **Work with businesses, schools and others to decrease impact**
- **Wait for May!**

Public Health Resources

- www.flu.nc.gov
- www.cdc.gov/h1n1flu

Genetic Components of the Pandemic H1N1 Virus

