FAQ’s Regarding Influenza for Health Officers – Internal Use Only

- **Q: Availability of Antivirals and Vaccine**
  - Current antiviral demand is high, and some pharmacies may run out of antivirals before the next shipment comes in but suppliers are meeting demands. Patients should be advised to call their pharmacy ahead to verify availability.
  - The supply of generic oseltamivir may be limited, the brand (Tamiflu) should be available.
  - If the oral suspension of oseltamivir is not available, pharmacies may compound suspension from the capsules.
  - Vaccine is still available in Florida.
  - Some health care providers may no longer carry influenza vaccine.
  - Vaccine is available at local county health departments (CHDs).
  - Most pharmacies provide influenza vaccines to adults, pharmacies with health-care clinics also offer flu vaccines to children 18 months and older.
  - Advice patients to call their primary care provider, CHD or pharmacy to verify the availability of vaccine.

- **Q: How long does a flu vaccine protect an individual from getting the flu?**
  - The flu vaccine is safe, and yearly vaccination provides the best protection against the flu throughout flu season. The flu virus changes from year to year so the flu vaccine also gets an annual update. For that reason, it is important for everyone 6 months of age and older to get a flu vaccine every flu season.

- **Q: Can the flu vaccine provide protection even if the flu vaccine is not a “good” match?**
  - Yes, antibodies made in response to vaccination with one flu virus may provide protection against different, but related flu viruses.
  - Even if you do get the flu after getting vaccinated, a yearly flu vaccine helps in protecting against serious complications such as hospitalization and death.
    - A 2017 study published in *Pediatrics* showed that flu vaccination can significantly reduce influenza pediatric mortality by half (51%) among children with underlying high-risk medical conditions and nearly two-thirds (65%) among healthy children ([www.cdc.gov/media/releases/2017/p0403-flu-vaccine.html](http://www.cdc.gov/media/releases/2017/p0403-flu-vaccine.html)).
    - A 2017 study published in *Clinical Infectious Diseases* showed that flu vaccination reduced deaths, intensive care unit (ICU) admissions, ICU length of stay, and overall duration of hospitalization among hospitalized flu patients ([www.cdc.gov/flu/spotlights/vaccine-reduces-severe-outcomes.htm](http://www.cdc.gov/flu/spotlights/vaccine-reduces-severe-outcomes.htm)).
      - Vaccinated adults were 52-79% less likely to die than unvaccinated flu-hospitalized patients.
      - Vaccinated adults 18-49 years of age and 65 years of age and older hospitalized from flu were 37% less likely to be admitted to the ICU than those who were not vaccinated.
  - Six children have died from flu in Florida to date this season (between October 2017-February 2018). All were unvaccinated.
• Q: Some news reports have claimed the flu vaccine is expected to be only 10% effective this year, is this true?
  o No, the Interim CDC Efficacy figures in the United States were released on 02/15/2018. The Vaccine Efficacy (VE) for adults was 36%. The VE for Children was 59%. With Several more weeks of elevated influenza activity expected, an increasing proportion of influenza A(H1N1)pdm09 and Influenza B viruses, and the potential to prevent significant illness through influenza vaccination, CDC continues to recommend influenza vaccination at this time.

• Q: A Client has been denied access or required to have pre-authorization to obtain Antiviral medication. What can I do?
  o Most plans do not appear to require pre-authorization. We are sending letters to insurance plans urging them not to. It may be worth it for the client to contact the insurance company. We can also help. Florida Medicaid Managed Care Plans do not require preauthorization. Members of Florida Medicaid Managed care plans with concerns, should file a complaint with Florida Medicaid.

• Q: A client cannot afford vaccination, what are the options?
  o Under or uninsured individuals can obtain at little or no cost flu vaccination at their local county health department.
  o Federally Qualified Health Centers also offer services to uninsured clients on a sliding fee scale. If the client cannot afford treatment, it is supplied free of charge.

• Can children with insurance receive VFC vaccine?
  o No but CHDs receive state supplied vaccine purchased by state and VFC funds. Provide influenza immunizations to your pediatric clients regardless, but ensure that the correct eligibility status (e.g., Medicaid, Privately Insured, Uninsured, Underinsured, American Indian/Alaskan Native) is selected and recorded in Florida SHOTS.

• When should Program Component 17 vaccine be used?
  o PC-17 vaccine can be used on any adult who is either uninsured or underinsured. PC-17 vaccine may also be used for adults when conducting a flu vaccination as part of a formal POD Exercise, as well as for disease control measures implemented by the CHD in an influenza outbreak investigation/response.

• Q: A client cannot afford antiviral medication, what are the options?
  o Instructions for CHD’s to request Antiviral medication can be found in the Public Antiviral Stockpile program concept of operations dated January 17, 2018
  o FQHC’s will provide antivirals free of charge or on a sliding fee scale

• Q: What is the current availability of the public antiviral cache?
  o Bureau of Pharmacy currently has 334,568 courses of Tamiflu capsule form, that can be available to support outbreak investigations and support standard treatment.

• Q: What is in the current public antiviral cache?
  o Provided is the breakdown of the available Antiviral cache, figures represent capsule form as we do not currently possess oral suspension form Antiviral.
  o Tamiflu 75mg 46,896 courses
  o Tamiflu 45mg 22,015 courses
  o Tamiflu 30mg 265,657 courses
• **Q: How do I request Antivirals for my County from the public cache**
  o The instructions on how to order Antivirals can be found at https://floridahealth.sharepoint.com/sites/DISEASECONTROL/EPI/flu-imt-2018/Shared%20Documents/Forms/AllItems.aspx
  o Antivirals ordered will contain an expiration date insert as the package date and actual expiration date differ.

• **Q: Availability of Surgical Masks and Respirators**
  o At this time there are no indications of supply shortages, state ESF8 is monitoring demand through commercial vendors.

• **Q: Is the Department recommending school closures?**
  o Health departments should engage with their educational partners to provide current CDC guidance and current situational awareness.
  o For further guidance, reference Dr. Blackmore’s email sent on 01/26/2018 at 1:00pm titled “School/ Daycare closure considerations”

• **Q: Is the Department providing recommendations for mass gatherings?**
  o Individuals in High Risk populations should consider delaying or avoiding mass gatherings.
  o High risk populations include:
    ▪ Children younger than 5, but especially children younger than 2 years old.
    ▪ Adults 65 years of age and older
    ▪ Pregnant women
    ▪ Residents of nursing homes and other long-term care facilities
    ▪ People who have medical conditions including (but not limited to):
      ▪ Asthma
      ▪ Neurological and neurodevelopmental conditions (including disorders of the brain, spinal cord, peripheral nerve, and muscle such as cerebral palsy, epilepsy, stroke, moderate to severe developmental delay, muscular dystrophy, or spinal cord injury)
      ▪ Chronic lung disease
      ▪ Heart Disease
      ▪ Blood disorders
      ▪ Kidney disorders
      ▪ Liver disorders
      ▪ Metabolic disorders
      ▪ Weakened immune system due to disease or medication
      ▪ People younger than 19 years of age who are receiving long-term aspirin therapy
      ▪ People with extreme obesity(body mass index[BMI] of 40 or more
  o Individuals who are sick, should avoid mass gatherings until they are fever free for a minimum of 24 hours without the use of fever reducing medication.
Q: What are the recommendations for “disinfection of schools”

- Continue routine cleaning of surfaces and objects that are often touched, such as desks, countertops, doorknobs, keyboards, faucet handles, and phones. Empty trash cans daily. Additional CDC guidance includes:
  - Use general cleaning products that you normally use. Always follow product label directions. Additional disinfection beyond routine cleaning is not recommended.
  - Provide adequate supplies, such as general EPA-registered cleaning products, gloves, disinfecting wipes, and no-touch trash cans.
  - Match your cleaning activities to the types of germs you want to remove or kill.
    - Flu viruses are relatively fragile, so standard practices, such as cleaning with soap and water, can help remove and kill them.
    - Studies have shown that the flu virus can live and potentially infect a person for only 2 to 8 hours after being deposited on a surface. Therefore, special sanitizing processes beyond routine cleaning, including closing schools to clean every surface in the building, are not necessary or recommended to slow the spread of flu, even during a flu outbreak.
    - Some schools may include other cleaning and disinfecting practices in their standard procedures to address germs that are not removed or killed by soap and water alone.

- [https://www.cdc.gov/flu/school/cleaning.htm](https://www.cdc.gov/flu/school/cleaning.htm)