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PUBLIC HEALTH ADVISORY

To: Health Care Providers
From: Dr. Siiri Bennett, State Epidemiologist
Subject: Influenza-Associated Pediatric Death
Date / Time: Tuesday, April 09, 2019 at 3:30pm
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Priority: Normal
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Abstract:

Maine CDC received notification of an influenza-associated pediatric death on Monday, April 8, 2019. The child, a Washington County resident, was unvaccinated and tested positive for influenza A. This is the first influenza-associated pediatric death in Maine during the 2018-19 influenza season.

Influenza activity in Maine remains elevated. Influenza vaccination is strongly encouraged and is still widely available. Vaccination can reduce illness and prevent hospitalization and death.

Influenza-Associated Pediatric Death

Summary:

Maine CDC received notification of an influenza-associated pediatric death on Monday April 8, 2019. The child, a Washington County resident, was unvaccinated and tested positive for influenza A. This is the first influenza-associated pediatric death in Maine during the 2018-19 influenza season.

Influenza activity in Maine remains elevated. Influenza vaccination is strongly encouraged and is still widely available. Vaccination can reduce illness and prevent hospitalization and death.

Background:

Influenza activity in Maine remains widespread with laboratory confirmed influenza reported in all sixteen counties. Influenza A/H1N1, influenza A/H3 and influenza B/Victoria have been recently confirmed in Maine, indicating these strains are circulating. Maine CDC has followed up on 89 outbreaks of influenza as of Tuesday, April 9, 2019. To date, facilities reported over 900 individuals hospitalized with laboratory-confirmed influenza, reminding us that influenza can be a serious illness.

Recommendations:

- **Treatment:** Clinicians are reminded to treat suspected influenza in high-risk outpatients, those with progressive disease, and all hospitalized patients with antiviral medications **as soon as possible**, regardless of negative rapid influenza diagnostic test results and without waiting for RT-PCR testing results. Early antiviral treatment works best, but treatment may offer benefit when started up to 4-5 days after symptom onset in hospitalized patients. Early antiviral treatment can reduce influenza morbidity and mortality.

Tamiflu (oseltamivir), Relenza (zanamivir), Rapivab (peramivir), and Xofluza (baloxavir) are approved antivirals for influenza. Treatment should begin as soon as possible. Guidance for use of Antivirals for the Treatment and Chemoprophylaxis of Influenza are available at <http://www.cdc.gov/flu/professionals/antivirals/summary-clinicians.htm>

- **Prevention:** Maine CDC recommends following the “No Flu 4 You” guidelines which include:
 - **Wash your hands:** Both the public and healthcare providers should remember to wash their hands frequently to prevent transmission of influenza
 - **Cover your cough:** Use tissues, or cough into your sleeve
 - **Stay home when you are sick:** Symptomatic individuals should remain home until 24 hours after fever resolves without the use of medications
 - **Get Vaccinated:** It is not too late to get vaccinated. Maine CDC recommends vaccination for everyone aged 6 months and older, especially for those people who are at high risk of serious complications from influenza. Influenza vaccine is provided at no-cost by the state of Maine for children under the age of 19 years. For questions about vaccination please contact the Maine Immunization Program at 800-867-4775 or through immunizeme@maine.gov.

For more information:

- Maine CDC’s influenza webpage: www.maine flu.gov
- Federal CDC’s influenza webpage: www.cdc.gov/flu
- Maine’s weekly surveillance reports: <http://www.maine.gov/dhhs/mecdc/infectious-disease/epi/influenza/influenza-surveillance-weekly-updates.shtml>