



## GOVERNMENT OF GUAM



### DEPARTMENT OF PUBLIC HEALTH and SOCIAL SERVICES

DIPATTAMENTON SALUT PUPBLEKO YAN SETBISION SUSIAT

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#### CLINICAL ADVISORY

#### NOVEL INFLUENZA A (H1N1) [SWINE FLU]

May 26, 2009

Novel Influenza A (H1N1) is infecting people and is spreading from person-person, sparking a growing outbreak of illness in the United States, and activity is now being detected through CDC's routine Influenza Surveillance Systems. The latest reports from CDC indicated that about 78% of all influenza viruses being detected through routine laboratory surveillance are Novel Influenza A (H1N1) viruses. Increasing numbers of cases are also being reported internationally. Although Guam continues to have no confirmed cases of the Novel Influenza A (H1N1) virus, significant increase in the seasonal influenza activity has been noted in the recent weeks

Global response now focuses on minimizing the impact of the virus through the rapid identification of cases, providing patients with appropriate medical care and instituting surveillance and containment measures.

Department of Public Health and Social services is proactive in identifying novel Influenza A (H1N1) locally by expanding the screening to patients presenting with the following symptomatology:

Sepsis syndrome (and no identifiable etiology)

Acute respiratory distress syndrome.

Adult patients with Influenza-Like-Illness (ILI) and diarrhea

**Please be advised that confirmatory tests for Novel Influenza A (H1N1) must be done at an approved state laboratory or CDC. Commercial laboratories are not equipped with the test kit specific for H1N1 virus.**

All health care providers are requested to report all suspect cases to DPHSS for further guidance with the collection, storage and transport of specimens for rapid influenza testing as well as confirmatory testing at an approved state laboratory or CDC. Please contact Joy Villanueva or Alan Mallari at DPHSS' Laboratory at 735-7153/7355, Monday – Friday, 8:00 a.m. – 5:00 p.m.

\*Please refer to laboratory guidance for storage of specimens – if collected over the weekend.

Clinicians are reminded to collect and send specimen samples from suspect cases even if the rapid influenza test is negative (specificity for rapid test is only around 50-70%).

## Case Definitions for Infection with Novel Influenza A (H1N1) Virus – (as of May 13, 2009, CDC)

A **confirmed case** of novel influenza A (H1N1) virus infection is defined as a person with an influenza-like illness with laboratory confirmed novel influenza A (H1N1) virus infection by one or more of the following tests:

1. real-time RT-PCR
2. viral culture

A **probable case** of novel influenza A (H1N1) virus infection is defined as a person with influenza-like-illness who is

- positive for influenza A, but negative for human H1 and H3 by influenza RT\_PCR

### *Optional*

A suspected case of novel influenza A (H1N1) virus infection is defined as a person who does not meet the confirmed or probable case definition, and is not novel H1N1 test negative, and is/has:

- a previously healthy person < 65 years hospitalized for ILI

OR

- ILI and resides in a state without confirmed cases, but has traveled to a state or country where there are one or more confirmed or probable cases

OR

- ILI and has an epidemiologic link in the past 7 days to a confirmed case or probable case