

EPI Update for Wednesday, April 29, 2009
Center for Acute Disease Epidemiology (CADE)
Iowa Department of Public Health (IDPH)
Swine-origin influenza A (H1N1) Update #3

Items for this week's EPI Update include:

- **Two cases of probable swine-origin influenza A (H1N1) in Iowa**
- **Guidelines for health care providers on the use of antiviral medications**
- **Use of surgical masks and respirators in health care settings**
- **Use of surgical masks and respirators for general public**
- **Guidelines for testing for swine-origin influenza A (H1N1) virus**

Two cases of probable swine-origin influenza A (H1N1) in Iowa

Two probable cases of swine influenza have been identified in Iowa, an adult male and adult female. They had been in southern California and Mexico respectively, during their incubation period. Early in their infectious period (before being isolated) they traveled around Scott, Clinton, Johnson, Des Moines, and Muscatine counties, doing everyday activities. Both cases had symptoms of influenza-like illness and the University Hygienic Laboratory has determined both have influenza A non-subtypable. At this time, the Iowa Department of Public Health (IDPH) has determined both cases meet the Centers for Disease Control and Prevention (CDC) probable case definition for Swine-Origin Influenza A (S-OIV). Confirmatory tests will be completed at CDC within one to two days.

Numbers of laboratory tests submitted are changing rapidly, but as of this afternoon about 150 had been submitted, 40 tests completed, with 2 probable test results and zero confirmed.

As of today in the U.S., a total of 91 confirmed cases have been reported in 10 states. One death was reported in a child from Texas. This strain of A (H1N1) swine influenza is a novel influenza strain that has the potential to spread person to person. The seasonal flu vaccine is not believed to protect against this novel strain of swine influenza. Rapid antigen screening influenza testing may be insensitive for the detection of swine influenza A and therefore is not recommended. Viral culture also is not recommended and laboratorians are strongly discouraged from conducting viral culture on any suspected swine flu cases, because of risks to laboratorians.

Guidelines for health care providers on the use of antiviral medications
The updated guidelines include special recommendations regarding children under age one year and pregnant women.

Use of surgical masks and respirators in health care settings

This document addresses the use of surgical masks and respirators for general patient care, during specimen collection and high risk aerosol generating procedures.

Use of surgical masks and respirators for general public

This document addresses the use of surgical masks and respirators for the general public, including caring for someone with swine-origin influenza A (H1N1) virus at home.

Guidelines for testing for swine-origin influenza A (H1N1) virus

This document addresses criteria for screening of persons for possible testing for swine-origin influenza A (H1N1) virus. The document also addresses the appropriate specimen to collect, how to collect, and how to ship the specimen.

The above four documents will be available very soon on the IDPH swine influenza website www.idph.state.ia.us/adper/swine_flu.asp under information for health care providers.

This situation is evolving rapidly. Check the IDPH Swine Influenza Web site www.idph.state.ia.us/adper/swine_flu.asp for updates.

Hope everyone stays healthy!

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