

INFLUENZA SEASON IS HERE

HOSPITALISATIONS

As of **18 September 2017** there have been a total of **166,896** laboratory confirmed notifications of influenza in Australia for 2017.



Children aged <10 long-term aspirin therapy



Homeless people



Pregnant women



20% of confirmed influenza cases are children under 10 years of age

WHO IS AT RISK:



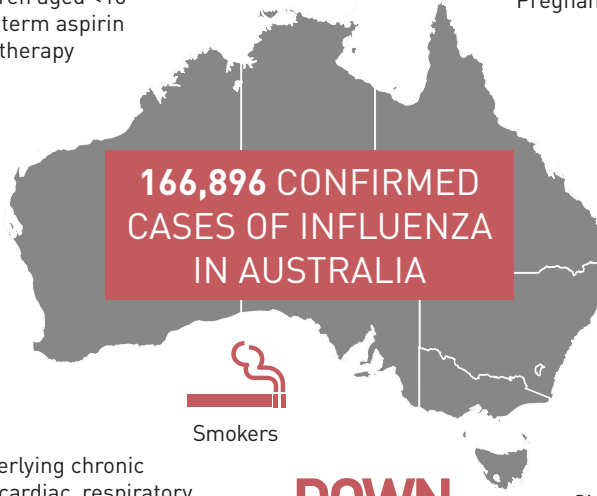
Aboriginal & Torres Strait Islander People



All people with underlying chronic illnesses including cardiac, respiratory, neurological, endocrine (diabetes), renal and immunological disorders.



Smokers



166,896 CONFIRMED CASES OF INFLUENZA IN AUSTRALIA



18,000 hospitalisations are caused by influenza each year



21% of confirmed influenza cases are adults aged 65 and over



Significant obese people (BMI > 30kg/m²)

DOWN SYNDROME

IMMUNISATION COALITION RECOMMENDATIONS

Antiviral treatment should be considered if the patient has clinical illness suggestive of influenza and a reasonable risk of exposure:



During the local influenza season



Recent travel to areas with influenza activity



Exposure to a known or likely influenza-infected person

Treatment with a neuraminidase inhibitor is:

- Recommended for people with mild/moderate illness at the time of consultation, who are at higher risk of influenza complications. Prior vaccination does not preclude the use of antivirals.
- Strongly recommended for people with severe illness that is known or suspected to be due to influenza, up to 5 days after onset of illness.

How effective are neuraminidase inhibitor (NIs)?

NIs can also be used to prevent influenza for those in contact with infected individuals, with an effectiveness of 70% to 90% in preventing influenza and are useful adjuncts to influenza vaccination.

HOW DO INFLUENZA ANTIVIRAL DRUGS WORK?

They block the activity of the neuraminidase enzyme, which in turn stops the release of the virus from infected cells and restricts further progression within the body.

48hrs



If they are commenced within **48 hours** of onset of illness they achieve:



44% reduction of lower respiratory tract complications



Reduction of otitis media and antibiotic use in young children



One day reduction in duration of symptoms



63% reduction of hospital admissions

WHAT ANTIVIRAL TREATMENTS ARE AVAILABLE AND POSSIBLE SIDE EFFECTS?

Tamiflu®

Oseltamivir, an oral capsule formulation (marketed as Tamiflu)

Side effects are **uncommon** and generally mild. Oseltamivir may cause **nausea** and **vomiting**. There have been post-marketing reports of **rare transient neuropsychiatric** events, mainly among Japanese adolescents and adults.

RELENZA™

Zanamivir, an inhaled formulation (marketed as Relenza)

Side effects are **uncommon** and generally mild. Anamivir may cause **gastrointestinal disturbances, headaches, dizziness** and because it is inhalational, it may also cause **upper airway congestion, sinusitis, bronchitis and coughs**.



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The Immunisation Coalition is a not-for-profit organisation consisting of medical and science specialists from Australia and New Zealand, with an expertise in influenza and other infectious diseases. The Influenza Specialist Group (ISG) is a special interest group within the Immunisation Coalition.

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Influenza Specialist Group