



GAVIN NEWSOM Governor

Health Advisory: Early Respiratory Syncytial Virus and Seasonal Influenza Activity November 12, 2022

Summary

Director and State Public Health Officer

- <u>Respiratory syncytial virus (RSV) activity is increasing in California and across</u> <u>the US</u>.
 - An <u>early wave of RSV activity</u> and circulation of other respiratory viruses has led to increased hospitalizations among children and has contributed to stresses in the pediatric healthcare delivery system in California and across the US.
 - Healthcare providers should promptly administer prophylactic palivizumab to infants and young children at high risk for RSV per American Academy of Pediatrics (AAP) guidance.
 - RSV can cause serious disease in adults, especially in the elderly and in young children.
- <u>Influenza activity in California</u> has also started, and COVID-19 activity is increasing and both are expected to increase in the coming months, further stretching California hospital resources for both adults and children.
- All healthcare facilities, including facilities without existing pediatric services, should consider expanding capacity to evaluate and treat pediatric patients to manage the increase in patient volume. Healthcare providers should review and implement pediatric surge measures where appropriate, such as expanding outpatient clinic hours, inpatient care, and/or consultative services.
 - Additional considerations, training materials, and information are available through the <u>Technical Resources</u>, <u>Assistance Center</u>, and <u>Information Exchange (TRACIE) from HHS ASPR</u>.
 - More information can be found in AFL <u>22-23</u>.





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As RSV and other respiratory virus activity continues to evolve and new evidence emerges, California Department of Public Health (CDPH) will collaborate with local health departments to assess and provide additional updates as they become available. CDPH provides brief guidance below regarding vaccination, testing, treatment, and other preventive measures for respiratory viruses.

Vaccination & Chemoprophylaxis Prevention

- CDPH <u>strongly recommends influenza vaccination</u> for everyone 6 months and older, as is recommended by the Advisory Committee on Immunization Practices (ACIP).
 - For those 65 years and older, preferentially recommend a higher dose or adjuvanted flu vaccine (Fluzone, Flublok, or Fluad). If none of these three flu vaccines is available at the time of administration, then any other age-appropriate flu vaccine should be used.
- <u>Co-administer</u> influenza and COVID-19 primary series or booster vaccines when patients present for either vaccine individually. Other routine vaccines may also be co-administered.
- Clinicians should prescribe influenza antiviral chemoprophylaxis during influenza outbreaks in long-term care facilities.
- <u>AAP guidance recommends prophylactic palivizumab to infants and young</u> <u>children at high risk for RSV</u>, including preterm infants, preterm infants with chronic lung disease, preterm and term infants with hemodynamically significant congenital heart disease.

Testing

• Healthcare providers are encouraged to test outpatients (children and adults) for influenza, SARS-CoV-2, and RSV (via multiplex assays if available) when





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feasible as testing may affect decisions regarding clinical management, treatment in high risk individuals, and infection control. Healthcare providers caring for children and adults with respiratory illnesses in inpatient and congregate settings should test for respiratory viruses, including influenza, SARS-CoV-2, and RSV.

- **Treatment** For <u>high-risk patients</u> with suspected influenza:
 - Start <u>influenza antiviral treatment</u> immediately. Decisions about starting influenza antiviral treatment should not wait for laboratory confirmation of influenza. If the patient tests negative for influenza, influenza antiviral treatment can be discontinued.
 - High-risk patients co-infected with influenza and SARS-CoV-2 should receive treatment for both viruses. There are no clinically significant drug-drug interactions between the antiviral agents or immunomodulators that are used to prevent or treat COVID-19 and those antiviral agents used to treat influenza.

Prevention measures

- Prevention is a key element and is **strongly encouraged** to help stop the spread of respiratory viruses. Counsel patients about everyday actions that can stop the spread of respiratory viruses, as appropriate:
 - Wear a mask in indoor public or crowded spaces. Wearing a mask can protect babies and young children who do not yet have immunity and are too young to wear a mask themselves.
 - Wash hands frequently and thoroughly with soap and warm water or use an alcohol-based hand sanitizer.
 - Cough or sneeze into your elbow, arm, or disposable tissue. If disposable tissue is used, use hand sanitizer or wash hands afterwards.
 - Avoid touching your eyes, nose, and mouth.





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- Stay away from people who are sick.
- Stay home when sick and encourage parents and caregivers to keep young children with acute respiratory illnesses out of childcare, even if they have a negative test for SARS-CoV-2.
 - Individuals may return to work/school/childcare after symptoms have resolved including at least 24 hours have passed since resolution of fever without the use of fever-reducing medications, such as Tylenol[®] or Motrin[®]. Patients who test positive for SARS-CoV-2 should follow CDPH <u>isolation</u> guidance.

RSV Resources

- <u>RSV (Respiratory Syncytial Virus) | CDC</u>
- <u>Updated Guidance: Use of Palivizumab Prophylaxis to Prevent</u> <u>Hospitalization From Severe Respiratory Syncytial Virus Infection During the</u> <u>2022-2023 RSV Season (aap.org)</u>
- CDPH CAHAN: Early RSV Activity October 3, 2022
- <u>CDC HAN: Increased Respiratory Virus Activity, Especially Among Children,</u> <u>Early in the 2022-2023 Fall and Winter</u>

Influenza Resources for Health Care Providers

- Influenza Vaccination CDC
- Influenza Testing CDC
- Influenza Antiviral Medications: Summary for Clinicians | CDC
- Influenza and COVID-19 Testing, Treatment and Vaccination | NIH
- Influenza Vaccine Promotional Materials Resources (eziz.org)
- Influenza CDPH (see Surveillance section for the weekly Flu and Respiratory Virus Report)
- Detecting and Controlling Outbreaks | CDPH







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<u>Guidance for the Use of Face Masks | CDPH</u>

Influenza and COVID-19 Resources for the Public

- Influenza (About Flu) | CDC
- Who Needs a Flu Vaccine and When | CDC
- Fight the Flu. Get Vaccinated | CDPH
- People at Higher Risk of Flu Complications | CDC
- <u>What You Should Know About Flu Antiviral Drugs | CDC</u>
- Isolation and Precautions for People with COVID-19 CDC
- Guidance on Isolation and Quarantine for COVID-19 | CDPH
- Vaccines Coronavirus COVID-19 Response | CDPH

