

Influenza Immunization of Health Care Workers 1st Year Results *and Influenza Update 2013 - 2014*

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Summary of the Rule

- Applies to ALL healthcare facilities licensed by CDPHE
- Report seasonal influenza vaccination of employees by **March 31st** of each year

Year	Dates	Target Vaccination %
Year 1	October 1, 2012 to December 1, 2012	60%
Year 2	October 1, 2013 to December 1, 2013	75%
Year 3 and after	October 1, 2014 to December 1, 2014, and ever year thereafter	90%

Summary of the Rule

- All facilities that meet target rate are exempt from many parts of rule (10.7 – 10.12) for following year.
- All ALRs that do not meet target rate required to perform an assessment and develop updated policy.
- Medically exempt employees do not count towards target vaccination rate.

Results for Year 1

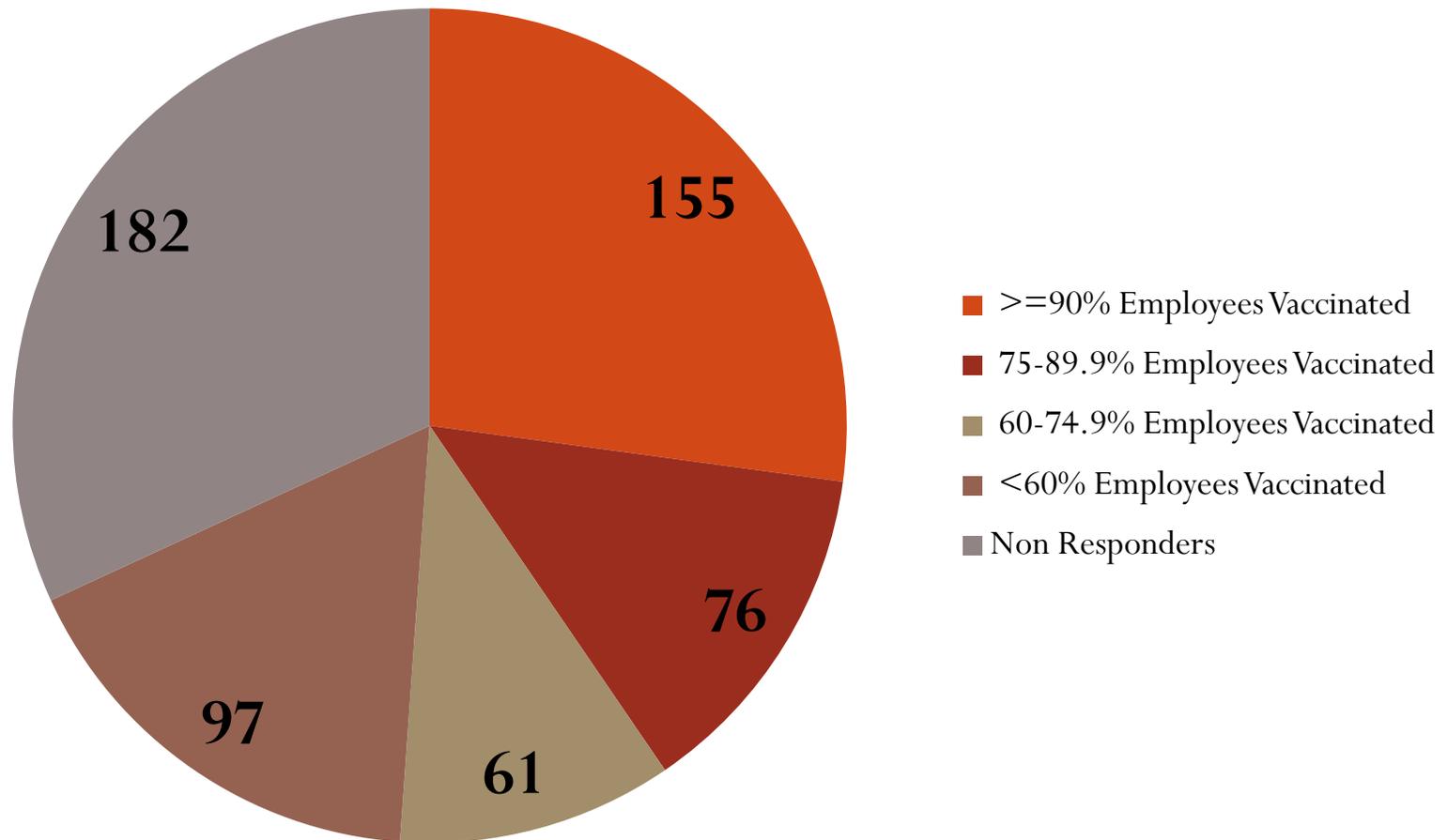
- Out of 2,020 licensed and active facilities, 1,449 facilities (72%) reported by extended May 17th deadline

Target	% of ALL Facilities
Year 1 (60-74%)	11%
Year 2 (75-89%)	14.7 %
Year 3 (>90%)	30.5%
TOTAL	56.2%

Compliance of Reporting Facilities

Target	% of Responding Facilities
Year 1 (60-74%)	15.4%
Year 2 (75-89%)	20.5 %
Year 3 (>90%)	42.5%
TOTAL	78.4%

Employee Vaccinations in Assisted Living



Epidemiology

How significant is influenza - really?

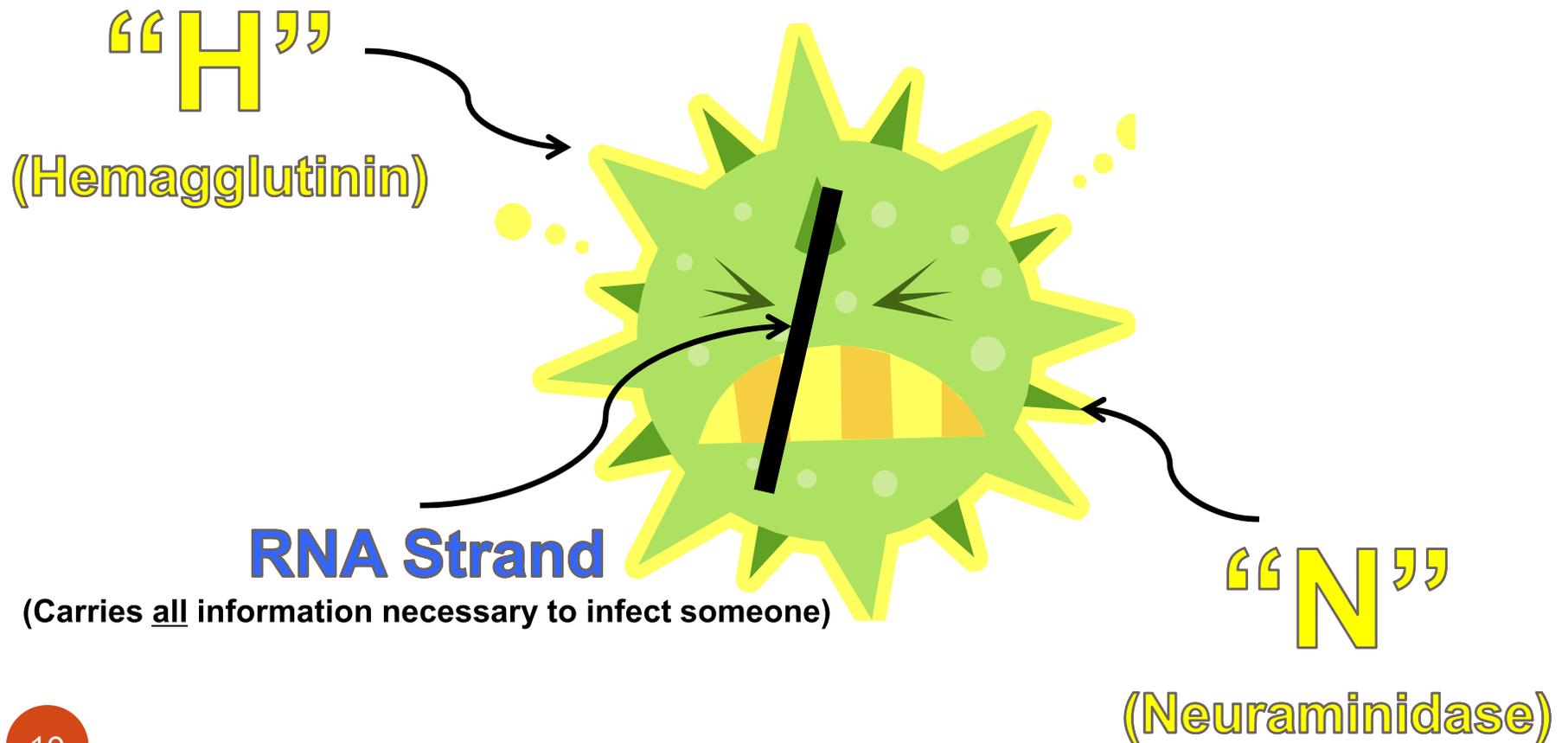
Influenza Epidemiology

- **Average annual Influenza-attributable deaths in US:**

36,000 – 48,000

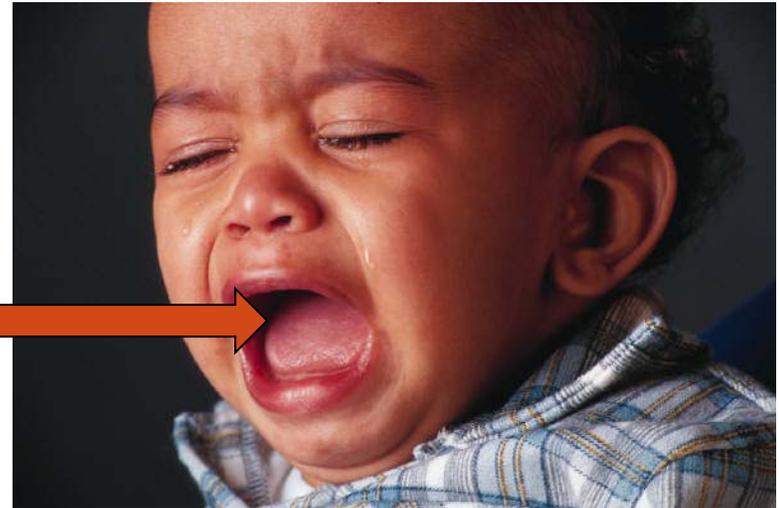
- **Good / Bad / Average years**
- **>90% of deaths in normal year are in those >65**
- **Increased cardiopulmonary disease, deaths**

The Influenza Virus



Getting Infected...

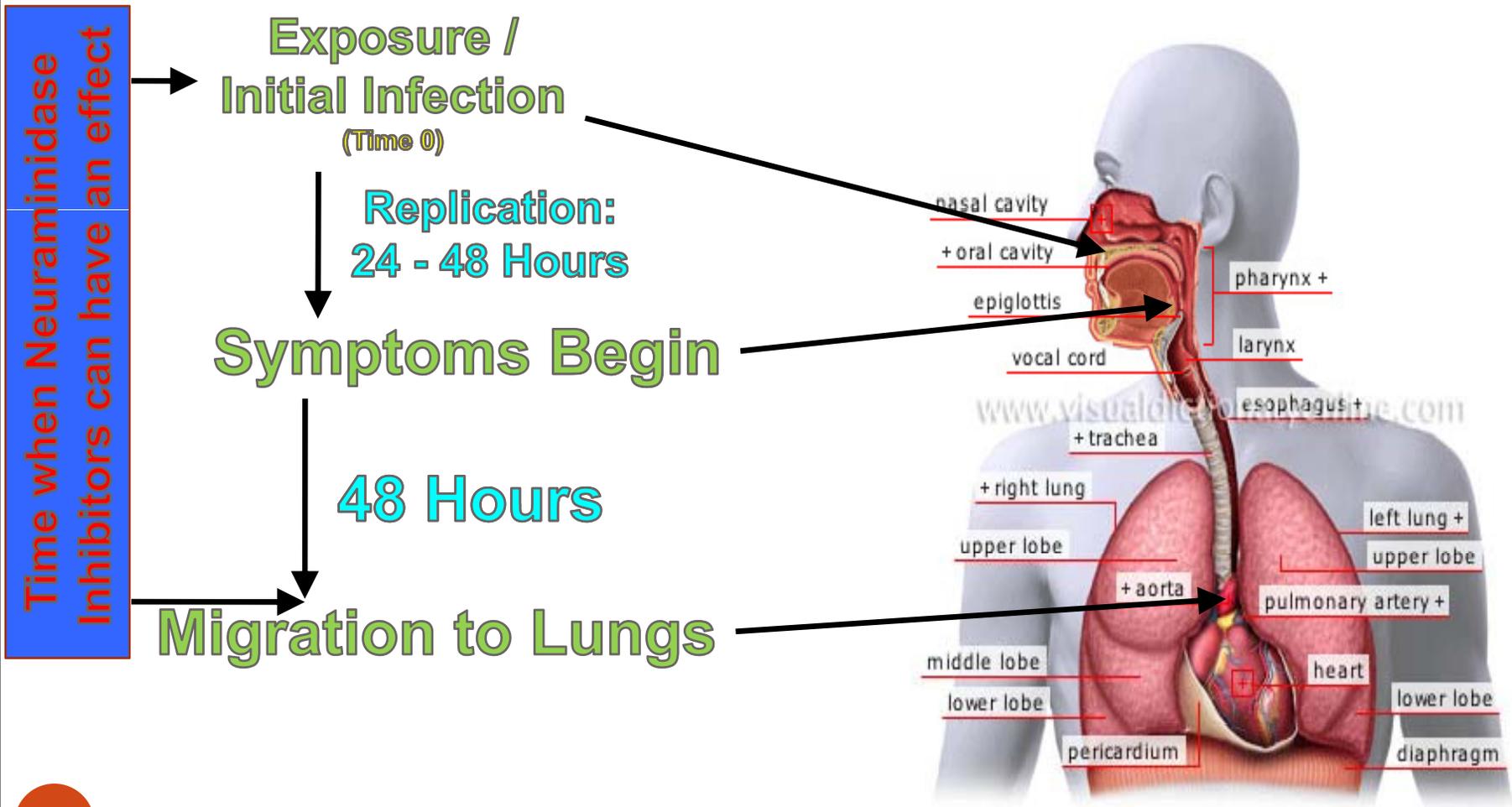
A Cough or Sneeze by an infected person leaves Flu viruses floating on water droplets in the air



The virus is inhaled by the unsuspecting victim...

...where it finds a home in the Oro- or Nasopharynx

Multiplication & Migration of the Virus



Preventive Medicine

How do I stay healthy?

The best way to **prevent** flu is

GET VACCINATED!!! - unless:

- You've had documented serious reaction to previous dose
- You've had Guillain-Barre associated with vaccine

Few Side Effects

- **Most common** → **redness, SORENESS** or swelling at injection site (*Bravo! for your immune system!*)
- **Less common** → fever and body aches
- **Egg allergy is not a contraindication – esp with a new recombinant vaccine made without any eggs used in the process**

Benefits of being vaccinated

✓ **The ACIP recommends**

Universal Vaccination

(everyone >6 months old)

For NH residents the vaccine reduces the risk of:

- **Hospitalization** by 50%
- **Pneumonia** by 60%
- **Death** and complications related to flu by 75-80%

In kids / young adults, it is 70-90% effective in preventing flu

(also keeps them from spreading it to sibs, parents and our patients)

Flu Vaccines for 2013-14

Viral Strains

- A/California/7/2009 (H1N1)
- A/Victoria/361/2011 (H3N2)
- B/Massachusetts/2/2012
- +/- B/Brisbane/60/2008

Vaccines Available

- LAIV (FluMist; 2 – 49 yo) – Quadrivalent
- Tri - & Quadri - valent inactivated vaccine (IM)
- High Dose Fluzone (over 65)
- Intradermal Fluzone (ages 18-64)
- RIV3 = Recombinant, egg-free vaccine for persons 18 – 49 yo

High Dose Fluzone

- For ages >65 only
- Contains 4X antigen for each of 3 viral strains
- Only 20-25% of frail elderly (NH pts) develop protective antibodies with normal seasonal vaccine
- Non-serious adverse events more frequent
 - *• pain @ injection site • muscle aches • headache • low-grade fever*
 - *• redness/swelling @ injection site • malaise*
- Serious adverse event rates were equivalent

How do I stay healthy?

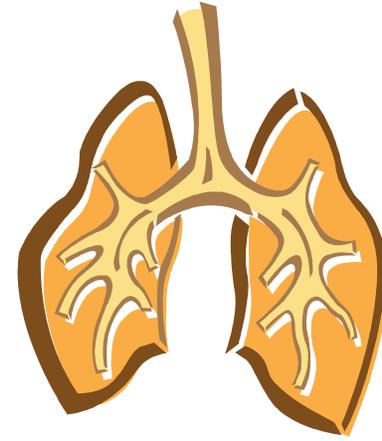
- Avoid close contact with people who are sick
- Stay home when you are sick
- Cover mouth & nose when coughing / sneezing
- *Cover mouth & nose when someone else coughs or sneezes!*
- Wash your hands and practice other good, common sense health habits
- **VENTILATE!** Open doors & windows on nice days!

Clinical Medicine

Influenza Recognition and Treatment

Influenza

- ◆ **A Respiratory Virus**
- ◆ **NOT the 'stomach' flu**
- ◆ Spread by coughing and sneezing



Symptoms... AKA...*How do you know someone has the flu?*

- 2 major symptoms:
 - **Sudden onset of HIGH Fever and/or a Nonproductive Cough**
 - **LTCFs: watch for multiple cases in a short period of time**

Other common symptoms:

- ✓ **Muscle aches – often profound**
- ✓ **Sore throat or nasal congestion**
- ✓ **Headache**
- ✓ **Confusion or Delirium**

Antiviral Treatment



- If you think someone has the flu:
 - Involve the provider ***as soon as*** there are symptoms!
 - **Meds only work if started <48 hours from start of symptoms**
 - When in doubt, start treatment – **STAT** – based on clinical judgment
- STAY HOME or cohort sick patients in LTCFs!
- Plenty of rest, fluids, nutrition
- Treat muscle aches / fever with NSAIDs, ASA, Tylenol
- Cough / lethargy can last 2 – 3 weeks depending on frailty
- Infectious from 1-2 days **before** symptoms start until 1-2 days after coughing stops

Thank You

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