



**To: All GPs (Please disseminate to all practice staff)**

Dear Colleagues

**Seasonal Influenza 2017/18**

You will no doubt be aware that seasonal flu is now circulating in your area.

Syndromic surveillance indicators have shown a substantial increase over the past few weeks in the GP consultation rate for influenza-like illness across the South West. Surveillance for week 51 shows a large increase in laboratory reports of both Influenza A and B, but particularly B. The data suggests that this winter we may observe co-circulation of both major types of Influenza.

Predominance of A/H1N1 or A/H3N2 within all Influenza A reports is not yet clear as both strains are currently circulating. However, early indications are that influenza B viruses related to the B/Yamagata lineage are predominating among laboratory confirmed influenza B cases. The trivalent 2017/18 seasonal influenza immunisation does not provide protection against this strain. The influenza B antigen contained within this year's trivalent vaccine protects against B/Brisbane/60/2008-like virus which is a B/Victoria lineage virus. The quadrivalent vaccine, including Fluenz the intranasal immunisation given to children, does however protect against both B/Yamagata and B/Victoria influenza B virus strains.

As most adults will have been vaccinated in general practice using trivalent rather than quadrivalent vaccine, it is possible that cases of flu will be seen amongst individuals, both staff and patients, who have accepted this vaccination.

A number of hospitals and care homes across the South West have already been affected by localised outbreaks and increased demand. Given the increased activity, we thought it might be helpful to provide you with the key points again to assist in trying to reduce further spread. (Please note we are also writing to all local care homes and sending out communications to patients to raise awareness).

**Attendance at healthcare settings / local hospital admission**

- Most cases of flu can be treated effectively at home. Patients should be encouraged to self-care, seek advice on treating symptoms via reputable on line resources such as NHS Choices, or to seek advice from a local Pharmacist before contacting the GP
- Patients should be advised to:
  - rest and sleep.
  - keep warm.
  - take paracetamol or ibuprofen to lower your temperature and treat aches and pains.
  - drink plenty of water to avoid dehydration(More info for patients can be found on <https://www.nhs.uk/conditions/flu> or via 111)
- Hospital admissions should be avoided where possible

- Patients who have severe/prolonged flu or other complicating factors particularly children, pregnant women, those with chronic conditions and the elderly (or where symptoms have not improved after 7 days) should be reviewed and admissions arranged where necessary via A&E or preferably via a pre-arranged admission.
- When admitting a patient, please inform the ambulance service and admitting ward if flu is suspected so they can implement the necessary measures to prevent further transmission.

## **Reporting outbreaks in community settings**

Please report any suspected outbreaks of Influenza like illness to Public Health England (PHE) South West Centre Health Protection Team (HPT) on Tel: 0300 303 8162 Option 1 (Health Protection), then Option 1 for Cornwall, Devon, Somerset and Dorset or Option 2 for Avon, Gloucestershire and Wiltshire.

This will help us monitor what's happening in the community and enables PHE to provide specific advice to minimise further spread.

## **The community**

Influenza is most infectious when symptoms start until about 3-5 days later, therefore, patients should be advised to avoid attending the practice or a health care setting while symptomatic, if at all possible.

Anyone with symptoms of flu should be advised to stay away from work/school until they have recovered and for at least 24 hours after the resolution of any fever. There are no recommended times for exclusion from school for an infected child; a child should return when they have recovered.

There are still opportunities to protect vulnerable people through vaccination. Quadrivalent vaccine will have greatest effect given the mixed picture of circulating strains, but trivalent vaccine will still offer better protection than having no vaccine in many cases, even if it may not protect against all of the circulating strains. It is important to remember that the seasonal flu immunisation programme runs until March each year and so the offer of the vaccine should be available to eligible individuals, especially newly pregnant women, throughout this period.

If you require any further information on immunisation or the flu vaccine please contact [england.southwestscrimms@nhs.net](mailto:england.southwestscrimms@nhs.net)

## **Use of antiviral medicines**

In accordance with the Chief Medical Officer alert dated 19<sup>th</sup> December, GPs and other prescribers working in primary care may now prescribe antiviral medicines for the prophylaxis and treatment of influenza at NHS expense. Antiviral medicines may be prescribed for patients in clinical at-risk groups as well as any who are at risk of severe illness and/or complications from influenza if not treated.

Information on at risk groups and patients eligible for treatment in primary care at NHS expense is available in PHE guidance:

[https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/648758/PHE\\_guidance\\_antivirals\\_influenza\\_201718\\_FINAL.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/648758/PHE_guidance_antivirals_influenza_201718_FINAL.pdf)

Yours faithfully

A handwritten signature in black ink, appearing to read 'Mike Wade', written in a cursive style.

Mike Wade  
Deputy Director of Health Protection  
Public Health England