



WEST VIRGINIA BUREAU FOR PUBLIC HEALTH



HEALTH ADVISORY (#3)

**FLU VACCINE DISTRIBUTION CHANGES: MEDICAL COMMUNITY
ASKED TO HELP IN DETERMINING BEST USE**

TO: West Virginia Local Health Departments, Physicians, Hospitals, Health Care Professional Organization and Societies and Other Health Care Professionals

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LOCAL HEALTH DEPARTMENTS: PLEASE DISTRIBUTE TO COMMUNITY VACCINE PROVIDERS, HEALTH CARE FACILITIES, AND OTHER APPLICABLE PARTNERS

OTHER RECIPIENTS: PLEASE DISTRIBUTE TO ASSOCIATION MEMBERSHIP, STAFF, ETC.

This advisory is aimed at notifying private providers and facilities of changes to the federal flu vaccine allocation plan and requests you assist your local health department in determining how to best allocate remaining limited private sector vaccine supply in your community. It also shares with you necessary actions if you are still in need of flu vaccine.

NEEDED ACTION

If you are a provider or facility in need of purchasing flu vaccine to reach the highest risk individuals and you do not have a recently confirmed order on route, WVBPH asks that you immediately contact your local health department to: 1) share the specifics of your vaccine need, and 2) participate in determining highest local priorities for remaining vaccine now being allocated through public health to the private sector. Local health departments will be placing vaccine orders through WVBPH on behalf of community-determined highest risk entities.

This unusual action (public health allocation of vaccine to the private sector) is taking place in order to assure remaining vaccine reaches those at highest risk in each community. Public health is primarily serving as an intermediary in this process, working with the local medical community to determine highest priority unmet need and placing orders on behalf of those entities. All vaccine being allocated to facilities and providers through local health departments will need to be purchased by the provider / facility (end user). Once the order is placed by public health, the end user is responsible for working directly with the distributor to arrange shipment

and payment. Vaccine orders placed through this process will be shipped through December and January. Please note: there will still not be sufficient vaccine for all providers and facilities.

If you are a provider with remaining vaccine that could be better utilized elsewhere in the community, you are also asked to notify your local health department so that your supply can be sold at cost or donated (at the discretion of the provider with vaccine) to another entity in need. Currently, several WV facilities, especially long term care facilities, need vaccine.

BACKGROUND:

Following initial distribution of approximately 12 million doses through private and public sectors (Phase 1 of the initial federal allocation plan), the Centers for Disease Control and Prevention (CDC) recently announced that the remaining 10.3 million doses of influenza vaccine will be turned over to state health departments for allocation. 3.1 million of these doses will go to states and territories to fulfill 100% of orders originally placed under federal and state contracts. Allocation of the remaining 7.2 million doses to states takes into account three factors:

- The estimated number of high-priority individuals in the state
- The number of doses the state has already received
- The state's unmet needs.

In the coming weeks, another 1.2 million doses of pediatric vaccine will be allocated to states using this same approach.

Under this plan, WV is eligible for approximately 47,000 doses of preservative containing influenza vaccine (~2/3^{rds} in Nov-Dec and ~1/3rd in January) and 8,000 doses of preservative free pediatric vaccine. The WV Immunization Program is using a strategy similar to the national strategy for allocating this vaccine to local jurisdictions (basing allocations on estimated county target population and vaccine already shipped to county providers, facilities, and agencies).

WVBPH's Immunization Program has used a similar strategy for distributing approximately 53,000 doses of state supplied vaccine to local health departments to date. The goal is to provide approximately the same proportion of vaccine in relation to unmet need across the state. Public-private cooperation is essential to assure equitable allocation of all vaccine within communities and to protect the health of West Virginia's most vulnerable citizens.

OTHER UPDATES

Flu Activity in West Virginia: To date, one case of confirmed influenza has been identified in WV. Surveillance data is updated weekly on the WVDHHR website at www.wvdhhr.org/,

Vaccination throughout the influenza season: Although early vaccine administration is preferable, it is never too late in the flu season to vaccinate. Typically in West Virginia, flu begins in December, peaks in January-February and tapers off by mid March to early April.

Flumist: This year's vaccine supply also includes three million doses of FluMist. Most healthy, non-pregnant, 5-49 year olds who are health care workers (other than those caring for severely immunocompromised) or who are caregivers and household contacts of children < 6 months old are good candidates for this vaccine. Additional supplies of this vaccine are still available.

Priority Groups: Vaccine should still be used only for priority groups listed below (as per Advisory Committee on Immunization Practices Guidance, October 5, 2004):

- All children aged 6-23 months
- Adults aged 65 years and older
- Persons aged 2-64 years with underlying chronic medical conditions
- All women who will be pregnant during influenza season
- Residents of nursing homes and long-term care facilities
- Children 6 months-18 years of age on chronic aspirin therapy
- Health-care workers with direct patient care
- Out-of-home caregivers and household contacts of children aged <6 months.

Given their knowledge of individual patient medical conditions, health care providers are in the best position to prioritize within these groupings, keeping in mind that those at highest risk are individuals who have both a high likelihood of complications and a high likelihood of coming in contact with influenza virus. Health care workers providing direct patient care to high risk individuals are also good candidates given their likelihood of becoming infected and then spreading it to those susceptible to the complications of flu.

Second dose of pediatric vaccine: A second dose of vaccine should not be held for children who would normally receive it (first time vaccinees <9 y.o.). Children should be vaccinated (first or second dose) on a first come, first serve basis. Children aged < 9 y.o. who received only one dose last year need only one dose this year.

Antivirals: Antivirals are available commercially. 2004-05 Guidelines on their use can be found at www.cdc.gov/flu. Per FDA, about 40 million people could be treated with available antivirals.

Prevention Beyond Vaccine: Besides vaccine, state residents, including all health care providers, should take other practical steps to help prevent spread of flu. These include staying home from work, school, and other gatherings when you are sick; covering your mouth and nose when coughing or sneezing; and practicing frequent and thorough hand washing with soap and water or waterless handwashing agents.

For more information about the flu and this year's recommendations, visit the CDC Website: <http://www.cdc.gov/flu> and the WV Immunization Program website at www.wvdhhr.org/Immunizations/. For more information, please contact your local health department or the West Virginia Immunization Program at 304/558-2188, toll-free: 1-800-642-3634. CDC's flu hotline is 1-800-FLU-INFO.

##This Message was distributed to Local Health Departments, Professional Societies (e.g., APIC, AAP, AAFP, ACP, WVHCA, WVHA), WVDHHR Disaster Network and Health Care Providers via WVMI##

Categories of Health Alert messages:

Health Alert: Conveys the highest level of importance; warrants immediate action or attention.

Health Advisory: Provides important information for a specific incident or situation; may not require immediate action.

Health Update: Provides updated information regarding an incident or situation; unlikely to require immediate action.