

MLS Laboratory Update #18
Change in Criteria for MDH Public Health Lab Testing of H1N1 Novel Influenza
June 17, 2009

****Please forward** this message to all appropriate personnel within your institution and any CLINIC or PHYSICIAN'S OFFICE with which you are affiliated**

This is an update from the Minnesota Department of Health – Public Health Laboratory (MDH-PHL) and the Minnesota Laboratory System (MLS). This message is being sent to MLS laboratory contacts serving Minnesota residents. You are not required to reply to this message.

New Laboratory Testing Criteria

As of June 17, MDH Public Health Laboratory (MDH-PHL) will ONLY test submitted specimens for novel H1N1 influenza among cases with ILI who are:

- (1) Hospitalized (or deceased following ILI illness);
- (2) Have had contact with pigs in the 7 days prior to their symptom onset or during their illness (e.g., swine worker); or
- (3) Are part of a cluster investigation or other unusual circumstance, for which MDH epidemiology at 651-201-5414 or 1-877-676-5414 has been consulted.

Community transmission of the novel H1N1 influenza is ongoing. MDH has documented a large increase in confirmed cases over the past week in Minnesota, particularly in, but not limited to, the Twin Cities area. Currently all patients with influenza-like illness (ILI) in Minnesota are likely to have the H1N1 novel influenza virus. MDH-PHL has documented the waning of seasonal influenza, with only rare isolates being positive for seasonal influenza strains. It is not necessary to test every patient with ILI for H1N1, and MDH-PHL cannot provide H1N1 testing for all patients with ILI.

Therefore, MDH is recommending:

- (1) All ILI patients, who do not have an alternative diagnosis, such as group A streptococcal pharyngitis, should be treated as if they have H1N1 novel influenza;
- (2) If the patient is very ill, an infectious disease consult is suggested;
- (3) If specific diagnosis is needed, viral culture is recommended and should be run at your usual clinical or reference laboratory.

Where to Find Forms

For both the Newly Revised Specimen Screening Form and the Laboratory Submission Form that must accompany specimens, see:

<http://health.state.mn.us/divs/idepc/diseases/flu/h1n1/hcp/testing.html#test>

Rapid Influenza Testing

The utility and accuracy of rapid influenza tests to detect the novel H1N1 virus is questionable. We are aware of false negative results of rapid influenza tests for H1N1 novel influenza. We do not know the positive predictive values of rapid influenza tests for novel H1N1 influenza.

Symptoms for H1N1

Although most cases of H1N1 influenza have had classic influenza symptoms including fever, cough, sore throat, headache and body aches, some cases have had significant vomiting and diarrhea resulting in dehydration. In addition, some cases have had a more insidious onset of symptoms compared to classic influenza. This infection is very contagious and people must be counseled to stay home if they experience ILI symptoms.

High Risk Groups

Individuals who are at risk for severe complications from influenza should receive treatment if they experience ILI, or chemoprophylaxis if they have close contact with someone who has ILI. For a list of high risk groups, further information on chemoprophylaxis for healthcare workers, and dosages of antivirals, see:

<http://www.health.state.mn.us/divs/idepc/diseases/flu/h1n1/hcp/antiviralrecs.html#high>

Additional Information

MLS website at www.health.state.mn.us/mls under “Hot Topics”

CDC H1N1 Novel Influenza website: www.cdc.gov/flu/swine/index.htm

MDH H1N1 Novel Influenza website:

<http://www.health.state.mn.us/divs/idepc/diseases/flu/h1n1/index.html>

MDH is very grateful for your collaboration and appreciate your flexibility as we all respond to this evolving situation.

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