Preparing for an influenza Pandemic
A Practical Guide for Primary Care

What will happen in a Pandemic
The announcement of the onset of an Influenza Pandemic is a significant public health event.

New Zealand has been planning for this for some time. The Ministry of Health has a national pandemic plan, and District Health Boards have local plans. The New Zealand Government, following the advice of the World Health Organization, is stockpiling anti-viral medicine to help reduce the impact of a pandemic on New Zealand.

More detailed patient management guidance will be distributed to medical practitioners as specific information on the illness becomes available.

All health care workers play an essential part in the national pandemic plan. It is essential that you protect yourself and your practice staff.

The onset of an influenza pandemic will mean a high level of public anxiety. The media will be used extensively to convey messages about the outbreak from the Ministry of Health. Recommendations for health care workers will be provided through the media, established sector networks and the Ministry’s website (www.moh.govt.nz/pandemicinfluenza).

A pandemic will also mean changes to most normal health services. It is possible that community assessment clinics will be set up to screen patients for influenza. Many patients will need to be cared for at home.

Vaccines
From the onset of an influenza pandemic, a new vaccine may take up to six months to develop and it may be difficult to ensure there are adequate supplies. The Ministry of Health is exploring options for getting access as quickly as possible to pandemic vaccine supply, once a vaccine is developed and available.

Antivirals
Oseltamivir (Tamiflu®) is a commercially available antiviral that can be used to treat acute influenza when started within 48 hours of the onset of symptoms. Tamiflu may also be used for post-exposure prophylaxis against pandemic influenza A strains in the absence of an effective vaccine. Consult the manufacturer’s product information sheets for indications, dosage, adverse reactions and current limitations on paediatric use.

Tamiflu has been stockpiled by the New Zealand Government for use during a pandemic. This will be allocated in accordance with nationally-determined priorities. The stockpile is owned by the Government and is not publicly available. This means that any community prescriptions for Tamiflu will not come from the national stockpile.

List of useful New Zealand Government phone numbers and web sites:
Ministry of Health
http://www.moh.govt.nz/pandemicinfluenza

Other useful Internet Sites:
World Health Organization:
http://www.who.int

Centers for Disease Control and Prevention (USA) http://www.cdc.gov

HealthLine: for free 24-hour health advice from registered nurses 0800 611 116
0800 immune for advice on seasonal influenza
Introduction

The Ministry of Health, the Royal New Zealand College of General Practitioners and the College of Practice Nurses (NZNO) have developed this guide to help you prepare for and recognise severe respiratory diseases that may have been acquired overseas, such as avian or pandemic influenza.

This guide will be invaluable when there are suspected or confirmed cases of efficient human to human transmission of these diseases.

Because there is a current threat, you are urged to consider now how you can apply this information in your practice. GPs, nurses, pharmacists, emergency department staff and international border staff will be the first point of contact by affected members of the public as such diseases appear in New Zealand.

It is important that as a health care worker you keep up-to-date with current information on the health risks involved with traveling. Your vigilance in recognising and responding to respiratory diseases in people who have travelled overseas is an essential part in the prevention of a major outbreak in New Zealand.

What to do now

Given the current global situation, please consider your level of preparedness for an influenza pandemic or other major outbreak of respiratory disease. In particular:

- Be vigilant for the possibility of severe or emerging respiratory disease in people who have recently travelled overseas
- Plan how to identify high-risk patients when they present

Plan how to manage such patients, including:
- keeping one metre between you and the patient wherever possible
- wearing a surgical mask and gloves; offer a mask to any patient and support people.
- rigorous, frequent hand washing
- ventilation

- identifying areas to isolate these patients from others
- Review staff infection control procedures and train staff in the use of personal protective equipment (PPE). Discuss your plans with all staff.
- Urge all staff to be vaccinated each year against seasonal influenza

Pandemic Influenza

A model plan for the recognition and management of patients, especially travellers, suspected to have a severe and infectious respiratory disease.

Screening

Patient with respiratory symptoms (such as cough or shortness of breath) AND history of travel in the past 21 days to an area with respiratory illness of concern

Patient and staff wear a surgical mask (if no masks, ask patient to cover mouth and nose with tissue when coughing/sneezing) and sit in an isolated room if possible.

Advise doctor

Clinical Assessment

Doctor using mask and gloves and maintaining 1 metre distance

- Fever $\geq 38^\circ$C and respiratory symptoms AND
- Plausible history of exposure

Yes
- Seek alternative diagnosis
- Maintain level of suspicion
- Arrange for follow-up if clinical deterioration

No
- Report immediately to local Medical Officer of health
- Discuss antiviral prophylaxis for staff and appropriate action
- Take appropriate clinical action as recommended by Medical Officer of Health

1. Additional clinical symptoms may include: fatigue, chills, sore throat, headache, conjunctivitis, muscle aches and pains and gastrointestinal symptoms (vomiting and diarrhoea)

2. Risk factors may include contact with infected animals or birds or their environment, contact with cases of severe respiratory illness or being a laboratory worker with potential exposure to the disease agent.