



Kansas Medical Assistance Program Drug Utilization Review Bulletin



October 2008

Influenza

Influenza is a serious viral illness that causes significant morbidity and mortality. It can effect people of any age, but rates of serious infection, including death, are the highest among persons ≥ 65 years, children aged <2 years, and persons of any age who have medical conditions that place them at increased risk for complications from influenza. Influenza vaccination remains the most effective method for preventing influenza virus infection and its complications, however vaccination rates remain low. It is estimated that 83% of the United States population fall into one of the target vaccination groups, however less than 40% of the U.S. population were vaccinated during the 2007-2008 season.

Recently, the Advisory Committee on Immunization Practices released the 2008-2009 Prevention and Control of Influenza guidelines. New recommendations included annual vaccination of all children 5-18 years of age, and the use of either the inactivated or live attenuated influenza for healthy persons aged 2-49 years of age. Target vaccination groups include the following: all children aged 6 months to 18 years, all persons aged ≥ 50 years, and other adults at risk for medical complications from influenza (see Table 1). Additionally, oseltamivir (Tamiflu[®]) and zanamivir (Relenza[®]) continue to be the only antivirals recommended for treatment of influenza due to high influenza virus resistance rates to other antivirals.

Administration of the influenza vaccine is contraindicated in patients with an anaphylactic hypersensitivity to eggs or other components of the influenza vaccine. Careful consideration of the risk versus benefit of vaccination should be used in patients with history of Guillian Barré syndrome within 6 weeks following a previous dose of an influenza vaccination. Additionally, the live attenuated influenza vaccine should not be administered to persons at high risk for medical complications from influenza, children/adolescents receiving aspirin or salicylate therapy, or children < 5 years of age with possible reactive airway disease or who have had a recent wheezing episode.

According to the Kansas Department of Health and Environment, the Centers for Disease Control consider the flu season in Kansas to be from mid-October through mid-April. Prescription drug claims for neuraminidase inhibitors zanamivir (Relenza[®]) and oseltamivir (Tamiflu[®]) will be paid for dates of service during the influenza (flu) season only October 1 through April 30.

Inactivated vaccine:

- Intramuscular injection indicated for anyone ≥ 6 months of age
- Should not be given to persons with contraindications to the influenza vaccine
- A second dose should be administered to children aged 6 months to 8 years if they have not been vaccinated previously (doses should be separated by ≥ 4 weeks)
- Vaccine from a previous influenza season should not be administered
- Immunocompromised persons may have a reduced response

Live attenuated vaccine :

- Intranasal solution indicated in healthy, non-pregnant individuals 2-49 years of age
- Should not be given to persons with: contraindications to the influenza vaccine, at high risk for medical complications from influenza, children/adolescents receiving aspirin or salicylate therapy, or children < 5 years of age with possible reactive airway disease or who have had a recent wheezing episode
- A second dose should be administered to children aged 2-8 years if they have not been vaccinated previously with either vaccine (doses should be separated by ≥ 4 weeks)
- A second dose should not be administered if the recipient sneezes
- Consider deferral of administration in patients with nasal congestion
- Other inactivated or live vaccines can be administered simultaneously

Neuraminidase Inhibitors (oseltamivir and zanamivir)

- Not a substitute for the influenza vaccine
- Both are indicated for treatment and prophylaxis of influenza type A and B
- Should be started within 48 hours of influenza illness onset
- Oseltamivir can be used in patients one year and older
- Zanamivir can be used in patients five years and older and for prophylaxis and in patients seven years and older for treatment of influenza
- Zanamivir is not recommended in patients with underlying airway disease due to risk of serious bronchospasm
- Live attenuated influenza vaccine should not be administered within two weeks before or 48 hours after administration of a neuraminidase inhibitor, unless medically indicated

Table 1. Summary of 2008 influenza vaccination recommendations

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| <ul style="list-style-type: none">• All children 6 months - 18 years• Any adult that wants to reduce the risk for becoming ill with influenza• Those at high risk for influenza complications:<ul style="list-style-type: none">○ 6 months - 4 years○ ≥ 50 years○ Women who will be pregnant during the influenza season○ Persons who have chronic pulmonary (including asthma), cardiovascular (except hypertension), renal, hepatic, hematological, or metabolic disorders○ Persons who have immunosuppression caused by medications or HIV○ Persons who have any condition that can compromise respiratory function or the handling of respiratory secretions or that can increase the risk of aspiration (e.g., cognitive dysfunction, spinal cord injuries, seizure disorders, or other neuromuscular disorders)○ Children who are receiving long-term aspirin or salicylate therapy who might be at risk for experiencing Reye's syndrome after an influenza infection○ Residents of nursing homes and other chronic care facilities○ Health-care personnel○ Household contacts and caregivers of children aged <5 years and adults ≥ 50 years, with emphasis on contacts and caregivers of children < 6 months old○ Household contacts and caregivers of persons with medical conditions that put them at high risk for severe complications of influenza |
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Kansas Drug Utilization Review Committee Members:

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We currently have two vacancies on the Drug Utilization Review Board. We are looking for a Kansas licensed pharmacist currently practicing in a retail setting. The other vacancy is for a Kansas licensed pharmacist currently practicing in long term care. For more information please contact Dr. LeAnn Bell, KHPA Pharmacy Program Manager @ 785-296-3981.

References:

1. Centers for Disease Control and Prevention. Prevention and control of influenza. Recommendations of the advisory committee on immunization practices (ACIP). MMWR Early Release 2008;57(July 17, 2008):1-59. Available at: <http://www.cdc.gov/mmwr/preview/mmwrhtml/rr57e717a1.htm>. Accessed July 30, 2006.