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Health Alert

Date: June 14, 2024

To: Yolo County Healthcare Providers and Laboratories

From: Aimee Sisson, MD, MPH, Health Officer

Subject: Influenza A Testing Guidance

Key Messages

In order to maintain awareness of influenza A subtypes circulating in California, including in Yolo County:

- Providers should report any suspected case of novel, avian, or variant influenza to <u>Yolo County Public Health</u> immediately, and should test for influenza in patients with respiratory illness and relevant animal exposures that could increase risk for influenza A (H5N1). Providers should test severely ill patients irrespective of exposure history.
- Clinical and commercial laboratories should submit influenza specimens to Napa-Solano-Yolo-Marin (NSYM) Regional Public Health Laboratory for subtyping if unable to perform subtyping themselves. Any clinical specimen for which subtyping is attempted and does not identify a seasonal subtype should be immediately reported to the local health department and urgently directed to a public health lab for further testing.

Background

The ongoing global outbreak of influenza A (H5N1) in animals has caused the worst domestic poultry outbreak on record, with more than 90 million poultry affected in the U.S. to date. In March 2024, the first detection of influenza A (H5N1) in dairy cattle was reported in Texas. Since then, there have been three mild human infections detected in dairy farm workers with exposure to infected dairy cattle in Texas (1) and Michigan (2). There has been no human-to human-transmission associated with these cases.

Currently, influenza A (H5N1) is believed to pose a low risk to human health. The spread of avian influenza viruses from one infected person to a close contact is very rare, and when it has happened, it has only spread to a few people. However, because of the



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possibility that avian influenza viruses could gain the ability to spread easily between people, monitoring for human infection is important for public health.

Recommendations

The following activities are recommended to maintain awareness of influenza A subtypes circulating in California.

Providers should:

- Test for influenza (preferably with RT-PCR) in patients with signs and symptoms
 of respiratory illness (with or without fever or conjunctivitis), especially if there is
 a history of potential exposure to avian influenza H5N1 (e.g., exposure to dairy
 cows, raw milk, wild birds, poultry, agricultural fair attendance). Subtyping of
 influenza A should be performed. If not available a clinical or commercial lab,
 subtyping is available at the NSYM Regional Public Health Laboratory and can be
 obtained by contacting <u>Yolo County Public Health</u>.
- For persons with suspected influenza A (H5N1) infection based on exposure history, collect the following specimens: 1) a nasopharyngeal swab and 2) a nasal swab combined with an oropharyngeal swab (e.g., two swabs combined into one viral transport media vial). The nasopharyngeal swab and the combined nasal-throat swabs should be tested separately. If these specimens cannot be collected, a single nasal or oropharyngeal swab is acceptable. If the person has conjunctivitis (with or without respiratory symptoms), both a conjunctival swab and nasopharyngeal swab should be collected. Swab specimens should be collected using swabs with a synthetic tip (e.g., polyester or Dacron®) and an aluminum or plastic shaft. Swabs with cotton tips and wooden shafts are not recommended. Specimens collected with swabs made of calcium alginate are not acceptable. The swab specimen collection vials should contain 1-3ml of sterile viral transport medium.
- Follow <u>CDC guidance regarding antiviral treatment and prophylaxis</u> in the event of suspected influenza A (H5N1) human cases and exposures; these recommendations should be implemented in consultation with <u>Yolo County</u> <u>Public Health</u>.
- Test for influenza in patients with severe respiratory illness (i.e., hospitalized or ICU) irrespective of exposure history and arrange for subtyping of all influenza A positive specimens. Please ensure the laboratory you use for influenza A testing



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is aware that influenza positive specimens that are not subtyped be submitted to the regional public health laboratory.

• Report any suspected case of novel, avian, or variant influenza by calling <u>Yolo</u> <u>County Public Health</u> immediately. Reports should be made if novel or variant influenza is suspected based on symptoms and relevant exposure, or if an influenza A test is positive, but subtyping was attempted and did not identify a seasonal influenza A subtype (this includes unsubtypeable results).

Clinical and commercial laboratories should:

- Report any samples that are influenza A positive and for which subtyping was attempted but did not identify a seasonal influenza A subtype to Yolo County Public Health and urgently direct these samples to a local public health laboratory for additional testing.
- During June through September 2024, submit influenza A positive samples not subtyped in clinical laboratories to the NSYM regional public health laboratory for influenza A subtyping. Continued collection of specimens for influenza testing and subtyping all influenza A positives over the summer is key to maintaining visibility of the influenza A subtypes circulating in the community, and for enhanced detection of novel and variant influenza cases.

Resources:

- CDC: Information on Bird Flu | Avian Influenza (Flu)
- CDC: Strategy for Enhanced Summer 2024 Influenza Surveillance
- <u>CDC: Variant Influenza Viruses in Humans</u>
- <u>CDC: Highly Pathogenic Avian Influenza A(H5N1) Virus in Animals: Interim</u> <u>Recommendations for Prevention, Monitoring, and Public Health Investigations</u>
- Novel Influenza (Flu) (ca.gov)
- California Department of Food and Agriculture: Avian Influenza
- US Department of Food and Agriculture: 2022-2024 Detections of Highly
 Pathogenic Avian Influenza