NEW MEXICO HEALTH ALERT NETWORK (HAN) ALERT
New Mexico Department of Health Announces Start of Influenza (Flu) Season

Department of Health Recommends Influenza Vaccination for Everyone 6 Months of Age & Older

October 27, 2023

Background:
The New Mexico Department of Health (NMDOH) has announced the start of the 2023-2024 influenza (flu) season. The NMDOH Scientific Laboratory Division (SLD) has confirmed the first two influenza infections in the state, located in the northwest and southwest regions. An increasing number of positive influenza tests are being reported from around the state by clinical laboratories and outpatient facilities each week. Influenza and influenza-like illness activity is on the rise throughout the US as well. Health care visits for respiratory illness and outbreaks are expected to increase in the coming weeks and months, although the timing of the peak of the flu season cannot be predicted. NMDOH publishes a weekly Influenza and Respiratory Disease Report that can keep you updated on respiratory virus activity in New Mexico:

Influenza Surveillance Reports

Recommendations for Clinicians:

We expect to see co-circulation of respiratory viruses in the coming months. Clinicians should follow CDC’s Testing Guidance for Clinicians When SARS-CoV-2 and Influenza Viruses are Co-circulating. The key points going into this season of co-circulation are:

1. **For patients experiencing respiratory illness who require hospitalization:**
   a. Testing for both influenza and SARS-CoV-2 using a nucleic acid detection assay (e.g. PCR or molecular) is recommended.
      i. Ideally, a multiplex assay for influenza A/B and SARS-CoV-2 can be ordered. If only singleplex assays are available, you might need to collect two respiratory specimens.
   b. Rapid influenza antigen detection assays are not recommended for hospitalized patients due to low sensitivities. If a hospitalized patient is diagnosed with influenza using rapid antigen testing, another specimen should be collected and sent to the state laboratory or another reference lab for PCR confirmation.

2. **For residents of Nursing Homes or Long-Term Care Facilities:**
   a. Notify NMDOH if any of your residents or staff test positive for influenza
   b. Testing symptomatic residents or staff for both influenza and SARS-CoV-2 using a nucleic acid detection assay (e.g. PCR or molecular) is recommended
      i. Ideally, a multiplex assay for influenza A/B and SARS-CoV-2 can be ordered. If only singleplex assays are available, you might need to collect two respiratory specimens.
c. If a resident tests positive for influenza using a rapid antigen test, do not delay treatment or infection control activities. However, due to low sensitivities of these tests, please send a specimen to the state lab or reference lab for PCR confirmation of influenza.

3. For patients experiencing respiratory illness who do not require hospitalization:

   a. Testing for SARS-CoV-2 is recommended using nucleic acid detection (e.g. PCR or molecular), or antigen detection.
   b. Testing for influenza is recommended for all patients, if possible, while SARS-CoV-2 and influenza are co-circulating.
   c. Influenza testing should always be ordered if the results will change clinical management:
      i. E.g. patients at increased risk of complications who might benefit from early antiviral treatment.
      ii. E.g. patients not at increased risk, but where testing might reduce unnecessary antibiotic use, further diagnostic testing, time in facility, or influenza antiviral treatment.
      iii. For infection control decisions (e.g. patient is a resident of a long term care facility).
   d. Influenza nucleic acid detection (e.g. PCR or molecular) testing is recommended. Rapid antigen testing is okay if molecular assays are not available.

Because SARS-CoV-2 and influenza virus co-infection can occur, a positive influenza test result without SARS-CoV-2 testing does not exclude COVID-19, and a positive SARS-CoV-2 test result without influenza testing does not exclude influenza.

Prescribe empiric antiviral treatment as soon as possible based on a clinical diagnosis of influenza for patients of any age with progressive disease of any duration, and for children and adults at high risk for influenza complications. Please note, during co-circulation, it may be difficult or impossible to clinically diagnose influenza without respiratory viral pathogen testing. Please attempt to test for all pathogens before making a diagnosis.

**Reporting Influenza To NMDOH:**

NMDOH reminds providers and their staff that in accordance with New Mexico Administrative Code (NMAC) 7.4.3.13, influenza is a reportable condition for the following situations:

- Influenza, laboratory-confirmed hospitalizations only
- Influenza-associated pediatric death (<18 years old)
- Other illnesses or condition of public health significance (novel influenza A)
- Acute illness or condition of any type involving large numbers of persons in the same geographic area (outbreaks)
- An influenza outbreak is defined as one confirmed case of influenza (either by rapid or PCR test) and any other cases of ILI in the same geographic location. Outbreaks should be reported to the on-call epidemiologist 24/7/365 at (505) 827-0006.
**Influenza Vaccination:**

NMDOH recommends that everyone six months of age and older get flu vaccine each flu season. Getting vaccinated against flu can reduce the severity of illness, prevent hospitalization and death, and prevent serious complications from a flu infection. Individuals aged 65 years and older should preferentially receive high-dose or adjuvanted influenza vaccines but can receive standard vaccine if none are available. COVID-19 vaccine and an influenza vaccine can be co-administered.

Flu vaccination has many **benefits:**

- Flu vaccination reduces flu illnesses, hospitalizations, and deaths.
- Flu vaccination has been shown to make illness milder in people who get vaccinated and still get sick.
- Flu vaccination can protect pregnant people from flu and protect their babies from flu for several months after birth.
- Flu vaccination has been associated with lower rates of some cardiac events among people with heart disease.
- Flu vaccination also has been shown in separate studies to be associated with reduced hospitalizations related to diabetes and chronic lung disease.
- Flu vaccination reduces the burden of flu on health care systems.

The following groups of people are strongly recommended to be vaccinated because they are at high risk of having serious flu-related complications, or because they live with or care for people at high risk for developing flu-related complications:

- Children younger than 5, but especially children younger than 2 years old
  - Children aged 6 months through 8 years who have never been vaccinated against influenza, or have an unknown vaccination history, should receive two doses of influenza vaccine, administered at least 4 weeks apart
- Pregnant women (all trimesters), and up to two weeks post-partum
- People ages 65 years and older
- People of any age with medical conditions like asthma, diabetes, kidney, liver, lung or heart disease, neurological disease, and those who are immunocompromised
- People who live in nursing homes and other long-term care facilities
- People who live with or care for those at high risk for complications from flu, including healthcare personnel and caregivers of babies younger than six months
- American Indians and Alaskan Natives
- People who are morbidly obese

All vaccinations for children and adults are required by law to be entered into the New Mexico State Immunization Information System (NMSIIS). If you need access, training, or assistance with using NMSIIS,
contact the Help Desk at (505) 827-2356.

The NMDOH encourages individuals with health insurance to contact their health care provider or pharmacist about getting a flu vaccine. NMDOH offers vaccinations for people without insurance or those who are otherwise not able to get vaccinated.

Patients can find a location with available influenza vaccine with the following resources:

- [Vaccines.gov - Search for flu vaccine locations](https://www.vaccines.gov)
- [Vaccines for Children providers in NM](https://www.vaccines.gov)
- [Vaccines for adults without insurance](https://www.vaccines.gov)

**Antiviral Treatment:**

Influenza antiviral medications can be used to shorten the duration of illness, reduce the risk of complications, and reduce death caused by influenza, and some can be used to prevent influenza (prophylaxis).

Antiviral treatment is recommended as soon as possible for any patient with suspected or confirmed influenza who:

- is hospitalized;
- has severe, complicated, or progressive illness; or
- is at higher risk for influenza complications.

Decisions about starting antiviral treatment for patients with suspected influenza should not wait for laboratory confirmation of influenza virus infection. Empiric antiviral treatment should be started as soon as possible in the above priority groups. Because the amount of influenza circulating in New Mexico will influence clinical suspicion, it is important to conduct laboratory-based testing in these situations even when antiviral medications will be initiated without waiting for results.

Clinicians can consider early empiric antiviral treatment of non-high-risk outpatients with suspected influenza [e.g., influenza-like illness (fever with either cough or sore throat)] based upon clinical judgement, if treatment can be initiated within 48 hours of illness onset.

**Additional Resources:**

- [Influenza Antiviral Medications: Summary for Clinicians](https://www.cdc.gov/flu/professionals/antivirals/antiviral-summary-clinicians.htm)
- [Information for Clinicians on Influenza Virus Testing](https://www.cdc.gov/flu/professionals/diagnosis/index.htm)
- [People at Higher Risk of Flu Complications](https://www.cdc.gov/flu/protect/highrisk/index.htm)
- [Testing Guidance for Clinicians When SARS-CoV-2 and Influenza Viruses are Co-circulating](https://www.cdc.gov/flu/professionals/diagnosis/treatment-guidance.htm)
- [Testing and Management Considerations for Nursing Home Residents with Acute Respiratory Illness Symptoms when SARS-CoV-2 and Influenza Viruses are Co-circulating](https://www.cdc.gov/flu/professionals/diagnosis/nursinghome.htm)
**New Mexico Health Alert Network**: To register for the NM Health Alert Network, please visit the following site [https://nm.readyop.com/fs/4cjZ/10b2](https://nm.readyop.com/fs/4cjZ/10b2). Please fill out the registration form completely and click Submit at the bottom of the page, to begin receiving Important health alerts, advisories, and updates.

**Please Note** that our system also utilizes text messaging to notify members of important health information. Due to FCC Regulation changes that are designed to decrease the amount of unwanted spam text messages sent each year to citizens, please save, this phone number (855) 596-1810 as the “**New Mexico Health Alert Network**” default phone number for your account used for text messages on the mobile device(s) you register with us.