

Flu Advisory Board (FAB) Meeting Minutes November 13, 2009

Members Present: Barbara Wolicki (MDCH), Teri Adams (MDCH), Carolee Besteman (MPCA), Sue Schryber (Ottawa County Health Department), Pat Krehn (Muskegon County Health Department), Jennifer Rihtarchik (sanofi pasteur), Rosemary Franklin (MDCH), Kevin Czubachowski (MDCH), Christna Fecher (MDCH), Vanita Shaw (GSK), Kimberly Newman (Saginaw Public Schools), Barbara Day (MDCH), Stephanie Sanchez (MDCH), Pat Vranesich (MDCH), Bob Swanson (MDCH), Rob Miller (MDCH), Jeff Romano (Meijer), Ruta Sharangpani (MDCH), Talat Danish (Wayne County Department of Public Health), Mark Upfal (DMC Occupational Health), Josh Meyerson (HDNWM), JoAnne Eakins (Ionia County Health Department), Teresa Holtrop (MIAAP), Beverly Piskorski (Greater Oakland VNA), Mariam Beck Clore (MDOC), Leonard Pollock (Henry Ford Health System), Gory Aiken (MedImmune), Kelly Dingle (MedImmune), Marie Milkovich (OPHP), Glen Love (Merck/CSL), Jim Matthews (HomeTown Pharmacies), Lisa Ailstock (Kalamazoo College), Tracy Newhouse (UMHS Michigan Visiting Nurses), Courtnay McFeters (MDCH), Cristi Carlton (MDCH)

Members on the Phone: Elaine Houser (Oakland Co.)

Cristi Carlton welcomed the group, reviewed past meeting minutes, and had all attendees introduce themselves.

MDCH Updates

Marie Milkovich from the Office of Public Health Preparedness (OPHP) discussed some of the materials developed for the 2009 H1N1 flu campaign. Materials are available targeting K-12 schools, colleges/universities, pregnant women, daycares, health care personnel, and seniors.

Presentation 1: Terri Adams - Vaccine Supply & Distribution:

VFC Seasonal Flu Vaccine Update – 11/13/09

- VFC Flu vaccine administered annually from 6 months through 18 years of age and VFC Flu Guidelines have been issued
- Current allocations from CDC to Michigan (as of 11/11/2009)
 - LAIV (FluMist) 100%
 - TIV (Fluzone) multi-dose vials 68%
 - TIV (Fluzone) 0.5mL single vials 58%
 - TIV (Fluzone) 0.25 mL syringes 90%
- CDC notified states yesterday of intent to release National Stockpile of VFC seasonal flu vaccine for use
 - Supply will arrive at McKesson for order at the end of December through mid January 2010
 - States must request additional supply by next Wednesday

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Updates on Flu Vaccines

- FDA Approves Seasonal Influenza Vaccine Fluarix®, by GSK, for Pediatric Use
 - Approved for use in children ages 3 years to 17 years. Previously, this vaccine, approved for use in adults, ages 18 years and older
- FDA issued approval letter for Afluria®, by CSL for Pediatric Use, on November 10, 2009
 - Approved for use in both H1N1 and Seasonal flu vaccines for 6 months through 17 years of age. Previously, this vaccine, had been approved for use in adults, ages 18 years and older
 - Letter also approved 0.25mL presentation
 - CSL supplying 18% of H1N1 vaccine nationally
- FDA issued approval letter for FluLaval® to include the Influenza A (H1N1) 2009 Monovalent Vaccine
 - This is by ID Biomedical and is pending final approval of all necessary documents
 - For use in 18 years of age and older

Discussion: 91 million doses of private supply flu vaccine have been distributed; 114 million doses are projected to be distributed. Jim Matthews from Hometown Pharmacy has been unable to get flu vaccine for his retail pharmacies, employee clinics, and long-term health care clinics. It has been frustrating trying to get seasonal flu vaccine to protect the most vulnerable elderly patients. Typically, IVEN is useful in redistributing flu vaccine within Michigan, however; due to the current situation this is not as applicable. Michigan does not order private supply flu vaccine – the state only orders flu vaccine for the Vaccines for Children (VFC) program. Some states order quite a bit of flu vaccine and hold large, mass immunization clinics.

Meijer uses Fluzone and received an additional 3,000 doses of seasonal flu vaccine a few days ago; they will be putting on public clinics. Right now, they are trying to serve public demand.

Further group discussion of seasonal flu vaccine: Jim Matthews pre-booked Novartis vaccine and hasn't been able to obtain his seasonal flu doses. He scheduled his delivery for September; if he would have booked his delivery for August, he more than likely would have received flu vaccine. He has 3,000 nursing home patients who are not vaccinated as of today and they need to be. Visiting Nurses Association (VNA) has about 1,000 doses; Jim Matthews and VNA will try and coordinate efforts. U of M is expecting to get 3,500 doses next week. Sanofi has 11.5 million doses remaining and are still on track to bring these doses to the public; these doses should be available by mid-November. Price gouging is out there. Jim was offered all of the doses he needs (3,000) at the price of \$59 per dose. He submitted to the state Attorney General's office and Bob Swanson asked the Office of Legal Affairs to follow-up.

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Presentation 2: Cristi Carlton - Flu Activity Surveillance:

WHO Weekly Update – November 6, 2009

- Impact of 2009 H1N1 virus
 - Worldwide spread
 - More than 199 countries and overseas territories/communities have reported laboratory confirmed cases of 2009 H1N1
 - Over 6,000 deaths reported
- 2009 H1N1 is the predominant influenza virus in circulation worldwide
 - 2009 H1N1 accounted for 72% of all laboratory confirmed flu detections
- Northern America – Intense and persistent influenza transmission
 - An unusually early start to winter influenza season
- Ukraine – Nov. 3 update: more than 250, 000 cases of influenza-like illness, with 235 patients requiring intensive care.
 - As of Nov. 2, 70 deaths from acute respiratory illness have been reported.
- East Asia- intense and increasing influenza activity continues
 - In China, after an earlier wave of mixed influenza activity (seasonal H3N2 and pandemic H1N1), pandemic H1N1 influenza activity now predominates and is increasing.

United States Surveillance: CDC Weekly Update – October 31, 2009

- Influenza activity remains elevated
- The proportion of outpatient visits for influenza-like illness (ILI) was above the national baseline
- Forty-eight states reported geographically widespread influenza activity
- 99% of subtyped influenza A viruses being reported to CDC this week are 2009 H1N1
 - 99.6% of the influenza A H1N1 viruses characterized at CDC have been related antigenically to the reference strain chosen for the influenza A (H1N1) vaccine
- The US is seeing elevated influenza activity compared to what we typically see this time of the year.
- According the Outpatient Influenza-like Illness Surveillance Network (ILINet), 7.7% of outpatient visits are due to influenza-like illness
- Influenza-associated Pediatric Deaths
 - 2006-2007 flu season total: 78
 - 2007-2008 flu season total: 88
 - 2008-2009 flu season total: 124
 - Since August 30: 85 reports
 - 12 – children < 2 years old
 - 9 - children 2-4 years old
 - 30 - children 5-11 years old
 - 34 - 12-17 years old
 - Of the 85 reports, 53 children had specimens collected for bacterial culture and 17 (32.1%) were positive

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- CDC Estimates of 2009 H1N1 Influenza Cases, Hospitalizations and Deaths in the US, April – Oct 17, 2009
 - Data Source: Emerging Infections Program (EIP) conducts surveillance for laboratory-confirmed influenza-related hospitalizations in 62 counties covering 13 metropolitan areas of 10 states
 - From April – October 17th:
 - Between 14 - 34 million cases
 - Between ~ 63,000 and 153,000 2009 H1N1-related hospitalizations
 - Between ~ 2,500 and 6,000 2009 H1N1-related deaths
 - Report available at:
http://www.cdc.gov/h1n1flu/estimates_2009_h1n1.htm

Michigan Epidemiology Update

- Michigan is seeing a higher number of outpatient visits due to ILI (10.2%) than they have seen in previous seasons
- New Data Collection for 2009 – Hospitalizations and Deaths for all age-categories
 - As of November 9, 2009:
 - 801 cumulative hospitalizations associated with any influenza strain since Sept 1, 2009
 - 28 cumulative deaths associated with any influenza strain since Sept 1, 2009
 - Data available at: www.michigan.gov/h1n1flu --> click on ‘Current H1N1 Activity’

Presentation 3: Courtnay McFeters – Updates on Michigan’s Flu Website and the Google Flu Clinic Locator

Since the outbreak of 2009 H1N1 began in the spring there have been a lot of updates and improvements to MDCH’s Influenza Website and other national influenza websites.

- The American Lung Association (ALA) and Google recognized the need to have a national tool that helped individuals find both seasonal and H1N1 flu vaccines. They have partnered to create a new flu clinic locator (www.google.com/flushot).
- ALA has closed the back-end of the existing flu clinic locator database (<http://flucliniclocator.org/>), so providers cannot continue to add their clinic information.
- The presentation provided visuals of what the new locator looks like and how it will be used.
- Some of the most recent edition to MDCH flu website are:
 - Frequently asked questions on the flu home page, including: “Where can I get the flu vaccine?”)
- The addition of an H1N1 Flu Web Page
 - One of the most helpful tools on this page is the “H1N1 Provider Toolkit” which provides links and resources for the H1N1 vaccine campaign.
- The Michigan flu webpage is updated frequently: (www.michigan.gov/flu)

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FAB Workgroup Reports

Preschool and Younger

- External Lead – Pat Krehn mentioned that Muskegon County is out of seasonal vaccine and many parents looking for flu vaccine have been upset and frustrated. Many providers have been reluctant to use LAIV. However, one pediatric office started using LAIV for 2009 H1N1 and has reported a very positive experience with it. Last year there was a shigella outbreak resulting in the LHD going into many schools and teaching children proper hand hygiene measures – many schools feel that this has helped with flu prevention efforts.
- MDCH Support – Pat Vranesich reported for JoEllen Wolicki. Flu posters and flyers went to day cares, day care employees, children and family members. This work group helped to critique the message and review the materials. We are about 400,000 doses less (from the previous 2008-09 flu season) for children 6 months and older for seasonal flu vaccine. It was important this year to get the message out about household contacts and surrounding the baby with protected people.

Discussion: Sue Schryber asked about reserving doses for children that need 2 doses. Even though we aren't supposed to hold doses for these kids, they are still considered unprotected according to ACIP recommendations until they get 2 doses. If a child still needs 2 doses of flu vaccine, go ahead and recall them if you have flu vaccine.

Children and Adolescents (K-12 Schools)

- External Lead – Kimberly Newman mentioned that the HHS toolkit for schools is a wonderful resource for school nurses. She has been utilizing the posters and flyers, as well as the GloGerm tools. Saginaw schools sent reminders to parents about prevention tips and talked about the flu at parent-teacher conferences and meetings. Staff meetings talk about flu prevention. There has been communication with principals, teachers, secretaries, and aides. Challenging meetings are with the union officials and board of education. Superintendents in the county have been meeting to develop protocols for closing schools and school buildings.
- Saginaw City – if a building closes, activities in that building are suspended– no sporting events, extracurricular activities, etc. Discussed with MHSAA about sporting event policies and school closures. Attendance policies are strict and many schools have let go of the perfect attendance incentives so that kids aren't coming into school when they are sick. District website – parent tab now has its own H1N1 website link. Public education channel – healthy schools and germs in general; interview about flu prevention. Kim has conducted several interviews on local news stations.
- Challenges – the number of children that come to school sick; parents that don't want to pick up children from schools; general lack of knowledge on parents and school staff (fear of vaccines, respiratory diseases); panic of parents, teachers, bus drivers; parents were nervous about insurance/payment issues

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Adults

External Lead – Lisa Ailstock discussed:

- posters and flyers; communication class put together PSAs;
- 1,000 students on campus - difficult to get them on-board – only about 300 students have been vaccinated so far;
- reached out to parents to so that they can convince their children to get immunized; would like more materials or links from the state reaching out to parents;
- try to educate students that even though they might not get sick and die, they don't know who the person next to them is;
- the college has worked with athletics regarding games and cancellations;
- pandemic planning team meets weekly; do students need meals delivered to their rooms; guidelines about professors relaxing their rules if students are sick; one college is banning drinking games to avoid spreading the flu virus; some universities were giving students hotel rooms to stay in if they are sick;
- MDCH Support – Barbara Wolicki discussed the OPHP posters and partnered with newer partners that we haven't worked with before. Seasonal vs. H1N1 vaccination has been a difficult message to communicate to adults, especially older adults who are not in the initial target groups to get flu vaccine.

Non-Vaccine Interventions/Antivirals

- Ruta Sharangpani is the new medical epidemiologist working with the Communicable Disease and Immunization Divisions. Her background is internal and preventative medicine and she will be filling in for Teri Lee Dyke.
- Two major topics – new infection control guidelines came out in October and N-95s are still the recommendation; CDC put together guidelines on how to prioritize N-95 masks during shortages. New study that came out in JAMA made things more confusing; Treat within 48 hours of symptoms.

Health Care Personnel

- External Lead – Mark Upfal mentioned that while HCP are an important way to raise immunization rates, with the complexities of this current flu season, along with vaccine supply, this might not be the best year to try and move forward with a flu vaccine mandate for HCP. This subject will be revisited.
- Spectrum mandated flu vaccine for HCP this year and Bronson has been mandating it for many years. In Saginaw, their hospital makes HCP wear masks if they don't take flu vaccine.
- Dr. Josh Meyerson mentioned that very few providers are wearing masks.

Manufacturers/Shipping Updates/Other Updates As Requested

- MedImmune – fulfilled all of its shipment commitments; 100% of doses were fulfilled by the beginning of November; doses unused or expired before January 1st can be replaced through McKesson; they have a form to do this
- Sanofi Pasteur – still shipping; as of today, over 39 million have been shipped and 11.5 million remain – these are on track to be shipped by the end of November; they are not taking away pre-booked doses – they are all coming; 85% of doses for VFC have been shipped to McKesson; they have good educational pieces

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- available to educate parents and patients; Jennifer showed a piece available for adolescent vaccines; sanofi is not pre-booking yet
- GlaxoSmithKline (GSK) – Fluarix is down to three years of age and this applies to this flu season; already prebooked over 4 million doses of Fluarix by October – have never seen this before; they book based on first in, first out; they are prebooking for Fluarix and Flulaval
 - Novartis – started taking pre-booking orders for Fluvirin for next year’s flu season on September 30, 2009; Expect to meet capacity by mid-December
 - CSL Biotherapies – Merck just signed a contract with CSL so they will be doing sales and marketing for 2009-10 flu season; will probably start booking in January for next season
 - Roche – No Report
 - Is total number of supplies going to be down for next year? We have heard rumors that because H1N1 is a slower growing virus, the total number of doses for seasonal flu for 2009-10 might not be that great.
 - Sanofi hasn’t heard this. They opened up a second plant this year which has really helped.
 - Merck said that CSL plans to have 40% more for next year.
 - MedImmune hasn’t heard anything.
 - GSK hasn’t heard anything.
 - Pat V. talked to CDC about this, but they haven’t confirmed anything.

Flu Gossip

- If anyone knows of available seasonal flu vaccine, please contact Jim Matthews. There is concern that the elderly population will be impacted greatly by seasonal flu because they haven’t received ample vaccine.
- Many people got vaccinated earlier than they normally would.
- Pat V. said that many smaller pharmacies and retail clinics have reported that they are left out because they don’t order a large quantity of doses and many of the doses go to large companies.
- Dr. Pollack found it challenging to vaccinate children for both doses of seasonal and both doses of H1N1 vaccine. They don’t know what presentations they will get (intranasal and injectible) and then they have to wait four weeks between these doses – it is very hard to plan what to do with these children.
- Concerned that when vaccine supply is ample, many patients will have already had the flu. In this case, they will still recommend vaccination, but it’s a very hard sell.
- Difficult for LHDs to determine the risk groups because they don’t have the person’s medical history. Providers know the medical history, but they weren’t getting any vaccine.
- Tracy Newhouse mentioned that it is a problem that LHDs have a lot of vaccine but so many people can’t stand attend mass vaccination clinics; Tracy gets tons of calls on this issue every day. She is distributing vaccine to many different nurses every day; but it’s very frustrating to be seeing on the news that LHDs are doing these mass clinics but yet providers and immunizers cannot get their hands on the

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vaccine. The plan was to have a ton of vaccine and the planning assumptions were to vaccinate as quickly as possible. However, with limited supplies, health systems and health plans had to shift gears. Many counties thought that mass clinics would help to get vaccine out quickly. No one in pandemic planning campaign said you actually had to verify your medical status. Self assess and use ACIP recommendations.

- Need to look back on – what did we do with the short amount of vaccine in short amount of time? Were we able to get vaccine out in arms quickly? Did we miss high risk individuals? Big decisions in the state and at the local level were made prior to this situation. How much H1N1 was distributed to each county? What has each county done with this? Each county received population-based allocations.
- The big decisions next are: When to roll this out to community vaccinators/pharmacies? Visiting Nurses haven't received ANY doses from their counties. They feel like they are the last ones being given vaccine.

The meeting was adjourned at 2:45 p.m.