CDC Guidance on the Use of Influenza Antiviral Agents and Rapid Influenza Diagnostic Tests During the 2010-2011 Influenza Season

Summary

Recommendations
Antiviral Agents Guidance:
The recommendations on the use of influenza antiviral agents contain information on treatment and chemoprophylaxis of influenza virus infection, and also provide a summary of the effectiveness and safety of antiviral medications. Highlights include recommendations for the following:

1. Early empiric antiviral treatment of suspected or confirmed influenza among people with severe, complicated, or progressive illness or those hospitalized for influenza;

2. Early empiric antiviral treatment of suspected or confirmed influenza among people at higher risk for influenza complications;

3. Use of either oseltamivir or zanamivir for influenza A and B treatment or chemoprophylaxis, and recommendations not to use rimantadine or amantadine as influenza antiviral medications due to high levels of resistance to these medications among circulating influenza A viruses;

4. Use of antiviral medications among children younger than 1 year of age;

5. Use of local data on influenza virus circulation and influenza testing of respiratory specimens from patients with suspected influenza, when available, to help inform clinicians about influenza circulation; and

6. Consideration of antiviral treatment for any previously healthy, non high-risk symptomatic outpatient with confirmed or suspected influenza, based upon clinical judgment, if treatment can be initiated within 48 hours of illness onset.
Rapid Influenza Diagnostic Tests Guidance
Recommendations on the use of rapid influenza diagnostic tests are available to help guide clinical decisions and to determine if outbreaks of respiratory illness in closed settings are due to influenza virus infection. The guidance also provides information for interpreting rapid diagnostic test results.

Highlights include recommendations for the following:

Use of rapid influenza diagnostic tests when a positive result will change the clinical management of patients or change outbreak control strategies in a population, especially if the setting includes hospitalized patients or persons at high risk for influenza-associated complications;

1. Avoiding the use of negative rapid test results to guide decisions regarding treating patients with influenza antiviral medications due to the suboptimal sensitivity of rapid tests;

2. Evaluation of rapid diagnostic test results in the context of other available clinical and epidemiological information; and

3. Consideration of further influenza laboratory testing in the following circumstances:
   - When a patient tests negative by rapid test during periods of high influenza activity;
   - When a patient tests positive by rapid test during periods of low influenza activity; or
   - When a patient has had recent close exposure to pigs, poultry, or other animals and novel influenza A virus infection is possible.

For More Information
For Information on Use of Influenza Antiviral Agents During the 2010-2011 Influenza Season go to: http://www.cdc.gov/flu/professionals/antivirals/index.htm

For Information on Use of Rapid Influenza Diagnostic Tests for the 2010-2011 Influenza Season go to: http://www.cdc.gov/flu/professionals/diagnosis/

For other inquiries, please visit www.cdc.gov/fluor call CDC’s toll-free information line, 800-CDC-INFO (800-232-4636). TTY: (888) 232-6348, is available 24 hours a day, every day.